

**Project Wangkuta:  
the iKnowMine Youth Advisory Board**

**Overview:**

This document contains information and an application for the 2023-2024 iKnowMine Youth Advisory Board.

The Alaska Native Tribal Health Consortium is seeking youth and young adult participants (ages 12-17 years old) to advise ANTHC on issues related to holistic health.

For the 2023-2024 project year, youth members will review a healthy relationships and holistic health curricula and a media campaign to raise awareness on related topics. Compensation is available for youth time spent attending these meetings and completing the assigned activities.

Completed applications are accepted on a rolling basis, and may be submitted to the ANTHC HIV/STD Prevention Program. Applications may be accepted online or through in-person delivery, mail, or email. They can be delivered to:

Alaska Native Tribal Health Consortium (ANTHC)  
ATTN: Millie Voight  
4115 Ambassador Drive, STE 201  
Anchorage, AK 99508  
Email: [iknowmine@anthc.org](mailto:iknowmine@anthc.org) // Phone: 907-729-3790

**Land Acknowledgement:**

The iKnowMine Team is based out of the HIV/STD Prevention Program at the Alaska Native Tribal Health Consortium (ANTHC). Base operations of ANTHC are located in Anchorage, AK on the traditional lands of the Dena'ina people. Thank you for your past and present stewardship of the waters, plants, lands, animals, and the spiritual practices of this place.

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## **Purpose**

The purpose of the iKnowMine Youth Advisory Board (YAB) is for the Alaska Native Tribal Health Consortium (ANTHC) HIV/STD Prevention Program to provide a safe space for youth to be able to confidently offer their perspectives on public health programs that are designed to promote health and wellness in the lives of Native youth and young adults across Alaska. Through the YAB, the ANTHC HIV/STD Prevention Program hopes to gain youth perspectives on how to best address holistic health-related programming needs, challenges and opportunities.

## **Mission**

The Mission of the YAB is to advise the ANTHC HIV/STD Prevention Program by offering their perspectives on interventions and programs, designed to promote health and wellness in the lives of Native youth and young adults across Alaska.

## **Goals**

Through the YAB, we hope to increase awareness of the holistic health issues and programs designed to address them among the Native youth and young adult population in Alaska.

The goals of the YAB are to complete the following by the end of the service year:

1. Review and provide feedback of the Native It's Your Game 2.0 (NIYG 2.0) curriculum
2. Review and provide feedback on a media campaign that works towards the prevention of early childbearing in Alaska.

## **Participation Overview**

The Members of the YAB will participate in all teleconference (Zoom) discussions and engage as a team in order to achieve the goals of the program. All YAB sessions, will include: a review of the assigned curriculum, a discussion around gathering feedback from the lessons assigned prior, and gathering feedback for the media campaign.

- Seats: 6
- Term: Every month from October 2023 - May 2024
- Platform: Virtual (Zoom)
- Required Activities:
  - Attend & engage in all sessions, unless otherwise excused
  - Complete all thirteen lessons of the NIYG 2.0 curriculum
  - Complete the three independent activities (IA) from the NIYG 2.0 curriculum
  - Present one time on the challenges, lessons learned, and experience gained through the YAB at a conference or other meeting, scheduled for the end of the service year

Optional activities include:

- Monthly 'Tea Time' Chats: Ask YAB staff questions & get support with lessons or independent activities. Bring your favorite snack and drink for this virtual get together!
- Other opportunities will be announced by YAB staff as they come up, and may include activities like interviewing new applicants or presenting at other conferences.

## **Expected Outcomes for Members**

Members who are highly engaged will:

- Develop leadership skills and work experience
- Increase self-esteem and confidence related to voicing needs when working with others
  - Develop problem-solving skills
  - Learn how to work as part of a team in a diverse workgroup
  - Connect with other youth in a safe space
- Learn about what public health is, in addition to the different programs, resources and services related to youth health
- Gain confidence in expressing youth needs and expectations for the organization and program

## **Eligibility Overview**

All Members are required to submit a complete YAB Application. Members younger than 18 must have parent permission & acknowledgement on all application documents to participate.

