

Dream Day

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Capstone IV

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June 12, 2022

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Abstract

The purpose of this project was to examine the result that a career fair could have on the self-determination of the student members of the Tribe. **Problem:** The problem is that there is a lack of diversity among the health care personnel at Tribal hospitals which is contributing to poorer health outcomes. **Intervention:** This project utilized Self-Determination Theory to guide the process for practice improvement with the student members of the Tribe using an interventional career fair called Dream Day. **Measures:** The survey measured the impact of Dream Day using 10-item Self-Determination Scale on the student's perception of their own determination. There were two 5-item subscales on their awareness of self and perceived choice. The pre and post survey scores were compared to see if there was an improvement in self-determination, awareness of self, and/or perceived choice after the event in comparison to before the event. **Results:** The sample size was five student members of the Tribe. Dream Day showed an increase in self-determination scores, and both dependent variables of awareness of self and perceived choice. **Conclusions:** Dream Day did show an overall increase in self-determination scores, and both dependent variables of awareness of self and perceived choice which was the goal of the event. Although this study presents plausible conceptual design, this concept could be applied to other high school students to build their self-determination before moving on to college or careers. **Keywords:** Self-Determination Scale, Self-Determination Theory, diversity, cultural competence, cultural awareness

Dream Day

Health care systems are committed to giving culturally competent care. This is essential in creating respect for patients, clinicians, and administrative staff. By increasing diversity within the health care system, there is increased opportunity to understand another culture. Organizations that place value in cultural competence can develop more effective team environments and better patient outcomes (Kumra et al., 2020). With the patient populations that we serve as well as, the melting pot of culture and communities in the United States, there is an unacceptable lack of diversity and cultural awareness among health care personnel specifically in Tribal health care systems which is contributing to poorer health outcomes. The purpose of this paper is to discuss the lack of diversity among health care personnel with particular reference to the Native American patient population and a research project designed to innovate change in a systemic problem and a vulnerable patient population.

Overview

Problem Description

In order to understand the lack of diversity among health care personnel in Tribal systems, one must attempt to understand history from the perspective of Native Americans. Native Americans lived on this land tens of thousands of years ago before European and Spanish colonization in the 1700's. Colonization along with displacement had a profound impact on Native American history, and the oppression of this vulnerable patient population is still being seen today. For hundreds of years now, Native Americans have experienced attacks to their Indigenous sovereignty, economy, nationhood and resources, which has left them vulnerable to deprivation and disease (Wilm, 2020). These injustices have included warfare, violence, racism, prejudice, persecution, enslavement, intermarriage, religious intolerance, epidemic disease, extreme poverty, hunger, social stress, as well as a loss of their land. According to the Foundation for Economic Education, Native American reservations are the most poverty-stricken lands in America (Yeagley, 2020).

There are many barriers to access health care for Native Americans, some of which include poverty, lack of transportation or money for transportation, isolated living, poor or no roads, and a lack of health care providers in the area. As a result of the generational oppression, one-third of Native Americans live below the poverty level (Flowers, 2005). This has taken a toll on physical, mental, behavioral, emotional, and spiritual health. The Native American patient population has a much greater percentage of increased risk of death from disease in alcoholism: 569%, tuberculosis: 475%, diabetes: 231%, accidents: 212%, suicide: 70%, and homicide: 41% (Flowers, 2005). It is clear that the Native American patient population is not receiving culturally competent care. They have been in the hands of health care personnel who do not truly understand their culture or even their disparities (Purtzer & Thomas, 2021). If patients are unsatisfied with their healthcare, they are less likely to continue treatment. This is especially true when it comes to differences in cultural awareness (Flowers, 2005). There is no question as to why there is a lack of diversity among health care personnel in Tribal hospitals all over America. It is difficult consider how to increase cultural competence among health care personnel, when the severity of the inequality must first be acknowledged.

