
INDIGENOUS EVALUATION TOOLKIT:

An Actionable Guide for Organizations Serving
American Indian/Alaska Native Communities
through Opioid Prevention Programming

FEBRUARY 2023



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A CENTER FOR INDIGENOUS PUBLIC HEALTH

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About Seven Directions:

In August 2016, Seven Directions was founded as the first national public health institute in the United States to focus solely on Indigenous health and wellness. Our mission is to advance American Indian and Alaska Native health and wellness by honoring Indigenous knowledge, strengthening Tribal and Urban Indian public health systems, and cultivating innovation and collaboration.

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Acknowledgments

Thank you to **the American Indian Higher Education Consortium (AIHEC) and Dr. Joan LaFrance & Richard Nichols**, whose seminal book, [Telling Our Story in Our Place and Time: Indigenous Evaluation Framework](#), **serves as the conceptual foundation for this Toolkit**, and which was used with the permission of AIHEC. In addition to her previous work, we have greatly appreciated Dr. LaFrance's ongoing consultation and feedback with our team since 2020, including her support with translating core tenets of the Indigenous Evaluation Framework into this Toolkit's actionable steps. While this Toolkit focuses on Indigenous evaluation approaches for programs focused on opioid overdose prevention and tribal public health, it would not have been possible without AIHEC's and LaFrance & Nichols' foundational work on Indigenous Evaluation and in the context of tribal higher education.

We also thank the Tribal Opioid Technical Advisory Group (OTAG) members' contribution to the development of this Toolkit. The OTAG members provided valuable feedback about the Toolkit's direction and content via webinar conferences in 2022. We thank the Centers for Disease Control and Prevention (CDC) and the National Network of Public Health Institutes (NNPHI) for their ongoing guidance throughout this project.

In developing this Toolkit, we first conducted interviews among directors or other leaders of 15 tribal programs, inter-tribal consortiums, and tribal epidemiology centers who received grants under the CDC's 1803 cooperative agreements. The findings strongly suggested a desire for concrete guidance to implement Indigenous evaluation approaches, with examples from substance use and prevention programs. We thank these leaders for this formative knowledge and impetus for this project.

Finally, a special thanks goes to our Toolkit piloting tribal partner sites for their insightful contributions from April to September 2022. We met virtually several times over six months. Our meetings with these partners who provide ongoing substance use prevention programming for their tribal communities elicited invaluable reactions and input to our proposed approach and draft materials. Their contributions undergird the lived experiences of the Native individuals, families and communities they serve, greatly increasing the clarity and cultural relevance in our final worksheets and written product.

INDIGENOUS EVALUATION TOOLKIT PILOT PARTNER SITES

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- Alaska Native Tribal Health Consortium
- Wabanaki Public Health & Wellness

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DEDICATION

Finally, we dedicate this Toolkit to Indigenous ancestors and Indigenous communities whose knowledge and traditions have supported the health and well-being of Indigenous peoples since time immemorial. We hope this Toolkit will uphold these strengths and promote the imperative need for Indigenous evaluation approaches in health promotion and prevention programming.



Forward from the Tribal Opioid Technical Advisory Group (OTAG)

American Indian and Alaska Native communities have long traditions of assessing and evaluating community-based approaches to improve health and wellbeing and efforts to address issues and concerns for individuals and the community. Tribal and urban Indian communities recognize the value of integrating cultural approaches to assessment and evaluation. Due to the forces of colonization, some of these traditionally based approaches to knowledge production may require revitalization and translation to fully address contemporary health issues.

Integrating Indigenous and Western approaches can support a more holistic, community-informed approach to understanding the overall impact and benefits of health programs. The concept of integrating these paradigms in an evaluation context underscores the importance of “two-eyed seeing,” first introduced by Canadian First Nations researchers in the early 2000s. It refers to “learning to see from one eye with the strengths of Indigenous knowledge and ways of knowing, and from the other eye with the strengths of Western knowledge and ways of knowing . . . and learning to use both these eyes together, for the benefit of all.”

We are excited to share this Indigenous Evaluation Toolkit developed by Seven Directions, which draws from these traditions, along with American Indian and Alaska Native community best practices, to support programs in incorporating Indigenous evaluation approaches into their work. Each Indigenous community has its own conception of health and well-being, along with its unique, rich culture and traditions, which inform its work on health promotion and prevention, including substance use issues. However, there are also important commonalities across tribal communities which provide the basis for the standard approach offered by this Toolkit. In partnership with Dr. Joan LaFrance and based on her work with Richard Nichols, MA, and the American Indian Higher Education Consortium (2009), this Toolkit that Seven Directions has developed expands on and specifies techniques used by Indigenous evaluators and communities. It provides an easy to apply, step-by-step guide that can help support health teams in developing their own evaluation approach for substance use disorder programs, including opioid overdose prevention efforts.

As the technical advisory group for the Tribal Opioid Overdose Prevention Program (a partnership among Seven Directions, the National Network of Public Health Institutes, and the Centers for Disease Control and Prevention), our role has been to offer feedback and insight into the complexities of opioid care and prevention within tribal and urban Indian communities. While the Toolkit focuses specifically on opioid programs and their evaluation, we are confident the approaches outlined in this Toolkit can be used for the evaluation of other public health programs, as well. It is our hope that this effort continues to move forward our shared goal of eliminating opioid use disorder and overdoses and promoting healing within American Indian and Alaska Native communities, while ensuring youth, families, and communities maintain traditions, and continue to improve the health and well-being for Indigenous peoples.

A Note on Terminology

In this Toolkit, we use “Indigenous” and “tribal and urban Indian communities” broadly to refer to peoples with ancestral and cultural origins in the many territories that now make up the United States. At Seven Directions, we recognize that “Indigenous” and terminology such as “Native American, American Indian, and Alaska Native” were not chosen by tribal communities and are based in settler colonial language, grouping together vast and diverse populations into aggregate terms. The experiences and cultures of Indigenous people are heterogeneous, and each tribal nation and Indigenous community is unique. We encourage the use of the specific tribe or band name and tribal language when possible.

Please see the following links for more information on the impact of words and suggestions for using appropriate terminology:

- The National Museum of the American Indian offers tips on considering the impact of language when selecting terminology: [Native Knowledge: National Museum of the American Indian – Am I Using the Right Word?](#)
- Dr. Michael Peters and Dr. Carl Mika describe different phrasings and their origins: [Aborigine, Indigenous, Indian or First Nations?](#)
- Dr. Michael Yellow Bird uses community member interviews to offer perspectives on terminology preferences: [What We Want to Be Called](#)



Glossary

American Indian/Alaska Native (AI/AN): This term is commonly used in federal law and public health contexts to refer to the broad range of Indigenous peoples (see below) in the United States, United States territories, Northern Mexico and Canada. In this Toolkit, we recognize that the term originates from settler colonial histories of misidentification. We place preference on the term “Indigenous” or on specific tribal community names where feasible.

- **Indigenous** – Indigenous people are members of communities that are deeply tied to place and often have traditional stories, as well as ancestral connections that shape their relationship with their land. Often, these communities define themselves as the “first people” of a given territory and predate the arrival of settler populations. Again, this Toolkit acknowledges that “AI/AN” and “Indigenous” may not be preferential terms. We support individuals and communities using their identification language of choice.

External evaluator: Program evaluators who are not from or affiliated with the community the program is serving or those who are not intensively familiar with the community’s culture.

External funder: Any funder not affiliated or unfamiliar with the culture of the tribal community or communities that the program they fund serves.

Indigenous Knowledge: This Toolkit prioritizes a breadth of Indigenous knowledge types as outlined by LaFrance and Nichols (2009) (see below) and encourages framing all Indigenous knowledge as data that could be used in Indigenous evaluation.

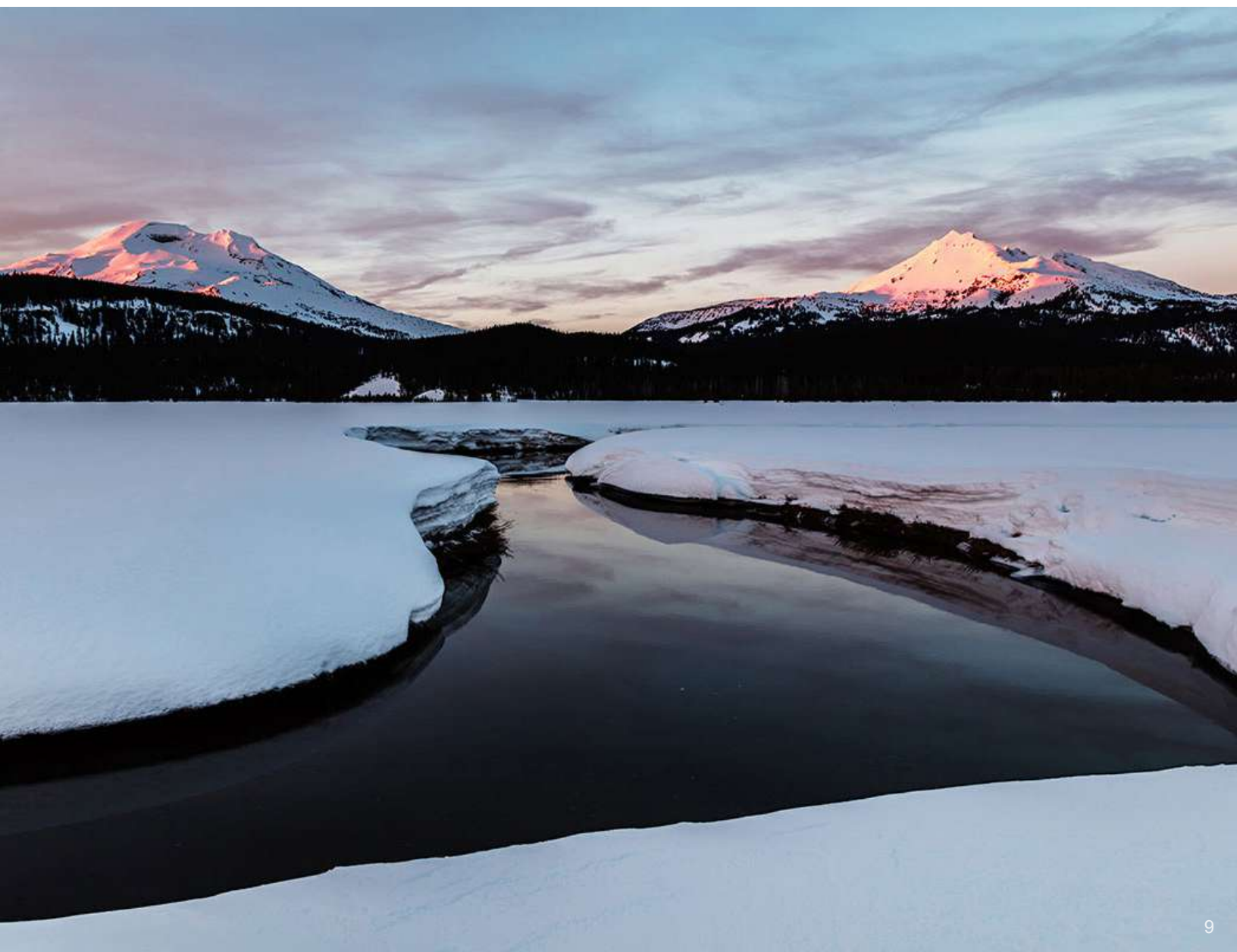
- **Empirical knowledge:** Knowledge gained from observation and experiences
- **Revealed knowledge:** Knowledge gained from spiritual or ancestral interaction such as through dreams, ceremonies, visions, etc.
- **Traditional knowledge:** Knowledge that is passed down from generation to generation that conveys traditional values and beliefs



Substance use: Use of alcohol, illegal drugs, prescription/over-the-counter drugs and any other psychoactive agents. **A person who uses substances** might be at risk for substance misuse or harmful consequences.

- **Substance Use Disorder (SUD) / Opioid Use Disorder (OUD):** An SUD involves a pattern of symptoms caused by using a substance or substances that an individual continues taking despite its negative effects related to impaired control, physical dependence, social problems, and risky use. Likewise, an OUD involves patterns of negative symptoms caused by opioid use.
- **Person with an SUD/OUD: A person experiencing negative effects from their substance use.** The Diagnostic and Statistical Manual of Mental Disorders (DSM-5) considers whether a person meets criteria for a SUD/OUD on an at risk-to-severe spectrum. We use person-first language to reduce stigma and to denote that a person with a substance use disorder is not defined solely by their use or diagnosis.¹

Revitalization: The process of reintroducing and normalizing an Indigenous practice after a period during which that practice was prohibited or lost due to colonization.



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Executive Summary

This *Indigenous Evaluation Toolkit for Tribal Public Health Programs* encourages Indigenous communities to tell their own stories and reclaim Indigenous ways-of-knowing, or epistemologies, as a basis for evaluation, with the goals of improved health and wellness through improved programs and services

Indigenous communities have engaged in review and reflection to understand the impact of community decisions or activities since time immemorial. In contrast to Western research and evaluation approaches – which rely on theories and frameworks developed within European-settler contexts – Indigenous perspectives take a more holistic approach, both in terms of what is knowable and measurable and regarding the role of evaluators and community. Broadly speaking, “**Indigenous evaluation**” refers to the use of Indigenous ways of knowing and meaning making and deep community involvement when evaluating an effort’s effectiveness or community impact.

Several Indigenous evaluation approaches have been documented in the research and gray literature. The Indigenous Evaluation Framework (IEF) developed by LaFrance & Nichols in 2009 for the American Indian Higher Education Consortium (AIHEC) is among the most thoroughly documented in the United States, and the authors are grateful to AIHEC for permission to use the IEF to develop this Toolkit. While the IEF was developed by AIHEC for use by Tribal Colleges and Universities (TCU) and other tribal K-12 programs in educational settings, the tenets of this framework also apply in tribal public health contexts. The IEF serves as a basis for this Toolkit, which aligns its foundational concepts with **actionable steps** that teams can work through at their own pace.

While applicable to all health promotion activities, this Toolkit focuses on the urgent need to address the ongoing **opioid overdose crisis and the related impacts of substance use in Indigenous communities throughout North America**. Thus, the primary intended audience for this Toolkit includes practitioners responsible for the leadership, management, and evaluation of programs addressing substance use in tribal or urban Indian communities.

It is critical for substance use prevention programs -- which are increasingly reimagining their services using traditional healing approaches and/or practices -- to have access to tools that infuse Indigenous ways of knowing into the evaluation of their programs focused on substance use prevention, treatment, and recovery support.

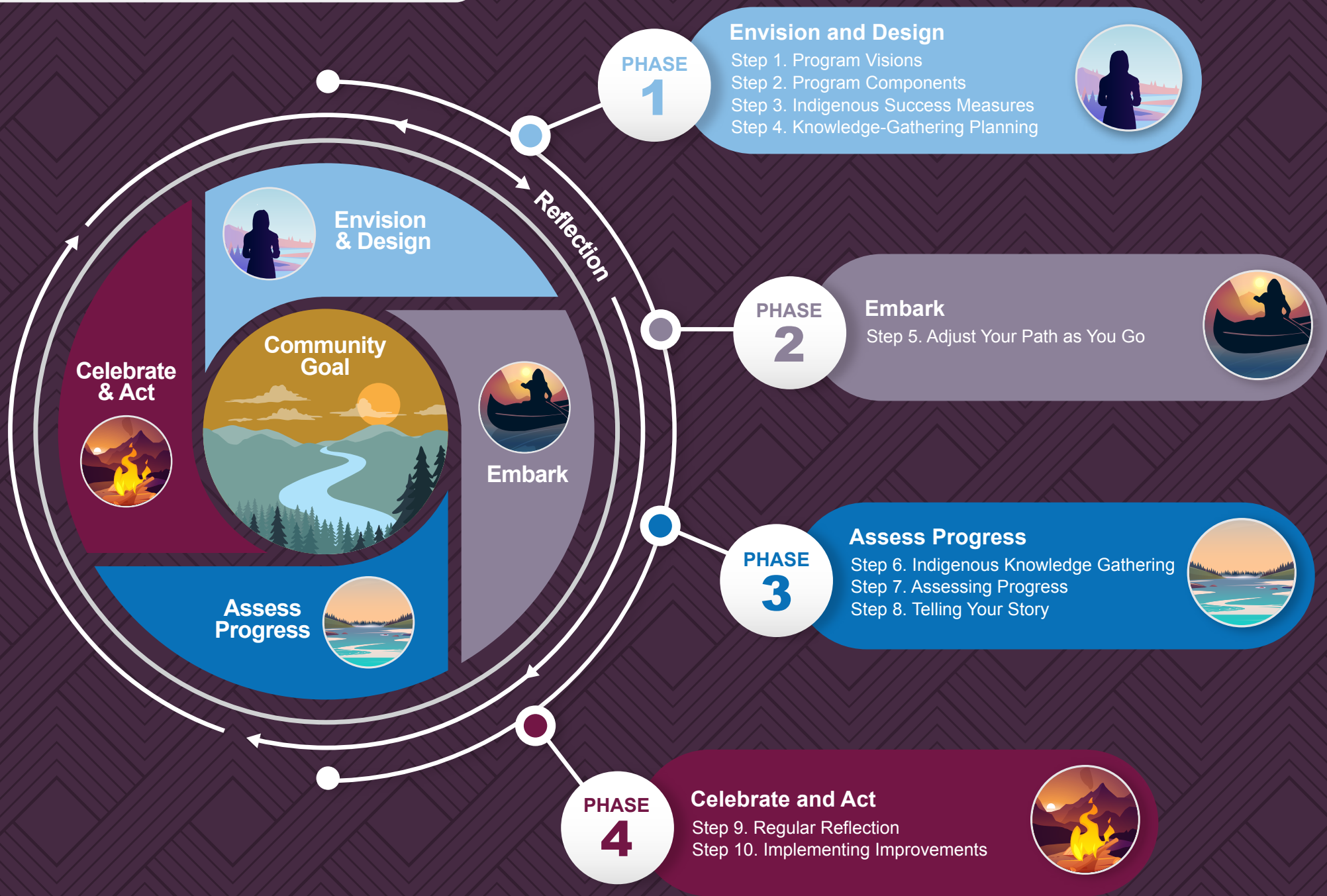
Indigenous evaluation views evaluation as a **continuous learning process** rather than a one-time reflection of a past state. This Toolkit takes this iterative, reflective, continuous learning approach to operationalize the core tenets of Indigenous evaluation in four key **phases**. It then further breaks each of the four phases into ten steps with detailed guides that programs can use to incorporate Indigenous ways of knowing into their programming and evaluation efforts:

- **Phase 1: Envision and Design**
 - Step 1. Identify Key Program Visions
 - Step 2. Identify Program Components
 - Step 3. Identify Indigenous Success Measures
 - Step 4. Plan Indigenous Knowledge-Gathering Activities
- **Phase 2: Embark**
 - Step 5. Adjust Your Path as You Go
- **Phase 3: Assess Progress**
 - Step 6. Collect Indigenous Knowledge as Data
 - Step 7. Reflect to Assess Progress
 - Step 8. Tell Your Story with Your Findings
- **Phase 4: Celebrate and Act**
 - Step 9. Regularly Reflect on Learnings Throughout Your Journey
 - Step 10. Plan and Implement Improvements

Figure 1 on the following page illustrates the phases and steps in this Toolkit.



Figure 1: Phases and Steps in the Indigenous Evaluation Toolkit





Part 1 of the Toolkit provides a conceptual introduction to Indigenous evaluation. **Part 2** prepares teams to reflect on their own knowledge-production practices and to discuss emotionally challenging work. **Part 3** provides step-by-step guidance and concrete examples of Indigenous knowledge-gathering activities, ways to involve community members in knowledge collection, meaning-making, and ways to decolonize data collection activities.

Throughout the steps, the Toolkit provides activities in the form of **worksheets** to help make the steps as actionable as possible. In addition, this Toolkit contains a **fictional companion story (or “Janelle’s story”)** about a tribal behavioral health center and their journey with utilizing this Toolkit in opioid overdose prevention programming. This narrative and accompanying **completed example worksheets** are designed to utilize **storytelling** to help teams envision implementation of Indigenous evaluation in tribal public health settings. We encourage program teams to read the vignette and completed worksheets for reference, since they help bring the Toolkit steps to life.

In drafting this Toolkit, we used community-based participatory research (CBPR) approaches to pilot various phases, steps, processes, worksheets, and other tools with three tribal public health partners who provide substance use prevention programming for their communities.

This Toolkit provides examples of utilizing Indigenous evaluation approaches. While this is not an exhaustive capture of all Indigenous evaluation approaches, we are hopeful that the materials can provide a starting point for prevention programs interested in incorporating these methods. We hope, too, that it can help external funders better understand and prioritize Indigenous ways of knowing, and to provide greater support for Indigenous evaluation approaches as valid and reliable evaluative measures. We are also hopeful that the Toolkit will encourage a community of practice that honors and supports Indigenous knowledge and Indigenous evaluation approaches.

Finally, we anticipate updates and revisions of the Toolkit as tribes and urban-Indian serving organizations start implementing this Toolkit, with lessons learned from implementation.

Part 1

Introduction to Indigenous
Evaluation Approaches

Part 1. Introduction to Indigenous Evaluation Approaches

The purpose of this Toolkit is to support tribes, urban Indian organizations, and programs working with Indigenous communities to incorporate Indigenous evaluation approaches into their work focused on substance use prevention, treatment, and recovery support. This Toolkit draws heavily from the seminal *Indigenous Evaluation Framework* (IEF) developed by LaFrance & Nichols in 2009 for the American Indian Higher Education Consortium (AIHEC).² The IEF is among the most well documented and cited summaries of Indigenous evaluation concepts, values, and approaches, with examples drawn from its implementation in tribal educational programs.

Throughout Seven Directions' work, conversations with partnering tribal public health program leaders and staff have revealed an interest in using Indigenous ways of knowing to evaluate their programs. Partners have also expressed a desire for concrete guidance to implement Indigenous evaluation approaches, with examples from substance use and prevention programs. This Toolkit aims to address that need by translating the IEF's foundational concepts into **actionable steps** that teams can adapt and work through at their own pace while providing prevention-specific examples throughout the text (or toolkit). It is critical for substance use prevention programs – which are increasingly reimagining their services using traditional healing approaches or practices based on Indigenous ways of knowing – to have access to tools that support the infusion of Indigenous ways of knowing into the *evaluation* of their programs too.

We hope that grounding Indigenous ways of knowing into program design and evaluation will provide an opportunity for health program staff and funders to learn from the community through their stories, culture, and Elder wisdom about ways prevention programs can better serve the community by engaging in meaningful and respectful relationships.

Finally, in the spirit of collaboration and connection, we often address our audience using language such as “you,” “your team,” and “your community” throughout the text.

WHAT IS INDIGENOUS EVALUATION?

