# IA² and The 4Ms Framework

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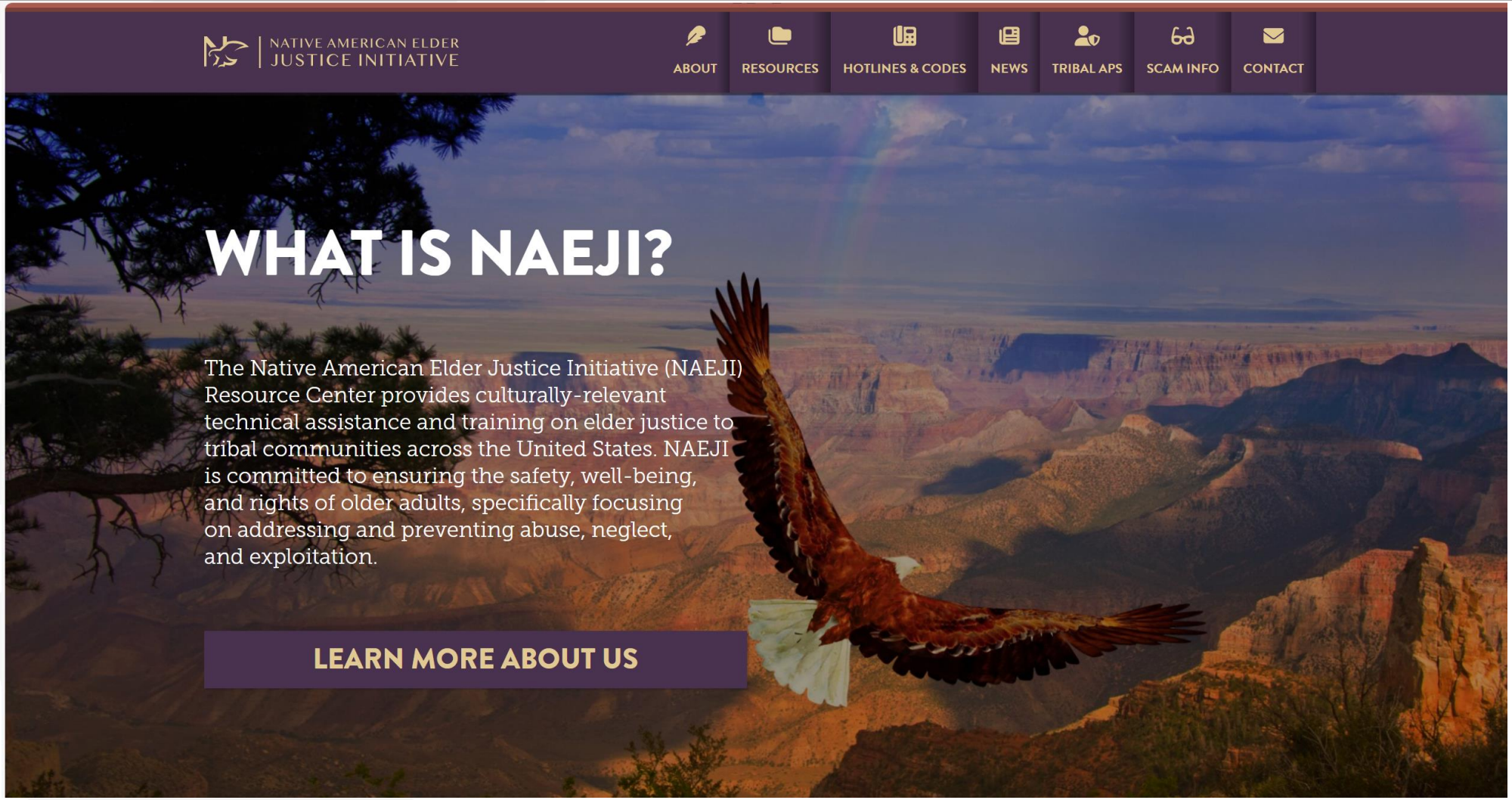
AMERICAN INDIAN and ALASKA NATIVE RESOURCE CENTER FOR BRAIN HEALTH

IA² INTERNATIONAL ASSOCIATION FOR INDIGENOUS AGING

# Native American Elder Justice Initiative (NAEJI)



# National Healthy Brain Initiative (NHBI)


Identify and feature locally-tailored, culturally relevant activities to address Native disparities in the burden of ADRD.