The lack of diversity and cultural awareness among health care personnel at Tribal hospitals is contributing to poorer health outcomes. This project utilized the evidence-based framework of Self-Determination Theory to guide the process for practice improvement of bringing diversity to the health care personnel at the Tribal hospital, by building self-determination within the student members of the Tribe. Self-determination is the concept that all individuals have the right to direct their own lives. Dream Day was designed to infiltrate the generational trauma and hopelessness the Native American people are experiencing by having the student members of the Tribe build self-determination to empower themselves into a better future as a culture and Tribe. An interventional career fair may increase personal motivation and self-determination towards future goals. With student members of the Tribe being motivated to receive higher education, they could get degrees to work in the medical

field to increase cultural awareness among health care personnel as equal partners in equal roles at the hospital (Willging et al., 2021).

The question guiding this program was what is the outcome of a career fair with student members of the Tribe when measured by assessment of self-determination before and after the career fair?

Available Knowledge

Lack of Diversity

A literature review showed some major deficits in research regarding the lack of diversity among healthcare personnel specifically in Tribal health care systems. There is also a lack literature looking at interventions to increase diversity. Kumra et al. (2020) asserts that considering others beliefs, and cultural humility are ways to promote cultural competence within Tribal populations. Much of the literature found was based around increasing cultural awareness and competence. This leaves a gap in the literature on how to increase diversity at the hospital rather than training the current culturally unaware employees in competence and awareness. As seen in the statistics regarding the current state of health care outcomes for Native American patient populations, the current methods to promote cultural awareness are not sufficient.

Where are Native American Voices?

Purtzer & Thomas (2021) described tribal healthcare values but did not include a Native American perspective in the discussion. For an article to be accurately written about cultural competence for Native American patient populations, their voices need to be shared as equals. This cannot be obtained from an outsider looking in to a Tribe and their culture, or from surveys alone. To truly be able to understand the lack of diversity, and what that means to the Native American patient population regarding their health care, Native American voices need to be heard as equals when

researching and attempting to achieve culturally competent health care. Future research articles should be written from the Native American perspective (Purtzer & Thomas, 2021).

Health Care Inequality

The literature review shows a clear deficit in health care equality. According to Willging et al. (2021) some of these inequalities are more likely to be uninsured, poorer health outcomes, suffering greater morbidities, lower quality of life, and lower life expectancy compared to all other aging populations in the country. Purtzer & Thomas (2021) notes that inadequate health care quality may contribute to Native American health disparities through racial/ethnic discrimination by health care professionals. Willging et al. (2021) did share some recommendations for improving health status of the Tribal members. One of the recommendations is to increase self-determination within the Tribes. Increasing self-determination could provide members of the Tribe better job opportunities, access to better insurance, the ability to prioritize their health status, and more culturally competent care with integration of Tribal members into the medical community.

Higher Education Improves Quality of Life

One pattern found in the literature analysis was a high rate of Native Americans in particular, dropping out of high school. In comparison to any other racial or ethnic group Native American youth has been researched to have the highest school dropout rates (Buckley et al., 2020). This causes damage to those individuals, but also to their society, since level of education can also determine one's own socioeconomic status. This can also impact social, civil, and culture, which are such significant factors to consider when working within a Tribal community. There is very little research being done on Native Americans and undergraduate degrees. There were 97 treaties addressing education signed with the federal government following the American Revolution, between 1778 and 1871, but there has been a lack of attention for Native Americans receiving higher education in general (McClellan et al., 2005).

Rationale

Vermeulen (2019) lists Self-Determination Theory as a comprehensive theory that increases intrinsic motivation. It does this by addressing three basic human needs. These needs include competence, autonomy and relatedness. Competence increases when a person feels like their activities are effective within their environment. Autonomy increases when a person feels as though they are able to be themselves and are in control of their own lives. Relatedness increases when a person feels a sense of belonging or close relationships with others (Vermeulen, 2019). Self-determination promotes identifying intrinsic motivation to allow an individual to look within to see what is motivating them to achieve their goals. It is incredibly important to learn before receiving higher education because it promotes transferability. Transferability refers to being able to apply what you have learned to real life situations, which is required if you are receiving education to gain the knowledge and skills that are needed to do a job.