Indigenous communities have engaged in review and reflection to understand the impact of decisions and activities on community health and wellbeing since time immemorial. Indigenous evaluation, then, is a long-relied-upon practice across many Indigenous communities to adjust and improve community-led efforts. Broadly speaking, Indigenous evaluation refers to the use of Indigenous ways of knowing and community involvement when assessing or evaluating an effort's effectiveness or community impact. Indigenous evaluation may be a better alternative to Western evaluation approaches within Indigenous settings because it ensures community-specific knowledge and perspectives are identified and included in the evaluation process. However, Indigenous evaluation and Western evaluation approaches can be combined through a practice known as “two-eyed seeing.” “Two-eyed seeing” refers to “learning” to see from one eye with the strengths of Indigenous knowledge and ways of knowing, and from the other eye with the strengths of Western knowledge and ways of knowing . . . and learning to use both these eyes together, for the benefit of all.”³

For example, Wabanaki Public Health and Wellness prioritized Indigenous evaluation approaches when creating their Center for Healing and Recovery. They shared their approach: “When developing our Center for Healing and Recovery we asked these evaluation questions: What does it need to feel like when you walk through the door? What does it need to smell like, what do we need to taste, what does it need to look like to heal?” These questions exemplify the use of multiple forms of knowledge when determining and measuring success, as we will discuss further below.

Western Research and Evaluation Approaches

Western evaluation approaches rely on research theory and frameworks developed within Euro-American contexts. Used in the context of health promotion and prevention programming, it involves the systematic gathering of information about programs, services, needs, target population, outcomes, and capacity considerations.⁴ Often, Western evaluation activities are conducted by evaluators who are not part of the community, and who, in theory, attempt to view the community from a detached or “objective” perspective. While Western evaluation approaches can provide valuable insight into goals, activities, strengths, and areas for improvement, they tend to focus on what is “objectively” measurable.⁵ In other words, this approach often excludes Indigenous knowledge as valid evaluative measures—such as traditional knowledge (i.e., wisdom passed down from ancestors), revealed knowledge (i.e., knowledge gained through dreams or ceremony), or feelings about community wellbeing.² Further, this approach often fails to include the unique assets, challenges, contexts, and cultures within which tribal and urban Indian programs operate, thus compromising the validity and utility of evaluation findings as they are not always reflective of the systems and settings within which these programs take place. A Western approach can also experience challenges in accurately and effectively identifying the community’s needs and approaches that are relevant, desired, acceptable, and adaptable to the community.⁶

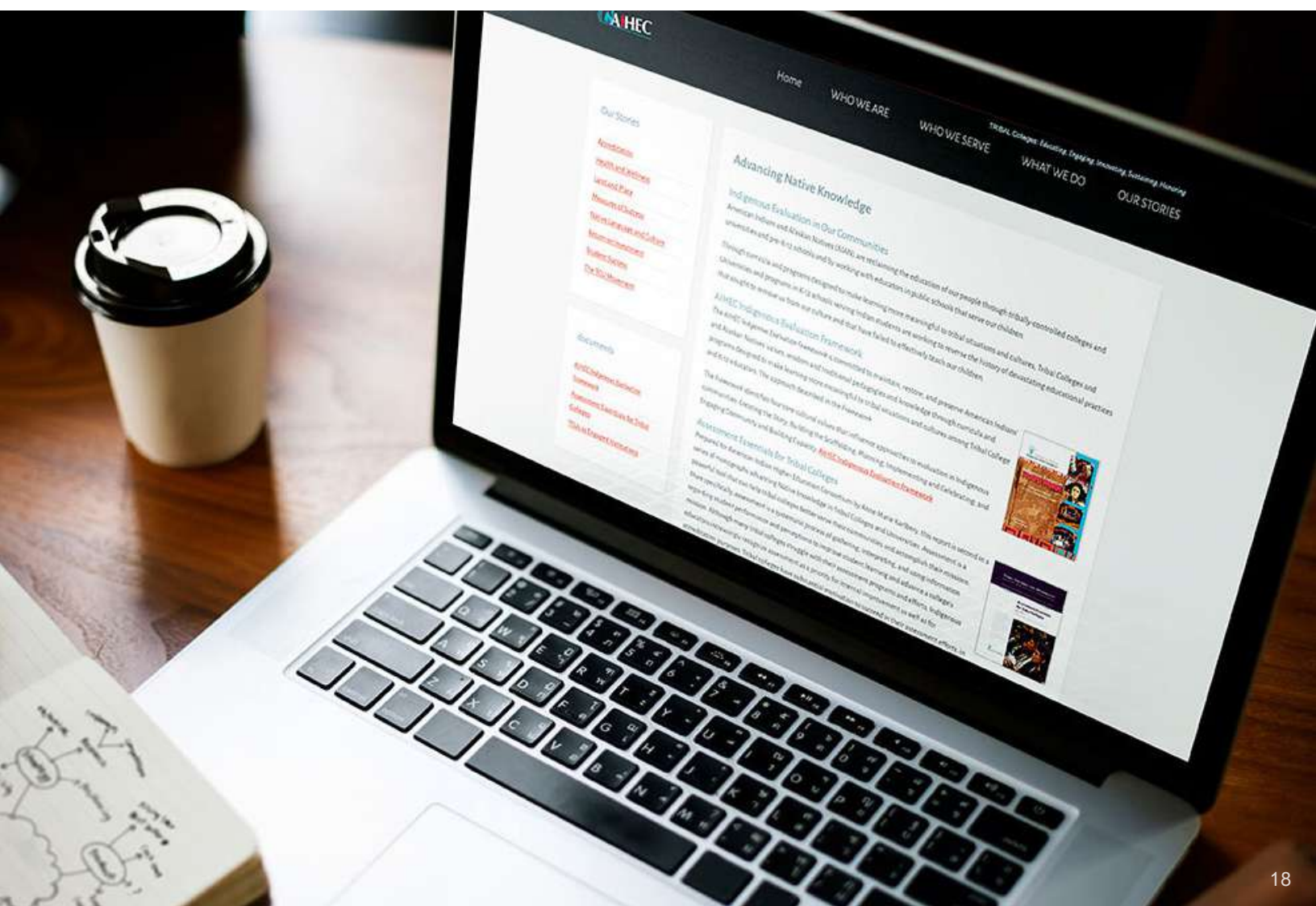
Indigenous Research and Evaluation Methodologies

Indigenous research methodologies also involve the systematic gathering of information about programs, services, needs, the community being served, outcomes, and capacity considerations. However, in contrast to Western research approaches, Indigenous perspectives take a more holistic approach, both in terms of what is knowable and measurable and regarding the role of researchers and community.⁷ Dr. Tuhiwai-Smith (1999), writing about a Māori community undertaking their own research, notes that Indigenous research methodologies view Indigenous people as neither victims nor objects of research. Instead, they are rooted in local (place-based) knowledge and allow Indigenous communities to address the issues that they define for themselves.⁸ Examples of Indigenous research methodologies include talking circles, storytelling, sharing testimony, language study, and traditional crafting, among others. However, it is important to note that these are examples, and there may be tribally specific methods that are a better fit for a given community. Therefore, it is important to engage in discussions with community members and avoid appropriating cultural practices or using approaches that require community permission.

In addition to Indigenous research methodologies, which reflect ancestral ways of pursuing knowledge, “decolonizing methodologies” refer to efforts designed to reduce colonial power dynamics within Western research methodologies. Decolonizing methodologies can “begin to remove roadblocks posed by Western influence” when using Western research methodologies.⁹ Examples include public health workers seeking to incorporate tribal language into a pre-existing intervention, or honoring community practices like gift-giving or sharing meals to build connections and relationships before beginning evaluation activities.

Indigenous Evaluation Framework (2009)

Several Indigenous evaluation approaches have been documented in the research and grey literature.^{10,11,2} Among these, the Indigenous Evaluation Framework (IEF) (LaFrance & Nichols, 2009) is the most thoroughly documented and widely cited summary of Indigenous evaluation concepts, values, and approaches. The IEF was developed by Dr. Joan LaFrance and Richard Nichols for the American Indian Higher Education Consortium (AIHEC) and provides examples of its implementation in tribal educational programs. As shown in Figure 2 on the next page, foundational values of the IEF include centering Indigenous Knowledge, People of a Place, Centrality of Community and Family, Honoring our Gifts (Personal Sovereignty), and Tribal Sovereignty.



**Figure 2. Indigenous Evaluation Framework
Core Values** (LaFrance & Nichols, 2009)

Indigenous Knowledge <i>Context is Critical</i>	People of a Place <i>Respect Place-based Programs</i>	Centrality of Community and Family <i>Connect Evaluation to Community</i>	Honoring our Gifts <i>Consider the Whole Person when Assessing Merit</i>	Sovereignty <i>Create Ownership and Build Capacity</i>
• Evaluation is woven into the program and its implementation; it is not an add-on function. • Evaluation is holistic and attends to relationships between the program, its context and community. • Evaluation knowledge honors multiple ways of knowing. • Evaluation recognizes our moral responsibility to reflect on what we are learning and use knowledge to improve our programs and community.	• Honor the place-based nature of many of our programs. • In telling the evaluation story, consider the context, environment, history, community, and contemporary circumstances of the place. • Respect that what works in one setting may not be easily transferred to other situations or places.	• Engage community when planning and implementing an evaluation. • Use participatory practices that engage community members. • Make evaluation processes transparent. • Understand that programs may not focus only on individual achievement, but also on restoring community health and wellbeing.	• Allow for creativity and self-expression. • Use multiple ways to measure accomplishment. • Recognize that people enter programs at different places and with different skills and experience. • Make connections between accomplishment and responsibility.	• Ensure tribal ownership and control of data. • Follow tribal Institutional Review Board processes. • Secure proper permission if future publishing is done. • Build evaluation capacity in the community. • Report in ways meaningful to tribal audiences as well as to funders.

Adapted from Dr. Joan LaFrance, Richard Nichols, and the AIHEC Indigenous Evaluation Framework (2009).

While the IEF was developed for Tribal Colleges and Universities and K-12 educational programs, the tenets of this framework apply to multiple settings, making it an excellent tool for tribal public health programs. This Toolkit relies on the core tenets of the IEF and connects the values identified by LaFrance, Nichols, and AIHEC to actionable phases and steps for you, your team, and your community to consider.

Indigenous Knowledge & Opioid Use Prevention

In 2017, the U.S. Department of Health and Human Services declared a nationwide opioid epidemic crisis.¹² Indigenous people living on reservations and in urban areas have been disproportionately impacted by opioid misuse, as demonstrated by higher fatality rates from opioid overdose and limited access to tailored prevention and intervention services.^{13,14}

Indigenous communities have begun to address opioid misuse and other public health issues by revitalizing Indigenous epistemologies or ways of knowing. Many Indigenous communities have integrated traditional teachings, practices, and belief systems within evidence-based practices and interventions to guide opioid recovery and tailor prevention activities for the populations they serve.¹⁵ Tribal opioid use disorder (OUD) programs and other service delivery programs also support critical healing around historical trauma, the impacts of federal policies, and Indigenous social determinants of health (defined by and for tribal and urban Indigenous communities).¹⁶

For example, White Earth Nation of Minnesota is well known for their harm reduction efforts, which incorporate traditional practices and medicine. The community attributes much of the program's widespread acceptance and uptake to Elder involvement in the program's development and its commitment to cultural values.¹³

This Toolkit takes the next step and provides guidance in how to develop an approach that includes Indigenous epistemologies in program evaluation. It provides examples of how Indigenous and tribal and urban Indian communities can tell their own stories. Our aim in developing these steps is to support communities in their efforts to reclaim Indigenous epistemologies as a basis for evaluation, and, to improve health and wellness in all Indigenous communities. While applicable to all health promotion and prevention activities, this Toolkit focuses on the urgent need to address opioid overdose risk while holding space for the impact this epidemic has had on individuals and communities. This challenging work prioritizes cultural knowledge systems and approaches as a **strengths-based opportunity** for changes to evaluation efforts and outcomes.

HOW TO USE THIS TOOLKIT

This Toolkit outlines four phases and ten steps of Indigenous Evaluation. The Toolkit provides step-by-step guidance to implement Indigenous evaluation approaches into program design, implementation, success measurement, and ongoing programming assessment and improvement. It includes a series of **worksheets**, **resource links**, and **questions** to consider as your team works through integrating these Indigenous evaluation approaches. In addition, this Toolkit provides a **fictional companion story (or “Janelle’s story”)** about a tribal behavioral health center and their journey to create and evaluate opioid overdose prevention programming using this Toolkit. This narrative-based example is designed to help you envision how you may approach the outlined steps in a tribal public health setting. We encourage program teams to refer to the vignette and completed worksheets as you apply the Toolkit guides.

The Toolkit is not meant to be prescriptive, but rather, it offers guidance for a continuous learning process for leaders, practitioners, other staff, and organizations at any evaluation experience level. We encourage you to see the [“Where are we at & Where do we start”](#) section for more information. While individuals will learn and benefit from this Toolkit, we encourage program staff, along with interested community members, to collaborate on these activities as a team. It may also be useful for tribal leaders and department leaders to familiarize themselves with the Toolkit to better support their team’s efforts. Finally, considering unique tribal cultures, available resources, and community-driven aims, each team will need to determine the Indigenous evaluation approaches that are most relevant for their community.

Part 1 of the Toolkit provides a conceptual introduction to Indigenous evaluation. **Part 2** prepares teams to reflect on their own knowledge-production practices and to discuss emotionally challenging work. **Part 3** provides step-by-step guidance and concrete examples of Indigenous knowledge-gathering activities, ways to involve community members in knowledge collection, meaning-making, and ways to decolonize data collection activities.

WHO SHOULD USE THIS TOOLKIT?

The primary intended audience for this Toolkit includes practitioners, staff, or leadership at programs working to address substance use in tribal or Urban Indian communities. **Both Indigenous and non-Indigenous team members can support Indigenous evaluation efforts**, but it is critical to include voices of tribal members in the community who have access to integral cultural information and context or lived experiences. We expect this Toolkit **to benefit a wide audience**, including program staff, departmental leaders, tribal leaders, community members, internal or external evaluators, and funders.

In drafting this Toolkit, we used community-based participatory research (CBPR) approaches to pilot various phases, steps, processes, worksheets, and other tools with three tribal public health partners who provide substance use prevention programming for their communities to ensure maximum relevance for this audience.

While examples emphasize opioid overdose/substance use prevention, this Toolkit can be adapted and used for any health promotion and injury prevention programming effort. We address our audience in the spirit of collaboration and connection and use language such as, “you,” “your team,” and “your community” throughout the text.

A NOTE TO FUNDERS AND EVALUATORS

To engage in equitable and effective partnerships, it is critical for funders and program evaluators to understand that Indigenous communities have experienced a history of harmful health research and evaluation practices that include direct violations of ethical guidelines, disrespect for cultural values, and ill-fitting programming requirements that are based on studies conducted in predominantly white populations.¹⁷ This history and context should inform how non-Indigenous staff and organizations approach, engage, and build relationships with Indigenous communities. We encourage funders and program evaluators to use this Toolkit as a resource to learn about the strengths and practical uses of Indigenous knowledge and Indigenous evaluation approaches. The Toolkit offers an opportunity to take specific steps to engage in more equitable partnerships, which acknowledge and work to combat colonization’s ongoing impacts on Indigenous communities. Equitable and effective partnerships can be fostered by prioritizing **cultural humility** and using **community-based participatory research (CBPR)** methods. Please see the box below for more information and resource links to learn more information about cultural humility and CBPR.

What is Cultural Humility?

The National Institutes of Health (NIH) defines [cultural humility](#) as “a lifelong process of self-reflection and self-critique whereby the individual not only learns about another’s culture, but one starts with an examination of her/his own beliefs and cultural identities.” Fisher-Borne, Cain & Martin (2015) present cultural humility as an improvement upon cultural competency, as it recognizes the fluidity of culture and the structural forces that shape individuals’ opportunities by challenging individuals and institutions to address inequalities.¹⁸ Non-Indigenous staff and institutions can utilize cultural humility to acknowledge power differentials and commit to an ongoing relationship with communities that requires lifelong, repetitive self-reflection and engagement, rather than reaching a finite end to knowledge attainment.¹⁹

What is Community-Based Participatory Research?

CBPR is a research approach designed to equitably involve community members and organizational representatives in all aspects of the research and programming to promote shared decision-making and ownership. It is a methodology aimed at reducing health disparities by recognizing and addressing the mistrust that characterizes community attitudes towards research and public health.²⁰ This toolkit provides funders with concrete guidance to involve community members in an evaluation. Please see **Worksheet 2: “Community Engagement Planning Table”** for more information.

We recognize that the nature of the grantor/grantee relationship can create power imbalances that might make Indigenous evaluation approaches more difficult for communities to pursue. Therefore, we ask funders and evaluators to share approaches learned by working through this Toolkit with the organizations you work in, to serve as an ally, and to advocate for equitable partnerships with Indigenous health promotion and injury prevention programs. We also encourage you to advocate for Indigenous evaluation methods as part of your organization's routine evaluation standards, when possible.

The box below provides insights from tribal program staff regarding why funders should prioritize Indigenous evaluation.

Tribal Programs' Requests to External Funders and External Evaluators to Prioritize Indigenous Evaluation

"We are struggling to fit into square boxes and we are round pegs, rather it should be how do their methods fit into the way we work? . . . To me that is an exercise in sovereignty . . . **Our evaluation has been inherent, intuitive and adaptive and has been done for thousands of years.**" – Sandra Yarmal, Wabanaki Public Health and Wellness

"Are Native scholars still asking for permission to be at the table? **We need to privilege our knowledge without apology**" – Dr. Danica Love Brown, Northwest Portland Area Indian Health Board



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Part 2

Preparing to Use Indigenous
Evaluation Approaches

Part 2. Preparing to Use Indigenous Evaluation Approaches

ACKNOWLEDGING HISTORY AND KNOWLEDGE-PRODUCTION PRACTICES

Prior to European colonization, Indigenous communities were healthy, and maintained meaningful connections to land, language, and cultural practices. Past and present systems of oppression, discrimination, and colonization have included genocide, erasure of culture, and the deliberate destruction of resources essential to Indigenous health and wellbeing. This Toolkit encourages support and revitalization of Indigenous knowledge systems and decolonization of program evaluation in Indigenous communities.

We also recognize that Indigenous knowledge-gathering and -sharing practices and protocols vary by community. We support the consensual and culturally appropriate gathering, sharing, and application of Indigenous knowledge within your community. We also respect and acknowledge that some pieces and forms of Indigenous knowledge are to be kept within the community and not shared publicly. Mapping community practices, protocols, and ethical principles can be a key step in ensuring trust, participation, and a common approach to the evaluation work moving forward.

USING METAPHOR AND STORYTELLING

“In Indigenous communities, knowledge is seen in very practical terms. People ask: ‘How can it help us or help our community?’ Thus, knowledge creation must be framed in practical terms. One way to do this is to use cultural metaphors.”

-LaFrance & Nichols (2009)¹

The use of metaphor can support the telling of Indigenous community stories, as well as the reclamation of Indigenous epistemologies. This use of storytelling and metaphor has always provided Indigenous peoples with relatable tools for knowledge creation. It also helps to make knowledge accessible to all members of the community.

This Toolkit uses the **metaphor of “a river journey”** throughout the steps and worksheets. The river journey metaphor allows Indigenous evaluation to be viewed as an ongoing process where adjustments are made to meet natural changes in planning. It also reflects the shared experiences of tribes across these lands for generations. Rivers, lakes, and oceans have been important routes for hunting, trade, and travel for Indigenous communities, and have supported the sharing of knowledge, information, cultural values, and resources across tribes. Even if a tribe is currently in a region some distance from a river or large body of water, their territories more than likely included these connectors prior to contact. The process for navigating these bodies of water provides a natural analogy to evaluation work.

For example, we ask evaluators to “look downstream toward their visions” to anticipate what they might see as they prepare for the journey their community will embark on. From there, we invite them to “Describe what (they) hope to experience,” and ask what they will “see, smell or taste.” We also acknowledge that looking downstream might not provide the full view of your path and the journey, so we encourage you to work flexibly to “adjust to your path as you go” to successfully make it to your destination. This metaphor encourages communities to immerse themselves in their journey from the outset and recognize that their experience will be as crucial as their vision. Please feel free to use, adapt, or replace this metaphor with one that fits best for your team and community as you embark on your journey to integrate Indigenous evaluation in your work.

PREPARING FOR EMOTIONALLY CHALLENGING WORK

It is important to acknowledge the emotionally challenging weight of developing opioid overdose prevention/intervention efforts. Depending on your community and culture, ceremony and prayer may be called for to support community members in evaluation efforts. Holding the space to have these discussions provides an important first step for teams to explore how and whether to include ceremony and prayer, or other healing approaches. Likewise, taking the time to include traditional celebrations and other supportive practices to mark and acknowledge ongoing efforts and key milestones may also bolster the overall evaluation effort. Fostering an atmosphere of support and celebration can help teams restore and replenish the emotional, physical, and spiritual capacity to approach difficult work. Given the diversity of tribal and urban Indian communities, we do not identify specific guidelines on how to include these important cultural and spiritual practices in this Toolkit, but we encourage teams to reflect on what ceremonial and celebratory aspects may be appropriate for your community. The box below provides some examples of ways to utilize ceremony and celebration when working with your team on an Indigenous evaluation project.

Utilizing Ceremony & Celebration

- Asking an Elder to open with a prayer
- Smudging/burning of Indigenous medicines
- Participating in a sweat
- Volunteering at a powwow or other community event

WORKSHEET: PREPARING FOR YOUR JOURNEY

Before beginning any evaluation work, it is helpful to sit with your team to brainstorm where you are already at in your program design and evaluation work. All partners (individual staff, leaders, organization, community members, etc.) at any experience level can contribute to evaluation efforts. To provide you with a starting point, this toolkit includes two **optional worksheets**. The purpose of these worksheets is to help you determine where you are at with your programming and evaluation (i.e., “current stage”), where you would like to go (i.e., “goal stage”), and how the Toolkit can help facilitate that process.

While addressing all phases in the Toolkit provides the most comprehensive way to infuse Indigenous ways of knowing into your program design, implementation, and evaluation, teams may prioritize the phase(s) they need to focus on. This can be accomplished by first identifying the stage that best represents where the program and the evaluation currently are.

Programming Stage:

What is your program design's current stage?

Instructions: This portion of the worksheet focuses on your team's programming efforts. Using the reference chart below, please place a check next to the best-fitting current and goal stages.

Stage	Description	Example	Current Stage	Goal Stage
1	A specific community need has yet to be identified	The community has a general request to reduce behaviors that harm health and encourage behaviors that improve health		
2	A specific community need has been identified	The community has a specific request to prevent opioid overdose related deaths		
3	Your team is engaged in planning to address the need	The tribal behavioral health center is developing a training on Narcan administration		
4	Your team is engaged in addressing the need via services or programming	The tribal behavioral health center has held one Narcan training for the community		

Review: If you chose 1, 2 or 3 as your current programming stage, you may benefit from starting at Phase 1 (Envision & Design). If you chose 4, please review Phases 2-4 (Embark, Assess Progress, Celebrate & Act) to identify the most appropriate point to start your evaluation efforts.

Evaluation Stage:

To what extent are Indigenous evaluation approaches embedded in your evaluation work already?