- The expertise of the IA$^2$ team was vital in helping ensure that the Road Map reflects the unique needs and perspectives of Indigenous elders and their communities.
- Address strategies and action items from the Road Map for American Indian and Alaska Native Peoples
- Deliverables include the development of resources
- Year 5

AMERICAN INDIAN and ALASKA NATIVE RESOURCE CENTER FOR BRAIN HEALTH

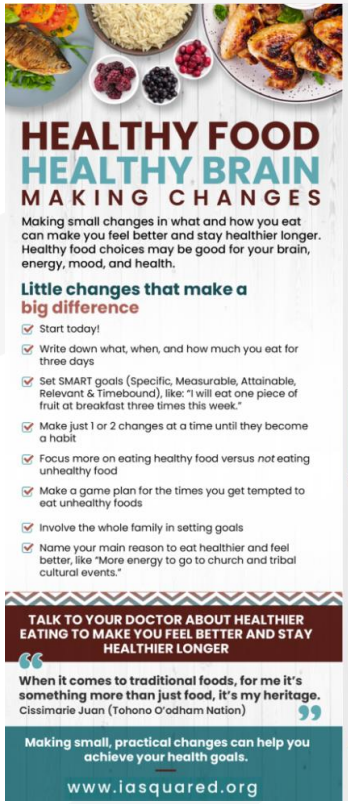
# IA²'s Content Creation Process


- Our products are **DESIGNED BY** and **DESIGNED FOR** American Indian and Alaska Native nations
- Development Process
  - Listening Sessions
  - Talking Circles
  - Community Surveys
- Targeted Community Input From
  - National Advisory Board
  - Elders
  - Title VI
- Communities from 28 States have ordered printed materials

# Recognizing Early Signs of Alzheimer's

There are 6 versions of the10 Signs flyers available on the IA² website. You can download them or order them to be shipped to you. FREE!!!

