

Measuring Implementation Fidelity for the Gathering of Native Americans (GONA)

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Abstract

This article releases the Gathering of Native Americans (GONA) Fidelity Tool to the public. The paper describes the methods in the development of the GONA Fidelity Tool and how it is used in planning, implementing, evaluating, and in further tailoring the GONA process more precisely to the community's needs and strengths. Development and revision of the tool occurred over 10 years with participation and input from 7 Urban Indian Health Organizations funded under Title V of the Indian Health Care Improvement Act, using the tool to advance local GONAs across the state of California. Participating organizations used the tool in partnership with Indigenous evaluators to measure GONA implementation. Process evaluations were conducted to support tool advancements over time and an Annual GONA Training of Facilitators provided a forum for consensus building of GONA best practices for tool revisions. Results indicate that the tool is useful in the planning, implementation, and quality improvement to advance local GONAs over time. The most effective use of the tool is when the items are adapted to the local culture, context, and spiritual practices of the community(ies) served. The tool is now being used nationally and has become an important resource for measuring practice-based evidence and community-defined evidence in the implementation of GONA for Indigenous communities.

INTRODUCTION

The Gathering of Native Americans (GONA) Curriculum was first published in 1999, with funding from the Center for Substance Abuse Prevention as a substance abuse prevention program for American Indian and Alaska Native peoples (Kauffman & Associates, 1999). The purpose of the Gathering of Native Americans (GONA) curriculum is to foster healing, resilience, and community empowerment through culturally grounded activities that address historical and contemporary challenges faced by Native communities. The purpose of the GONA curriculum is to foster healing, resilience, and community empowerment through culturally grounded activities that address historical and contemporary challenges faced by Native communities. Since that time, GONA has been effectively used and replicated across tribal nations in the United States and with Indigenous groups in other countries to also address mental health-related challenges, like suicide and violence prevention, with a core focus on healing from historical trauma (SAMHSA Tribal Training and Technical Assistance Center, 2016).

While the curriculum has been widely used across tribal nations and urban Indigenous communities for nearly two decades, there has never been a systematic evaluation of the GONA to understand more about the process, outcomes, and impact. In 2012, urban Indian health organizations began working with national partners and the Substance Abuse and Mental Health Services Administration (SAMHSA) Native American Center for Excellence to advance GONA evaluation and research. This partnership resulted in the creation of the first GONA Fidelity Tool that was developed to support the implementation of GONA consistently across sites so that youth outcome data could be confidently pooled and aggregated in an effort to increase sample size for quantitative study (King & Kraus, 2017; Kraus et al., 2017). This article releases the first GONA Fidelity Tool in the public domain, describes the methods and results of developing and refining the fidelity tool over time, and discusses effective and ethical uses of the tool (see [Supplemental File: GONA Fidelity Tool](#)).

Literature Review

Implementation fidelity is the degree to which an intervention is delivered as intended (Carroll et al., 2007) and is important to improve the reliability and validity in interpreting outcomes in research studies and in the effective replication of an intervention for reducing the science to practice gap (An et al., 2020). When an intervention is not implemented as it was

intended, researchers may end up erroneously attributing outcomes to an intervention that did not actually occur; therefore, the measurement of implementation fidelity is necessary in research. Four (4) primary components have been identified as important to measuring program fidelity, which include: 1) Adherence to the intervention as it was intended, with all the key elements being delivered to the population of focus by effectively trained staff implementing the intervention with the right resources in the right context or environment; 2) Exposure or dosage (i.e., number of sessions, length, frequency of intervention); 3) Quality of program delivery by individuals demonstrating effective skills and techniques defined in the intervention and also the personal characteristics a person brings, like a positive attitude and preparation; and 4) Participant responsiveness, which is the degree to which the participants are responding and engaging in the intervention (Dane & Schneider, 1998; Mihalic, 2004; Mihalic et al., 2004).

