Merging Tradition and Innovation in Workforce Development
Health Care, Work-Based Learning, and Indigenous Americans in Jobs to Careers

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In a number of Native-Alaskan communities, the University of Alaska, Norton Sound Health Corporation, and other partners collaborated to deliver work-based training for frontline behavioral health staff working in substance abuse, mental health, and social services.

In the Navajo Nation, Northern Arizona University collaborated with acute care and public health providers to improve workers’ skills and career ladder opportunities.

In a largely Native Hawaiian region of Hawaii, the Waianae Coast Comprehensive Health Center and Leeward Community College used work-based learning to improve the job performance of medical receptionists and medical assistants.

These projects are part of Jobs to Careers, a national initiative that seeks to transform the ways in which workers on the front lines of health care are trained and advanced in their jobs. An initiative of the Robert Wood Johnson Foundation in collaboration with The Hitachi Foundation and the U.S. Department of Labor, Jobs to Careers supports 17 workforce partnerships between employers and educational institutions nationwide.

The efforts in Alaska, Arizona, and Hawaii add a special facet to the Jobs to Careers approach. They are applying and adapting the initiative’s core strategy of work-based learning to promote advancement for frontline workers from indigenous American cultures and to improve service to Native communities.
Barriers to Success

A capable and diverse health care workforce is essential to meeting the health care needs of all Americans. Yet in building that workforce, a significant group of workers that is critical to patient care and satisfaction is often underserved: America’s six million frontline health care workers. These include medical assistants, health educators, laboratory technicians, substance counselors, and home health aides—all of whom provide direct patient care and client services.

Frontline workers fill about half of all health care jobs and deliver most of the nation’s direct patient care and public health services. However, much of their potential for delivering quality care and filling critical vacancies in professional positions goes untapped.

Most frontline workers are women earning $40,000 or less per year, and their formal education often ends with a high school diploma. Few frontline workers are licensed to practice independently, and they receive little or no training for their work beyond brief in-service sessions and on-the-job guidance in day-to-day tasks. Moreover, they lack the support needed to ensure—let alone improve—quality service and patient care. Too often, the result for frontline workers is low morale and high turnover.

Low-income workers face special challenges when they seek to develop marketable skills and earn credentials. In particular, low-income adults have significantly different needs than the 18- to 22-year-olds we typically think of as college students: they are more likely to be working full time and meeting family responsibilities that compete for their time, energy, and financial resources. They may have less time available for college-level studies, even though their need for remedial instruction, tutoring, or other interventions may be greater.

Frontline workers from traditional cultures encounter all these barriers—and more. They may feel disconnected from the culture and usual modes of instruction at mainstream academic institutions. Standard educational measures, including tests, can contain cultural biases and fail to measure the full accomplishments and skills of diverse learners. Moreover, learning can be impeded whenever instructors come from one culture and the students from another. And students from traditional cultures may feel alienated by the substance and teaching approach of mainstream curricula. For example, the typical classroom may emphasize individual accomplishment in situations where a traditional culture might emphasize collaboration with strong community supports.

Work-Based Learning and Traditional Cultures

Through Jobs to Careers, health care employers partner with education institutions and other community organizations to change the way frontline employees are trained, rewarded, and advanced. With work-based learning as a cornerstone, the partnerships develop career paths that frontline employees can easily access. Work-based learning emphasizes the employee as learner, and the work process
itself as a source of learning. It involves education and training methods that capture, document, formalize, and reward learning that occurs on the job.

Work-based learning is central to the goal of Jobs to Careers: to increase access to postsecondary education and thus to rewarding careers opportunities. With work-based learning at the center, the frontline workers participating in the Arizona, Alaska, and Hawaii Jobs to Careers projects learn material that directly relates to their work and apply that learning to better perform their current tasks. Workplace supervisors act as mentors, providing support and encouragement to participants striving to complete their programs of study.

At the same time, success for students and their employers in these three projects has depended partly on embracing and presenting work-based learning practices as an extension of each community’s cultural framework. All three projects have employed some degree of culturally specific designs as they framed key elements of their work-based learning programs.

### Project Profiles

**Jobs to Careers** provided three years of funding to design and implement local and regional projects, with Arizona and Hawaii beginning in 2006 and Alaska in 2007. When Jobs to Careers funding ended, all three continued at least some aspects of their efforts. Even in today’s tight fiscal environment, the partners in each project have incorporated the lessons of Jobs to Careers to the extent possible.