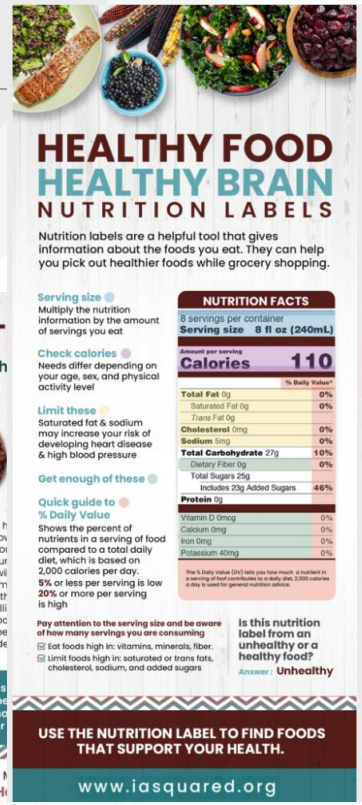
# Healthy Food Healthy Brain Rack Cards





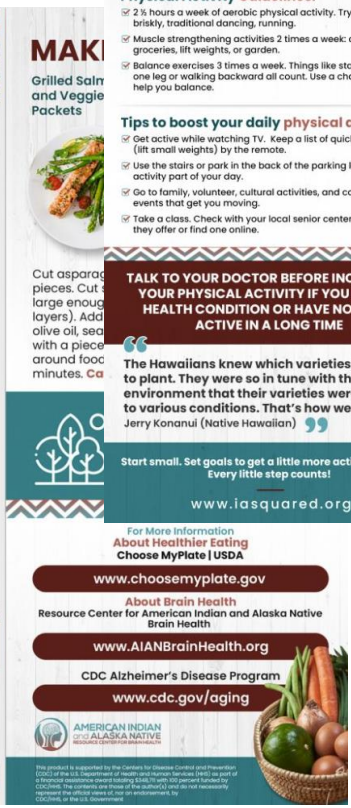














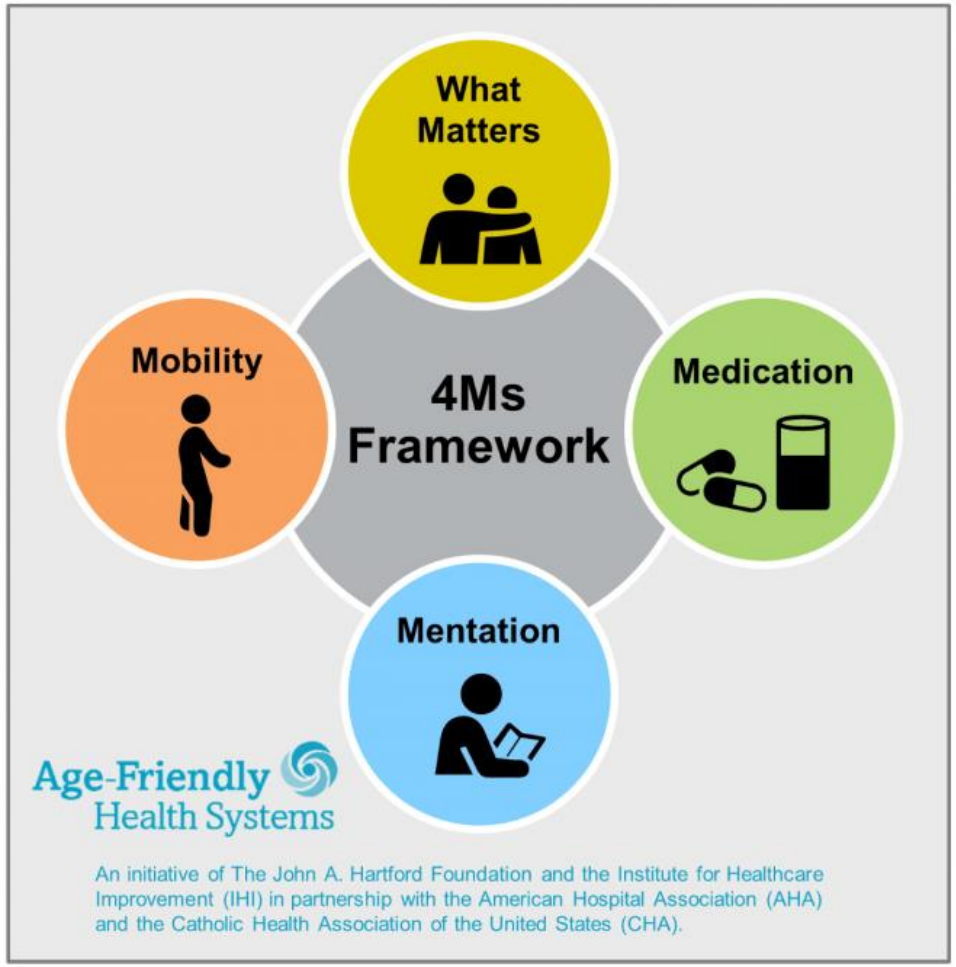


# The River

# Resources | International Association for Indigenous Aging (iasquared.org/resources)

IA² has a current and evolving resource library covering a variety of topics. IA² provides free subject matter expert consultation and referrals to tribal and urban Indian organization staff and state, local, and tribal public health entities nationwide. If you would be interested in connecting with the team at IA² to learn more or discuss the potential of further collaboration or IA² be sure to reach out.

# The 4Ms Image




For related work, this graphic may be used in its entirety without requesting permission.
Graphic files and guidance at ihi.org/AgeFriendly

**What Matters**

Know and align care with each older adult's specific health outcome goals and care preferences including, but not limited to, end-of-life care, and across settings of care.

**Medication**

If medication is necessary, use Age-Friendly medication that does not interfere with What Matters to the older adult, Mobility, or Mentation across settings of care.