Self-determination is learned through making mistakes and learning from those outcomes, though it can also be fostered through support. Dream Day was designed to offer said support since students with high self-determination skills are more successful in independence and employment in adulthood. Self-Determination is essential for children to learn the impact that intrinsic motivation can have on their lives. An increase self-determination may lead to pursuing degrees of higher education including medical jobs, to increase diversity among health care personnel at the hospital (Wang et al., 2020). Note figure 2 for demonstration of Self-Determination Theory.

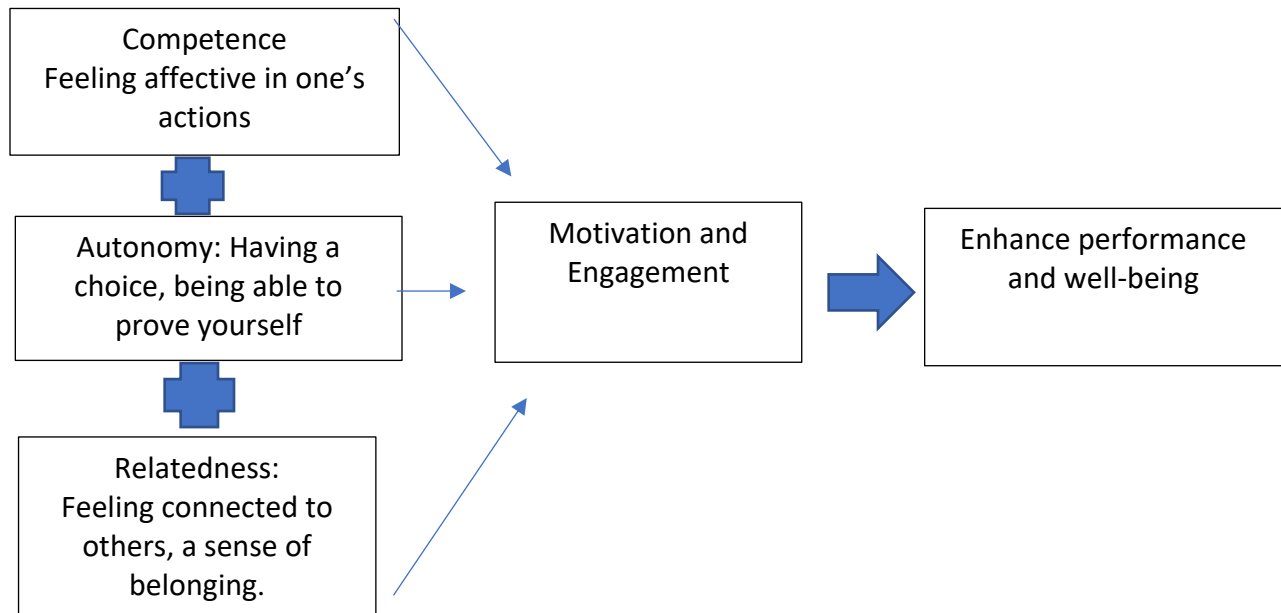


Figure 2: Self-Determination Theory. This figure demonstrates the components of Self-Determination Theory (Vermeulen, 2019).

Purpose

The purpose of this project was to build self-determination within the student members of the Tribe.

Methods

Context

Tribal hospitals serve Native American patient populations, and attempt to give preferential employment to the Native American patient population. Within Tribal hospitals there is a lack of diversity of the Native American patient population being in positions of power in their own health care systems. This includes inequality of Native American voices in positions such as providers, nurses, case managers, Board of Directors and the Executive Team. Tribal hospitals offer specialties in public health, ambulatory care, emergency care, inpatient care, pharmacy, radiology, medical laboratory, physical

therapy, social services, dental, optometry, audiology, and behavioral health, so this is where the majority of Native Americans receive all of their healthcare services.

The organization partnered with was the high school and the Education Pathways to Student Success Scholarship Program. This internship program was designed to prepare the students for life after high school by promoting education and career development. This was an effective environment to implement the project, since they are specialized to work competently within the culture of the Tribe.