For consideration to the YAB, Members are required to:

- Be aged between 12-17 years old
- Have Zoom teleconference capabilities. This includes having reliable and regular access to the internet, a computer and/or tablet with camera & microphone access
- Be able to attend most of the required sessions and complete all required activities

The following experiences are preferred, but not required:

- Self-identification as Alaska Native and/or American Indian
- Experience living in rural Alaska
- 2SLGBTQ+ self-identification

## Schedule

Date and Time	Session and Activities Schedule Review
Scheduled between YAB member and YAB staff	<p><b>Topic:</b> Eligibility Screening and Orientation</p> <p><b>Group Activity:</b> Review Application to ensure eligibility, Introduction to YAB, iKnowMine, and NIYG 2.0</p> <p><b>Lessons/IA Assigned:</b> Practice with program, complete NIYG lessons 1 and 2 prior to the next meeting</p>
Thursday, October 12 <sup>th</sup> 3-4 PM	<p><b>Group Activity:</b> NIYG lesson 1 and 2 discussion</p> <p><b>Lessons/IA Assigned:</b> Complete lessons 3 and 4 prior to next meeting, complete Independent Activity for lesson 3</p>
Thursday, October 26 <sup>th</sup> 3-4 PM	<p>Tea Time: Ask YAB staff questions &amp; get support with lessons or independent activities.</p> <p>Note: Session will close if there is no attendance after 15 minutes</p>
Thursday, November 9 <sup>th</sup> 3-4 PM	<p><b>Group Activity:</b> NIYG lesson 3 and 4 Discussion</p> <p><b>Lessons/IA Assigned:</b> Complete NIYG lessons 4 and 5 prior to next meeting</p>
Thursday, November 23 <sup>rd</sup> 3-4 PM	<p>Tea Time: Ask YAB staff questions &amp; get support with lessons or independent activities.</p> <p>Note: Session will close if there is no attendance after 15 minutes</p>
Thursday, January 11 <sup>th</sup> 3-4 PM	<p><b>Group Activity:</b> NIYG lesson 4 and 5 discussion, media campaign discussion</p> <p><b>Lessons/IA Assigned:</b> Complete NIYG lessons 6 and 7 prior to next meeting, complete lesson 6 Independent Activity</p>
Thursday, January 25 <sup>th</sup> 3-4 PM	<p>Tea Time: Ask YAB staff questions &amp; get support with lessons or independent activities.</p> <p>Note: Session will close if there is no attendance after 15 minutes</p>
Thursday, February 8 <sup>th</sup> 3-4 PM	<p><b>Group Activity:</b> NIYG lesson 6 and 7 discussions, media campaign discussion</p> <p><b>Lessons/IA Assigned:</b> Complete NIYG lessons 8 and 9 prior to next meeting, complete lesson 9 Independent Activity</p>
Thursday, February 22 <sup>nd</sup> 3-4 PM	<p>Tea Time: Ask YAB staff questions &amp; get support with lessons or independent activities.</p> <p>Note: Session will close if there is no attendance after 15 minutes</p>
Thursday, March 14 <sup>th</sup> 3-4 PM	<p><b>Group Activity:</b> NIYG lesson 8 and 9 discussion, media campaign feedback</p> <p><b>Lessons/IA Assigned:</b> Complete lessons 10 and 11 prior to next meeting</p>
Thursday, March 28 <sup>th</sup> 3-4 PM	<p>Tea Time: Ask YAB staff questions &amp; get support with lessons or independent activities.</p> <p>Note: Session will close if there is no attendance after 15 minutes</p>
Thursday, April 11 <sup>th</sup> 3-4 PM	<p><b>Group Activity:</b> NIYG lesson 10 and 11 discussion, media campaign feedback</p> <p><b>Lessons/IA Assigned:</b> Complete lessons 12 and 13</p>
Thursday, April 25 <sup>th</sup> 3-4 PM	<p>Tea Time: Ask YAB staff questions &amp; get support with lessons or independent activities.</p> <p>Note: Session will close if there is no attendance after 15 minutes</p>
Thursday, May 9 <sup>th</sup> 3-4 PM	<p><b>Topic:</b> End-of-Year Celebration and Final Presentation!</p> <p><b>Group Activity:</b> NIYG 2.0 Lesson Review, Final Presentation</p> <p><b>Lessons/IA Assigned:</b> Complete feedback form on YAB experience</p>

## Activities Overview

Required Activities	Measure of successfully completing activities	Number of opportunities	Time Expectation	Total
Eligibility Overview/Orientation	Attendance at beginning and end, introduction	1	1 hour	1 hour
Monthly Sessions	Attendance at beginning and end of sessions, active participation in teamwork activities	7	1 hour each	7 hours
Complete Individual Assignments	Completed assigned independent activities, completed presentation section	13	~30 minutes each	6.5 hours
Team Presentation	Attendance at beginning and end of presentation, completed presentation	1	1 hour total, present as a team	1 hour
Total Minimum Required Hours				15.5 hours

Additional opportunities for engagement include: monthly “Tea Time” gatherings, application reviews and interviews, and other volunteer opportunities that will be announced by YAB staff. Additional opportunities are not required.

### Attendance Details

Each member is allowed up to two excused absences from YAB teleconference (Zoom) meetings. The following guidelines will apply to each member of the YAB:

- Members must email YAB staff in advance to inform us that you will be unable to attend.
- Members that are unable to attend a meeting will still be responsible for providing feedback and completing the lessons and independent activities assigned prior to the following meeting.