**Mentation**

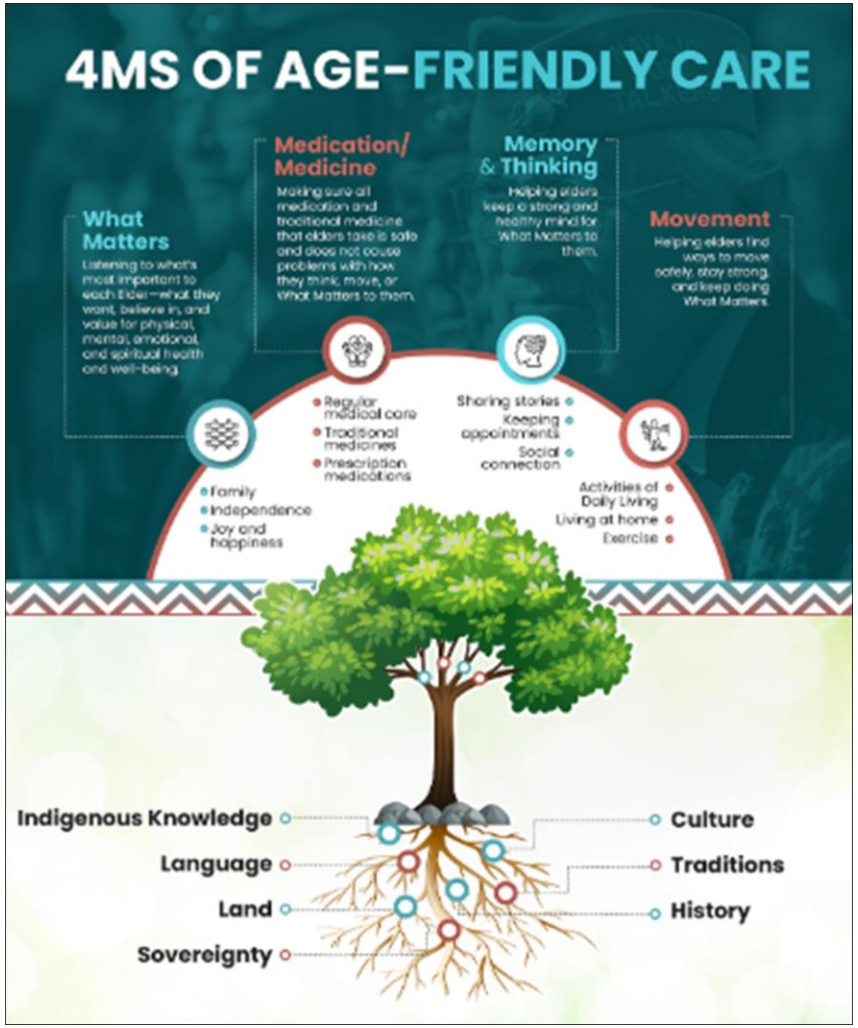
Prevent, identify, treat, and manage dementia, depression, and delirium across settings of care.

**Mobility**

Ensure that older adults move safely every day in order to maintain function and do What Matters.

# The Team

- In partnership, The International Association for Indigenous Aging (IA$^2$) and the Yale COACH GWEP team sought to adapt the language and visual imagery associated with the 4Ms to be more relatable and relevant to American Indian and Alaska Native communities
- Through an iterative process including tribal organization leaders, brain health advocates, tribal elders and care partners, we arrived at a tool that reflects the individual 4M components and also incorporates cultural elements