Instructions: This portion of the worksheet focuses on your team's current evaluation efforts. Using the reference chart below, meet with your team, make a list of the evaluation activities currently implemented, and choose the corresponding current and goal stages.

Stage	Description	Example Activities	Current Stage	Goal Stage
1	Tracking program/service deliverables	Maintaining a detailed work plan Tracking progress of program deliverables		
2	On-site evaluator and/or outcome measure tracking	Utilizing outcome measures and expected impacts Project evaluator tracks qualitative and quantitative outcomes		
3	Specific evaluation efforts infused with Indigenous evaluation approaches	Hiring an internal or external evaluator who incorporates some Indigenous evaluation methods (e.g., storytelling, developing a Theory of Change utilizing cultural foundations)		
4	Evaluation is grounded in Indigenous evaluation methodology	A program/service is grounded in Indigenous evaluation approaches at all phases (e.g., planning, implementation, and reflection)		

Review: What did you choose as your goal evaluation stage? Why? Does that stage involve a greater use of Indigenous evaluation methods than your current stage? If so, we look forward to you using this Toolkit to provide guidance for supporting and incorporating ongoing Indigenous evaluation efforts.

Reference (Part 2)

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EMBARKING ON A JOURNEY

We have reviewed some of the foundational building blocks necessary to begin Indigenous evaluation work: Centering Indigenous Knowledge, People of a Place, Centrality of Community and Family, Honoring our Gifts (Personal Sovereignty), and Tribal Sovereignty. We have provided a definition of Indigenous evaluation and compared this approach to Western evaluation approaches. We have provided examples of how to identify Indigenous research methodologies that may be appropriate for your community and program and discussed how to integrate Indigenous knowledge into evaluation efforts. We have reviewed who may benefit from this Toolkit and provided reflections for funders on how to support Indigenous evaluation approaches.

The following sections will give more specific guidance on each step of the Indigenous evaluation approach described in this Toolkit. As teams explore these sections, you will also receive guidance on overview of the key phases and steps:

- **Phase 1: Envision and Design**
 - o Step 1. Identify Key Program Visions
 - o Step 2. Identify Program Components
 - o Step 3. Identify Indigenous Success Measures
 - o Step 4. Plan Indigenous Knowledge-Gathering Activities
- **Phase 2: Embark**
 - o Step 5. Adjust Your Path as You Go
- **Phase 3: Assess Progress**
 - o Step 6. Collect Indigenous Knowledge as Data
 - o Step 7. Reflect to Assess Progress
 - o Step 8. Tell Your Story with Your Findings
- **Phase 4: Celebrate and Act**
 - o Step 9. Regularly Reflect on Learnings Throughout Your Journey
 - o Step 10. Plan and Implement Improvements

Part 3

Implementing Indigenous Evaluation Methods:
A Step-by-Step Process

Part 3. Implementing Indigenous Evaluation Methods: A Step-by-Step Process

“[The] focus needs to be on interconnectedness. The Indigenous perspective [is] that everything is interrelated, and the world is holistic. If your air gets sick, you get sick. Engage local knowledge since every tribal community has their own stories . . . community heritage and history are a tool of empowerment.”

Dr. David Begay (a traditional healer and Diné Elder) of the University of New Mexico, where he provides services as a cultural consultant

The Toolkit utilizes LaFrance & Nichols’ Indigenous Evaluation Framework (2009) and translates its five foundational values into **actionable steps** that teams can work through at their own pace. For example, it translates the Indigenous Knowledge value of “honoring multiple ways of knowing” into actionable steps such as consulting with Elders about traditional knowledge to identify Indigenous measures of success in an evaluation design (see Steps 3 & 4 below for more information).

In Indigenous evaluation, evaluation activities are viewed as part of a cyclical learning process, in which evaluation is interwoven with the program design and implementation. It can also be viewed as a continuous learning process rather than a one-time reflection of a past state.¹

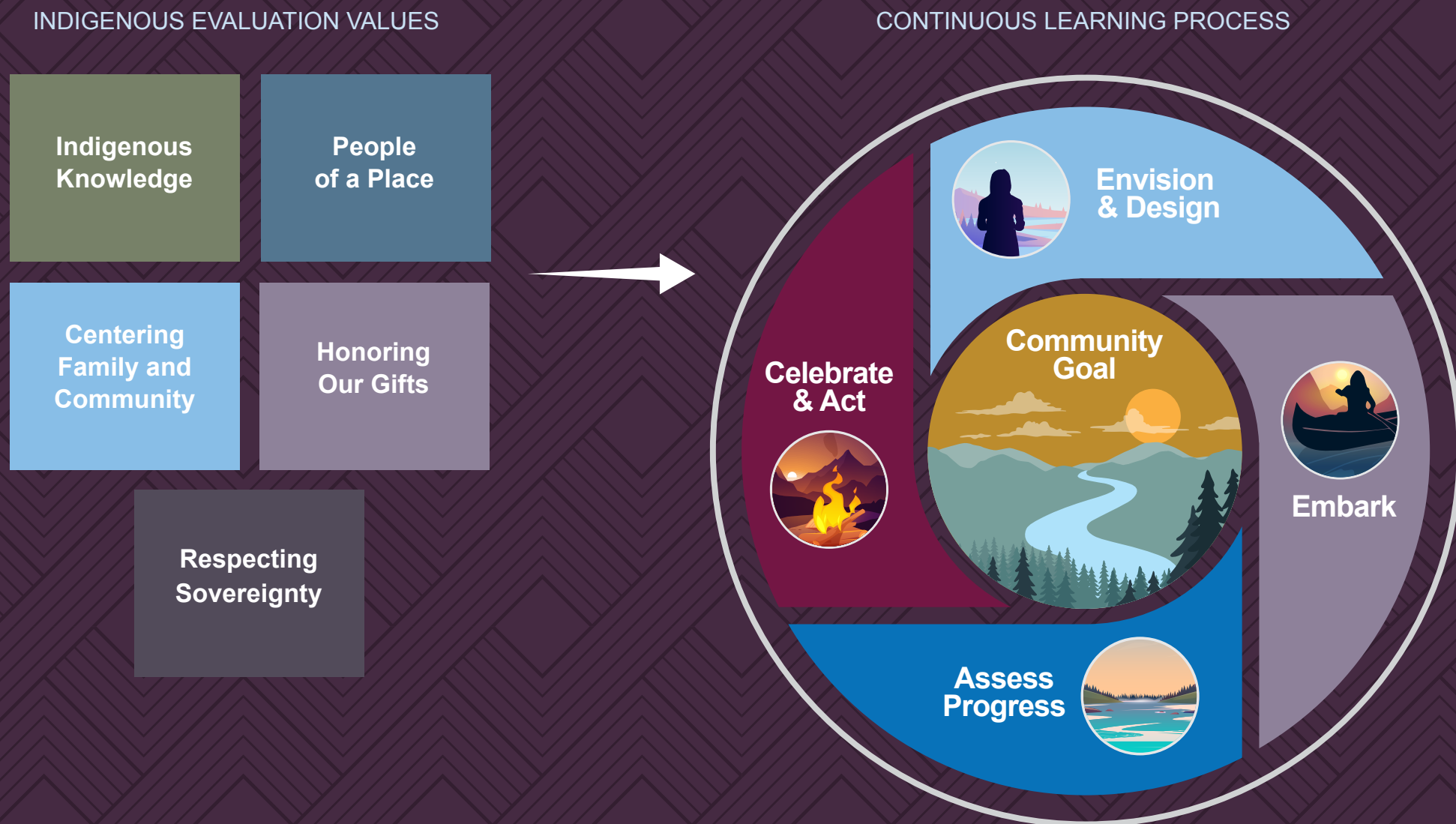
Figure 3 below illustrates how this Toolkit translates the core Indigenous evaluation values into a continuous learning cycle, organized into four key **phases**:

1. Envision and Design
2. Embark
3. Assess Progress
4. Celebrate & Act

As teams work through the Toolkit, these phases describe the nature of the activities they will engage in throughout their journey. The phases support the identification of a central community goal, which communities can define for themselves. As illustrated by the circle surrounding all phases, teams should imagine a constant thread of “reflection” inherently woven throughout the process.

1. This continuous learning process mirrors a Plan-Do-Study-Act model (PDSA), with which some readers may be familiar. The PDSA model differs from the scientific method model by viewing research not as a singular opportunity to determine an outcome, but rather an ongoing approach to improvement over time with many outcomes and many opportunities to reshape the process.

Figure 3. Translating Indigenous Evaluation Values to a Continuous Learning Process



(LaFrance & Nichols, 2009)

Each of the four phases can be further broken down into steps. This Toolkit identifies ten of these steps that programs can take to implement Indigenous evaluation methods over the course of a continuous learning cycle:

- **Phase 1: Envision and Design**
 - Step 1. Identify Key Program Visions
 - Step 2. Identify Program Components
 - Step 3. Identify Indigenous Success Measures
 - Step 4. Plan Indigenous Knowledge-Gathering Activities
- **Phase 2: Embark**
 - Step 5. Adjust Your Path as You Go
- **Phase 3: Assess Progress**
 - Step 6. Gather Indigenous Knowledge as Data
 - Step 7. Reflect to Assess Progress
 - Step 8. Tell Your Story with Your Findings
- **Phase 4: Celebrate and Act**
 - Step 9. Regularly Reflect on the Lessons You've Learned Throughout Your Journey
 - Step 10. Plan and Implement Improvements

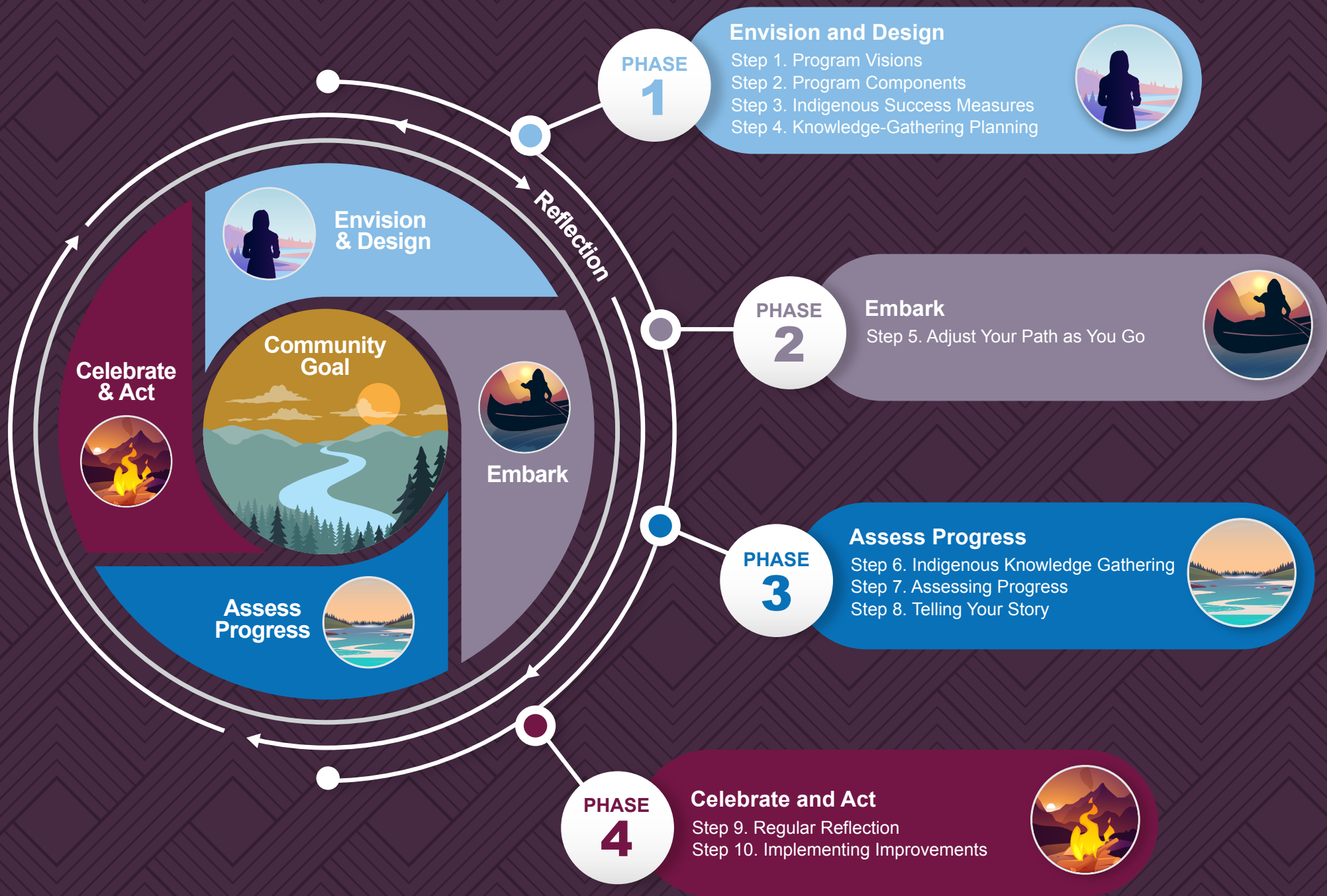
Figure 4 on the next page illustrates the steps by phase.

We encourage teams to work through these steps as it makes sense to you and your team. As noted in Part 1 above, teams who are starting to develop a program or initiative may want to work through the Toolkit beginning at Step 1. Others who have already designed a program may be most interested in Steps 2 and onward.

The following provides a step-by-step guide for teams interested in working through this Indigenous evaluation continuous learning cycle.



Figure 4. List of all Steps by Phase





Step 1. Identify Key Program Visions

What destination can your community reach with this program?

STEP 1 OVERVIEW

This portion of the Toolkit focuses on building a foundation and destination for your Indigenous evaluation work. It starts by outlining ways to integrate evaluation into your program design. This step guides teams through identifying the program vision and encourages input and feedback on the evaluation process from an advisory committee or other entity. This section also covers how to engage an Indigenous evaluator or other expert familiar with both your community and Indigenous evaluation approaches. After setting the stage and identifying key resources, it highlights the importance of engaging the evaluation team in self-reflection to examine personal and professional values and biases, acknowledging that these topics can be challenging to discuss. Identifying community approaches to healing and providing support are essential elements of moving forward together in the Indigenous evaluation process.

Each of the four phases can be further broken down into steps. This Toolkit identifies ten of these steps that programs can take to implement Indigenous evaluation methods over the course of a continuous learning cycle:

- **Weave together evaluation design with program design**
 - Begin thinking about evaluation-related concepts during program planning, rather than as an after-thought once the program has been designed.
 - Taking time to reflect and assess at all stages of program design and implementation are core practices of Indigenous evaluation. Before developing your health program, take some time with your team and community partners to think about how reflection and assessments can be included as you design and implement the program.
 - Reflection with your team can take several forms, which may include:
 - Brainstorming important questions you think you might ask at each stage of program implementation.
 - Discussing how you might answer those questions, keeping in mind the community you are serving as well as the time and resources available.
 - Listing the health behaviors your program would like to prevent and behaviors it would like to promote.
 - Building in time at key points to discuss whether the measures / data / activities meet your visions and support program deliverables (more on this in Step 4).
 - Planning resources, time, and space for observing, sharing, listening, learning, and feeling.
 - This Toolkit is designed to support your efforts in weaving evaluation into program design and implementation.

- **Develop an advisory committee for evaluation and program activities**

- Convene a group of interested community members who will be valuable resources and who can speak to the program's impact on the community. This committee may include:
 - program staff at your organization,
 - community Elders,
 - youth,
 - those directly or indirectly impacted by OUD, or
 - external community members whose voices are valued and may aid in the design or evaluation process.
- The advisory committee can be comprised of individuals with different skills, experiences, and knowledge; members need not be familiar with research or evaluation.
- A designated leader or facilitator may be helpful to coordinate meetings, confirm the agenda, and provide a consistent approach.
- Groups will vary in size and composition. It's possible that an advisory committee may be comprised of program staff only, which is fine.

- **Engage local, Indigenous evaluation professionals if possible**

- If possible, invite an Indigenous professional who specializes or has experience in Indigenous evaluation approaches to join the advisory committee, whether from within your organization or outside (e.g., from a tribal epidemiology center, local university, or from another tribe).
- This person or team can assist your team in building internal evaluation capacity and centering data sovereignty. See the **“What is Indigenous Data Sovereignty?”** box on page 65 for more information.
- A team may also work through the Toolkit on its own to build internal evaluation capacity.

- **Discuss how personal and professional values inform your team's work**

- Values are beliefs that motivate people to act one way or another. Values can inform practice, visions, and activities.
- Once your team has convened a core group of advisory committee members, the next step is to reflect on individual and shared values before embarking on any program or evaluation planning work.
- Use [Worksheet 1: “Exploring Our Values”](#) to help facilitate this discussion. This worksheet creates a shared understanding of the values of your team and other community members. To see an example of how a fictional team might fill out the worksheets, reference the “Example” worksheets after “Janelle's story” for each section. For blank worksheets, see Appendix A.

- **Make space to acknowledge the difficult feelings that may come with opioid overdose prevention work or other public health needs**
 - It is important to reflect on the broader context surrounding the substance use disorder issues your community is working to address. By providing space to reflect on issues such as historical trauma or personal experiences with substance use/abuse, teams can ground their work in group members' and the community's lived experiences. This step helps to understand the sensitivities that need to be addressed. It also provides space to include spiritual or cultural practices that can help support this work.
 - **Worksheet 1: "Exploring Our Values"** provides an opportunity to reflect on these topics. Keep in mind that it may be necessary to regularly revisit these issues to continue the healing process.
- **Engage community early and often to ensure community-level healing and transformation**
 - Use **Worksheet 2: "Community Engagement Planning Table"** to consider the wide range of voices needed for community transformation and healing, beyond the core group of advisory committee members more actively involved in planning your program and evaluation efforts. Indigenous evaluation approaches prioritize ensuring community members have a meaningful voice throughout the project. See the **"What Role Does Community Engagement Play in Indigenous Evaluation"** box below for additional information.
- **Focus initial community conversations on broad visions for your journey's destination,** including any new or existing opioid prevention, treatment, and healing work. Broad visions can help groups ground their work in a shared vision before getting into program specifics.

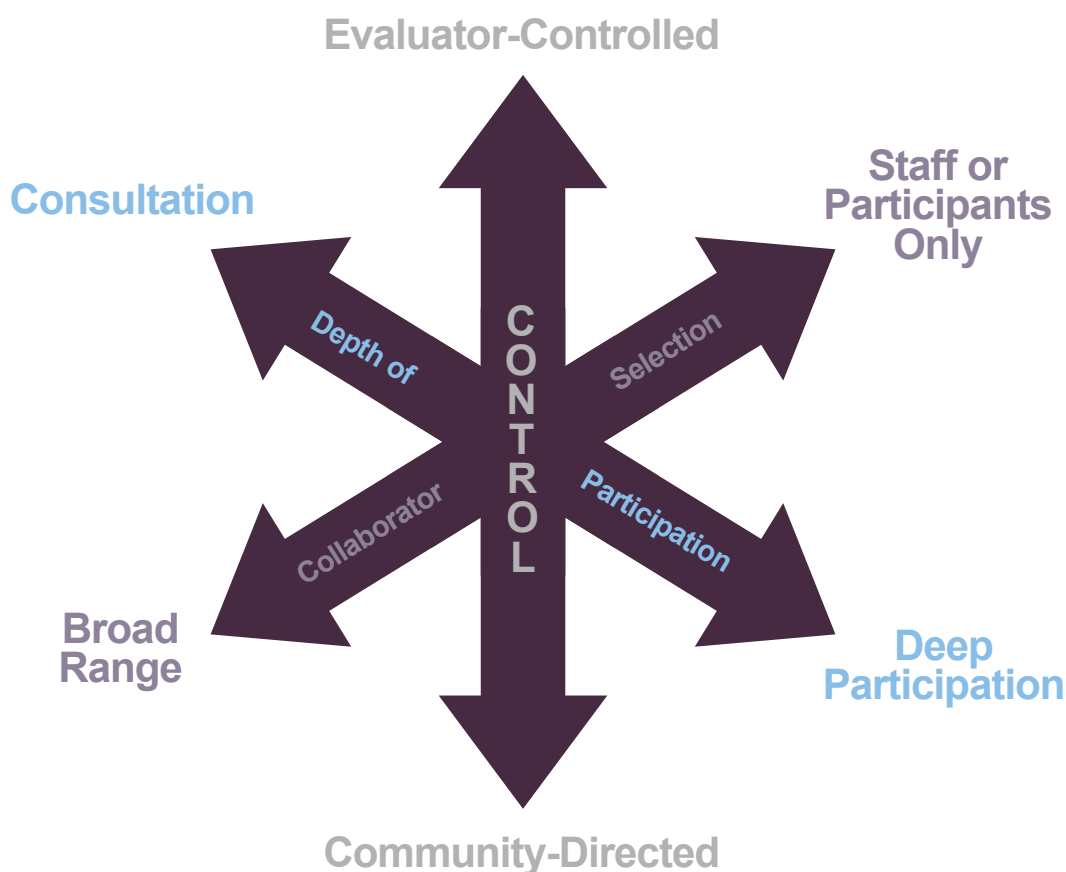


Figure 5.
Community
Engagement
Spectrums
in Indigenous
Evaluation

*Adapted from
LaFrance &
Nichols (2009)*



What Role Does Community Engagement Play in Indigenous Evaluation?

Community engagement plays a central role throughout an Indigenous evaluation process, underscoring the “Centrality of Community and Family” values (see Figure 2 above). LaFrance and Nichols (2009) envision three core components of community engagement, which all operate as intersecting spectrums (See Figure 5 above):¹

- **Control of the evaluation.** At each end are the two extremes: complete control by the evaluator and complete control by the community. The middle of the arrow represents a spectrum between the two extremes where teams can choose the type of control that works best for their project and their community, with the hope of giving the community as much control as possible.
- **Selection of participants.** At one extreme, program collaborators might only include staff and participants. At the other end, a program might engage a broad range of community groups or members, including tribal leadership or community knowledge bearers. In Indigenous evaluation, determining which community voices should be involved in a given project can be more complex than in the Western world, because individuals often play multiple, overlapping roles in a tribal community. For example, an individual might embody both the role of “program staff” and “impacted community member,” blurring clear distinctions in a community engagement selection table. Alternatively, Elders might request that teams expand their table to include non-human relatives. Indigenous evaluation approaches prioritize the broadest community engagement, when possible.
- **Depth of participation.** This arrow ranges from consultation, where community members might advise from afar or offer light feedback, to deep participation, where community members might collect and analyze data or shape crucial aspects of the project. Indigenous evaluation approaches prioritize deep community engagement, when possible.

Teams will vary in terms of where they fall along each of these spectrums. Teams should reflect on their own status within the community, how the community usually generates and shares knowledge, and how their project can best fulfill the needs of the community members. Some projects may only require review with an advisory board who takes minimal control of the project. Others may require cooperation with tribal, Elder, and youth councils to formulate what the project ought to look like from the beginning.