Implementation research, also referred to as implementation science, is the scientific study of methods that advance implementation of research and/or evidence-based interventions into practice in a way that improves quality and effectiveness of care (Eccles & Mittman, 2006; Mihalic et al., 2004). On a provider level, Fixen and colleagues (2005) described implementation fidelity assessment as an interactive assessment of the selection of providers, the training provided, and the coaching and supervision offered to achieve the greatest outcomes. Much of the implementation research has focused on the implementation of practices deemed ‘evidence-based’ by highly controlled studies in university-based settings to the ‘real world’ in community-based settings (Breitenstein et al., 2010; Eccles & Mittman, 2006; Stains & Vickrey, 2017). However, implementation research can also be used when researching an intervention that has not yet been deemed evidence-based to increase confidence in attributing outcomes to the intervention.

Carroll and colleagues (2007) proposed a conceptual framework for measuring implementation fidelity, where an intervention's outcomes are influenced by moderating factors such as policy, pre-intervention strategies to facilitate implementation, the quality of delivery, and participants' responsiveness. The intervention then goes through evaluation of implementation with focus on adherence to the details of the content, the coverage, frequency, and duration of the implementation. Outcomes are then measured, and through that evaluation process, essential components are identified.

Implementation science to serve Indigenous populations has been advancing with the need to quickly and efficiently support dissemination and implementation (D&I) strategies that work to

address the many health and health-related disparities that exist for Indigenous peoples (Blue Bird Jernigan et al., 2020). However, a number of challenges exist in the implementation of D&I strategies for Indigenous populations, including defining what practices have evidence bases for Indigenous populations, such as the geographical, cultural, and political diversity that exists between and within Indigenous groups, and sustainability after grant or research funding ends. A promising Indigenous model, the He Pikinga Waiora (HPW) implementation framework, developed with the Māori community, offers a way for researchers to measure implementation of interventions with Indigenous communities that includes attention to four core elements: cultural-centeredness, community engagement, systems thinking, and integrated knowledge translation (Oetzel et al., 2017). With this model, researchers can assess whether their application of an intervention aligns with high, medium, low, or negative levels of fidelity to the four core elements: cultural-centeredness, community engagement, systems thinking, and integrated knowledge translation. A systematic review of the literature was conducted by Harding and Oetzel (2019) to determine to what extent the HPW's four core elements were attended to within health interventions of non-communicable diseases in Indigenous communities across mostly English dominant speaking countries. This review identified that implementation research studies with Indigenous populations most often had high levels of community engagement and moderate to high levels of cultural centeredness. The authors conclude that long term sustainability through effective translation of knowledge into practice may be more limited because of limitations in systems thinking and integrated knowledge translation.

While there has been a focus on implementation science for Indigenous communities to address disparities, there has also been decades of criticism about the implementation of mostly western-based practices defined as evidence-based that are most often imposed upon tribal nations and Indigenous peoples (Bartgis, 2016; Walker & Bigelow, 2011; Walker et al., 2015) and the continued lack of inclusion of Indigenous knowledge and wisdom (Blue Bird et al., 2020; Naquin et al., 2008; Ninomiya et al., 2022). Solutions for addressing these challenges have included the advancement of concepts like practice-based evidence and community-defined evidence. Practice-based evidence has been defined as interventions driven by the culture that reflect the community values, beliefs, and practices for healing and wellness (Isaacs et al., 2005). For Indigenous communities, many of these interventions have been used for centuries before western practices

and still exist today. Many practice-based evidence models do not have research evidence but practice evidence (Isaacs et al., 2008).

Similarly, community-defined evidence originates in ‘from the ground up’ interventions that come from the community (Martinez et al., 2010). Community-defined evidence has been defined as “knowledge accumulated through the ongoing successful implementation and/or evaluation of practices developed locally with significant community input” (Martinez et al., 2010, pg. 12) and is a direct response to the need to examine community-based practices that ‘work’ using culturally acceptable and appropriate research methods.