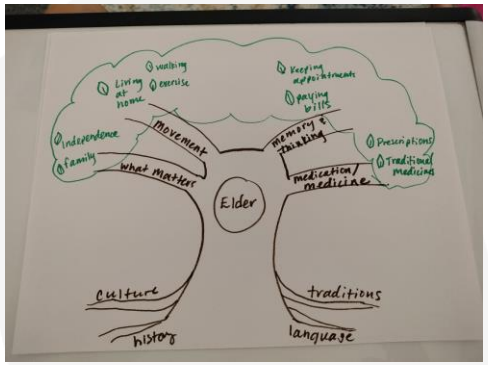


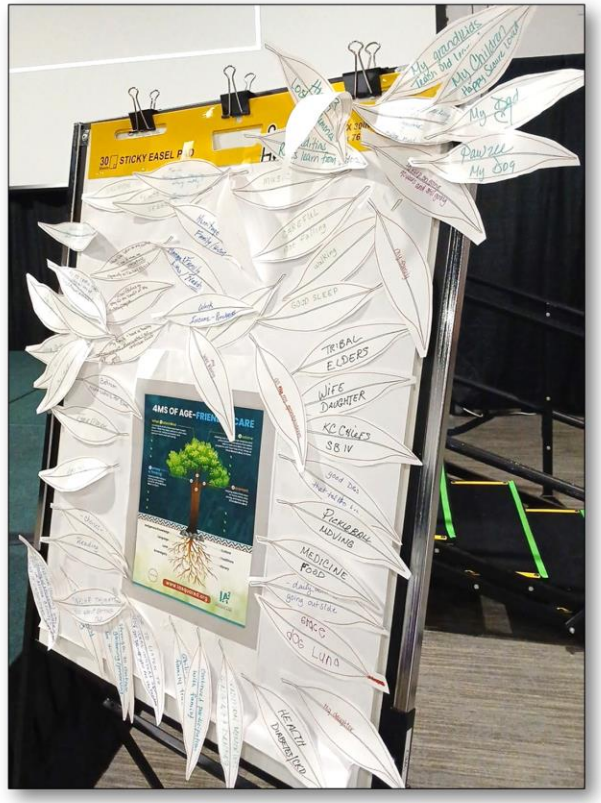

Yale SCHOOL OF MEDICINE
COACH 4M
Yale Connecticut Older Adult Collaboration for Health

# The Adaptation Process

## Methods:

1. Phase 1: Listening session with IA2 constituents; A total of 15 participants from 10 states joined the sessions; Internal discussion,- IA2/GWEP team
2. Solicitation for graphic designer - tree image
3. Phase 2: Presented the resource during two virtual learning sessions in May 2025. Shared with advisory council; California Indian Manpower Consortium meeting; NICOA meeting;
4. Meetings with IHI-input
5. Further feedback from original listening session participants