**ALASKA**

Native Alaskan culture, like many traditional cultures, leans toward a holistic worldview in which the activities of one member are reflected in and by those of the entire community. As a reflection of this, Jobs to Careers leaders in Alaska enlisted the support of their community when encouraging frontline workers to participate in their behavioral health project. Moreover, the voices of elders—guides and representatives of the community—provided important and trusted encouragement to program participants.

The Alaska Jobs to Careers partnership was a collaboration of Norton Sound Health Corporation with the University of Alaska–Fairbanks. Founded in 1970, Norton Sound Health Corporation is the primary source of medical care for the Inupiat, Siberian Yupik, and Yup’ik peoples of Alaska's Bering Strait region. The Alaska Rural Behavioral Health Training Academy, the Western Interstate Commission for Higher Education Mental Health Program, and the Annapolis Coalition also partnered in this effort.

While most Alaskans live in or near Anchorage, Fairbanks, or Juneau, 40 percent of residents live throughout rural and frontier Alaska, scattered across 39 towns and over 200 village councils. Norton Sound Health Corporation serves 16 remote villages, 15 of which are only accessible by plane. As a result, it has faced significant difficulties in recruiting qualified workers and training them.

As Larry Roberts of the University of Alaska and his colleagues wrote in the spring 2011 issue of *Rural Mental Health*:

> Given the limitations inherent in recruiting a workforce from another region or state, the “grow our own” approach took hold within behavioral health. It involves training and developing village residents as behavioral health workers as a means for increasing access to culturally relevant services in Alaska Native villages. Rather than enticing workers into a village,

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The Alaska planning and coordination team originating the Jobs to Careers work-based learning project, meeting in Nome.
Alaska’s Jobs to Careers project began by developing a work-based learning curriculum that would prepare frontline workers to become certified behavioral health aides. Training was available to entry-level frontline workers, village-based counselors, substance-abuse counselors, and case managers. Coming from several small behavioral and mental health facilities, participants completed six courses as part of the University of Alaska’s human services curriculum: standards of practice; counseling; ethics; case management; crisis intervention; and community development. They received mentoring from peers and supervisors, on-the-job training, guided learning experiences, and distance-learning opportunities, all geared toward meeting the needs and goals of their workplaces.

Workers’ mastery of competencies was demonstrated and assessed at their workplaces. As part of the program, the participants compiled portfolios and kept journals to help them reflect on their educational experiences and career options. Dawn Miller, a village-based counselor with Norton Health, described a portfolio she developed to capture her personal and professional priorities, accomplishments, and beliefs. Being encouraged to incorporate her personal story into her coursework was important: it motivated Miller to be “more into my job because I want to explain my whole story.”

Program graduates earned a certification as Behavioral Health Aide I and 15 to 18 college credits toward an Associate’s degree. The assessment process for each competency involves a self-assessment by the student, feedback from his or her peers, an assessment in the field by a clinical supervisor, a review by an elder mentor, and final approval by the lead Jobs to Careers instructor. Participants then gained opportunities to advance along a three-level career path: Behavioral Health Aide I, II, and III. As they progressed through each level of competency, they received hourly raises of $2 to $3 for each competency mastered.

Supervisors, clinicians, and village elders served as mentors to the frontline workers, meeting with them regularly while on the job. Sometimes the mentors and participants met formally (e.g., the student completes an assignment with the help of mentor); sometimes they consulted informally during the workday. Peers, supervisors, and elders met each week for two hours.

The elders’ role also proved important to the educational process as the Jobs to Careers project drew on another aspect of Native-Alaskan culture: the concept of the learning circle, in which the members of a group exchange thoughts, feelings, and ideas. In the past, Dawn Miller had taken classes via distance learning. “In the other classes, there were people from all over. It seemed like we weren’t that connected. You could relate to [the Jobs to Careers participants]. They have some of the same backgrounds and some of the same issues in their jobs and in their people.”

Darlene Milligrock of Norton Sound Health Corporation spoke about the critical support of elders throughout the program: “It makes me want to keep going.” Indeed, the project embraced the central role of elders by engaging them in face-to-face meetings with the worker-students. Students “are encouraged to bring their reflections into the supervisory process and to also share their experiences with peers and elders, who are part of the educational process. Elders bring a unique contribution to the learning,” according to Roberts and his colleagues. This creates “an explicit connection with the tribal culture and language and offering a culturally attuned perspective on the nature of individual and community problems and paths to healing.”