- In having these broad visioning conversations, it may be necessary to **map out important relationships, key historical moments, or other important cultural information** to best understand the path forward. Identify the starting point of your journey by taking stock of existing programs, reports, or conversations that have already been done in service of your goals. This will help you incorporate any existing knowledge and avoid repeating progress that has already been made.
- Tribal community members and program staff may not be aware of all existing, effective programs working on similar goals.
- **Use Worksheet 3: “Looking Upstream: Observing Our Starting Point”** to conduct a scan of existing programs in your area or community working on similar goals. This may help your team refine their visions to be more specific or differently targeted than other existing programs. It may also identify ways that your program can leverage existing resources to work toward your visions.
- In addition to reviewing existing programs, we encourage your team to review the relevant Indigenous knowledge that could inform your visions and your journey ahead.
- To build local capacity by participating in the evaluation process, community members could document or present their findings or share oral stories to the advisory committee, providing insights from their lived experience.
- **Draft a list of core program visions around which success will be measured and your team’s story can be told**
 - Documenting your team’s process and progress is important. Write out or draw a picture of the visions your team hopes to achieve by implementing your opioid prevention, treatment, or healing project.
 - Use **Worksheet 4: “Planning Our Journey”** to distill these visions into the three main program visions your team hopes to achieve.
 - **Why just three?** While you are welcome to list several visions, we encourage you to break the list into doable pieces. This will focus your community’s efforts and support you as your team works through subsequent steps in this Toolkit.



Activities for Step 1

Introduction to the Companion Story (“Janelle’s Story”)

The following story (or “Janelle’s story”) provides a narrative about a fictional tribal behavioral health center and their journey utilizing this Toolkit in their opioid overdose prevention programming. The story opens as the team begins to work through Step 1 of the Toolkit. Subsequent chapters align with subsequent steps. Janelle’s story, and the accompanying completed example worksheets that follow, are designed to utilize storytelling to help teams envision how they would implement the information presented in the Toolkit document itself and blank worksheets.

We encourage program teams to read Janelle’s story and completed worksheets for reference after each Toolkit step to gain perspective on how the steps and activities might be used by an actual team. We have also included some prompts for teams to explore together as they read through the story and think about how the fictional team’s discussions or decisions might be relevant to their own work.



Janelle's Story, Step 1

Pre-Work (Year 1: January-March)

Janelle, a program manager at her Pacific Northwest (PNW) tribe's behavioral health (BH) center, has been tasked with leading the development of an opioid overdose prevention program to address the recent rise in opioid-related deaths in her community. Her program received federal funding for this work, and the funders would like to receive progress reports on specific program deliverables.

Janelle and her team want to ensure the program is designed for her community and evaluated using a holistic approach that includes her community's history and current experiences. She learned about the Indigenous Evaluation Toolkit from a webinar and decided to work through it with her team.

Deciding to begin with Step 1 of the Toolkit, Janelle and her program director identified a core group of BH team members, community members, and opioid prevention experts who could serve on an advisory committee (AC) for the project. Because there was no in-house, BH program evaluation staff member, Janelle invited a local, non-Native university evaluator who specializes in substance use prevention projects and Indigenous evaluation.

Janelle convened the first AC meeting in March with copies of the Toolkit materials in hand. She chose a central location to meet, distributed COVID-19 personal protective equipment and developed a hybrid meeting approach so that AC members could participate from home. Janelle put together thank-you gifts, the community's customary way to express gratitude. They included local traditional food and a personalized thank-you note, along with a program sticker and magnet, to express appreciation for individuals' time and knowledge sharing.



Advisory Committee (AC) Planning Meeting #1 (Year 1: March)

Janelle began the first meeting by thanking AC members for their participation. A few days before the meeting, Janelle arranged for Simon, a community Elder, to join the meeting and provide an opening prayer.

Next, Janelle led the AC team through Phase 1 of the Toolkit: Preparation to Use Indigenous Evaluation Approaches. This discussion provided a space for team members to reflect on the difficult emotional nature of the work they do together. The group noted the substantial impact of historical trauma on community members. They also noted that substance misuse was related to the trauma people experienced. Colonization has limited access to traditional approaches to healing or other healthy ways to cope with issues of personal trauma, the effects of colonization, and substance misuse.

Janelle concluded that portion of the conversation on a hopeful note, noting the potential to incorporate the group's Indigenous knowledge to create successful programming and evaluation work. She noted that the funding agency has certain requirements, but these requirements do not mean that important cultural elements are not allowed. Rather, it may mean the team must explain how the cultural elements tie into the sponsor's requirements.

After pausing to reflect, the AC team completed **“Worksheet 1: Exploring Our Values”** to lay a foundation of shared understanding for building and evaluating a new program in their community. Completing this worksheet helped the team realize that several members had personal connections to opioid-related deaths, underscoring the interconnectedness of this issue in their community. Additionally, the AC team noted overlaps in individual, organization, and community values including connection, respect, healing, honoring Indigenous knowledge, and cultural resiliency. They also discussed balancing funder values of evidence-based practice and outcomes measurement with the shared value of service. The team noted their commitment to providing the connection between culture and healing in accordance with community norms of relationship building. They further committed to identifying ways to translate the community need for this culturally-informed work to funders as needed.

Next, Janelle and the AC team began completing **Worksheet 3: “Looking Upstream: Observing our Starting Point”** to determine what work had already been done in their community to address opioid use prevention. They noted that the tribal council had recently led a talking circle with community members about substance misuse. This included requests from the community to address the observed increase in opioid overdoses and opioid-related deaths; reduce stigma for people who use substances; and address poor attendance at 12-step meetings by building a range of prevention services, including harm-reduction programming in addition to abstinence-only programming.

Recognizing that these tribal council requests were an important starting point, and to reduce duplicating efforts, the team decided to incorporate these requests as helping to define the community “vision” for the new overdose-prevention program. Using **Worksheet 4: “Planning Our Journey”** as a guide, Janelle posted each of these requests on a whiteboard as three core goals:

- *Reduce opioid-related deaths, loss of community members*
- *Increase education about ways to reduce harm related to opioid use*
- *Reduce stigma related to seeking substance use and mental health services*

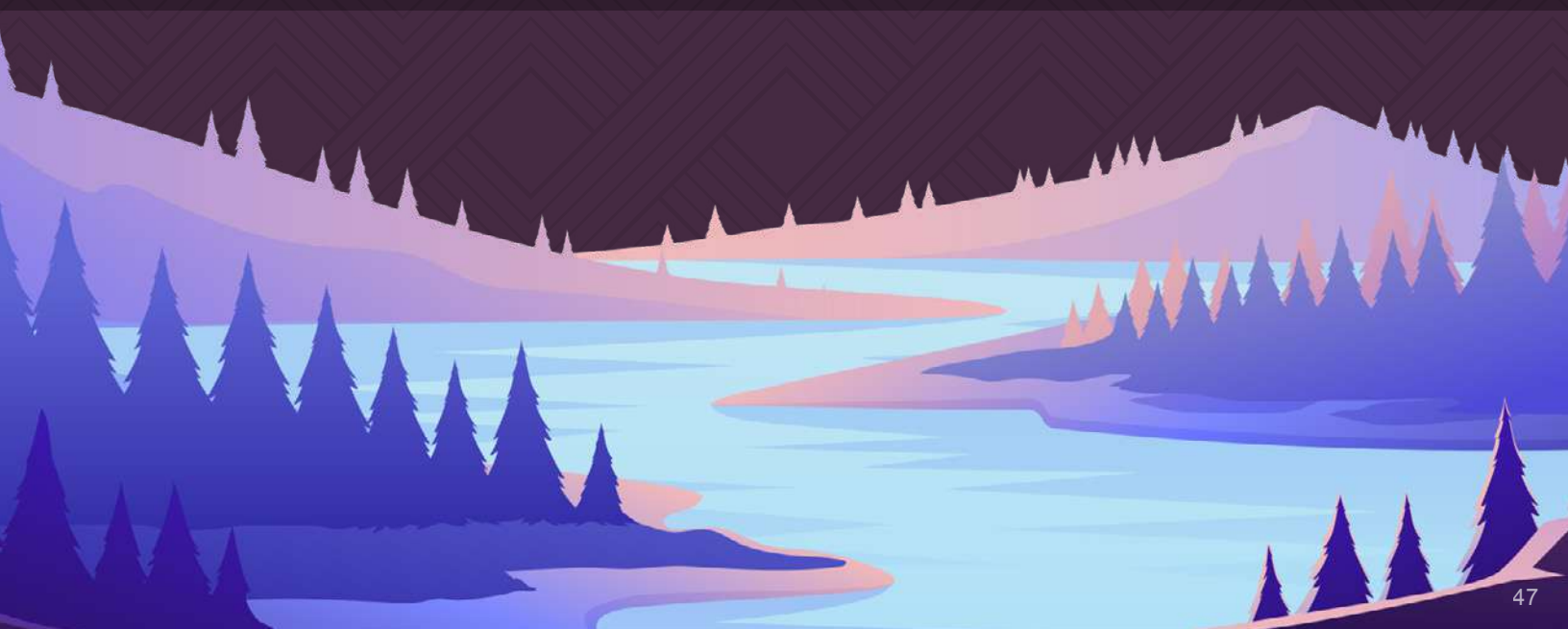
To end the day, the group discussed the importance of community engagement to build reciprocal learning and capacity, as well as facilitate ownership over the project and evaluation. Using **Worksheet 2: “Community Engagement Planning Table,”** the AC listed names of community members whose input was critical to shape community ownership over the project and the proposed depth of their participation. They also emphasized the importance of tribal ownership of all project-related data, regardless of an external evaluator’s assistance.

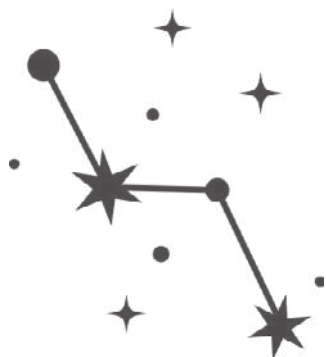
The team concluded the meeting with a clear vision for the work ahead. As “homework” before the next meeting, each team member was asked to speak with at least one community member to see if anything should be included in their community vision list. In addition, they asked the Elders who joined the AC to review the community planning table and make sure they had listed everyone they needed to engage in the project.

Janelle closed the first meeting by asking Simon to offer a closing prayer. Simon also offered the chance to smudge for those who wanted to clean off after discussing some challenging topics. Some of the group members had never smudged before, so Simon gave instructions for how to do it and why it is important.

After reading this section, consider these questions with your team:

- Janelle’s team decided to start at Step 1, but remember, you can start at a different step depending on where you are at in your programming. Looking at existing programs and the stage of your team’s program, at what step does your team feel is best to start?
- Janelle’s team begins their advisory committee meeting with a prayer. Is there an appropriate cultural practice that would support your team as you begin your Indigenous evaluation work?
- Who would and would not be on your team’s advisory council for an Indigenous evaluation project? Why or why not?
- When you compare the tools available to Janelle’s team to your own, are there any that you have that they don’t? Are there any that they have that you don’t?





Exploring Our Values

Purpose: To create a shared understanding of the values of your team, organization, or other community members involved in planning and evaluating your project.

Instructions: Use this space to reflect on your personal, organizational, and community values. As you list these values, ask yourselves: Do they align well across different groups or are there areas of conflict? How might these values impact the program/project you are working on together?

Part 1. Answer individually:

What motivates you to work on opioid misuse prevention in your community?

To prevent overdoses and death. Also, to be able to provide services that address the root cause of misuse, lessen suffering, and support a healthier community.

What values guide you as you do your work?

Connection, respect, healing, honoring Indigenous knowledge, cultural resiliency

Pause and discuss your answers among the group.

Part 2. Discuss and draft together:

What are your team's/organization's values as you approach this work?

Community, cultural resiliency, service, equity, holistic wellness

What are the values of the community/communities you serve?

Culture & identity, family & community, respect for sovereignty, Indigenous knowledge

What are your funders' values?

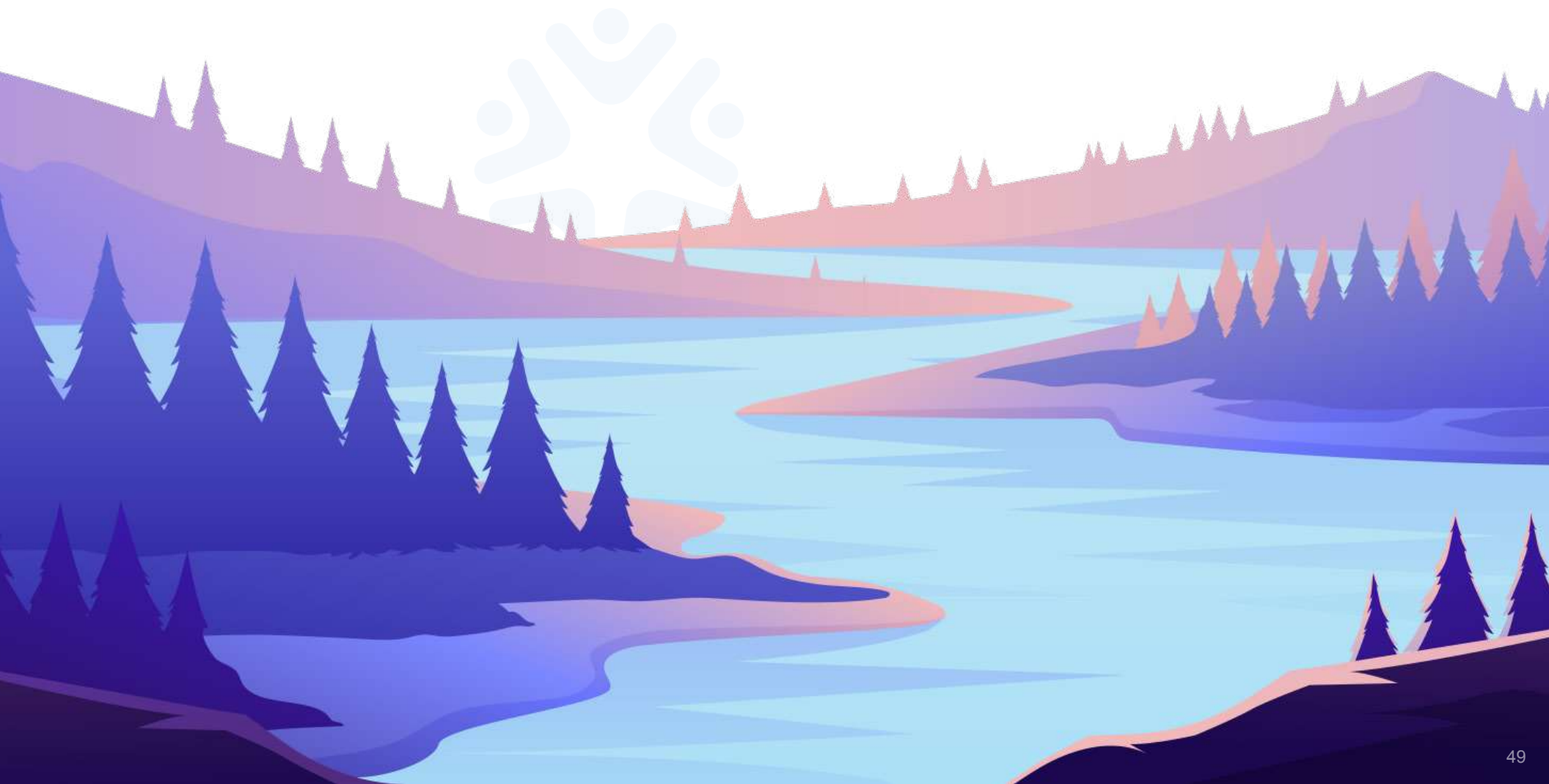
Evidence based prevention/intervention, outcome tracking, support provision



Community Engagement Planning Table

Purpose: To consider and intentionally plan to engage the full range of voices that should inform the development and evaluation of your program. Your plan should aim to increase deep community participation and community ownership over the evaluation as much as possible.

Instructions: On the next page, list community members' names, how they will be involved, in what ways they will have control, and how deep their participation will be. This table can be used as a blueprint for a dynamic plan, which will evolve over time as you think of other or deeper ways to engage your community.



Worksheet 2: Community Engagement Planning Table (Completed Worksheet)



Community Engagement Planning Table			
Which voices should be engaged?		How do you plan to engage them?	
Community members	What is/are their roles?	Control of the evaluation	Depth of participation (planning, designing, implementing, analyzing, reporting)
<i>PNW tribe's behavioral health (BH) center</i>	<i>Program development, implementation & tracking</i>	<i>Make evaluation/ programming final determination with approval from tribal council</i>	<i>Planning, designing, implementing, analyzing, reporting</i>
<i>Program Advisory Committee (AC)</i>	<i>Consultation & expert insight provision</i>	<i>Consultative role</i>	<i>Monthly feedback on planning, designing, implementing, analyzing, reporting</i>
<i>PNW tribe/tribal council</i>	<i>Consultation & approval of programming</i>	<i>Community ownership</i>	<i>Initial grant received tribal resolution. Will submit to the tribal IRB. Data owned by tribe. Additional approval needed for publication.</i>
<i>Patients of the BH center clients/ opioid prevention program</i>	<i>Service utilizer</i>	<i>PHI protected by HIPAA & 42CFR</i>	<i>Feedback via qualitative report & client surveys</i>
<i>External evaluator</i>	<i>Hired consultant & data analyst</i>	<i>Community ownership, evaluator facilitated</i>	<i>Consultation on design, implementation, analyzing & reporting</i>
<i>Federal funding body</i>	<i>Provide funding</i>	<i>Requested monthly progress reports on deliverables</i>	<i>Review of deliverable completion and future funding opportunities</i>



Looking Upstream: Observing our Starting Point

Purpose: To take stock of where you are beginning your journey so that you don't cover the same ground.

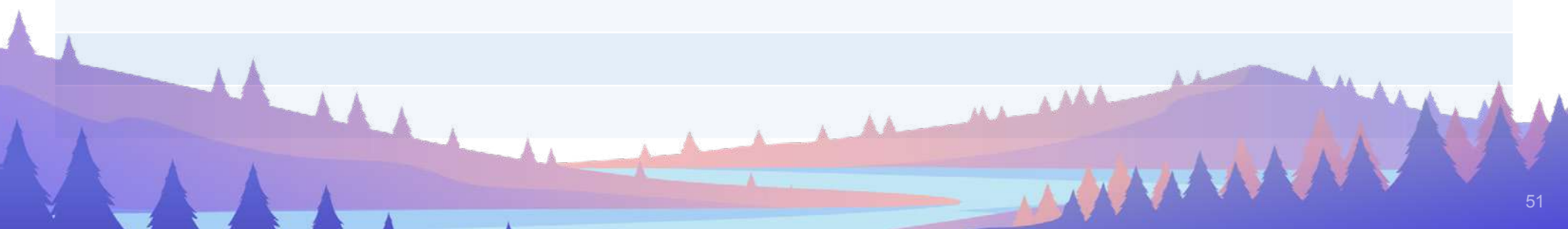
Instructions: Use this space to list any existing programs, publications, or conversations that have already been made or done in the service of your goals. For example, this could include an existing prevention program in a neighboring area, or a needs assessment conducted a few years back.

List all existing work that has been done on this issue here:

Tribal council had led a talking circle with community members to discuss substance use. This resulted in a set of key community desires:

- Addressing an observed increase in opioid overdoses & opioid related deaths*
- Targeting the observed decrease in 12-step meeting availability and attendance by increasing type and number of substance use prevention services availability*
- Including harm reduction programming in services offered*

To avoid duplicating work and to use the work already done, the team is adapting these desires to guiding visions for the project.





Planning Our Journey

Purpose: To outline your driving motivations or visions for doing this prevention work, now that you understand where you are starting and what your group's values are.

Instructions: List your program's three driving visions for doing this work. How do you envision the program or project you are planning improving lives in your community?

What are your three underlying visions for this project or program?

VISION 1

Reduce opioid-related deaths and loss of community members

VISION 2

Increase education about ways to reduce harm related to opioid use

VISION 3

Reduce stigma related to seeking substance use and mental health services

OTHER VISIONS



Step 2. Identify Program Components

What will your program provide, say, or coordinate within your community to achieve these visions?

STEP 2 OVERVIEW

This portion of the Toolkit focuses on designing the program services or activities that your team will be evaluating. It starts by encouraging groups to design for **“people of a place,”** keeping cultural values and local realities at the forefront of program design. Designing through this lens also means focusing on what groups think will work best for their community, prioritizing **“practice-based evidence”** over “evidence-based practice.” Once the group has determined what the program will include, this step guides groups through an exercise to document its key **activities** (i.e., program services, events), **messages** (e.g., slogans), or **community resources** (e.g., access to a truck or van) that they will utilize to implement their program and set out on their journey. See completed worksheets at the end of this section for examples. Finally, it encourages groups to come up with a culturally relevant metaphor to help explain the program model to other community members outside of the core planning committee.

Note: Step 2 is similar to developing the “Activities” column in a standard public health logic model, for those familiar with that tool. See Figure 6 below.

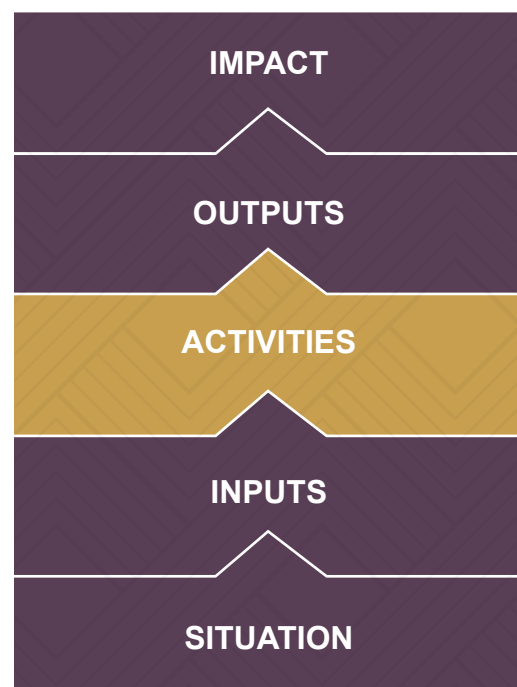
• Design for “people of a place”²

- Include cultural values, community visions, community needs, local strengths, and local challenges in the program design.
- Explore tribal stories, histories, and teachings. In what ways could these sources help in developing a program services model or framework?
- Recognize the program’s relationship to the community, including the community’s history and current situation. See the **example box** on the next page highlighting a program that exemplifies designing for people of a place.

See the **“What does it mean to be ‘People of a Place?’”** box below for additional discussion of ways to honor “people of a place” through Indigenous evaluation approaches.

Figure 6.

Step 2 viewed in a Standard Public Health Logic Model



2. The Toolkit also prompts teams to consider: What steps might be needed to adjust evaluation approaches for programs that serve multiple tribal communities/geographies, or urban Indigenous communities, rather than just one place?

What Does it Mean to be “People of a Place”?