GONA is a framework in which practice-based and community-defined evidence interventions exist. While GONA is a manualized curriculum for the implementation of a healing framework, each tribal nation/Indigenous community brings their own local healing and wellness practices to the GONA event. This could result in a sweat lodge in one community, a stomp dance in another community, and a canoe journey in yet another. While they may be using diverse practices, they are all using traditional knowledge for healing and wellness, which are the local practice-based evidence interventions.

The development and refinement of the GONA Fidelity Tool is a tangible example of practice-based and community-defined evidence. Over 10 years of community-driven evaluation, this tool has been refined through practice and improvements using methods that were acceptable and appropriate for the communities being served. The outcome has been so impactful that Indigenous elders, youth, and their families have continued to participate in and support the sustainability of GONA in the same community for more than 20 years (Deetz, June 12, 2019; Nebelkopf et al., 2011). This paper will describe the methods for developing, implementing, testing, and revising the GONA Fidelity Tool over time; the results in using the tool, including ethical uses and limitations; and a proposed Indigenous model for implementation fidelity that incorporates practice-based and community-defined evidence.

METHODS

A community-based participatory research (CBPR) model was selected from the beginning to guide the project and was used throughout the project including in the writing of this manuscript (Bordeaux et al., 2007). Engagement with community leaders resulted in core guiding principles of the evaluation to be relational, community-focused, strength-based, holistic, and youth friendly.

The project also followed principles established by Indigenous scholars to decolonize and re-indigenize the evaluation and research process (Walters et al., 2009). Both formal and informal advisory groups represented local youth and community members who helped develop, implement, and evaluate the GONAs locally and across organizations.

Development of the GONA Fidelity Tool

The GONA Fidelity Tool was originally developed through the SAMHSA Native American Center for Excellence, Service to Science initiative. SAMHSA funded two Indigenous technical experts, one with experience in fidelity measurement with tribes (Holly Echo-Hawk) and the other being a skilled GONA facilitator with 25 years of experience (first author). Through a 3-day, in-person meeting, a team of local GONA facilitators and Indigenous community members (which included second and fourth author) from three organizations and an Indigenous research partner (last author) worked together with technical experts to 1) identify key components in the GONA curriculum that were demonstrating positive outcomes with youth in practice; 2) develop a quantitative scale of measurement; 3) begin testing the tool through use at each site; and 4) evaluate and advance quality improvement.

The first iteration of the GONA Fidelity Tool consisted of five sections, which remain in the 2022 revision, and that include the Core GONA Elements and the elements of Belonging, Mastery, Interdependence, and Generosity. Core GONA Elements were identified as important to occur across the entire GONA 4-day event. Each of these five sections is organized by fidelity item names and descriptions, which are rated on a 4-point scale from Exceeds Intentions +1 to Intentions Not Met -2, with a Not Applicable (NA) category in case that fidelity item is inappropriate or culturally incongruent for a specific culture. The number of fidelity items within each of the five sections are reported in Table 1 by year.

Table 1
Number of fidelity items by GONA Fidelity Tool section by year

Year	2013 (original)	2017	2018	2022
Core Elements	11	13	13	22
Belonging Day 1	7	6	6	10
Mastery Day 2	8	8	8	9
Interdependence Day 3	5	5	5	5
Generosity Day 4	4	5	5	7
Total Fidelity Items	35	37	37	53

From the original tool to the 2017 revision, the primary changes included 1) the addition of the Belmont Process to the Core Element; 2) the adjustment of an item in the Interdependence section to broaden the concept of the use of a local Healing Model that is used to teach about balance and wellness in the community (i.e., medicine wheel, canoe journey, or many other models); 3) a Commitment Ceremony using local practices in the Generosity section; and 4) the moving of Risk Tokens from the Belonging section to a Core Element that should be present across all 4 days of the GONA.