Perhaps most important, note Roberts and his colleagues, the elders are “affirming for the learner, fostering self-confidence about their personal value, heritage, and ability...”
to make a meaningful contribution to their community,” reinforcing Jobs to Careers’ core belief that no one is ever too old or too young to learn.

Mentoring was also crucial to learning, as well as providing important structure and support in the workplace. When Irene Olanna stepped into the role of case manager, her predecessor had already left, leaving only notes on how to perform the work. Olanna’s mentor helped her succeed in the new position and prompted her to serve as a guide to new counselors in her region. The program also expanded Olanna’s view of her career opportunities: she now plans to participate in a certification program in substance abuse training and intends to expand her professional responsibilities.

Another significant aspect of the project was that Norton Sound Health Corporation clinical supervisors—often Native Alaskans—received appointments as adjunct faculty at the university. This helped link work life to education. As adjunct faculty and mentors, the supervisors understood both workplace demands and academic goals. The supervisors, in turn, could perform their roles better because they were mentored by university faculty.

Dawn Miller believes that her experiences in Jobs to Careers helped her identify career goals. It made her “want to do more and [get] more education, to become more certified and, mostly, more professional. Instead of being broad, I want to find something like school counseling or hospital counseling.”

The impact of Jobs to Careers on participants’ lives has the ability to extend far beyond the current cohort of employees. Educational attainment has a proven, positive effect on future generations within the same family. Miller’s desire to “get more education” affects her family. She says her “high school children are amazed,” and her success has encouraged one of her daughters to enroll in college as well.

Larry Roberts and his University of Alaska colleagues conclude that work-based learning “is a natural extension both of tribal efforts to define competencies and university efforts to increase the relevance of its human services curricula.”

**ARIZONA**

To advance the career opportunities of frontline staff serving the Navajo Nation, Northern Arizona University partnered with two hospital systems, one in the field of public health, the other in nursing. These two partnerships incorporated the tradition of learning circles to stress bottom-up decision making and teamwork in developing and delivering work-based learning.

The projects used a team approach to both setting and accomplishing learning objectives. They evolved organically, with employers and employees contributing lists of desired competencies, and employees working together to master them. The partners benefitted from a history of collaborating, and all are part of the Pathways into Health group, a partnership focused on designing pathways into health-related careers for Native Americans.

At Chinle Service Unit, health-tech workers in the Public Health Department applied to participate in the Learning Circles program and advanced to become health technicians.

The Chinle Service Unit meets the primary care needs of the Navajo Nation and also provides a range of public health, preventative health, and Native medicinal services. It serves about 33,000 people, of whom 97 percent are Native American. About 1,000 employees are located at Chinle’s 60-bed hospital, with three additional clinics (plus one under construction) in outlying regions. The Department of Native Medicine employs two native healers and has an onsite Hogan, the Navajo’s traditional dwelling.

With Jobs to Careers, the delivery of health services on the reservation took on a more
holistic approach, and it helped to make explicit connections between service delivery and spiritual and cultural beliefs. For example, the Navajo do not like to speak of death, dying, or illness; health advocacy and promotions take place in a way that respects this. In addition, rather than focus on the negative consequences of poor health habits, public health workers emphasized the importance of treating the body well.

The training program was composed of modular online courses. Developed by Northern Arizona University, the modules helped workers demonstrate competencies in the field of community health and health promotion. As with work-based learning, each module used work projects to help students acquire their competencies.

While Northern Arizona University developed, administered, and maintained the online courses, the process of developing the curriculum was collaborative, in keeping with the learning circles concept. Employees, supervisors, instructors, and the university’s administrative staff all weighed in on relevant competencies for the courses. Employees and supervisors contributed real-world knowledge of day-to-day job tasks and responsibilities, while university instructors and administrators ensured consistency and standardization with existing public and community health curricula.

For the second Arizona project, the university partnered with Winslow Indian Health Care Center, which provides urgent care and other outpatient services to the Navajo Nation. Winslow helped workers pass the national licensure exam to become registered nurses (RNs), positions in particularly high demand. The Winslow Indian Health Care Center, a mid-sized community hospital, has 300 employees and a board of directors comprised of Navajo Nation leaders.

Several Winslow employees had graduated from a nursing degree program (not at Northern Arizona University) but remained in low-wage frontline jobs after failing the RN NCLEX licensure exam. The NCLEX exam is a well-established, standardized requirement to obtain RN licensure and therefore not subject to modifications.

The site coordinator consulted with nurses at Winslow on how best to study and practice for the exam. The resulting tutoring program that Northern Arizona University set up embraced learning circles. Workers took part in group study sessions and received instruction on reducing test anxiety and other general stresses. They also received individualized assessments of academic remediation needs and mentoring on study skills and managing personal life issues. Many eventually passed the exam and became RNs.