Indigenous people have cultural understandings of “space and place” which distinguish land and landscape as essential to both individual and communal identities (LaFrance & Nichols 2009). Though perspectives differ between communities and geographies, communities use landscape to inform ceremony, life perspectives, and ethical understandings. For an Indigenous evaluation approach, honoring the perspectives of “people of a place” could include:

- Designing the program to be evaluated in a way that incorporates tribal histories describing how landscape and community have shaped one another over time;
- Prioritizing projects that enable community members to spend time on the land; or
- Seeking opportunities to use culturally relevant methods of data collection that are dictated by place, such as traditional gathering or crafting.

- **Follow pathways you and your team think will work**

- Focus on developing a model that your team (with community input) believes will work for the unique circumstances of your community, rather than looking to evidence-based models based on Western notions of “evidence” alone.
- If selecting a Western evidence-based model, ask: Should traditional teachings, practices, and belief systems be included?

- **“Pack” a list of the key metaphors, programs, community resources, and phrases, slogans, or messages that your program will bring to the community in service of your primary visions**

- **Refer to Worksheet 5: “Packing for Our Journey”** to list the core components of your program or project’s approach.
- Start by listing as many activities, resources, or messages as your team can think of. Then group them into topics. Finally, link this list to the core visions identified in Step 1 above. Which topics are most closely related to your three visions? Which ones can be taken on by your project?
- Consider: How will these pieces fit together to support a cohesive program feel, approach, or model?

ACORN Example: Designing for “People of a Place” with Traditional Food Staples in Mind

The A.C.O.R.N. Youth Wellness Program designed by Two Feathers Native American Family Services is a mental health and early intervention program in which Wiyot, Hupa, Yurok, Karuk, and Tolowa youth learn about cultural pillars represented by the program’s acronym:

A: Acknowledging Our Whole Selves
C: Connecting Language and Culture
O: Opportunity and Access
R: Relationships with Others
N: Nurturing Nature and Spirit

The A.C.O.R.N. acronym itself honors acorn, an essential food staple in traditional Northern Californian diets. Afterward, boys learn to compete in the Stick Game and girls participate in the Flower Dance, a coming-of-age ceremony.

For more information see: <https://twofeathers-nafs.org/programs/youth-wellness/>

- **Explore metaphors that could describe the program model**
 - Indigenous stories and teachings often rely on the use of metaphor to explain complex processes or phenomena. A useful first step is to begin by drawing a picture of your program, and how your team thinks it will help your community. Does the picture remind you of any local stories, locations, or cultural approaches? What might resonate best with community members? It is critical to engage community members in this stage. They may have better insights into metaphors that will resonate both with the program and with the community. This process can also help to confirm cultural fit and ensure uptake of the intervention.
 - For example, see the Canoe Journey box below.

Example: Canoe Journey Metaphor Describes Youth Prevention Program

“The Culturally Grounded Life Skills for Youth” curriculum designed by Healthy Native Youth is a suicide and substance abuse prevention program that uses the Canoe Journey as a metaphor. It provides youth the skills needed to “navigate their journey through life without being pulled off course by alcohol or drugs – with tribal culture, tradition, and values as compasses to guide them, and anchors to ground them.”

For more information, visit: <https://www.healthynativeyouth.org/curricula/healing-of-the-canoe/>



Activities for Step 2

Janelle's Story, Step 2

Advisory Committee Planning Meeting #2 (Year 1: April)

Janelle began the team's second meeting with an opening prayer from another Elder who led the talking circle earlier in the year. The AC then shared their insights from speaking with community members about the program's visions and values. This discussion revealed that tribal youth would like more usable information about harm reduction approaches to prevent opioid overdoses. They reported wanting a safe space to discuss the root causes of substance use with an emphasis on cultural teachings from Elders to promote healing. They also shared that the experiences they had in watching parents, older siblings, cousins, and even grandparents struggle with substance misuse was hurtful on many levels.

With these new insights in mind, Janelle led the group through **Step 2**. The group brainstormed the services, resources, or messages they wanted to build into their new program in support of the community's vision and the three main goals. Some members of her BH team recently attended a conference where BH staff from other tribes presented their approach to opioid overdose prevention, which involved using a **mobile check-up unit** to conduct wellness checks with people who have an OUD (Opioid Use Disorder). They thought this might be a good model to adopt for their community. Other committee members heard about a **"Stay Safe in Community: Don't Use Alone"** campaign in another tribal community that researchers found was effective at preventing solo drug use, which is linked to higher death rates from overdose. Finally, a member suggested that a **peer-support program** led by people who are known to have used substances in the past could reduce stigma and foster discussions about the root causes of use. The team also discussed adding two youth to the AC to ensure youth input on program development. One of the Elders on the AC noted that access to tribal ceremonies was limited to those who were not currently intoxicated or high. The team discussed acceptable options for those who might be intoxicated or high, and what that might look like for the community, noting the importance of following cultural traditions, and at the same time, supporting those with OUD in a culturally grounded way.



With several ideas swirling in her head, Janelle used **Worksheet 5: “Packing for Our Journey”** to lead the AC through a discussion about hopes for the program’s eventual form and spirit. She encouraged the team to think outside of existing evidence-based models to imagine what would work best for people in *their* community, a semi-rural, coastal tribe with an active tribal council and regular community events.

She facilitated a discussion to help the group refine their ideas into a cohesive set of “supplies” for their journey. While this set of supplies resembled aspects of the evidence-based models other members had encountered, it prioritized local cultural values, geographic realities, and salient messaging for their community.

Finally, Janelle prompted the AC to think about what creation or cultural stories could be used as a metaphor or theoretical framework for their program’s model. A committee Elder reminded the group about a story that helped the group reframe the program as *creating a protective herbal balm the community can apply to woven goods to ward off pests and harsh rains that unravel the threads*. The team asked the Elders to find a name that reflected that idea in their tribal language, with the hope of using it as the program name.

In closing, the group discussed next steps to ensure the program design beginning to take form was truly designed for “people of a place” and met the community’s identified needs. The AC planned to present this proposal at the upcoming tribal council meeting.

Finally, using the **Worksheet 5: “Packing for Our Journey”** worksheet, the team wrote down the proposed program services, resources, and messaging in one place. Their key messages included stigma reduction, information access, original instructions as resiliency, and “Stay Safe, Stay in Community: Don’t Use Alone.” Building from these messages, they decided that their programming components would include:

- Peer support program training & curriculum
- Mobile check-up vans/units
- “Stay Safe, Stay in Community: Don’t Use Alone” campaign – marketing materials and giveaways
- Intergenerational cultural trainings to promote healing and hold space for youth to share their experiences

After reading this section, consider these questions with your team:

- *Janelle’s team receives helpful feedback from youth community members as well as Elders. How can your team engage community members and diverse voices to contribute to defining your community visions?*
- *Janelle’s team serves a semi-rural coastal tribe with an active tribal council and community events. What unique features of your community will shape the needs and function of your evaluation effort?*



Packing for Our Journey

Purpose: To list the key activities, resources, or messages your program will deliver to help you progress on your journey.

Instructions: As you prepare for your journey, you might want to pack a parfleche, canoe or gourd. As you pack, list your program's key metaphors, programs, community resources, and phrases, slogans or messages. What meaningful metaphor could you use to explain your program to your community?

Program Services	Peer support program training & curriculum Mobile Wellness Checks "Stay Safe, Stay in Community" campaign – marketing materials and giveaways Intergenerational cultural trainings to promote healing and hold space for youth to share their experiences	
Community Resources	Tribal Council Outside evaluator & funding body Access to a program-operated van	
Key Phrases, Slogans or Messages	"Stay Safe, Stay in Community" Stigma Reduction Information access Original Instructions as resiliency	
Metaphors	A story about the blending of a protective herbal balm the community can apply to woven goods to ward off pests and harsh rains that unravel the threads	



Step 3. Identify Indigenous Success Measures

What does it look like at your journey's destination?

How will you know if you've made it there?

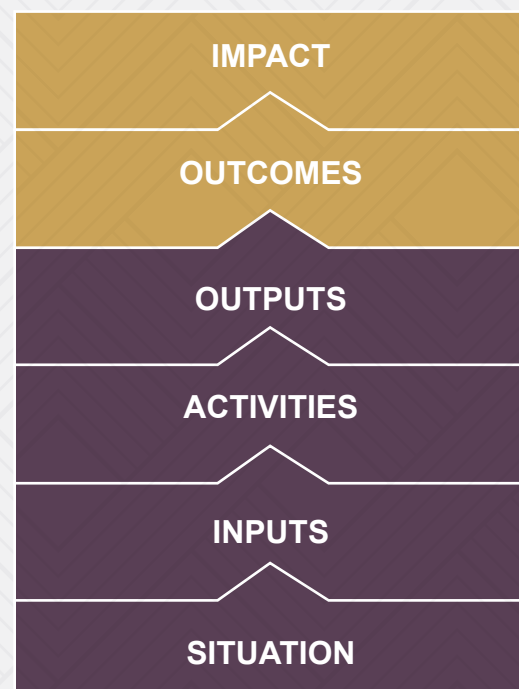
STEP 3 OVERVIEW

This step guides groups through a process to determine Indigenous success measures teams can use to evaluate their program that draw from multiple forms of Indigenous knowledge. It starts by guiding groups through a process to imagine success in a holistic way – what would it look, feel, or even smell like if you made progress toward your visions of success? – before determining ways to measure those feelings of success. In creating these success measures, or “landmarks,” this section of the Toolkit encourages groups to dig deep to ensure they are accessing all forms of Indigenous knowledge to measure success.

Note: Step 3 is similar to developing the “Outcomes” and “Impact” columns in a standard public health program logic model and the “indicators” to measure those program outcomes and impact. See Figure 7 to the right.

Figure 7.

Step 3 Viewed in a Standard Public Health Logic Model



- **Engage community to envision “success”**

- Once your team has determined the program’s key visions and activities, use participatory approaches to help other community members envision what they hope to see as your team embarks on your journey. See the **“What are Participatory Approaches?”** box on the next page for examples of these approaches.
- Use **Worksheet 6: “Imagining Success”** to facilitate this discussion. The purpose of this worksheet is to evoke personal, emotional, or spiritual associations and descriptions about what success will look like as you progress toward your visions listed in Step 2 above.
- Be as descriptive as possible! For example, what does it look and feel like to have a community free of opioid overdose, with all its lived and shared history intact?
- For example, your team may have a vision to *“Reduce opioid-related deaths and loss of community members.”* In this case your description of what you envision this looking and feeling like may include *“Ability to access information related to reduction in opioid related deaths,”* or *“Feelings of relief, increased safety, and connection to family and community.”*

What are Participatory Approaches?

Community-based participatory approaches allow evaluators to involve the community throughout the entire evaluation process so that research is done *with* vs. *on* Indigenous communities.² Prioritizing equitable partnerships balances control amongst those conducting research and those who belong to the community and engenders shared ownership. Methods that might embody this approach include practices that might be familiar to Western researchers, such as focus groups or needs analyses. Indigenous communities also have their own participatory approaches, including storytelling, traditional arts, or land-based methods, such as gathering or walks on the land to help community members share their future visions or provide feedback about a given project.

- **Tell the story of success from the perspective of your community's values and aspirations**
 - In many Indigenous communities, success is often defined by how well an effort supports community wellbeing. Community gatherings, sharing meals, and engaging in cultural activities together are common ways to celebrate and foster holistic wellbeing. Relatedly, honoring ceremonies and potlatches are two examples of Indigenous approaches to recognizing individual achievement. How can your team develop community-based success measures? How can your team help tell the program's story in a way that involves and acknowledges the community? What are ways of recognizing important individuals and their contributions?
- **Develop measures that honor individuals' unique gifts and circumstances**
 - Many Indigenous communities believe that each entity or person in the natural world has a place and a purpose. Respect for each person and honoring their unique gifts or experiences is therefore an important Indigenous evaluation value (LaFrance & Nichols 2009). According to the IEF, in an educational context, the evaluator's task is "to devise measures that respect individual learners' growth and progress" (LaFrance & Nichols 2010, pg. 23).³ In a substance use prevention and treatment context, this might mean developing measures that account for individuals' unique risk and protective factors as they participate in a program.
 - "Honoring our gifts" includes respecting and honoring all individuals, families, and community members and how their gifts or experiences may have been directly or indirectly impacted by an SUD/OD. It also includes remembering and honoring those lost through opioid overdose.
- **Consider multiple ways to measure success using Indigenous knowledge sources**
 - LaFrance and Nichols (2009) cite the work of Marlene Brant-Castellano (2000) in describing the three types of Indigenous Knowledge (*empirical, traditional, and revealed*) that Indigenous people have been producing and using for time immemorial.⁴ Your team can use these different forms of knowledge to define your success measures.
 - In contrast to Western scientific knowledge, which tends to limit itself to that which can be explained through evidence in the physical world, Indigenous knowledge includes social, ecological, biophysical, and metaphysical values or information present in both the physical and spiritual world.
 - See the **Types of Indigenous Knowledge box below** for more information about the different types of Indigenous Knowledge.

3. Tuhiwai, L. T. (2012). *Decolonizing methodologies: Research and indigenous peoples*. Otago University Press.

Types of “Indigenous Knowledge”

Indigenous knowledge has been used and passed down throughout all generations. LaFrance and Nichols (2009) note that Indigenous people often approach new activities with expectations that can be likened to the Western concept of a hypothesis, which is then tested through evaluation processes that enable the community to determine whether the activity has fulfilled their expectations. In this way, evaluation is perceived as a crucial part of the knowledge-creation process, because it determines “what works, why, and provides a full description of what happened.”

- **Empirical knowledge** is observational knowledge “gained from multiple vantage points over extended periods of time”.
 - Example: weather, resources, food’s readiness to harvest, number of people gathering
 - **Traditional knowledge** frames and conveys the values and beliefs of the community.
 - Examples: Stories of the community’s origin, clan histories, oral tradition describing relationships with the land
 - **Revealed knowledge** is the result of spiritual and ancestral interaction.
-
- **Identify Indigenous success measures – “Landmarks”**
 - Your team now has a shared vision for what you hope to see as you progress on your journey. The next step on the journey is to begin identifying ways to measure success. There may be several ways to measure “success” and there may be short-, medium-, and long-term measurement points. Your team might use a range of qualitative and quantitative measures. Quantitative data are numeric in value and are often used to answer questions such as how many; how much; or how often through surveys, questionnaires, maps, or electronic health records. Qualitative data is descriptive in nature and is expressed in terms of language, often used to answer questions such as how or why (e.g., community storytelling practices, interviews). Both types of measures lend to assessing changes and impacts by a program or service. However, as described above, there are types of Indigenous knowledge that do not yield measurement in a standard measurement method. For example, dreams and ceremonies are considered *revealed knowledge* by the IEF. Creating a chart to map out these measures and the methods to collect them will help your team develop an action plan to implement the evaluation.
 - You can use **Worksheet 7: “Landmarks”** together with your team to begin thinking through specific data, stories, conversations, or wisdom you can use as you measure your progress toward your visions.
 - Be specific and draw on **multiple forms of knowing** to inform your measures. This includes different forms of Indigenous knowledge: traditional, empirical, or revealed knowledge.

- For example, if the “envisioning success” activity above resulted in your team envisioning *“Feelings of relief, increased safety, and connection to family and community,”* one way to know you have arrived at this river bend (i.e., progress point) might be inviting program participants who use substances to share their stories about changes in their relationships with family and community after program implementation. Thus, your team’s landmark could be: *“People dealing with SUD/ODU describing stronger connections to family, as well as past and future generations, in conversations or interviews.”*
- **Double Check to Ensure You Are Including All Types of Indigenous Knowledge in Your Success Measures**
 - Once you have developed your preliminary list of landmarks, make sure you are including all types of Indigenous knowledge, not just that which is objective or measurable in a Western evaluation sense. As included in the example above, measures can include empirical knowledge, such as tribal council meeting attendance, or revealed knowledge, such as feelings of connection among community members.
 - See Figure 8 below for examples of Indigenous Success Measures by Indigenous Knowledge type.

Figure 8: Indigenous Success Measures by Indigenous Knowledge Type

Empirical Knowledge	Revealed Knowledge	Traditional Knowledge
Observations and experiments in natural settings	Dreams, vision, ceremony, feelings	Handed down through generations (creation stories, oral histories)
Ex. Success Measures Meeting attendance/ participation records; feedback at talking circles; program retention rates; photographs/drawings	Ex. Success Measures Feelings about relationships captured when talking about the program; feelings of sacredness; participants’ art	Ex. Success Measures Elders’ opinions about the program; interactions between ancestors/spiritual world and the community
		

- Be mindful of who will see and handle this knowledge as many communities have knowledge that only trusted individuals or tribal members should know. Do you want to note that some of your landmarks should be used internally only?
- If it is helpful for your team, you can use the optional **Worksheet 8: “Your Indigenous Success Measures”** to categorize your success measures from the Landmarks worksheet into the three “baskets” of Indigenous knowledge. This will ensure that you have included all forms of knowledge.

Step 4. Plan Indigenous Knowledge-Gathering Activities

How and when will you collect data or knowledge to assess progress along your journey, while centering data sovereignty?



STEP 4 OVERVIEW:

This portion of the Toolkit focuses on identifying ways to gather indigenous knowledge (or data collection methods/activities), and what data teams need to know to determine if their programs are making progress toward their intended vision(s). Once teams have identified their knowledge-gathering activities, the Toolkit guides groups through a planning exercise to outline when and how they will collect each of their Indigenous success measures. Knowledge gathering is intimately intertwined with the concept of data sovereignty. This section of the Toolkit guides teams through ways to ensure tribal ownership and use of their own knowledge when collected through Indigenous evaluation methods.

Note: All forms of knowledge your team acquires, learns, reveals, or elevates throughout the evaluation process are considered “data,” and vice versa. We use the terms interchangeably here but prioritize the use of “knowledge” to signal its inclusion of all forms of Indigenous knowledge.

- **Determine Indigenous knowledge-gathering activities**
 - These knowledge-gathering activities may include culturally specific approaches for your community and/or approaches like OUD assessment tools or surveys. See the box to the right for examples of Indigenous knowledge-gathering activities.
- **Develop a knowledge gathering calendar**
 - Use **Worksheet 9: “Knowledge-Gathering Calendar”** to create a data collection plan focused on the Landmarks identified in Step 3 above. This can include specific points in time (e.g., administering a survey six months after launching the program), or a general sense of frequency (e.g., monthly conversations with families affected by opioid use).

Examples of Indigenous Knowledge-Gathering Activities

- Facilitating conversations with youth about their feelings of connectedness to adults with substance use disorders in their lives;
- Inviting people who use drugs to share their stories about changes in their relationships with family and community after the program’s implementation;
- Capturing descriptions among people who currently or formerly used drugs about their feelings of stigma;
- Using art-based activities to help respondents articulate their feelings visually if not verbally;
- Gathering attendance records at tribal meetings; or
- Collating Tribal Epidemiology Center data capturing morbidity or mortality rates.

- **Ensure data sovereignty through tribal ownership and control of data**

- In addition to planning when various data or knowledge elements will be collected, teams should consider the following questions to ensure tribal ownership and control of data:
 - Who will collect this data?
 - Whose permission is needed to collect it?
 - Who will store the data?
 - Who will be able to view the data?
 - Who will analyze the data?
 - Who and what will these data be used for?
- Whenever possible, teams should attempt to involve a tribal community member to provide input on and/or perform the above-listed tasks.
- Capacity-building note: It may be helpful to engage local youth members to plan to serve as data collectors for topic-appropriate success measures. For example, your team could work with youth to develop a survey instrument measuring engagement in cultural activities and their relatedness to health promotion and facilitate interviews among the target respondents.
- See the What Is data sovereignty? box below for more information.

What is Indigenous Data Sovereignty?

Data sovereignty refers to the inherent right of tribes to control collection, ownership, and application of data, information, or knowledge about their peoples, lands, and resources. This refers to any data about communities' resources and environments (e.g., land, water, geology, titles, sacred sites, plants); individuals (e.g., administrative, legal, health, social, services), or nations (e.g., traditional and cultural information, oral histories, literature, stories, belongings).^{5,6}

Tribes' inherent and treaty-based authority to govern their peoples, lands, and resources entitles them to this right to knowledge about themselves. Ensuring tribal ownership and control of all data used for evaluation purposes promotes data sovereignty. In contrast, Western program evaluation practices often ignore tribal sovereignty.

- **Secure proper permission to conduct knowledge-collection activities**

- If applicable, follow all relevant tribal/urban Indian and/or other institutional review board (IRB) processes well in advance of conducting knowledge-gathering activities when working with tribal communities. The IRB will help ensure that all appropriate measures are considered and taken to protect the rights of and prevent any harm to those involved in evaluation activities.
- In absence of a formal IRB, make sure you have tribal leadership's ongoing permission to conduct any evaluation activities you will be performing, in addition to broad community buy-in.



- **Make evaluation planning transparent to community**
 - Publicize program visions, planned knowledge-gathering activities, and (if applicable) draft knowledge-gathering instruments on relevant media and social media platforms.
 - Solicit community feedback on knowledge-gathering instruments and your knowledge-collection approach prior to launching the project and its associated evaluation activities.
 - Publicizing your knowledge-gathering calendar may even aid you in recruiting participants later in your knowledge-gathering steps, if community members are aware of the opportunity to participate (e.g., in a focus group).
 - Revisit [Worksheet 2: “Community Engagement Table”](#) to confirm that all relevant community members know about your evaluation plans and upcoming knowledge-gathering activities. Moreover, you may find it useful to engage some of these community members in the work of publicizing these activities.

Activities for Steps 3 & 4

Janelle's Story, Steps 3 & 4

Advisory Committee Planning Meeting #3 (Year 1: May)

After presenting the key visions and program components at the community-wide Spring tribal council meeting, Janelle and her team gathered for their third AC planning meeting. This meeting focused on incorporating tribal council feedback on the new program's design and envisioning Indigenous ways to measure the program's success using **Steps 3 and 4** of the Toolkit.

Using “**Worksheet 6: Imagining Success: What do you hope to see if your journey is successful?**” the group discussed what it would look, smell, taste, and feel like to achieve each of their visions outlined in their “**Planning Our Journey**” worksheet, particularly what it would feel like to have a community free of opioid overdose deaths. The group noted the following evocative descriptions by vision:

VISION 1	VISION 2	VISION 3	OTHER VISIONS
<i>Vision 1 from worksheet #4</i> <i>Reduce opioid-related deaths and loss of community members</i>	<i>Vision 2 from worksheet #4</i> <i>Increase education about ways to reduce harm related to opioid use</i>	<i>Vision 3 from worksheet #4</i> <i>Reduce stigma related to seeking substance use and mental health services</i>	What will it look, feel, smell or taste like if you are successful downstream?
VISION 1 What will it look, feel, smell or taste like if you are successful downstream? <i>Ability to access information related to reduction in opioid related deaths</i> <i>Feelings of relief, increased safety, and connection to family and community</i> <i>More opportunity to follow original instructions surrounding community wellness</i> <i>Intergenerational connections between family members are long-lasting and healthy</i>	VISION 2 What will it look, feel, smell or taste like if you are successful downstream? <i>Excitement about receiving knowledge from different sources</i> <i>The community shifting perspectives to view harm reduction as a positive (from a strengths-based perspective)</i>	VISION 3 What will it look, feel, smell or taste like if you are successful downstream? <i>Reduced community judgment</i> <i>Increased understanding of the difficult journeys of community members</i> <i>Community members who use or have used substances are increasingly invited to cultural events</i> <i>Combating/dismissing problem-focused assessment from external evaluators</i>	What will it look, feel, smell or taste like if you are successful downstream?



