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## Engaging American Indian Women and Communities to Culturally Tailor a Lifestyle Modification Intervention to Reduce Cardiometabolic Risk after Gestational Diabetes

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# Creating Crucial Connections: Lessons Learned from Engaging Diverse Communities in Research

*Engaging American Indian Women and  
Communities to Culturally Tailor a  
Lifestyle Modification Intervention to  
Reduce Cardiometabolic Risk after  
Gestational Diabetes*

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# Indigenous CBPR Principles



1. ACKNOWLEDGE HISTORICAL EXPERIENCE
2. RECOGNIZE TRIBAL SOVEREIGNTY
3. DIFFERENTIATE BETWEEN TRIBAL AND COMMUNITY MEMBERSHIP
4. UNDERSTAND TRIBAL DIVERSITY AND ITS IMPLICATIONS
5. PLAN FOR EXTENDED DEADLINES
6. RECOGNIZE KEY GATEKEEPERS
7. PREPARE FOR LEADERSHIP TURNOVER
8. INTERPRET DATA WITHIN THE CULTURAL CONTEXT
9. UTILIZE INDIGENOUS WAYS OF KNOWING

<sup>1</sup> Christopher S., et al. Applying Indigenous Community-Based Participatory Research Principles to Partnership Development in Health Disparities Research. *Fam Community Health*, 2011; 34(3):246-55.

# Maintaining those crucial connections

- ▶ Connect with likeminded clinicians who care for women in the community – work with people with programmatic



- ▶ Lessons learned in recruitment may translate to future phases of the research project – what's FEASIBLE with your population?



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Jones, E. J. (2014, August.) *Postpartum approaches to reduce cardiometabolic risk in Oklahoma American Indian women with previous gestational diabetes*. National Gestational Diabetes Network Webinar, sponsored by the National Association of Chronic Disease Directors (NACDD), Centers for Disease Control and Prevention (CDC).

*Link to archived CDC webinar presentation reporting findings of the Path to Prevention Study is available upon request*