Again, the project team took a holistic approach to preparing workers to pass the exam, taking into account workers’ lives, spirituality, and health. In addition to small-group tutoring and study sessions, workers could practice what they were learning for the clinical substantive areas. Doing in addition to reading helped workers retain information better. The training process also included a diet-and-exercise plan. Participants learned stress reduction techniques, such as deep breathing exercises, to address test anxiety. They also visited the testing site before the day of the test to check it out and become familiar with the setting. After hearing accounts from several workers about stressful events at home interfering with their ability to concentrate and do well, workers also learned to negotiate with their families so that they would not be bothered starting 24 hours before their exams.

A significant systemic change occurred through the implementation of the learning circles program: the creation of a dual-appointment staff position. The onsite coordinator for the Winslow program became a staff member at both the health center and Northland Pioneer College. The coordinator led efforts to identify the personal and work-related issues encountered by nursing students who were at risk of dropping out of the program or
failing the NCLEX exam. Students who were scoring poorly on the standardized tests in the program could participate in small study groups to address weaknesses in certain areas.

These efforts grew out of Winslow’s commitment to increase the percentage of nursing graduates passing the NCLEX. Tailoring the study process to meet the unique needs and challenges of the workers proved to benefit both the workers and employers. Developing frontline staff for higher-level management, clinical, and professional positions helps address some of the challenges that Winslow and Chinle have faced in filling these positions. Given the high proportion of Native Americans in frontline positions, “growing their own” also leads to a greater representation of Navajo people in mid-level and higher positions.

As a result of participating in the learning circles, workers performed more independently in their jobs. Supervisors and project team members reported that workers felt more confident in and capable of performing their job responsibilities and had less need for direction on job assignments. Workers began to display more initiative—even helping develop new programs. Supervisors, in turn, spent less time monitoring their workers than they did before the learning circles program began, having more confidence in workers as a result of this increased engagement and better performance.

**HAWAII**

In Hawaii, Waianae Coast Comprehensive Health Center and Leeward Community College partnered to provide culturally sensitive care. Like many community health centers, Waianae serves vulnerable and diverse populations. Its clientele consists primarily of low-income individuals and Native Hawaiians. About 80 percent of its staff members are also Native Hawaiians, and the center wants to increase that to 95 percent. Targeting underrepresented workers for career advancement offered the center an avenue toward diversifying the workforce and moving minorities into higher-level positions, while also being more sensitive to its patients’ cultures. Through *Jobs to Careers*, the health center and the college established work-based learning opportunities for medical receptionists and medical assistants to improve their job performance and retention.

The health center, located in the medically underserved rural community of Waianae on the island of Oahu, is governed by a 17-member board of directors, most of whom are Native Hawaiians from the community. It is the largest employer on the Waianae coast and Hawaii’s largest provider of primary health care to low-income Native Hawaiians.

Developing Native-Hawaiian health care workers is essential to ensuring the provision of culturally appropriate care. Many members of the community are suspicious of outsiders, which has posed a challenge for non-Native staff. Further, the center seeks to take into account certain aspects of traditional Hawaiian ways of healing. For example, traditional Hawaiian healers do not believe in referrals for their services; rather, the patient should take the first step in seeking healing.

In addition, elders play a generally important role in the Native-Hawaiian community. Thus, they have also been essential to the development strategies of the health center. A Council of Elders oversees traditional Hawaiian healing at the center and contributes to its overall strategic plan.

For *Jobs to Careers*, frontline workers participated in work-based learning and college classes covering word processing, medical office procedures, medical terminology, electronic medical records, quality and performance, health and safety, business services, computers, and customer service. At the end of their programs, each earned a Medical Administrative Support Certificate of Completion, as well as 15 college credits from Leeward Community College. The workers could apply those...
credits toward an Associate’s degree in business technology. They also received raises of up to 10 percent and took on greater responsibilities at work.

One important step toward these successes was preparing team office managers to become preceptors (mentors). That way they could teach frontline employees on the job and in the classroom, and be more effective as supervisors. Project leaders encouraged these managers to participate in Jobs to Careers by stressing the honor involved in being selected as a preceptor. That strategy persuaded many of the managers to participate, in part because of the emphasis within Native-Hawaiian culture on teaching through oral traditions and of treating members of the community—including coworkers—like members of an extended family.