Next, the AC reviewed “**Worksheet 7: Landmarks: How will you know where you’re at?**” which helped to identify Indigenous ways of measuring progress and success utilizing “landmarks” (or, indicators) that correspond with empirical, revealed, and traditional knowledge.

The team noted the following landmarks by vision:

VISION 1	VISION 2	VISION 3	OTHER LANDMARKS
<i>Vision 1 from worksheet #6</i> <i>Reduce opioid-related deaths and loss of community members</i>	<i>Vision 2 from worksheet #6</i> <i>Increase education about ways to reduce harm related to opioid use</i>	<i>Vision 3 from worksheet #6</i> <i>Reduce stigma related to seeking substance use and mental health services</i>	How will you know where you're at?
LANDMARKS How will you know where you're at? <i>People who use or have used substances describing stronger connections to family as well as past and future generations in conversations or interviews</i> <i>Trainings on properly identifying opioid overdose admissions and correct racial/tribal identification are well attended</i> <i>Data collection/sharing agreements are approved</i> <i>Reduction in opioid related hospital admissions/deaths</i>	LANDMARKS How will you know where you're at? <i>Feedback from community members after harm reduction presentations shows growth in knowledge</i> <i>Engagement metrics from various resource platforms (e.g. in person, pamphlet, internet, video) show wide use</i> <i>Conversations with community members about shifting perspectives related to harm reduction are increasingly positive</i> <i>People who use or have used substances involved more in community conversations and expressing better access to harm reduction information</i>	LANDMARKS How will you know where you're at? <i>Conversations with community members reveal increased understanding of substance use</i> <i>Conversations with people who use or have used substances reveal reduced judgment by others</i> <i>Community members who use or have used substances are increasingly invited to cultural events</i> <i>Combating/dismissing problem-focused assessment from external evaluators in favor of strengths-based evaluation</i>	How will you know where you're at?

After listing their landmarks, the team used **Worksheet 8: “Your Indigenous Success Measures”** to confirm that their landmarks drew on as many forms of Indigenous knowledge as possible (i.e., empirical, revealed, and traditional knowledge). By organizing their indicators by knowledge type, the group felt satisfied that their measures drew meaningfully on all three forms of Indigenous knowledge.

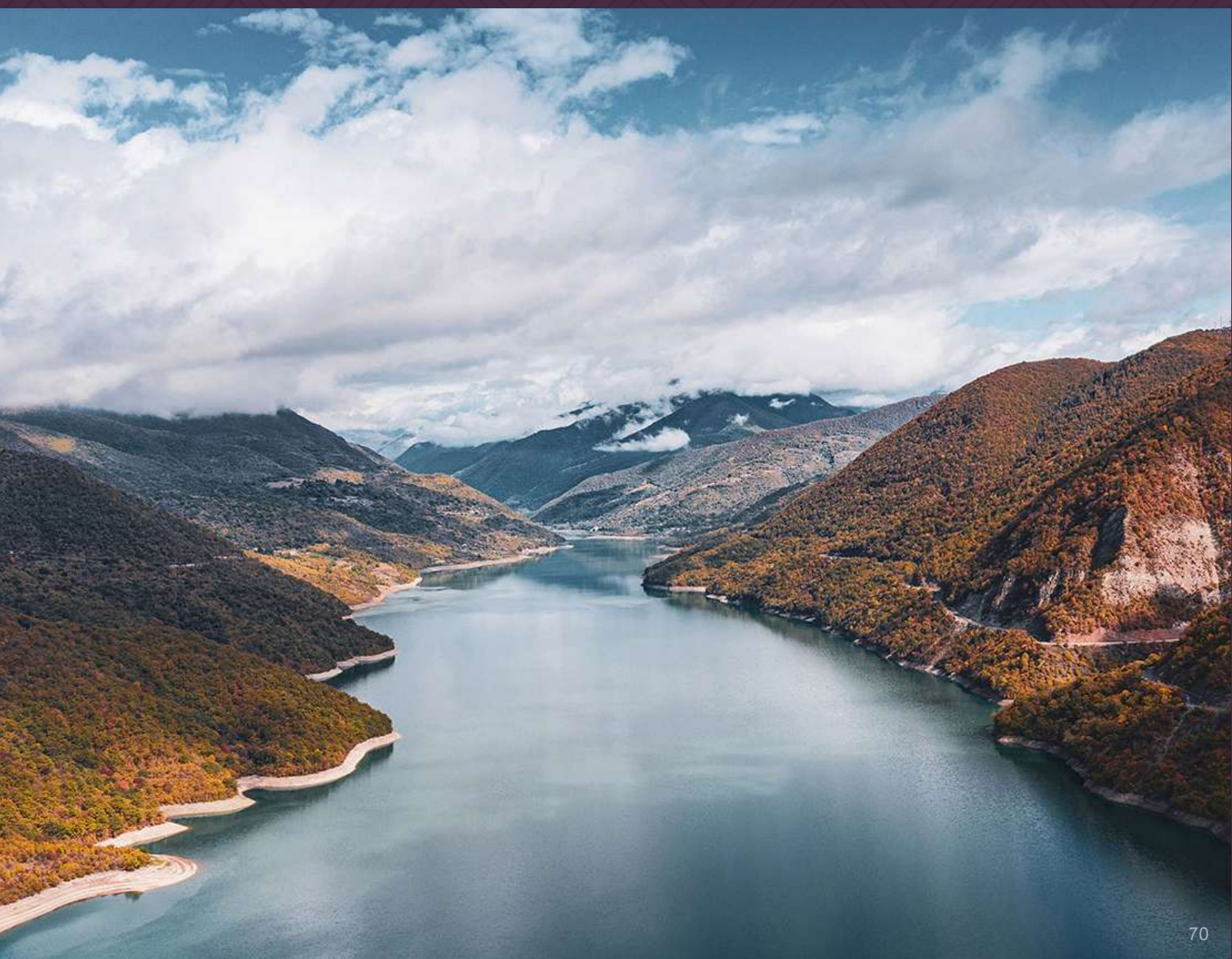
Afterward, the AC discussed privacy, confidentiality, and data sovereignty considerations and noted which landmarks would be shared externally and which would be for internal use only. For example, while the AC aimed to use “people with substance use disorders describing stronger connections to past and future generations” as a landmark measuring progress toward the program’s first vision, Elders requested that the details of any conversations with ancestors or descriptions of ceremonies used to converse with them be kept within the community. The team decided to include this in their contract with the funder, so that if materials are marked “Confidential” they are not required to provide them. They also included this provision in subcontracts with vendors to ensure that private cultural information was kept within the tribal community.

Finally, the AC mapped their plan to measure these landmarks in timeline form using **Worksheet 9: “Knowledge-Gathering Calendar.”** They also noted the specific methods they would use to gather information from community members, such as talking circles, and art-, music-, or dance-based activities.

With this final step of evaluation and program planning complete, the AC concluded Meeting 3 with a prayer and a blessing for the new program. The group then celebrated by taking the rest of the afternoon off to have lunch at a community member-owned restaurant.

After reading this section, consider these questions with your team:

- *Janelle's team presented their program plans in a Spring tribal council meeting in order to involve the community's voice and inform the program design and ways of measuring program success. What would be a good way to engage your community in designing your program and evaluation?*
- *Janelle's team used practices like explicitly mentioning data sharing policies in contracts to respect data sovereignty and confidentiality of ancestral wisdom. What would be a practical and respectful way for your team to ensure data ownership? How can you show respect for the norms the community you serve has with respect to knowledge sharing?*





Imagining Success: What Do You Hope to See if Your Journey is Successful

Purpose: To evoke personal, emotional, or spiritual associations and descriptions about what success will look like as you progress.

Instructions: Look downstream toward your visions. Describe what you hope to experience. What will you see, feel, smell or taste? Recognize that the path may not be linear and embrace opportunities to change direction.

VISION 1	VISION 2	VISION 3	OTHER VISIONS
<i>Vision 1 from worksheet #4</i> <i>Reduce opioid-related deaths and loss of community members</i>	<i>Vision 2 from worksheet #4</i> <i>Increase education about ways to reduce harm related to opioid use</i>	<i>Vision 3 from worksheet #4</i> <i>Reduce stigma related to seeking substance use and mental health services</i>	What will it look, feel, smell or taste like if you are successful downstream?
VISION 1 What will it look, feel, smell or taste like if you are successful downstream? <i>Ability to access information related to reduction in opioid related deaths</i> <i>Feelings of relief, increased safety, and connection to family and community</i> <i>More opportunity to follow original instructions surrounding community wellness</i> <i>Intergenerational connections between family members are long-lasting and healthy</i>	VISION 2 What will it look, feel, smell or taste like if you are successful downstream? <i>Excitement about receiving knowledge from different sources</i> <i>The community shifting perspectives to view harm reduction as a positive (from a strengths-based perspective)</i>	VISION 3 What will it look, feel, smell or taste like if you are successful downstream? <i>Reduced community judgment</i> <i>Increased understanding of the difficult journeys of community members</i> <i>Community members who use or have used substances are increasingly invited to cultural events</i> <i>Combating/dismissing problem-focused assessment from external evaluators</i>	What will it look, feel, smell or taste like if you are successful downstream?

These are examples of how a fictional team might use these worksheets. See Appendix A for blank version.



Landmarks: How Will You Know Where You're at?

Purpose: To outline Indigenous indicators that you will use to measure progress toward your vision.

Instructions: As you make your way downriver, how will you know where you're at? Look out for information, knowledge, wisdom, conversations, stories, or data that will help you know if you are making progress. Be as specific as possible: Who or what will help you understand where you are at on your journey toward each vision?

VISION 1

Vision 1 from worksheet #6

Reduce opioid-related deaths and loss of community members

LANDMARKS

How will you know where you're at?

People who use or have used substances describing stronger connections to family as well as past and future generations in conversations or interviews

Trainings on properly identifying opioid overdose admissions and correct racial/tribal identification are well attended

Data collection/sharing agreements are approved

Reduction in opioid related hospital admissions/deaths

VISION 2

Vision 2 from worksheet #6

Increase education about ways to reduce harm related to opioid use

LANDMARKS

How will you know where you're at?

Feedback from community members after harm reduction presentations shows growth in knowledge

Engagement metrics from various resource platforms (e.g. in person, pamphlet, internet, video) show wide use

Conversations with community members about shifting perspectives related to harm reduction are increasingly positive

People who use or have used substances involved more in community conversations and expressing better access to harm reduction information

VISION 3

Vision 3 from worksheet #6

Reduce stigma related to seeking substance use and mental health services

LANDMARKS

How will you know where you're at?

Conversations with community members reveal increased understanding of substance use

Conversations with people who use or have used substances reveal reduced judgment by others

Community members who use or have used substances are increasingly invited to cultural events

Combating/dismissing problem-focused assessment from external evaluators in favor of strengths-based evaluation

OTHER LANDMARKS

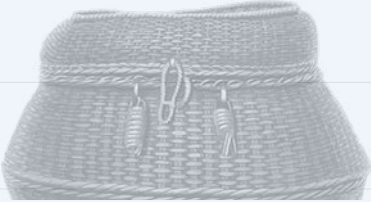
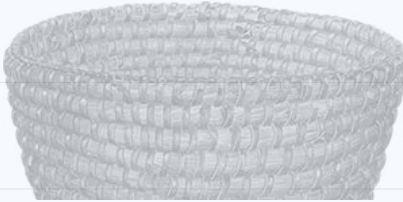
How will you know where you're at?



Your Indigenous Success Measures (Optional)

Purpose: To take time to be intentional about accessing all forms of knowledge as you’re measuring success.

Instructions: Indigenous knowledge has always contained observation of the world around us. In Worksheet #7, you’ve set out landmarks. These are like guide posts to help you understand where you are. Take this opportunity to list those landmarks, and explicitly link how those landmarks connect to Indigenous knowledge in your community. Have you included all three forms of knowledge? Are there more landmarks that you should list?

Empirical Knowledge	Revealed Knowledge	Traditional Knowledge
Observations and experiments in natural settings	Dreams, vision, ceremony, feelings	Handed down through generations (creation stories, oral histories)
Increased connections with hospitals statewide Trainings on properly identifying opioid overdose admissions and correct racial/tribal identification are well attended Data collection/sharing agreements are approved Feedback from community members after harm reduction presentations shows growth in knowledge Engagement metrics from various resource platforms (e.g. in person, pamphlet, internet, video) show wide use	Conversations with community members about shifting perspectives related to harm reduction show more positive feelings Conversations with people who use or have used substances reveal reduced judgment by others Conversations with community members reveal increased understanding of substance use People who use or have used substances describing stronger connections to family as well as past and future generations in conversations or interviews	Community members who use or have used substances are increasingly invited to cultural events Combating/dismissing problem-focused assessment from external evaluators in favor of strengths-based evaluation People who use or have used substances involved more in community conversations and expressing better access to harm reduction information
		



Knowledge-Gathering Calendar

When or how often will you look for each of these landmarks?

Purpose: Use the worksheet on the next page to outline how and when you will gather data on your progress.

Instructions: For each of your landmarks on worksheet #7, make a plan for when you will gather data, stories, and wisdom to see if you have reached that landmark. This can include a specific point in time or a general sense of frequency. Feel free to add additional details about how you will gather this knowledge or who will gather it, prioritizing capacity building in your community.



Worksheet 9: Knowledge Gathering Calendar (Completed Worksheet)



VISION 1

Vision 1 from worksheet #6

Reduce opioid-related deaths and loss of community members



Landmarks (see Worksheet #7):

Users describing stronger connections to family as well as past and future generations in conversations or interviews

Increased connections with hospitals statewide

Trainings on properly identifying opioid overdose admissions and correct racial/tribal identification are well attended

Data collection/sharing agreements are approved

Reduction in opioid related hospital admissions/deaths

When will you look for each of these markers? (e.g., 6 mos. post-launch, every two weeks)

Bi-monthly, start late summer

Monthly, start in first winter

Start in first summer

Complete in first summer

Start in first summer

VISION 2

Vision 2 from worksheet #6

Increase education about ways to reduce harm related to opioid use



Landmarks (see Worksheet #7):

Feedback from community members after harm reduction presentations shows growth in knowledge

Engagement metrics from various resource platforms (e.g., in person, pamphlet, internet, video) show wide use

Conversations with community members about shifting perspectives related to harm reduction are increasingly positive

Substance users involved more in community conversations and expressing better access to harm reduction information

When will you look for each of these markers? (e.g., 6 mos. post-launch, every two weeks)

Bi-monthly, start late summer

After each session, starting in the summer

Whenever possible, starting in the summer

Bi-monthly, start late summer

Worksheet 9: Knowledge Gathering Calendar (Completed Worksheet)



VISION 3

Vision 3 from worksheet #6

Reduce stigma related to seeking substance use and mental health services

Landmarks (see Worksheet #7):

Conversations with community members reveal increased understanding of substance use

Conversations with users reveal perceived reduced judgment

Increased invitations to community members who are users

Combatting/dismissing problem-focused assessment from outside evaluators in favor of strengths-based evaluation



When will you look for each of these markers? (e.g., 6 mos. post-launch, every two weeks)

Whenever possible, start late summer

Whenever possible and during bi-monthly sessions, start late summer

Whenever possible and during bi-monthly sessions, start late summer

As necessary throughout the project

VISION 4

Vision 4 from worksheet #6

Landmarks (see Worksheet #7):



When will you look for each of these markers? (e.g., 6 mos. post-launch, every two weeks)

Step 5. Adjust Your Path as You Go

As you set out on your journey with your community, how can you adjust your path to honor local and current circumstances?



STEP 5 OVERVIEW:

This portion of the Toolkit focuses on continually improving and adjusting your project and your evaluation to better meet the needs of your community as you make progress. Continuous reflection on the state of your community by meeting with your team and asking the community how your services or messages are landing with them are helpful practices to employ. In addition, personalizing your approach to better fit your community and location are helpful to ensure you are getting the input you need to make necessary adjustments. Finally, this step guides you through an activity to track any changes made to your original plans for future documentation on your journey.

- **Adjust your path to reflect community realities as needed.**
 - Unique circumstances and contexts may require tailoring your approach to better meet community needs.
 - As your team begins implementing or delivering the program activities/resources you outlined in Step 2, feel free to continually adapt the model based on current, emerging needs.
 - Ask yourselves: Are these services landing well with our community?
 - Team decisions can and should evolve. Teams should reflect regularly to adjust for necessary changes as knowledge informs previous work and best practices begin to be identified.
- **Fidelity to other Western evidence-based models may need to be compromised, which is okay.**
 - In Indigenous evaluation approaches, the emphasis of the evaluation should not focus on “testing the generalizability of a program to other communities, but rather on seeking to understand how each program fits its particular situation and contributes to local understandings of what works” (LaFrance & Nichols, 2010, pg. 27).
 - However, your team may find it helpful to keep track of key changes you make to your program services over time and your justification for doing so during its implementation. This may enable you to describe the program components more clearly later at the reflection steps, or if you create a written product summarizing the evaluation findings or knowledge gained.
 - **Use Worksheet 10: “Checking Our Supplies”** with your advisory committee to update the key activities, resources, and messages that your program is delivering to your community.
 - Update your **Worksheet 4: “Planning Our Journey,” Worksheet 6: “Imagining Success,” and Worksheet 7: “Landmarks”** if your core activities change in such a way that it alters the overall visions and success measures for your program.

Activities for Step 5

Janelle's Story, Step 5

Program Launch (Year 1: July)

After months of planning the program and evaluation design, the BH center officially launched its new opioid overdose prevention programs in July. To celebrate and get the word out, the BH team set up a table at the large regional powwow to share information about the mobile wellness checks and peer support program. In addition to sharing information, the team distributed various giveaway items such as tote bags, toothbrushes, and pens printed with the “Stay Safe, Stay in Community: Don’t Use Alone” campaign language plus a BH center phone number for community members to learn more about getting help with substance misuse.

After operating the wellness checks and peer support group for a few months as planned, the team felt ready to reflect on how the programs were landing with the community and make adjustments using **Step 5**. Staff who conducted the wellness checks in a mobile van marked with the program’s logo shared with the AC that many community members they visited did not receive their visits in a positive, welcoming manner, with some asking the staff to leave and not come back. The group discussed the extent to which the van’s markings might be contributing to a sense of intrusion of privacy and confidentiality, or if the wellness check model was a good fit for their community after all. In thinking through modifications, they thought they could change the transportation method, introduce conversational messaging at the door, or scrap the program altogether to respect the wishes of the people visited thus far.

Ultimately the group decided to remove the wellness check programming from their opioid overdose prevention programming to respect the privacy of people who have an OUD and avoid further stigma through unwanted home visits.

After making this and other, minor adaptations to the list of programming, the AC used **Worksheet 10: “Checking Our Supplies”** to chronicle these changes relative to what they’d originally “packed” on their journey (see **Worksheet 5: “Packing for Our Journey”**) in order to relay an accurate description of their programming at a later reflection point.

After reading this section, consider these questions with your team:

- Janelle’s team utilized the regional powwow as an opportunity to share their program information. Can you think of any appropriate community gatherings where you can reach as many community members as possible without the need of separate convenings?
- Janelle and team used tote bags, toothbrushes, and pens to disseminate their information. What are creative or especially effective ways to disseminate information in the community you serve?
- Are there protocols around practices like gift giving in the community that you serve? How might you ensure that you are honoring important practices like these in your programming?
- Janelle’s team removed some programs as they practiced continual reflection and adapted to the community’s needs and acceptance. How can you make sure you are adjusting your program with respect to the needs and context of the community you are serving?



Checking Our Supplies

Purpose: To revisit your original plans for your program or project and document changes.

Instructions: At this point in your journey, you may have noticed that what you're carrying has begun to change. How have they changed? Why have they changed? What are you learning from these changes?



What did you originally pack? (See worksheet #5)	How have the contents of your pack (i.e. your original plans) changed?
<i>Program Services:</i> <i>Peer support program training & curriculum</i> <i>Mobile Wellness Checks</i> <i>"Stay Safe, Stay in Community" campaign – marketing materials and giveaways</i> <i>Intergenerational cultural trainings to promote healing</i> <i>Community Resources:</i> <i>Tribal Council</i> <i>Outside evaluator & funding body</i> <i>Access to a program-operated van</i> <i>Key Phrases, Slogans & Messages:</i> <i>"Stay Safe, Stay in Community"</i> <i>Stigma Reduction</i> <i>Information access</i> <i>Original Instructions as resiliency</i> <i>Metaphors:</i> <i>A story about the blending of a protective herbal balm the community can apply to woven goods to ward off pests and harsh rains that unravel the threads</i>	<i>Program Services:</i> <i>Added "Train-the-trainer" workshops to increase relatability of the programs</i> <i>Scrapped the mobile-wellness checks</i> <i>Community Resources:</i> <i>No change</i> <i>Key Phrases, Slogans & Messages:</i> <i>No change</i> <i>Metaphors:</i> <i>No change</i>

Step 6. Gather Indigenous Knowledge as Data (as permitted)

How can the stories, data, or wisdom you planned to use as your landmarks be collected using Indigenous methodologies?



You are here →

STEP 6 OVERVIEW:

This portion of the Toolkit provides guidance on how to identify the unique methods and protocols needed for data collection. This step recommends prioritizing the community for input and, if appropriate and with compensation, for data collection to build local capacity and support community connectedness. Next, the Toolkit offers ways that the data collection process itself can be decolonized. Using methods that move away from Western practices can help communities to better shape the knowledge or data collected to suit their needs, rather than extracting it from them. This section invites teams to use multiple forms of knowledge in their knowledge gathering. This step is an opportunity to ensure that culturally relevant empirical, traditional, and revealed knowledge informs your success measures and guides your evaluation process. Finally, this section details how you can make information collected transparent to community members, which is key to ensuring community support for your journey.

- **Prioritize building evaluation capacity in the community during knowledge gathering (i.e., data collection)**
 - If the tribe is interested and funds allow, train and hire local community members to collect and manage data for their own communities. See the **“What are ways to involve the community in knowledge gathering?”** box for examples. This ensures community ownership of the evaluation while centering sovereignty in the process.
- **When gathering knowledge, focus on ways your team can decolonize the “data-collection” process**
 - For examples, see the **“How Can We Decolonize Data Collection and Promote Knowledge Collection?”** box below for ways to decolonize the data collection process.

What are ways to involve the community in knowledge gathering?

