FOREWORD

I had the pleasure of serving on the external Scientific Advisory Committee of the National Institute on Minority Health and Health Disparities-sponsored Collaborative Research Center for American Indian Health, and of presenting twice at its annual conferences. In both capacities, I came away impressed by the work of the scholars, native and non-Native, whose research was featured in poster sessions and oral presentations. Their work is deeply rooted in the communities of which they are a part and showcase the promise for future efforts that chart new courses for such collaboration, informing the scientific agenda in terms of process as well as substance. I was also intrigued by the emerging metaphor of the River of Life that describes in colloquial, but compelling terms, the different perspectives, varying priorities, and complementary approaches of the partners—advocates, researchers, educators, providers, and tribal representatives—in addressing the challenges of this work.

 Accordingly, I invited Drs. Elliott, Kenyon, and Heinzmann, the principal investigators, to consider a special issue of this journal as a vehicle for sharing the lessons learned. I could not be more pleased with the efforts of all who contributed to the ensuing conversation, which is as instructive as I had originally anticipated. Their articles reflect the possibility and power of embracing matters of tribal sovereignty, transdisciplinary collaboration, and sustainability through building local research capacity. This work further illustrates the advancements encouraged by a recently published issue of Prevention Science entitled Promoting Health Equity through Rigorous, Culturally Informed Intervention Science: Innovations with Indigenous Populations in the United States.1 The growing body of literature, to which the present publication adds, attests to the ability of today’s science, in the right hands, to respond to the needs, realities, and promise of indigenous communities. Thank you to the contributors for showing the path forward.

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