Program facilitators also encouraged rapport between workers who had completed the training and new participants by emphasizing the concept of ohana (family) between members, the center, and the local community. Frontline workers were extremely supportive of this approach, indicating that it often helped them through the program.

Ohana was further reflected in the cohort training model, which enabled participants to support and learn from one another. Staff at both the health center and the college emphasized this type of support, which participants tended to perceive as an expression of Native-Hawaiian culture. They saw the benefit of interacting with teachers as a group and attending classes together at the college, which also increased their comfort in entering the college environment. As Waianae employee Lucille Cox commented, her colleagues formed a powerful learning support group. Participants took responsibility for one another’s success, working together until the entire group completed an assignment.

It is worth noting that Leeward Community College revised its mission as a result of Jobs to Careers. The community college system and the campus’ strategic plan strengthened their emphasis on workforce development, serving underserved rural areas, and underserved populations—including Native Hawaiians, older students, and incumbent workers.

“‘It’s really been transformational,’” said Stephanie Bell, education director at the Waianae Coast Comprehensive Health Center. She reported that Jobs to Careers participants were more confident, seeing it in their behavior, their posture, and even their appearance. “They are so proud, particularly that they’re earning college credits.”
“It’s Our Culture”

While Native cultures vary greatly in beliefs, language, and customs—and while each individual has a different sense of connection to his or her culture—the three projects have drawn on a number of common characteristics, in particular the importance of family and extended family, spirituality, tradition, and respect for elders. Jobs to Careers participants shared their personal histories and priorities, bringing their culture into the classroom. Learning experiences took advantage of the communal values of the participants, rather than enforcing individualistic learning styles. The projects address the particular challenges and needs of the students, adapting the learning environment, curricular structure, instruction methods and delivery to the values, beliefs, and social and cultural practices specific to these learners.

Like many educational programs, Jobs to Careers encouraged participants to bring their personal and cultural backgrounds into the classroom. In Alaska, Arizona, and Hawaii, project designers enlisted the support of their communities in encouraging participants to enroll. In addition, the projects themselves reflected the holistic worldview of many indigenous American cultures that the activities of one member are reflected in and by these of the entire community.

Elders, as guides and representatives of these communities, provide important encouragement to learners in these Jobs to Careers projects. The partnerships all incorporated community elders into their strategic planning and throughout the projects. By infusing culturally relevant traditions into the implementation of Jobs to Careers, employers improved their ability to reflect the demographics of their communities in both frontline and professional positions.

One of the most important aspects of work-based learning is that supervisors assume some of the responsibility for curricular instruction, instead of instruction being the sole province of college faculty. For Native-American workers, this was particularly important in light of the disconnect and discomfort they feel in academic settings and from traditional academic material. Having part of the curriculum designed and delivered by workplace supervisors tends to ensure that skills and topics are relevant to the workplace, and that workers learn them in a familiar, comfortable setting. Plus workers are assessed on their skills in the workplace. Supervisors’ awareness of Native cultural sensitivities helped these programs identify opportunities for learning potential in work-related tasks. It also helped incorporate culturally distinct practices into work-based learning. All this, in turn, helped improve job performance.

The Jobs to Careers workplaces in Arizona, Alaska, and Hawaii provided active support to working adult learners in several ways. Employers paid students’ tuition and expenses so they could participate in coursework. They allowed participants to take courses and discuss coursework during work hours. Supervisors even participated as co-learners and mentors. Students and instructors acted as learning teams, helping one another through academic and professional issues. Employers also arranged for classes to meet via teleconferencing or in person at or close to the workplace.

Jobs to Careers illustrates the powerful potential of work-based learning to meet the needs of learners who are underserved in traditional educational settings. These projects have brought access to higher education to individuals who—through limitations of poverty, lack of education, lack of time and financial resources, or cultural barriers—would otherwise have
had little access to higher education. The Jobs to Careers projects in Alaska, Arizona, and Hawaii used work-based learning to enhance the use of culturally aware and sensitive strategies that validated workers’ values and experiences, developing better, more confident learners. Culturally sensitive strategies (e.g., learning circles, involving community elders, group learning) increased workers’ confidence and motivation, demystified higher education, and led to workers’ greater sense of professionalism.

This cultural norm of community or clan support has led students to view success as not just an individual accomplishment but also as a group accomplishment. “We pulled back together as a team,” one participant explained. “Work-based learning pulled all of us together to start working as a team.” “We all live here,” said another. “We’re neighbors. We’re family. Going to school here, we take that with us. It’s our culture.”

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