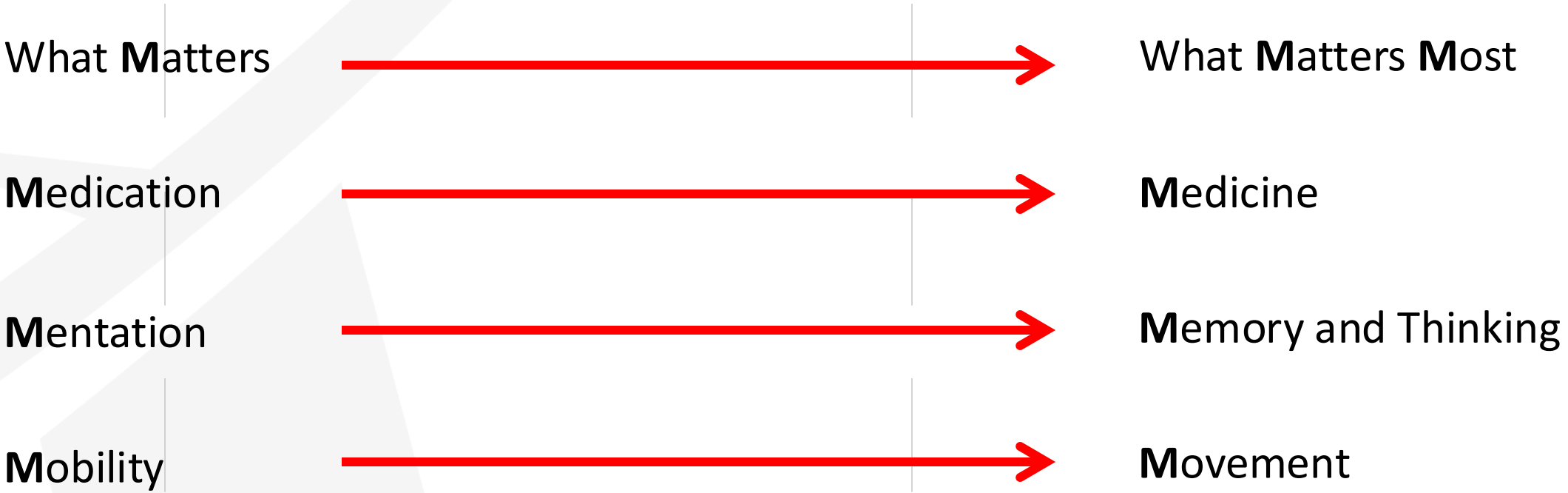



# Learnings From Listening

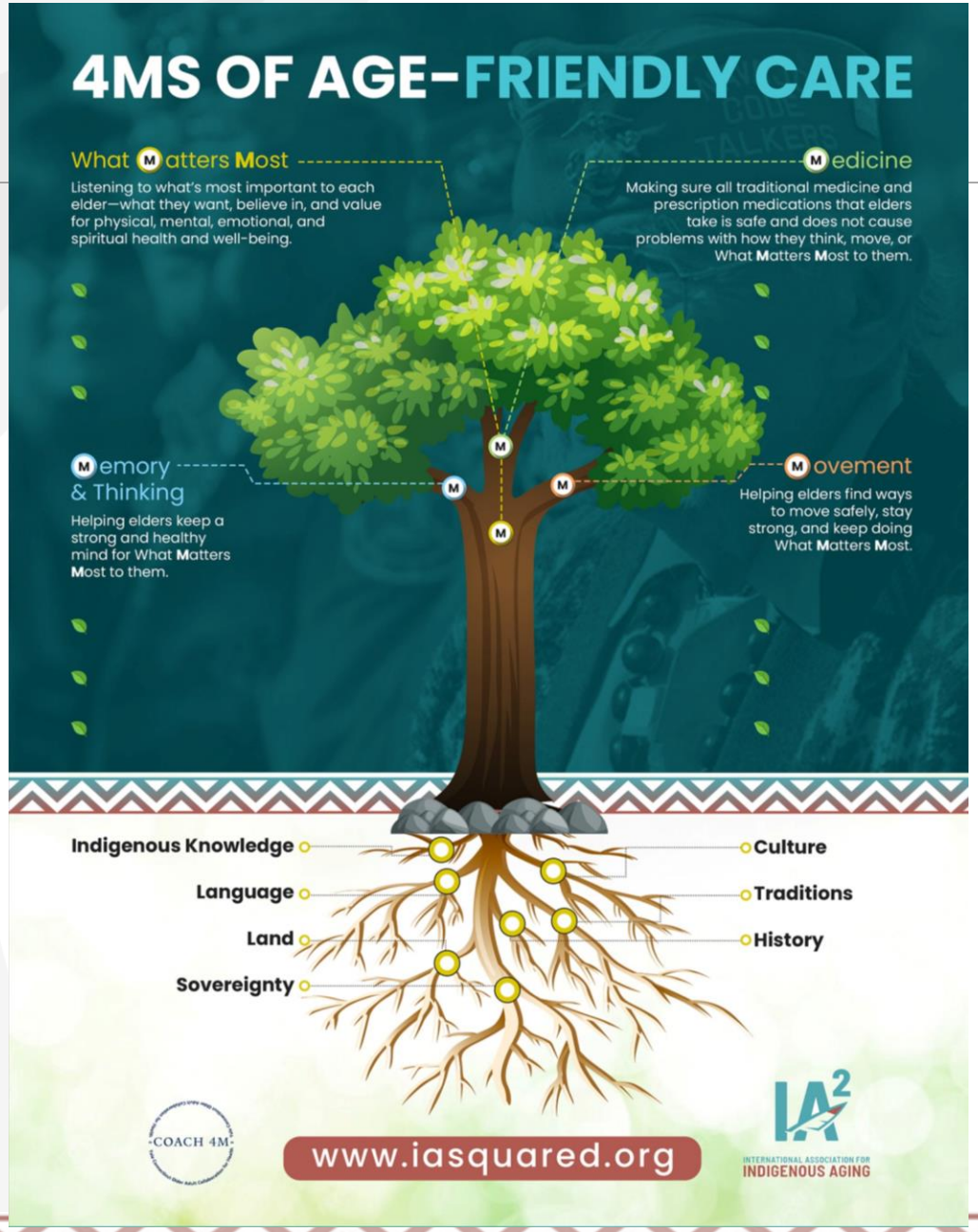
- Center Indigenous culture through concepts like physical, mental, emotional, and spiritual well-being.
- Acknowledge traditional medicine and ways of being.
- Replace medical jargon with accessible language for elders, caregivers, and community members.
- Consider cultural imagery such as the Medicine Wheel, the Sacred Tree, or Totem Poles.
- Center What Matters and provide examples.
- Participants requested that we consider adapting and/or creating other resources to support elders, caregivers, and community-based workers.