Intervention(s)

Dream Day was a career fair that was designed to give the students the opportunity to express their dreams for the future by utilizing creative writing and visual planning to build the three basic human needs of autonomy, competence and relatedness to grow self-determination (Vermeulen, 2019). The intent was to increase their intrinsic motivation with their futures in mind. Consents were gathered on the two 19-year-old students and parental consents and student assents were gathered for three minor students. Two students did not consent to participate.

Dream Day started with an icebreaker to open the door to communication and build trust with the students. The Self-Determination Scale was given as a pre-survey. The creative space was built by starting with a snack and playing light music in the background. To build autonomy and competence, the students were asked to write their first entry in their personal dream journal. This entry included their dreams for the future. The dream journals were discussed with each individual to give recognition to their personal dreams. Dream Day worked to reinforce the concept that we all get to choose our path in life. Growing this concept helps to build autonomy. After journaling dreams for the future, visual planning was implemented in the vision board to achieve those dreams. Implementing their dreams into a visual plan was an effective way to build competence. The vision boards were followed with discussing resources that are available with a special emphasis on the role that education can play in achieving those dreams. Relatedness was included in Dream Day since the project was implemented by working

within a Tribe. The students could relate to one another with the triumphs and struggles of growing up on the reservation. They had similar life experiences due to this unique life factor. The Self-Determination Scale was then utilized again as a post-survey.

Study of the Intervention(s)

The approach chosen to assess the impact of the intervention was to survey the students with the Self-Determination Scale (Arab Psychology, 2021). This survey measured the impact of Dream Day through this 10-item scale on the student's perception of their own determination, with two 5-item subscales awareness of oneself, and perceived choice in one's actions. Data collection procedures included quantitative Likert data which was analyzed as a comparison tool with pre and post survey scores to see if there was an improvement in self-determination, awareness of self, and/or perceived choice after the event in comparison to before the event. The intended goal from Dream Day was to build self-determination.

Measures

The Self-Determination Scale is an assessment tool that was developed to assessing individual differences in *perceived choice* and *awareness of self*. The scale uses perceived choice to assess feeling a sense of choice with respect to one's behaviors and awareness of self as being aware of one's feelings and sense of self (Arab Psychology, 2021).

The Likert quantitative data analysis scores are based on a 5-point scale:

Only A feels true 1 2 3 4 5 Only B feels true

The subscales are:

Awareness of Self: 2, 4, 6, 8, 10

Perceived Choice: 1, 3, 5, 7, 9

This scale is a reliable source that has been published in at least two evidence-based research articles dating back to 1995 and 1996 (Sheldon, 1996). This scale was chosen as a 10-question survey at an 8th grade reading level for the students (Arab Psychology, 2021).

Analysis

Results are presented in a quantitative meta-analysis captured in a Microsoft Excel spreadsheet with an independent variable of self-determination and dependent variables of awareness of self and perceived choice. The sample size was five student members of the Tribe. Descriptive statistics included a summarization of data percentages with mean, median, mode, standard deviation and t-tests on the two dependent variables. Types of data and coding included nominal data of the participants gender, age, and their individual scoring for each question. Inferential statistics included two dependent sample T-Test's on dependent variables of awareness of self and perceived choice. This ordinal data ranks numbers and their sequence in a particular order. This included the summarization of the total value of the scores before and after Dream Day to determine a relationship between the two scores. The relationship between the pre and post survey scores will show if the outcome of increasing self-determination with Dream Day was met.

Ethical Considerations

Ethical aspects of implementing and studying the intervention included human subject research rights as well as working with a vulnerable population of minors. Participants were protected first having the parents or guardians sign a consent to participate in the survey. Under the age of 19 students were also provided a Student Assent Form to sign the day of Dream Day to ensure that they wanted to voluntarily participate in the research portion of the project. Before signing information was given to fully explain the purpose of the research, all questions were answered, clarification that they understood the information given to them, and that they agreed to participate in the project voluntarily. There were no negative consequences for the students that did not want to participate in the data collection portion of

the project. They were still able to participate in Dream Day. Integrity of data was preserved by leaving all documents anonymous with no personal identifiers. Agreement to participate in the project also included statement of level of risk as well as potential benefits from participation. There was no greater than minimal risk or discomfort as part of this study. Minimal risk means that the risks of being a part of this study were no more than what happens in everyday life. The information learned from this study may benefit students by concluding that there was a positive result on self-determination from the intervention project.