Changes from 2017 to 2018 reflected changes to the introduction to include disclaimers that the fidelity elements should be adapted to meet the unique cultural needs and context of diverse communities and implemented in partnership with GONA facilitators and local youth/community member experts in their own culture and community. The instructions also included the use of the GONA Fidelity Tool in planning, as a checklist for GONA facilitators in implementation and as a research tool. Further, the instructions included a disclaimer that the tool should not be used to penalize individuals or organizations, acknowledging that there are many ways in which a community could implement an effective GONA. Another change included the addition of a row at the end of each section to calculate a total and average score. This was added to support the research study that had begun through funding from the California Reducing Disparities Project.

Changes from 2018 to 2022 reflected the addition of 16 more items, nine of which were identified as Core Elements as shown in the Word Cloud (See Figure 1).



Figure 1. Word cloud of new Core Elements in 2022 GONA Fidelity Tool revision

Four (4) new elements were added to Belonging including Creating a Safe Space, Tuckman’s Stages of Group Development, Conflict Resolution Plan and Team, and a Trauma Informed Transition to Mastery. Only one item was added to the section on Mastery, and that was to support a Trauma Informed Transition to Interdependence. Two items were added to the section on Generosity which included Honoring GONA Family and Follow-Up. Additionally, the row added in 2018 for tallying a total score and average for each section was removed completely. The scale of measurement also changed from using the word “standard” to using the word “intention” with an emphasis on the intention of the community as the most important frame of reference for scoring the GONA Fidelity Tool (see Table 2).

Table 2
GONA fidelity item rating rubric

Rating	Definition of Rating: “During the GONA event ...”
Exceeds Intention	...you have gone beyond just meeting this GONA intention; it is achieved with advancements.
Meets Intention	...you are currently doing this.
Approaching Intention	...you are taking steps to achieve this intention.
Intention Not Met	...no effort is being made yet to reach this intention.
Not Applicable	...if an element does not apply to your community and document why it does not apply.

There was also an inclusion of a box to write in a description of how the fidelity items were culturally adapted or enhanced to indicate the importance of adaptation as a best practice for each community. The GONA Fidelity Tool was intended and designed to be a flexible tool to be adapted to meet local language, culture, and context. Engaging local cultural/spiritual leaders and youth in planning, implementation, and evaluation is critical for ensuring that the GONA is implemented in a way that reflects as much as possible the local language and cultures. It is important that the leadership, staff, and even evaluators trust in community members as experts in their own languages and cultures.

GONA Local Process Evaluations

A total of 20 process evaluations were conducted at local GONAs from 2012 to 2021. The methods included 1) ongoing observation and tracking of the curriculum intervention using the GONA Fidelity Tool across all 4 days, 2) documenting observations made by facilitators, Clan

Elders, youth Peacekeepers, providers, evaluators, and other helpers and support staff during live observations and daily “Debriefings,” and 3) for some sites, documenting debriefing discussions that occurred 2-4 weeks post GONA with event helpers and the staff of the participating organizations. The process evaluations were conducted by the lead evaluator, agency staff, and/or local community members, all of whom had been trained in research ethics and methods. These local process evaluations resulted in evaluation reports that summarized findings, best-practices, and lessons learned.

Annual GONA Training of Facilitators and Peer Virtual Calls

Each time the tool was revised, it was included in an annual GONA Training of Facilitators (TOF) supported by a SAMHSA Garrett Lee Smith funded initiative, and with technical support from the SAMHSA Tribal Training and Technical Assistance Center. The GONA TOF served as a way for seven partnering urban Indian health organizations’ leaders, staff, and community members to join together for training and practice in GONA facilitation. At these TOFs, the GONA Fidelity Tool was used for training and role-playing feedback. The GONA Fidelity Tool was then tested at the next year’s GONAs with the seven participating urban Indian health organizations. Ongoing virtual calls were used to support and track peer-to-peer learning in implementation, and an annual GONA TOF report supported cross-cutting best practices and lessons learned.

The following model adapts Carroll and colleagues (2007) conceptual framework for measuring fidelity as depicted in Figure 2.