# Adapted

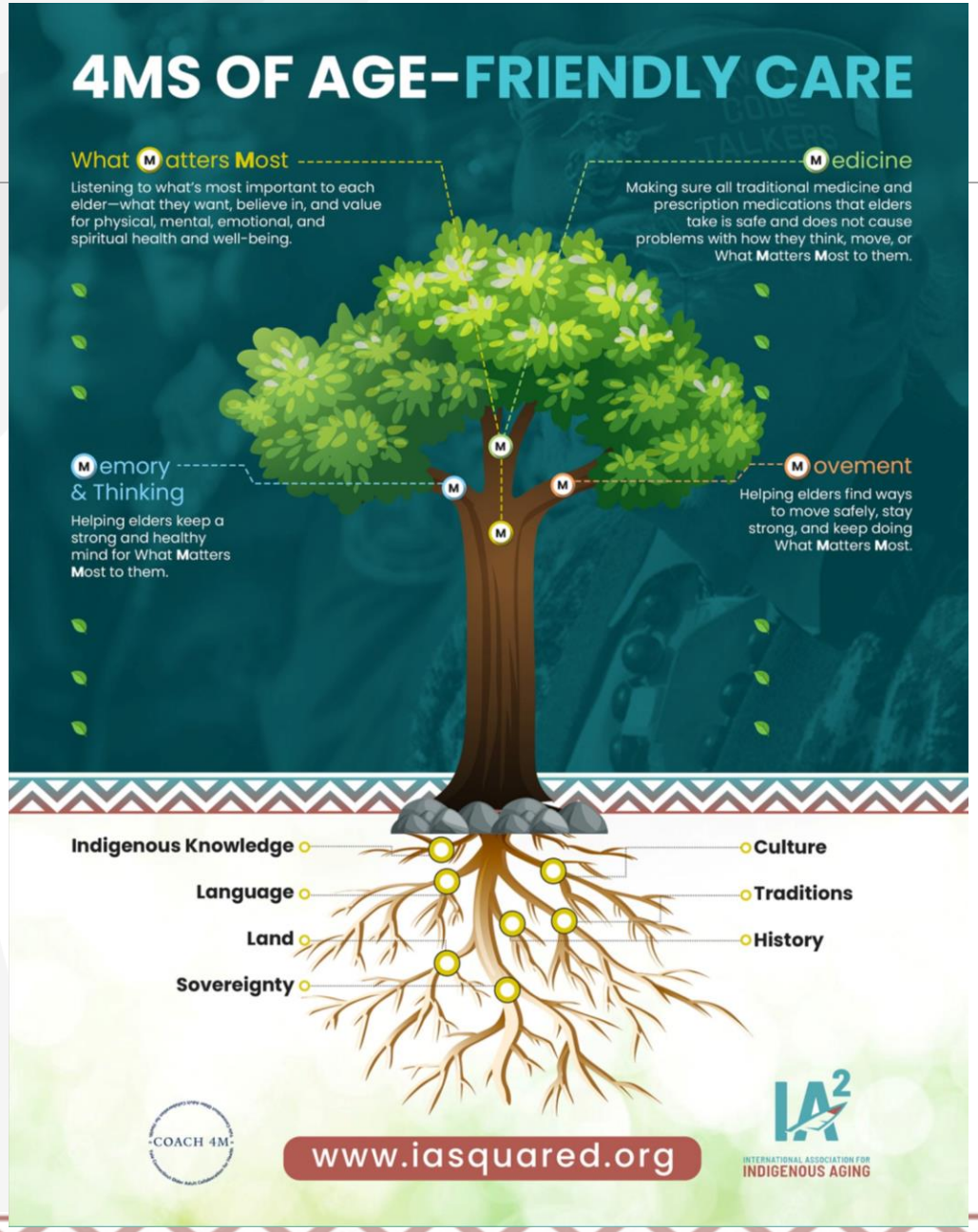
*They apply regardless of the number of functional problems an older adult may have, or that person's cultural, racial, ethnic, or religious background.*



# The Tree



# Activity



# The Vision

- This version of the 4Ms was intentionally created to be interactive and to face both directions, the providers **AND** the Elders and their families are involved.
- If “What Matters Most” to the Elder is central, then the Elder should know that.
- It is designed to create a conversation between providers and patients.
- American Indian and Alaska Natives often have a distrust for Western Medicine or Health Care.  Trust is formed through building a relationship.  This conversation can be the foundation for that.
- Example:
  - What Matters Most to Ron
  - Ron’s Family Medical History

# Conclusion

- This version has been well received with every community in which IA$^2$ has shared it.
- There are requests to work on an adaptation for Native Hawaiians.
- This can be a bridge to providing better health care to American Indian and Alaska Native Elders.

- What do you think?

# Connect With Us!

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