Nebraska Methodist College (NMC) and the Tribal high school Institutional Review Boards (IRB) reviewed and approved the project. Both the investigator and the faculty completed Collaborative Institutional Training Initiative (CITI).

Results

Five student members of the Tribe ages 17-19 participated in the project. There was one female participant and four male participants. The quantitative data analysis primary outcome of self-determination increased from the presurvey (Mdn = 28) to a postsurvey (Mdn = 31), these scores could range from 10-50 with a perfect score of 30. Secondary outcome for subgroup awareness of self with a presurvey (Mdn= 18) and post survey (Mdn = 23) which was closer to the perfect score of 25. Subgroup perceived choice with a presurvey (Mdn = 12) to a post survey (Mdn = 8), which was closer to the perfect score of 5. The probability value was calculated for each subgroup. P-value is the probability of obtaining observed difference in the outcome measure, given that no difference exists between treatments in the population. T-test for awareness of self ($p = 0.061885$), and perceived choice ($p = 0.0993$). While statistical significance was not reached, there was a positive improvement in all subscales.

Discussion

Summary

The goals of the project were to use Self-Determination Theory to promote intrinsic motivation to allow an individual to look within to see what is motivating them to achieve their goals. Competence, autonomy and relatedness were built through the interventions of Dream Day. Self-determination promotes transferability. Transferability will be necessary for the students moving forward in their lives to be able use what they have learned in real life situations, which is required if you are receiving education to gain the knowledge and skills that are needed to do a job. The students will be able to take the next steps in life toward college or careers with an increase in self-determination towards their goals for their careers or college. Other goals for the project were self-empowerment of the Tribal youth. This project was able to bring them back to the power of their own voice and how they will make a difference in the world.

Interpretation

The impact of this project can be measured as a short-term success by the results of the data. The long-term impact of this project is unknown. Health care inequalities for Native Americans include being more likely to be uninsured, poorer health outcomes, suffering greater morbidities, lower quality of life, and lower life expectancy compared to all other aging populations in the country. One of the recommendations to improve health status of the Tribal members is to increase self-determination (Willging et al., 2021). Increasing self-determination could provide better job opportunities, access to better insurance, the ability to prioritize their health status, and more culturally competent care with integration of Tribal members into the medical community. The promotion of transferability to higher education will improve the quality of life of the students that participated. "Native American youth had the highest school dropout rate of any racial or ethnic group in the US" (Buckley et al., 2020). This causes damage to those individuals' socioeconomic status, since level of education can also determine one's own socioeconomic status.

Limitations

This project was completed from an outsider's perspective of the Tribe and unfortunately does not include a Native American perspective, along with most other research that has been done. This project was meant to give resonance to the power their own voices can carry and inspire them to reclaim that power that they have been fighting for against all odds. They deserved to be heard not only as equals, but by standing in their full power of their Indigenous sovereignty. The biggest limitation to the study and imprecision to the design was the researcher's own cultural incompetence. Due to this confounding bias that is still relevant in our society today, it cannot be deemed culturally competent. Future projects should be designed from the Native American perspective (Putzer & Thomas, 2021).

Conclusion

The revised standards for quality improvement reporting excellence (SQUIRE 2.0) was used as a framework for reporting this project. This research supported the hypothesis that interventional projects to build autonomy, competence and relatedness created a definitive increase in self-determination, awareness of self, and perceived choice. The generational trauma inflicted on Native American communities runs deep and centuries long. With the improved self-determination scores from the event, there was a shift in the generational powerlessness that was inflicted upon the Native American people and therefore, their youth.

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