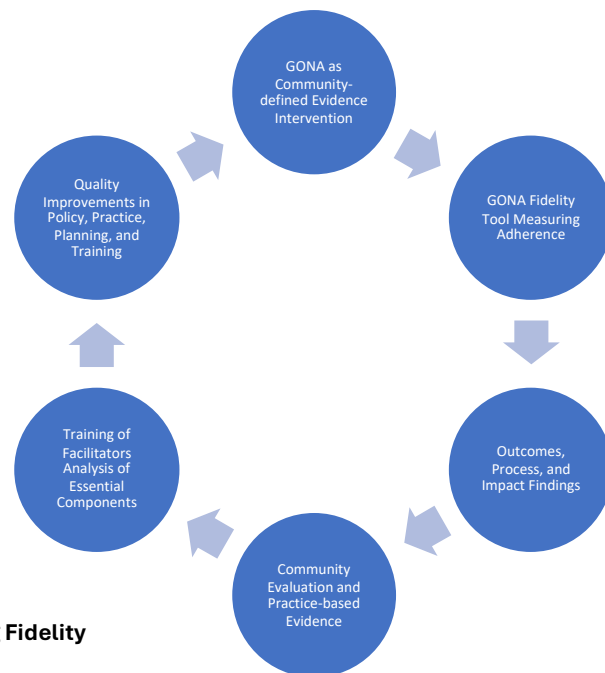


Figure 2. GONA Conceptual Framework for Measuring Fidelity

RESULTS

The GONA Fidelity Tool has been defined by community team members as a “labor of love” through the documentation of 10 years of experience that has led to a deeper understanding of GONA and its impact. The GONA Fidelity Tool brings greater clarity to the GONA process. However, the intent for achieving fidelity and what fidelity looks like for the community is best coming from the community’s perspective. Therefore, the “measuring stick,” or locus of evaluation, is the community evaluating themselves. The “Spirit of GONA” is one and the same with the “Spirit of Community.” Therefore, adaptations should happen to make the GONA relevant to meet the community’s intent.

What we know today about fidelity is what we learned across the GONA Collaborative in California. What we learned might be true for others, but maybe not. We do not know if the GONA Fidelity Tool would generalize to all situations and communities or if every fidelity item would be a right fit for that community. The sharing of the GONA Fidelity Tool is like sharing a blueprint for a house that we built together.

—GONA Facilitator, Fresno, California

Initial discussions in the development of the original GONA Fidelity Tool identified concerns about “being evaluated” by outsiders who did not understand the culture and context of the community and concerns that it would make GONA inflexible. Indeed, one process evaluation documented this case when an outsider to the community attempted to apply the tool with some rigidity. This created conflict, and community members vocalized concerns about the frame of reference for the metric and the importance of adaptations based on culture and context. However, when GONA is used in a flexible way in which local adaptations are consistently made to tailor the intervention and the metric is from the community’s point of view (i.e., youth receiving GONA, their families, staff members, and helpers who are also members of the community), the GONA Fidelity Tool has been embraced as an effective resource.

Another new challenge in the process of implementing the GONA Fidelity Tool was the inclusion of an evaluator at local GONA events. It is important that evaluators are also participants in the process to the extent possible. There are no observers in GONA, so an evaluator must be a participant/observer. It was documented that when the evaluator was introduced as a helper to the

facilitators in tracking the GONA process, youth and adults present were more quickly accepting and at ease with the participant observer. It is also important that the notes being taken on the fidelity tool do not include names of people or other identifiers as the tool should be open for review by any participant at the event. This demonstrates more transparency as a tool for the community. Ideally, trained evaluators from the community are supporting the observation and tracking using the GONA Fidelity Tool; however, it has also been used effectively by some Indigenous external evaluators with GONA experience who actively participate/join in and demonstrate ability to work across cultures.