- Designing data collection instruments (e.g., surveys, focus groups guides);
- Facilitating talking circles or other storytelling platforms;
- Facilitating community mapping exercises or arts & craft activities to elicit community feedback and feelings;
- Conducting interviews/focus groups with community members; and/or
- Administering surveys with community members;
- Taking photos or videos of program activities, or community members’ interviews (if permitted); or
- Taking and synthesizing notes during data collection activities.

- **Honor and record multiple forms of knowledge as revealed during knowledge-gathering**
 - In addition to any formal knowledge gathering activities your team has planned (e.g., surveys, focus groups), be sure to collect and record other knowledge shared in relation to your program's community impact. For example, if a community member shares a story about ways your prevention programming has affected them at a tribal council meeting outside of pre-arranged knowledge-gathering plans, ask if it is permissible to include their story or quote in any evaluation products or stories you may tell in the future.
 - Reflect back on [Worksheet 8: "Your Indigenous Success Measures"](#) to note if any new forms of empirical, traditional, or revealed knowledge sources emerge throughout the course of your evaluation and can be used as assets to help you understand your [Worksheet 7: "Landmarks."](#)

How Can We Decolonize Data Collection and Promote Knowledge Gathering?

A decolonizing approach to data collection honors the scientific value of traditional Indigenous ways of knowing and reinforces, rather than challenges, Indigenous cultural values.⁷ In this Toolkit, we refer to this process as "knowledge gathering," which is done to benefit the community and focuses on mindfully gathering only the information that is essential to the project, as opposed to simply compiling all accessible data.

Practices that decolonize data collection include:

- Collaborating with communities to ensure projects involving knowledge gathering are truly beneficial and that data collection is necessary to achieve the project's goals
- Integrating tribal language(s) throughout materials
- Considering adjustments to questions or knowledge-gathering instruments for different populations. For example, are there some questions that are inappropriate to ask Elders?
- Considering whether there are conflicts of interest with known relationships between program staff and community, and planning accordingly
- Asking what the meaning of gift giving is in a given community before developing incentives for community members who participate in evaluation activities. If you are offering incentives, adjust these to make them non-coercive and freely offered without expectation of return.
- Also, ensure the incentives are usable for community members based on local context. For example, if there is no large chain store within 50 miles, a gift card may not be helpful.
- Involving culturally informed tribal members at all stages of a project's development who can ensure that sensitive knowledge is handled well, or if it should be collected at all.

- **Make data collection activities transparent to community**
 - Publicize upcoming data collection activities (e.g., talking circles, household interviews/ conversations) on all relevant media and social media platforms well before their occurrence.
 - If possible, seek input on the data collection instruments themselves.
 - Revisit [Worksheet 2: “Community Engagement Table”](#) to confirm that all relevant community members are kept abreast of your data collection activities or invited to participate in them. Moreover, you may find it useful to engage some of these community members in the work of publicizing these activities.



Activities for Step 6

Janelle's Story, Step 6

Ongoing Knowledge Collection (Year 1 August – Year 2 November)

As the group continued to implement programming, they began **Step 6**, the knowledge-gathering phase of their evaluation process to assess their progress and make any necessary course corrections. In August of 2022, they reached out to community members who were comfortable facilitating talking circles in the tribal language and English about leading bi-monthly circles with community members who formerly or currently use substances. They advertised these talking circle opportunities at their IHS clinic, the local grocery store, and on their social media. These circles offered valuable insight into their progress towards their *revealed* and *traditional* knowledge-based goals, such as feelings of community connectedness.

BH staff recognized that some of their empirically based landmarks (i.e., training meeting attendance, mortality data) would require hiring someone with experience analyzing quantitative data. By September, they secured funding for hiring a student statistician from the local tribal college to build relationships with hospitals in the state and analyze data to determine if hospital admissions and deaths were decreasing for their community members.

After delivering her monthly update at the November tribal council meeting, Janelle stayed late for a conversation with a tribal social worker to discuss the new opioid overdose prevention programming. The social worker described a situation where one of her clients was excited after hearing about the peer-support and culturally based healing programs. With the social worker's consent, Janelle added this information to the knowledge that her BH team had gathered about the program's impact.

After reading this section, consider these questions with your team:

- Janelle and team facilitate bi-monthly talking circles to promote continued feedback from the community and adjust the program. What are some culturally respectful and familiar ways of engaging community members in conversation about the programming?
- Sometimes the capacities and resources you need might not be available in the team. In this example, Janelle needed to hire an external data analyst. However, it is important to explore these resources within the community as Janelle did with the local tribal college. What resources are available in your community?
- How can you learn about the community's perspective, needs, and hopes for the program without creating a burden on the community?
 - Are there sources of funding to compensate community members for their time? Are there ways for you to reciprocate their effort?
 - Are there circumstances where the community might prefer you to hire externally?

Step 7. Reflect to Assess Progress

What does your view look like now?



You are here →

STEP 7 OVERVIEW:

This portion of the Toolkit honors reflection and assessment as crucial components throughout your Indigenous evaluation journey. It reminds groups to create space to reflect on the progress you've made and ensure that it aligns with the original vision you set out to accomplish. Given that your community is at the center of the journey, the next step recommends checking to make sure that your work is still relevant to your community and context.

- **Engage community members to reflect on data/knowledge collected and assess program success relative to visions**
 - Revisit [Worksheet 8: “Your Indigenous Success Measures”](#) and [Worksheet 7: “Landmarks.”](#)
Discuss the ways in which the team feels they have reached or are on their way to reaching their destination:
 - Which of the Landmarks have been revealed so far on your journey?
 - In what ways does the current state of your community look or feel similar to the vision your team described at the beginning of this process?
 - What looks or feels different?
 - Do observed patterns in the measures you have developed align with your perceived reality (i.e., do the data make sense)?
 - Alternatively, your team may find it helpful to work through [Worksheet 11: “Where are we on our path?”](#) to assess whether you are still making progress toward your vision and how you might adjust.
 - Remember that there are multiple ways to measure progress; personal stories can and should be prioritized.
 - Revisit the [Worksheet 2: “Community Engagement Planning Table.”](#) Who or who else should be involved in discussing the extent to which the team feels the program has reached its intended destination? How else can you give power over the data analysis process to your community, broadly?
- **When assessing success relative to your visions, focus on community relevance (What works in this place with this community?)**
 - Indigenous evaluation approaches honor the “place-based” nature of tribal programs by capturing the contextual situations and connections to the place in which programs operate.³

Activities for Step 7

Janelle's Story, Step 7

Making Progress (Year 1 December – Year 2 February)

By December of 2022, the BH team was excited to see progress in some of their landmarks coming into view along their journey. The new programming was received by the community as a substantial improvement on prior substance use prevention programming. However, they were not making as much progress as they had hoped toward other landmarks. Recognizing the opportunity in **Step 7**, they scheduled an internal meeting to pause and reflect on their “**Imagining Success**” and “**Landmarks**” worksheets. As the team members shared their perspectives, they documented their progress in “**Worksheet 11: Where are we on our path?**” by adding two new landmarks: counting the number of trainings delivered by local peer trainers and determining whether youth were more comfortable working with peer trainers.

After reviewing these data and analyzing responses to an anonymous survey sent to the regular attendees of their circles, the BH team realized that they needed landmarks for their vision of “*Increasing education about ways to reduce harm related to opioid abuse.*” After consulting with the AC and reviewing data from evaluations for each training session, they noticed that high school-aged youth were not gaining as much knowledge from the workshops than other community members. One team member suggested that high schoolers might not relate to the BH team members, so it could help to have workshops offered by people already embedded in those spaces. They returned to their “**Worksheet 10: Checking Our Supplies**” to note introducing these “train-the-trainer” style workshops.

After sending flyers to the IHS center, tribal high school, and college campuses, and organizing an informational campaign on social media to raise interest, they debuted a series in February of 2023 where community members could learn to host their own educational workshops. Those who began or completed the training were honored with a traditional foods cookout at the close of the series.

After reading this section, consider the following questions with your team:

- *Janelle's team learns that a portion of the community that they serve needs them to adjust how they deliver their programming. How might you ensure that as many members of the community as possible are benefiting from your programming?*
- *Janelle's community celebrates those who began or completed their training program with a traditional foods cookout. What are ways that you can include celebration throughout your programming and evaluation?*





Optional: Where Are We On Our Path?

Purpose: To stop and reflect on whether your approach and supplies are leading you toward your vision.

Instructions: In order to do so, imagine you are climbing to the top of a tree to get a clearer view down river. Are there any adjustments you should make to your journey? Look toward the next vision and spot your landmarks. Have you arrived at any of your landmarks yet?

VISION 1	VISION 2	VISION 3	OTHER LANDMARKS
<i>Vision 1 from worksheet #6</i> <i>Reduce opioid-related deaths and loss of community members</i>	<i>Vision 2 from worksheet #6</i> <i>Increase education about ways to reduce harm related to opioid use</i>	<i>Vision 3 from worksheet #6</i>	What adjustments do you need to make to your supplies or approach
LANDMARKS	LANDMARKS	LANDMARKS	
What adjustments do you need to make to your supplies or approach <i>No change</i>	What adjustments do you need to make to your supplies or approach <i>New landmark: Number of trainings delivered by local peer trainers</i> <i>New landmark: Youth participants express more comfort working with peer trainers</i>	What adjustments do you need to make to your supplies or approach <i>No change</i>	

Step 8. Tell Your Story with Your Findings

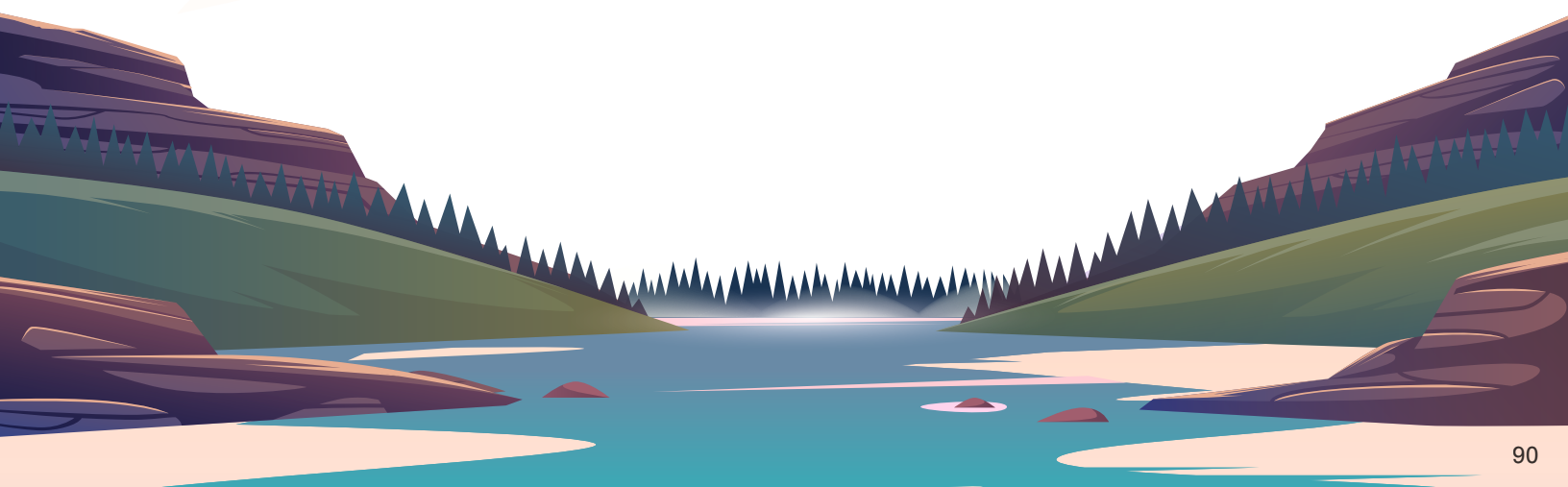
How can you tell the story of your people in your place?



STEP 8 OVERVIEW:

As you reflect on your journey, it would help to start thinking about how you will tell the stories of your team's progress. This portion of the Toolkit focuses on planning ways to tell your team's story in ways that are respectful and meaningful. The first section includes ensuring proper permission and community review of the content before dissemination. Once you have permission, the next section includes exploring dissemination formats that work best for your community. Indigenous evaluation embraces the context of the program, and the next section emphasizes ways to include context, environment, history, and contemporary circumstance of the place in your evaluation story. The final step helps identify findings relevant to the community and ways to make evaluation reporting transparent and accessible to the community and other project partners.

- **Ensure proper permission and community review prior to dissemination or publication**
 - If applicable, follow all relevant tribal approval or IRB processes to report findings when working with tribal communities. Consult with the community advisory committee and tribal historic preservation office or officer when appropriate.
 - In the absence a formal IRB, make sure you have tribal leadership's permission to publish any results or insights learned through your evaluation.
 - Consult with Elders and community leaders about whether your team has permission to disseminate any traditional or revealed knowledge gathered over the evaluation that the community may value as sacred or private.
- **Determine what dissemination format will work best for your community**
 - There are a range of dissemination approaches to ensure the knowledge you have gained through this evaluation process reaches the people who helped make it. See the box on the next page for additional suggestions.



Which dissemination approaches are best for your community?

As you prepare to share your findings, you might find that your community has unique strengths or needs when it comes to conveying information. For instance, your community might have thriving community spaces, but limited internet access in some regions. Other communities might require tailoring information in multiple tribal language dialects. There are many ways to meet these unique strengths or needs. Some examples of dissemination approaches that might work for your community include:

- Report back periodically to groups involved in the evaluation process at formal ceremonies, family or tribal councils, feasts, or other events
- Distribute pamphlets summarizing your key findings, distribute locally
- Hold talking circle discussions to share and obtain feedback on key findings
- Provide an information booth at a powwow or other cultural event
- Host a community open house for your program
- Develop videos or other media
- Implement a social media campaign
- Integrate technology as available and appropriate
- Consider using Seven Directions' Gathering Grounds platform to disseminate your story to a wide tribal network (<https://www.indigenousphi.org/gathering-grounds/about>).

- **In telling the evaluation story, include the context, environment, history, community, and contemporary circumstances of the place**

- After discussing lessons with as many community members and project colleagues as possible, your team's job may be to distill those lessons into a set of core findings. In doing so, and especially when putting findings into written form, be sure to situate the program/project by "describing its relationship to the community, including its history, current situation, and the individuals affected" (LaFrance & Nichols 2009). This helps honor the place-based nature of many tribal programs.

- **Focus findings on community relevance—what works in this place with these people**

- In addition to or instead of describing the program's quantitative impacts, report on the lessons your community learned. These lessons could be valuable knowledge for other tribal or urban Indian programs implementing an SUD/ODU prevention program.
- Focus less on external validity – the idea that you could generalize your evaluation findings to suggest your program model could work well in another setting too. These types of findings require large sample sizes and are less important than focusing on what works well *here*.

- **Make evaluation reporting transparent to community**

- Publicize any relevant insights or findings on all relevant media and social media platforms. Consider the team's findings a living document, open to community input once publicized.

Activities for Step 8

Janelle's Story, Step 8

Sharing The Findings (Year 2: March – May)

When Janelle and the BH team felt they made significant progress in their journey and began to see success towards most of their landmarks, they were excited to implement **Step 8** and share their findings with the community. In March, the AC advised the BH team to schedule meetings with Elders, youth, and families to determine which formats would best reach each group. The team learned from the meeting that youth and families felt social media and billboard advertising would be effective, while Elders recognized the limited internet accessibility on the reservation and that they enjoyed the conversational updates at the tribal council meetings. They further recommended continuing the tribal council updates and producing pamphlets that would tell the project's story and people, detail findings and share resources.

Having settled on their formats, they set out to determine which information from the project would be most useful for the community. Although the data analysts could calculate several metrics regarding program attendance or high local morbidity/mortality rates using their empirical data, they found that community members were especially interested in learning:

- 1) Details of how the new support services compare to more mainstream substance use prevention programming, and how to connect their loved ones to these new services.
- 2) How cultural components were contributing to the program's success, according to participants.

The AC engaged tribal college students studying marketing to develop catchy slogans about the ways their program differed from traditional abstinence-only programming for billboards or pamphlets. The students also recorded some video testimonials from program participants to share on social media.

Because the tribe lacked a formal institutional review board (IRB) process, the team reviewed their plans for the social media campaign, billboards, and pamphlets at the April tribal council meeting. They also met with the AC, Elders, and two knowledge keepers who reviewed the information for cultural appropriateness. They were advised to produce two versions of each type of media, one in English and one in the tribal language, to make them accessible.

Once the information was approved by community members, they began to disseminate the information in May of 2023. They launched a social media campaign, posted billboards along the reservation's major highway, and passed out pamphlets after the tribal council meetings, at the tribal schools, the grocery store, and through a mailing.



After reading this section, consider these questions with your team:

- *Throughout this section, Janelle's team convenes meetings with many different groups within the community, including Elders, youth and families, knowledge keepers, the tribal council, and students from the local tribal college. Are there components of your team's evaluation that might benefit from engaging different groups within the community?*
- *The community that Janelle's team serves does not have a formal institutional review board (IRB). Does the community that you serve have one? What are appropriate ways to make sure that the community you serve consents to the work you are doing? Is there any regulatory body for research and research-like activities in your community?*
- *The dissemination efforts that result from consulting with the community Janelle's team serves are diverse and cater to different needs in the community. How can you ensure that you are reaching as much of the community you serve as possible when you disseminate information?*



Step 9. Regularly Reflect on Learnings Throughout Your Journey

How can you interpret the knowledge or data gained through ongoing reflection?



STEP 9 OVERVIEW:

This portion of the Toolkit focuses on creating conditions for continuous reflection and interpretation of the data. It is important to recognize that gaining new knowledge from continuous reflection will be essential throughout your journey. The first step in this section encourages your team to recognize that Indigenous evaluation is a cyclical process of reflection, learning, interpretation, implementation, and improvement. This requires the evaluator or team to plan and implement regular opportunities to discuss knowledge gathered and analyzed throughout the program/evaluation implementation. The last section highlights the need to reflect on the process, as well as the outcome.

- **Implement regular opportunities to discuss knowledge gathered and analyzed throughout the course of program/evaluation implementation**
 - In Indigenous evaluation, ongoing reflection is valued to understand data's implications deeply, rather than simply analyzing data for a report or generating a one-time conclusion.
 - Consider adding a standing agenda item to each of your advisory committee meetings focused on discussing "what we are learning," with respect to each of your landmarks (i.e., data sources).
- **Reflect on the process, as well as the outcomes**
 - As Dr. LaFrance (2009) reminds us, teams learn from doing – not just meeting or failing to meet their objectives or goals.



Step 10. Plan and Implement Improvements

How can you use the knowledge you have gained in the next phase of your journey?



STEP 10 OVERVIEW:

This portion of the Toolkit focuses on the importance of the responsibility to reflect on and use knowledge gained through the evaluation. The insights and learnings from this process should not end with one evaluation cycle; rather, groups should incorporate these insights into future programming as the journey continues.

- **Recognize the responsibility to use knowledge gained through evaluation**
 - Indigenous evaluation approaches recognize that “knowledge itself has life and moral purpose” (LaFrance & Nichols, 2009, pg. 22). Rather than concluding or publishing findings for the purpose of building knowledge for knowledge’s sake, Indigenous evaluation approaches prioritize using the knowledge gained through evaluation efforts to actively improve communities.
 - Indigenous evaluation approaches view knowledge as active and learned by doing: “Our challenge is to learn and improve, not to render judgement” (LaFrance & Nichols 2010, pg. 18).
- **Incorporate insights into evolving and future program design**
 - As you round the curve on the fourth phase in this Indigenous Evaluation Toolkit, remember that evaluation and learning-through-doing are cyclical and continuous: Your journey does not end here!
 - As you *re-enter* the planning/design phase of your journey, pause to reflect on the knowledge you’ve collected by implementing this project and process and, importantly, what you plan to do with that knowledge.
 - Use **Worksheet 12: “Making Camp”** to help orient yourself toward the future of your program and how you might implement the lessons you’ve learned.

Congratulations! You’ve worked hard to prioritize community engagement and Indigenous knowledge in your programming and evaluation activities so far. We encourage you to continue using these approaches as you continue to refine and learn from your programming efforts!



Activities for Steps 9 & 10

Janelle's Story, Step 9

Reflecting and Celebrating Progress (Year 2: June)

Throughout the project, the AC chose to incorporate **Step 9** by meeting regularly with BH team staff members and attending the community member talking circles to ensure that the program was continually improving to meet community needs. By fall, they developed a routine of opening the floor during the AC meetings for any interesting information that team members learned since they last spoke, then using the last twenty minutes of their AC meeting to revisit their “**Imagining Success**” and “**Landmarks**” worksheets.

In June, the BH team returned to the powwow where they first launched programming. There they were able to celebrate the progress of program participants and family members who were comfortable participating in a special honoring ceremony. At their booth, they passed out pamphlets detailing their findings, T-shirts commemorating the one-year anniversary of the program's launch, and promotional materials for the coming year. They made special note of community members who mentioned the impact of the program on their lives or those of their loved ones.

When they returned to work the next week, Janelle reviewed **Step 10** and decided to lead the team through a guided talking circle based on “**Worksheet 12: “Making Camp.”**” In the first round, she asked community members to share components of the program that made them the proudest. In the second round, she encouraged them to share insights that they thought were important in the first year. The team reported that the program and various modifications they had made throughout the first year were serving the community well, but that they wanted to expand their reach.

In the third round, she asked the team how they could act on these insights. They decided to develop their grant-writing skills in the coming year to support expanding the number of participants. They also wanted to partner with nearby urban IHS centers to reach out to community members who were eligible for their programs, but outside the reach of their current promotional materials. Finally, they wanted to expand the program to include more regional dialects of their language so that more community members could easily understand materials and participate in the programs.

The team wrote down the conclusions that they wanted to act on and then modified their “**Imagining Success**,” “**Landmarks**,” and “**Checking Our Supplies**” worksheets to reflect the knowledge they had gained. The team felt refreshed and prepared to begin the second year of their journey.

After reading this section, consider these questions with your team:

- Janelle's team's first round of evaluation is implemented alongside their first year of programming, but they are mindful of planning for the future and flexible in their planning so that they can build connections and include community perspectives.
- Does your team have any timelines that might affect how you plan to evaluate your programming?
- How might you build in flexibility to ensure time and space to keep the community you serve meaningfully involved?
- How might your team plan to continue their process of evaluation into the future?
- Janelle's team takes time to celebrate their progress with their community at their annual powwow.
- Are there ways that the community your team serves usually celebrates progress? How can your team meaningfully celebrate and express gratitude with the community you serve?

Janelle's story Conclusion

Janelle's story and filled-in worksheets function only as an example of how a program might implement the steps and activities outlined in the Toolkit. We encourage teams to continually reflect on how the needs and cultural contexts of the community they serve, as well as the team's own resources and capacity, might differ and to adjust accordingly. In Appendix C, we provide references and resources that offer perspectives on how other communities have approached Indigenous evaluation across a broader array of contexts, which may offer additional perspective on how teams might approach their own evaluation efforts.





Making Camp: Celebrating and Preparing To Continue

Purpose: To orient yourself toward the next portion of your journey and honor the knowledge you’ve gained.