It is highly encouraged for members to attend the following “Tea Time” session after a missed meeting.

Absences may be requested via email to YAB staff. Excused absences will be approved on a case-by-case basis by YAB staff. Confirmation will be sent via email to the member directly. Allowable absences may include, but is not limited to: family emergencies, personal physical and/or mental emergencies, participation in subsistence activities, conflicts with school-related activities, etc.

## Activities Details

Members are expected to complete the following activities over the course of their YAB participation:

- Attend and engage in all sessions, unless otherwise excused
- Review all 13 lessons and accompanying independent activities of the NIYG 2.0 curriculum. Lessons include:
  - Lesson 1: Pre-Game Show
  - Lesson 2: Keeping it Real... Among Friends
  - Lesson 3: Playing by Your Rules... SELECT DETECT PROTECT\*
  - Lesson 4: Protecting Your Rules
  - Lesson 5: Know Your Body
  - Lesson 6: Keeping it Real... Healthy Dating Relationships
  - Lesson 7: Protecting Your Rules... Regarding Sex
  - Lesson 8: Negotiating to Protect
  - Lesson 9: Keeping it Real... Consequences of Pregnancy
  - Lesson 10: Keeping it Real... Consequences of HIV & STDs
  - Lesson 11: Keeping it Real... Risk Reduction Strategies
  - Lesson 12: Playing by Your Rules... A Review
  - Lesson 13: Post-Game Show
  - Lesson 14: Native IYG Program Feedback Survey (optional)
- Independent Activities:
  - Lesson 3: Playing by Your Rules... SELECT DETECT PROTECT
  - Lesson 6: Keeping it Real... Healthy Dating Relationships
  - Lesson 9: Keeping it Real... Consequences of Pregnancy
- Independent Activity: Complete the design of a presentation slide for a topic that members learned about and what their experience was like as part of the YAB at the end of the cohort.

All assigned independent activities are due before the following meeting.

## Compensation Details

Members will be compensated for their time with \$50 gift cards. The compensation will be issued directly by YAB staff to the member on a monthly basis, provided that the member is eligible to claim compensation. To be eligible, members must successfully:

- Attend the monthly meetings with active participation in the group discussion, or have an excused absence AND
- Complete all independent activities or lessons assigned prior to the next meeting.

Members receiving compensation may not use the gift cards to redeem for cash, purchase tobacco, alcohol or firearms, or be transferred to other parties. Members in violation of these guidelines may forfeit their eligibility to receive said compensation and/or involvement of the YAB, as determined by YAB staff.



**iKnowMine Youth Advisory Board Application**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Tribal Affiliation: \_\_\_\_\_

Mailing Address (street or P.O. Number): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Preferred phone number: \_\_\_\_\_

Email (linked to Zoom account): \_\_\_\_\_

Parent Name (if under 18): \_\_\_\_\_

Parent Phone Number (if under 18): \_\_\_\_\_

Parent Email: \_\_\_\_\_

I identify as Alaska Native and/or American Indian: \_\_Y\_\_N

I identify as part of the 2SLGBTQ+ Community: \_\_Y\_\_N \_\_I don't know \_\_no answer

I have lived in Rural AK before or I live in Rural AK now: \_\_Y\_\_N

I am able to attend all of the virtual meetings, including the orientation and monthly sessions as outlined in the schedule: \_\_Y\_\_N \_\_Maybe with support \_\_If we adjust the schedule

Please provide 1 or 2 sentences on why you are interested in participating in the iKnowMine Youth Advisory Board:

\_\_\_\_\_  
\_\_\_\_\_

**Youth Advisory Board Applicant:** By signing below, I agree that I can fully participate in the Youth Advisory Board for one year. I have read the accompanying informational documents and understand the expectations for all Members for the Youth Advisory Board. I can confirm that I can access all necessary equipment in order to fully engage in the program and am eligible for the program.

\_\_\_\_\_  
Signature Printed Name Date

**Parent/Guardian (if under 18):** My signature affirms that I am aware and supportive of my child's application to the iKnowMine.org Youth Advisory Board. I have read the accompanying information documents and understand the expectations and eligibility requirements of the program, and confirm that my child can access all necessary equipment in order to fully engage in the program.

\_\_\_\_\_  
Signature Printed Name Date

This application may also be completed online at: [iknowmine.org/youth](http://iknowmine.org/youth)

Hard-copy applications may be submitted via email, mail or in-person to the below contact:

Alaska Native Tribal Health Consortium (ANTHC)

ATTN: Millie Voight

4115 Ambassador Drive, STE 201

Anchorage, AK 99508

Email: [iknowmine@anthc.org](mailto:iknowmine@anthc.org) // Phone: 907-729-3790