Additional strategies were used to support the building of a relationship between the evaluator and the GONA facilitators in the implementation of the tool. A phrase was often used that the GONA Fidelity Tool is an “I’ve got your back tool” not an “I’ve got you tool!” The tool was to support the GONA facilitators in touching on the important elements of GONA as the curriculum is deep and has many layers of interventions within. In fact, most communities select 2-3 trained facilitators to work together to plan and implement GONA, as it can be difficult for one person to facilitate alone. The evaluator tracking the process and content of the GONA served as a feedback loop to GONA facilitators in real time. For example, during “head huddles” with GONA facilitators and/or daily debriefs, it is best when the evaluator is also present to review what was observed already and what had not been observed yet. Risk Tokens, used as a behavioral strategy to increase healthy participation of participants, are often a fidelity item that gets overlooked, yet this simple action has a big impact in positively reinforcing healthy participation, especially at youth GONAs where some may be nervous about speaking up. With this feedback loop the facilitators could make quick decisions, like asking a GONA helper to observe, praise, and disseminate Risk Tokens at the end of large group sessions. With a strong feedback loop between the evaluator as participant observer and the facilitators, the GONA Fidelity Tool works to increase fidelity to the curriculum in a way that meets the culture and context of the community.

Over the course of the project, GONA facilitators began asking for a one-page sheet that had a list of the names of each fidelity item (i.e., Spirit Place, Risk Tokens, Affirmations, Gift Giving, etc.) for them to put in their pocket, as they felt it was valuable for them to be able to review the items at a glance throughout the facilitation. The GONA Fidelity Tool and the GONA Pocket Checklist that was ultimately developed was also used by Master GONA Facilitators

working with the SAMHSA Tribal Training and Technical Assistance Center and is now being used in tribes and urban programs nationwide.

Through the course of the project, the GONA facilitators began using the GONA Fidelity Tool in the **Planning Phase**. Community teams start planning many months in advance of the GONA event. Some communities plan GONA all year. The fidelity tool is used to plan the GONA Agenda to make sure there is space, resources, and a procedure to include each of the fidelity items. In many ways, the GONA Fidelity Tool became a pre-implementation checklist. Each element needs human or material resources for its implementation, and the planning team can begin lining up what is needed and determine who will be the lead using what process to what outcome. If a resource turns out to not be available, the team has time to work out another plan. This also allowed for making changes based on the context. Referring to the GONA Fidelity Tool often also helps the team keep the focus on the purpose and philosophy of holding a GONA event for the participant group selected, and to understand how one's role fits in with those of others. If the team has new members, discussion on how attendees and facilitators experienced a previous GONA can enhance new member engagement and can be a preview of how the activities will adapted for the next GONA.

The GONA Fidelity Tool is also used in the **Implementation Phase** by the implementation team. The implementation team often includes individuals from the planning team, facilitators from the community or facilitators from the outside, community members who assist with an element, local clinicians, trained youth Peacekeepers, and/or an evaluator. A hard copy of the GONA Fidelity Tool is given to the team members to keep their attention on the elements for each day, in addition to the shortened GONA Pocket Checklist. Throughout the day, brief team huddles can be held to adjust how the elements are completed based on the responses of the event participants and any circumstances that arise that might challenge the flow of the day. At the end of the day, the implementation team caucus to give assessment and comment on each element. Rating at the end of each day is advised when the observations are fresh. Decisions about adjustments for the next day are made at that debriefing. One can see how the frequent conversation and decision-making enhances fidelity to the desired process as it supports real time quality improvement as driven by a team approach.

The **Post-Implementation Phase** begins with the last debriefing session and can be the time to document proposed changes to the GONA process and to identify post-GONA tasks. This

is the time for community evaluation of the practices that demonstrated the most evidence as effective.