Instructions: As you celebrate your progress and begin to re-renter the planning phase, consider resting and making camp, so you can look back on how far you’ve come and reflect on the knowledge you’ve gained. What can you DO with this knowledge as you continue on your journey toward other visions?

What knowledge have you gained through this process?	How will you use this knowledge as you continue your journey
<i>Programs (with their modifications) are doing well!</i>	<i>Continue to develop team members’ grant writing skills</i>
<i>The reach of the programs could be larger and include more community members</i>	<i>Contact urban IHS centers to find off-reservation community members who are eligible</i>
	<i>Expand the number of tribal language dialects used in the programs</i>

References (Part 3)

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Part 4

Summary & Future Directions

Part 4. Summary & Future Directions

We offer this Indigenous Evaluation Toolkit as an actionable guide to support tribes and urban Indian organizations on their journey to incorporate Indigenous Evaluation approaches into their health promotion and injury prevention programming.

In utilizing this Toolkit, program staff, departmental leaders, tribal leaders, community members, internal or external evaluators, and funders can:

- Reflect on their role as individuals, community members and/or community allies, or parts of a team or organization to explore how they can effectively integrate Indigenous evaluation approaches into health promotion and prevention programming
- Access a series of worksheets, resource links, and information to consider as teams work through planning and implementing Indigenous evaluation approaches
- Center unique tribal cultures, Indigenous knowledge, and community-driven aims and aspirations when designing program and evaluation activities
- Understand how evaluation activities can be undertaken by individuals in varied settings and at all experience levels, and gain comfort doing so through hands-on activities
- Use the Toolkit as an adaptable framework to support programmatic change through a continuous learning process

In compiling this Toolkit, the following gaps and needs emerged:

- **Greater support for Indigenous evaluation approaches among funders.** Insufficient support or understanding from external evaluators and funding bodies for Indigenous evaluation approaches or culturally grounded interventions – especially those rooted in community-specific beliefs, traditions, and stories – may have led some tribal programs to deprioritize Indigenous ways of knowing relative to Western evaluation standards. There is a need for increased acceptance and insistence among funders that tribal programs utilize “practice-based evidence” when developing and evaluating prevention, harm reduction, or recovery activities in their communities.
- **Acceptance of Indigenous Evaluation measures as valid.** Indigenous evaluation approaches include valuing and using knowledge that goes beyond data and evidence that is measurable, such as traditional knowledge, revealed knowledge, or feelings about community wellbeing. There is a need for increased acceptance from funders and evaluators that these are valid evaluative measures. There is also a need for understanding and respecting the fact that some knowledge sources are not appropriate for Indigenous communities to disclose to outside persons, including funders.
- **Time and space to revitalize traditional ways of knowing.** Due to the forces of colonization, some tribally based approaches may require revitalization and translation to address contemporary health issues. Funders should provide time, space, and support for tribal organizations to revitalize traditional languages, practices, and knowledge.

- **Support the development of implementation research documenting Indigenous Evaluation activities in the health promotion and prevention space.** While the literature and this Toolkit provide examples of ways tribal organizations can decolonize their research methods during Indigenous evaluation activities, specific examples from the health prevention and recovery space are limited. Further implementation research or case studies are needed to document specific approaches tribal organizations take to gather and use a variety of Indigenous knowledge sources in support of their evaluation goals.

We recognize that this Toolkit is not an exhaustive capture of Indigenous knowledge and Indigenous evaluation approaches. Rather, this Toolkit offers a specific set of Indigenous evaluation methods derived from Indigenous approaches and Indigenous knowledge. In doing so, we offer a process that integrates the IEF's five core values into four phases and ten actionable steps. We are hopeful that the materials can provide a starting point for a wide audience to utilize and that they can serve as a translational bridge for external funders and organizations to better understand the critical need for Indigenous evaluation approaches. We are also hopeful that the Toolkit will encourage a community of practice that honors and supports Indigenous knowledge and Indigenous evaluation to positively impact prevention efforts and health promotion programming. Please visit our website, <https://www.indigenousphi.org/>, to find additional Indigenous evaluation participation opportunities led by Seven Directions.



SEVEN DIRECTIONS

A CENTER FOR INDIGENOUS PUBLIC HEALTH

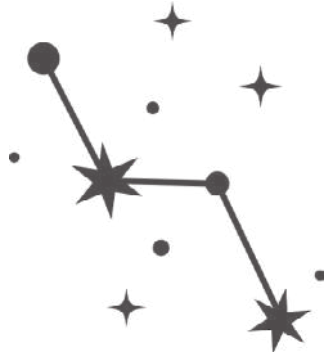
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Appendix

Phase 1 Worksheets

ENVISION AND DESIGN





Exploring Our Values

Purpose: To create a shared understanding of the values of your team, organization, or other community partners involved in planning and evaluating your project.

Instructions: Use this space to reflect on your personal, organizational and community values. As you list these values, ask yourselves: Do they align well across different groups or are there areas of conflict? How might these values impact the program/project you are working on together?

Part 1. Answer individually:

What motivates you to work on public health promotion in your community?

What values guide you as you do your work?

Pause and discuss your answers among the group.

Part 2. Discuss and draft together:

What are your team's/organization's values as you approach this work?

What are the values of the community/communities you serve?

What are your funders' values?

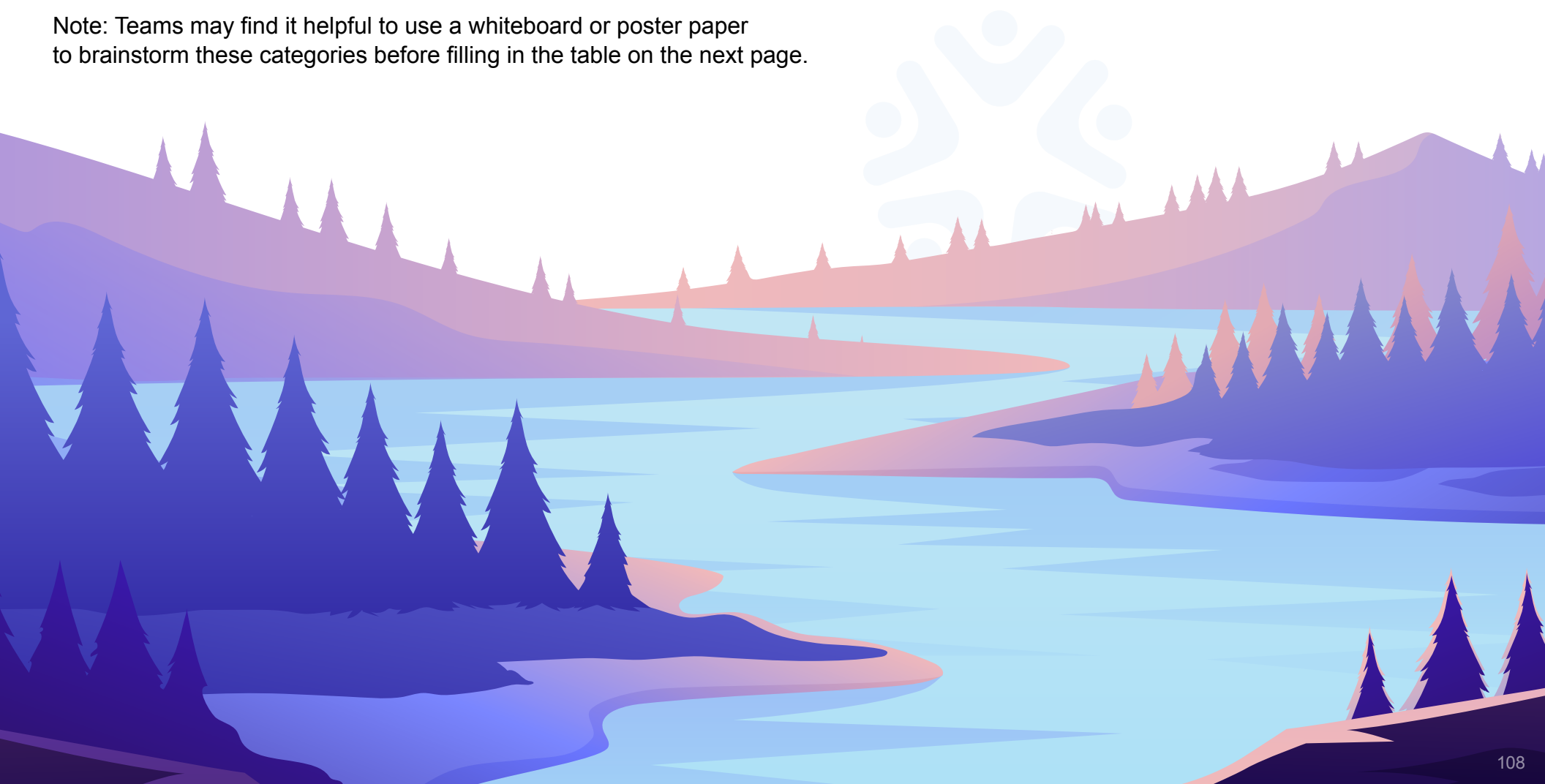


Community Engagement Planning Table

Purpose: To consider and intentionally plan to engage the full range of community members who should inform the development and evaluation of your program. Your plan should aim to increase deep community participation and community ownership over the evaluation as much as possible.

Instructions: On the next page, list community members' names, how they will be involved, in what ways they will have control, and how deep their participation will be. This table can be used as a blueprint for a dynamic plan, which will evolve over time as you think of other or deeper ways to engage your community members.

Note: Teams may find it helpful to use a whiteboard or poster paper to brainstorm these categories before filling in the table on the next page.



Worksheet 2: Community Engagement Planning Table (Blank)



Community Engagement Planning Table			
<i>Which voices should be engaged?</i>		<i>How do you plan to engage them?</i>	
Community members	What is/are their roles?	Control of the evaluation	Depth of participation (planning, designing, implementing, analyzing, reporting)

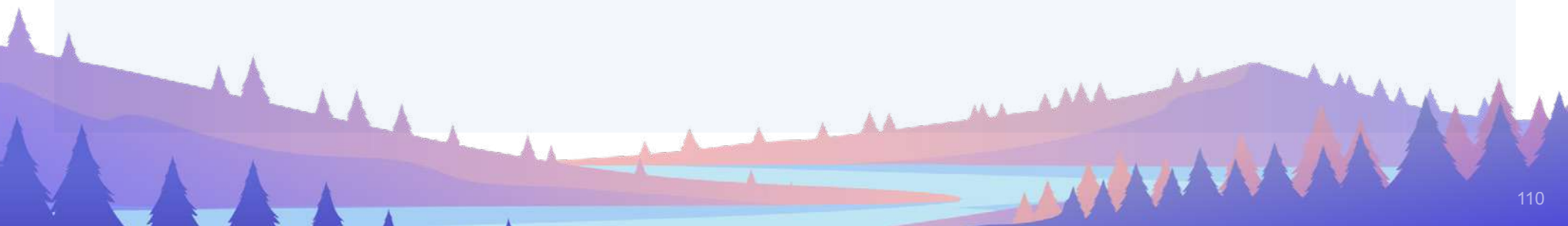


Looking Upstream: Observing our Starting Point

Purpose: To take stock of where you are beginning your journey so that you don't cover the same ground.

Instructions: Use this space to list any existing programs, publications, or conversations that have already been made or done in the service of your goals. For example, this could include an existing prevention program in a neighboring area, or a needs assessment conducted a few years back.

List all existing work that has been done on this issue here:





Planning Our Journey

Purpose: To outline your driving motivations or visions for doing this prevention work, now that you understand where you are starting and what your group's values are.

Instructions: List your program's three driving visions for doing this work. How do you envision the program or project you are planning improving lives in your community?

What are your three underlying visions for this project or program?

VISION 1

VISION 2

VISION 3

OTHER VISIONS



Packing For Our Journey

Purpose: To list the key activities, resources, or messages your program will deliver to help you progress on your journey.

Instructions: As you prepare for your journey, you might want to pack a parfleche, canoe or gourd. List your program's key services, community resources, phrases, slogans or messages. What meaningful metaphor could you use to explain your program to your community?

Program Services		
Community Resources		
Key Phrases, Slogans or Messages		
Metaphors		



Imagining Success: What do you hope to see if your journey is successful?

Purpose: To evoke personal, emotional, or spiritual associations and descriptions about what success will look like as you progress.

Instructions: Look downstream toward your visions. Describe what you hope to experience. What will you see, feel, smell or taste? Recognize that the path may not be linear and embrace opportunities to change direction.

VISION 1

Vision 1 from worksheet #4

VISION 1

What will it look, feel, smell, taste or sound like if you are successful downstream?

VISION 2

Vision 2 from worksheet #4

VISION 2

What will it look, feel, smell, taste or sound like if you are successful downstream?

VISION 3

Vision 3 from worksheet #4

VISION 3

What will it look, feel, smell, taste or sound like if you are successful downstream?

OTHER VISIONS

What will it look, feel, smell, taste or sound like if you are successful downstream?



Landmarks: How Will You Know Where You're at?

Purpose: To outline Indigenous indicators that you will use to measure progress toward your vision.

Instructions: As you make your way downriver, how will you know where you're at? Look out for information, knowledge, wisdom, conversations, stories, or data that will help you know if you are making progress. Be as specific as possible- who or what will help you understand where you are at on your journey toward each vision?

VISION 1

Vision 1 from worksheet #6

LANDMARKS

How will you know where you're at?

VISION 2

Vision 2 from worksheet #6

LANDMARKS

How will you know where you're at?

VISION 3

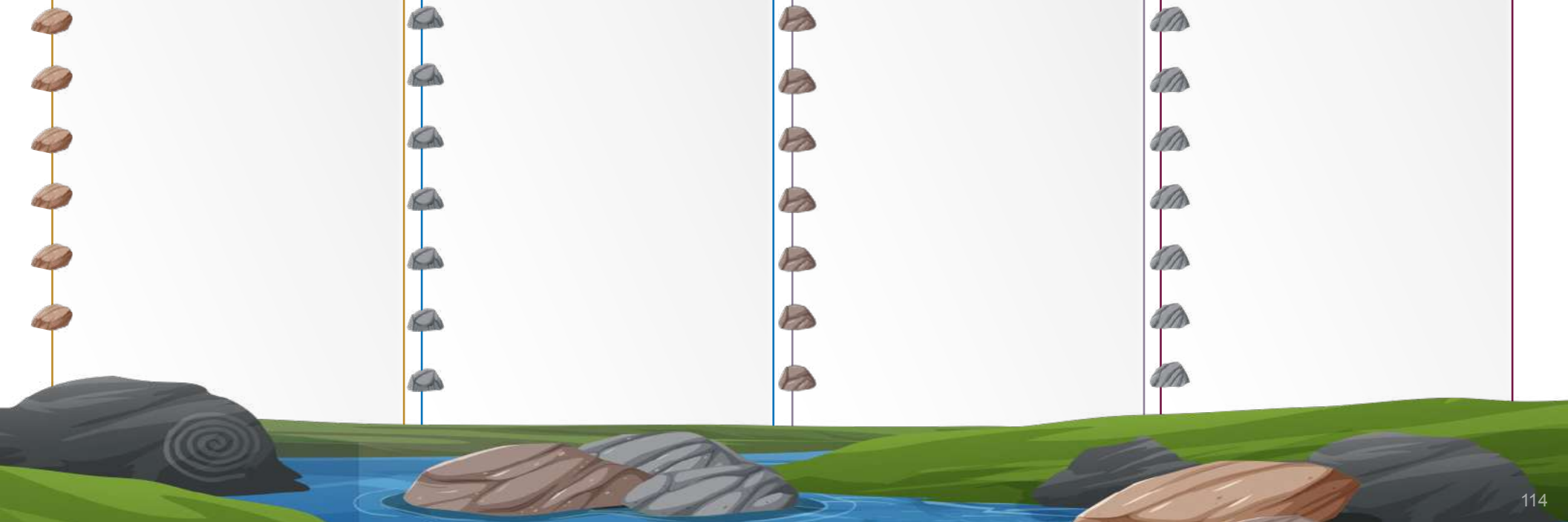
Vision 3 from worksheet #6

LANDMARKS

How will you know where you're at?

OTHER LANDMARKS

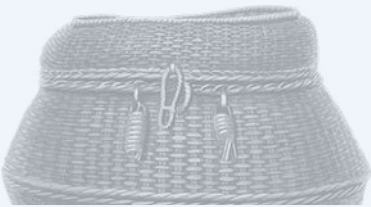
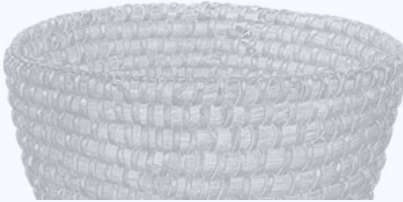
How will you know where you're at?



Your Indigenous Success Measures (Optional)

Purpose: To take time to be intentional about accessing all forms of knowledge as you’re measuring success.

Instructions: Indigenous knowledge has always contained observation of the world around us. In Worksheet #7, you’ve set out landmarks. These are like guide posts to help you understand where you are. Take this opportunity to list those landmarks, and explicitly link how those landmarks connect to Indigenous knowledge in your community. Have you included all three forms of knowledge? Are there more landmarks that you should list?

Empirical Knowledge	Revealed Knowledge	Traditional Knowledge
Observations and experiments in natural settings	Dreams, vision, ceremony, feelings	Handed down through generations (creation stories, oral histories)
		



Knowledge-Gathering Calendar

When or how often will you look for each of these landmarks?

Purpose: Use the worksheet on the next page to outline how and when you will gather data on your progress.

Instructions: For each of your landmarks on worksheet #7, make a plan for when you will gather data, stories, wisdom to see if you have reached that landmark. This can include a specific point in time or a general sense of frequency. Feel free to add additional details about how you will gather this knowledge or who will gather it, prioritizing capacity building in your community.

Note: Teams may find it helpful to use a whiteboard or poster paper to brainstorm these categories initially before filling in the table on the next page!



Worksheet 9: Knowledge-Gathering Calendar (Blank)



VISION 1

Vision 1 from worksheet #6



Landmarks (see Worksheet #7):

When will you look for each of these markers? (e.g., 6 mos. post- launch, every two weeks)

VISION 2

Vision 2 from worksheet #6



Landmarks (see Worksheet #7):

When will you look for each of these markers? (e.g., 6 mos. post- launch, every two weeks)



VISION 3

Vision 3 from worksheet #6



Landmarks (see Worksheet #7):

When will you look for each of these markers? (e.g., 6 mos. post- launch, every two weeks)

VISION 4

Vision 4 from worksheet #6



Landmarks (see Worksheet #7):

When will you look for each of these markers? (e.g., 6 mos. post- launch, every two weeks)

Phase 2 Worksheets

EMBARK





Checking Our Supplies

Purpose: To revisit your original plans for your program or project and document changes.

Instructions: At this point in your journey, you may have noticed that what you’re carrying has begun to change. How have they changed? Why have they changed? What are you learning from these changes?



What did you originally pack? (See worksheet #5)	How have the contents of your pack (i.e. your original plans) changed?



Phase 3 Worksheets

ASSESS





Optional: Where Are We On Our Path?

Purpose: To stop and reflect on whether your approach and supplies are leading you toward your vision.

Instructions: In order to do so, imagine you are climbing to the top of a tree to get a clearer view down river. Are there any adjustments you should make to your journey? Look toward the next vision and spot your landmarks. Have you arrived at any of your landmarks yet?

VISION 1

Vision 1 from worksheet #6

LANDMARKS

What adjustments do you need to make to your supplies or approach?

VISION 2

Vision 2 from worksheet #6

LANDMARKS

What adjustments do you need to make to your supplies or approach?

VISION 3

Vision 3 from worksheet #6

LANDMARKS

What adjustments do you need to make to your supplies or approach?

OTHER LANDMARKS

What adjustments do you need to make to your supplies or approach?

Phase 4 Worksheets

CELEBRATE & ACT





Making Camp: Celebrating And Preparing To Continue

Purpose: To orient yourself toward the next portion of your journey and honor the knowledge you’ve gained.

Instructions: As you celebrate your progress and begin to re-renter the planning phase, consider resting and making camp, so you can look back on how far you’ve come and reflect on the knowledge you’ve gained. What can you DO with this knowledge as you continue on your journey toward other visions?

What knowledge have you gained through this process?	How will you use this knowledge as you continue your journey?



Appendix

APPENDIX B. REFERENCES & RESOURCE LINKS

In addition to this Toolkit, we are excited to engage in **Indigenous evaluation knowledge sharing** via the following resource links. This is a non-exhaustive list of leading organizations engaged in Indigenous evaluation approaches as well as seminal articles and books related to Indigenous evaluation. Please click on the links to be directed to the original source materials.

Leading Organizations Engaged in Indigenous Evaluation

- American Indian Higher Education Consortium's ([AIHEC](#)) [Indigenous Evaluation](#) webpage with Indigenous Evaluation Framework book chapters and resources.
- Urban Indian Health Institute's [Indigenous Evaluation](#) webpage with Indigenous evaluation toolkits, videos, and technical assistance services.
- [Great Plains Tribal Leaders' Indigenous Evaluation Toolkit](#) webpage with evaluation toolkit, videos, and resources link for indigenous evaluations.

Indigenous Evaluation in the Literature

- [Looking backward but moving forward: Honoring the Sacred and Asserting the Sovereign in Indigenous Evaluation](#)
- [Talking Circles: A Culturally Responsive Evaluation Practices](#)
- [Developing Responsive Indicators of Indigenous Community Health](#)
- [Place of Strength: Indigenous Artist and Indigenous Knowledge is Prevention Science](#)
- [Telling Our Story in Our Place and Time: Indigenous Evaluation Framework \(LaFrance & Nichols, 2009\)](#)
- [Indigenous Approaches Program Evaluation](#)

Webinars and other Videos:

- An introduction to the Indigenous Evaluation Framework by Dr. Joan LaFrance developed for American Indian Higher Education Consortium (AIHEC). [Introduction to Indigenous Evaluation \(LaFrance\)](#)
- An introduction to Indigenous Methodologies and ways to engage meaningfully with the Indigenous communities a part of PREVNet's Community of Practice to Address Youth Dating webinar: [PREVNet WEBINAR - A Toolkit on Indigenous Evaluation Methodologies](#)
- Ways to combine western and Indigenous evaluation techniques productively: [Dr Nicole Bowman: Braiding Evaluations-Balancing Cultural, Community Context, and Scientific Requirements in Project Evaluation](#)

Other Toolkits:

- An introduction to Indigenous Methodologies by PREVNet's Community of Practice to Address Youth Dating: [Indigenous Evaluation Methodologies](#)
- Notah Begay III Foundation's, [Keeping Track: A Toolkit for Indigenous Youth Program Evaluation](#)



INDIGENOUS EVALUATION TOOLKIT:

An Actionable Guide for Organizations Serving American Indian/Alaska
Native Communities through Opioid Prevention Programming

FEBRUARY 2023



SEVEN DIRECTIONS

A CENTER FOR INDIGENOUS PUBLIC HEALTH

UNIVERSITY of WASHINGTON