The tool has a description of what to look for to determine that an element is present and how developed it is at that time. When community planning teams begin their work, some of the elements cannot be present or implemented as developed by the intention listed. The reasons for this vary and could be circumstantial, such as an illness experienced by a community member who was asked to provide a talk about healing. Another reason can be the fact that the culture of the community is revitalized in an uneven way. Maybe no one yet knows their Creation story, so they borrow one from another tribe, which was gifted to the GONA curriculum for this purpose. There also may be contextual issues that require adaptations, for example in areas where elders have to work to afford to live, identifying youth as elders to those younger than them can build youth leadership and mentorship. The hope is that the community can identify elements to strengthen for the next GONA or to develop in an ad hoc way as a step toward community healing. Each element is rated, and two questions are asked: 1) Please explain your rationale for this rating, and 2) How was this element culturally adapted or enhanced? Table 3 demonstrates how GONA fidelity items may be adapted for each community culture and context.

Table 3
Examples of rating an element by community

Item	Rating	How was this item culturally adapted/enhanced?	Rational for Rating
<u>Spirit/ Quiet Table/ House/ Place/ Resources:</u> An area was provided for the youth to meditate and/or pray with spiritual resources (medicines and sacred items) that represent the diversity of the community spiritualities and is incorporated into ceremony at GONA.	[X] Exceeds Intention [] Meets Intention [] Approaching Intention [] Intention Not Met [] N/A	Tribal elders identified that spirit ‘place’ was within each person, 7th direction, and therefore each youth was given a medicine pouch to wear around their neck as a constant reminder, and this was referred to and used during the sessions.	The GONA team believed that they exceeded in connecting youth to spirituality in such a personal way by using the tribal creation story and ways of knowing that we do not have to look for spirituality outside of ourselves; it is in each one of us. Youth expressed and demonstrated much pride in their medicine pouches that were gifted to them in ceremony. A traditional practitioner participated in the entire event using local medicines ,and a sweat lodge was made available for those who wanted that medicine for healing and wellness.

Table 3 continued below

Table 3 continued
Examples of rating an element by community

Item	Rating	How was this item culturally adapted/enhanced?	Rational for Rating
<p><u>Elders:</u> The generations of elders were introduced and engaged; trained Clan Elders stayed with the Clans throughout the GONA.</p>	<p>[] Exceeds Intention [X] Meets Intention [] Approaching Intention [] Intention Not Met [] N/A</p>	<p>Due to economic conditions, many elders in the community had to work, and few could participate. Elders present were introduced, and aged-up youth were also identified as 'elders to the youth.' These young adults provided support to each of the Clans throughout the event.</p>	<p>There was much discussion among the team on this rating. The team worked diligently to invite elders, but with serious inflation in housing costs, there were not enough elders to cover each of the Clans. If the team had stopped there and just asked the 1 or 2 elders rotating, it would limit elder support for each of the 7 Clans. By identifying young adults as elders to the youth, it allowed this teaching to be in place and created additional support to Clans for problem solving, since these aged-up youth had been trained in Peacekeeping.</p>

In order for GONA to become a sustainable healing movement, as it has been for many of the California communities, it is vital that GONA is supported at the top level of leadership and is woven into organizational values, policies, and procedures. Everyone within the organization should have at least some “dose” of GONA in onboarding and ongoing education, both upstream to leadership and downstream to staff and communities. Effective policies are also needed to ensure GONA can operate and continue quality improvement over time. The GONA Fidelity Tool has helped advance such policies, such as formalization of a conflict resolution team and process that includes spiritual/cultural leaders, mental health providers, and youth Peacekeepers; the availability of mental health providers on site 24/7 during the event; and the shifting to restorative justice models to support community healing.

Strengths and Limitations

The implementation of the GONA Training of Facilitators each year during the project and the ongoing support from expert GONA facilitators was a major strength in the implementation of high fidelity GONAs with youth and families for the purposes of healing. Many of the participating sites are planning, preparing, and training for GONA year-round, with monthly meetings in the first 6 months after the last GONA ends, with increasing frequency to weekly as the GONA event

date gets closer. It is important that planning, preparation, and training are ongoing to ensure that those who will fill important GONA roles are prepared. Important roles include spiritual leaders, GONA facilitators, Peacekeepers, Clan Elders, evaluators, mental health providers, and other Natural Helpers, like Mountain Movers, who work in Fresno to support transitions and to make sure the facilitators are prepared for what is needed to implement the GONA event. In GONA everyone present with a helping role needs training and re-training. The GONA Fidelity Tool also helps to incorporate all of these roles working together. However, it is unsure how the GONA Fidelity Tool generalizes to other communities doing other types of GONAs, like GONAs primarily for strategic planning purposes, although the authors recognize youth GONAs have contributed greatly to local strategic planning.

There has been a core group of committed community members, organizational leaders, and staff participating in this 10-year journey; however, much turnover occurred across the participating organizations. This turnover had an impact on invested community members who commonly reported increased frustration with turnover but also increased responsibility to keep the GONA going in their communities. Turnover also impacted continuity, required much onboarding and retraining, and reduced opportunities to 'train up' under a mentorship model at the GONA.

The GONA Fidelity Tool represents the “ideal” based on the lessons and experiences of those communities contributing over 10 years. The authors want to express that the GONA Fidelity Tool is not meant to overwhelm or make communities feel like they are inadequate when first starting out. For the first GONA in a community, it is common to use an expert GONA facilitator from another community, and in this project, the participating organizations were accessing Indigenous GONA experts connected to the SAMHSA Tribal Training and Technical Assistance Center. In years 2-5 of implementing annual GONAs, it is common for expert GONA facilitators to be training, coaching, and mentoring on site local community healing champions as they take on more and more GONA facilitation responsibility. In years 5-10, these local GONA facilitators then begin training others coming up (and also in other communities) to facilitate keeping the training, coaching, and mentorship going.

There are also concerns that the GONA Fidelity Tool might be used to shame communities starting out with lower fidelity; that some organizational authority, like a state Medicaid program, might try to use the tool to pass judgements on communities for funding; or that some individual

or organization may try to capitalize from the tool. These are not the intent or appropriate uses of the GONA Fidelity Tool. Each community has its own developmental path with cultural adaptations that may change based on resources and context. For example, during the pandemic, participating communities shifted to virtual GONAs, and it was difficult to implement some of the fidelity tool items to a great extent (for example, connection to a fire). Yet, organizations and their communities did their creative best in the context, and these virtual GONAs documented similar outcomes of increasing hope, connectedness, cultural identity, and linkages to community mentors/helpers and mental health providers.

DISCUSSION

The GONA has been an important driving change tool for the participating communities, and the GONA Fidelity Tool has supported the emphasis that GONA is a healing process to help community groups or entire populations to heal from historical and intergenerational trauma. The greatest impacts centered around the mobilization of communities for healing, the growing of local leaders and workforce, and broader advocacy in the community as GONA communities have taken on local issues like Missing and Murdered Indigenous Women (MMIW), tribal youth in foster care, and Indian mascots. The GONA Fidelity Tool reflects the collection of lessons learned and best practices in GONA implementation across these Collaborative sites. However, it is important that this tool be used in an ethical way to support the healing and growth of very diverse Indigenous communities. The tool should be used for planning and implementation of GONA for beginning communities. As skills and capacity grow, the tool can be used for community-driven evaluation and quality improvement planning.

It is expected that the tool will grow and change over time, both for the GONA Collaborative, as well as for other communities who might begin to use the tool when communities continue to advance locally driven implementation research of practice-based and community-defined evidence. However, it is important that the intent of healing the community from historical and intergenerational trauma always be at the forefront when making decisions about changes to the tool which could impact the therapeutic effectiveness.

The California GONA Collaborative has already been sharing the GONA Fidelity Tool with tribes and other Indigenous organizations to support implementation in the United States and in Canada, Australia, and now, Guatemala, where a Spanish version is in development. It is

expected that the GONA framework can be used as a common healing language across Indigenous communities and across borders to advance healing for Mother Earth and us as one in the same. The GONA Fidelity Tool has become an important resource for measuring practice-based evidence and community-defined evidence in the implementation of GONA.

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The authors declare that they have no conflicts of interest.

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