WINDING PATH dêtetsi vo'i oninjakan

A Short Documentary Directed by Alexandra Lazarowich & Ross Kauffman

SHORT SYNOPSIS

Eastern Shoshone medical student Jenna Murray spent summers on the Wind River Indian Reservation helping her grandfather any way she could. When he suddenly dies, she must find a way to heal before realizing her dream of a life in medicine.

SYNOPSIS

"Being an urban Indian is really complicated because you have this geographic disconnection from your land and your community." - Jenna Murray

Jenna Murray is an Eastern Shoshone MD/PhD student at the University of Utah. Her most formative childhood experiences were spent on her family's Wind River Indian Reservation ranch, where she loved nothing more than helping her grandfather. When her active, 70-year-old "Papa" suddenly dies of a preventable health issue, Jenna grapples with her dream of a career in tribal health while facing her own mental health crisis.

CREDITS

Directed by Cree filmmaker and 2019 Sundance Award Winner Alexandra Lazarowich (Fast Horse), and Oscar-winning Director Ross Kauffman (Born into Brothels, E-TEAM).

Produced by Oscar-nominated filmmaker Robin Honan (Freeheld, Mondays at Racine).

Co-Produced by Sundance Native Lab Alum Charine Pilar Gonzales and Minoo Allen.

Original score by Choctaw Nation Musician Samantha Crain (Fancy Dance).

FILMMAKER BIOS

ALEXANDRA LAZAROWICH (Co-Director) is an award-winning Cree filmmaker originally from northern Alberta, Canada. Her short documentary ***FAST HORSE*** premiered and won the Special Jury Award for Directing at the 2019 Sundance Film Festival. Alexandra's body of work as a director, series producer, and writer include CBC's ***STUFF THE BRITISH STOLE***, SYFY's ***RESIDENT ALIEN S3,*** CBC's ***STILL STANDING***, ***LAKE***, ***A PORTRAIT IN RED***, ***OUT OF NOTHING***, ***CREE CODE TALKER***, ***EMPTY METAL***, and ***ALVARO***. She is one of the co-founders of the Indigenous experimental not-for-profit COUSIN Collective.

ROSS KAUFFMAN (Co-Director) is an Academy Award-winning director. His credits include the feature documentaries ***BORN INTO BROTHELS, E-TEAM,*** and ***TIGERLAND***, all of which premiered at the Sundance Film Festival. His short documentary ***WHAT WOULD SOPHIA LOREN DO?***, a Netflix original, was shortlisted for the 2021 Academy Awards. His latest feature documentary, ***OF MEDICINE AND MIRACLES***, will be distributed this spring. Ross founded Red Light Films, a media company based in New York City, and teaches documentary filmmaking in the MFA Program at the School of Visual Arts.

ROBIN HONAN (Producer) is an Academy Award-nominated filmmaker. She co-produced the Oscar-winning documentary ***FREEHELD***, which premiered at the Sundance Film Festival and was the basis of a feature film starring Elliot Page and Julianne Moore. Her Oscar-nominated HBO film ***MONDAYS AT RACINE*** inspired the creation of a non-profit of the same name that supports cancer patients and their families. Robin also produced

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the Netflix documentary ***WHAT WOULD SOPHIA LOREN DO?*** and was shortlisted for the 2021 Academy Awards.

ABOUT THE EASTERN SHOSHONE TRIBE

It is estimated that the Eastern Shoshone Tribe has been living in and hunting the Wind River Range for roughly 12,000 years.

The Eastern Shoshone Tribe was the only tribe to select their own land when the reservation system was established.

They invited the Northern Arapahoe tribe, their sworn enemies, to join them in Wyoming. The Arapahoe were slated to relocate to lands in Oklahoma, but the Shoshone believed that they would not survive the winter travel and invited them to stay with them for the winter. After which, the Northern Arapahoe ended up staying with the Eastern Shoshone indefinitely.

The reservation originally stretched from Wyoming down to Salt Lake City, Utah.

Chief Washakie, leader of the Eastern Shoshone during the mid-19th century, worked with the government and the colonizers to preserve the Shoshone people and find peace. He expressed his sadness at the fighting between his people and the white settlers in the Utah Territory. He also was given a full military burial after his death.

https://easternshoshone.org/
https://www.writc.org/

NATIVE AMERICAN SUMMER RESEARCH INTERNSHIP

The Native American Research Internship (NARI) at the Spencer Fox Eccles School of Medicine at the University of Utah supports the education, training, and leadership development of Native Americans who are interested in careers in health care. Native American communities experience significant health disparities. NARI aims to help address those health disparities, believing that the people who are affected most are best positioned to find solutions.

NARI is a dynamic summer research opportunity for Native American undergraduate junior and senior students who are interested in health sciences research. The internship is located at the University of Utah in Salt Lake City, Utah. It is a 10-week, paid summer internship, funded by the National Institutes of Health.

https://medicine.utah.edu/pediatrics/research/education/nari
https://x.com/NARI_UofU?s=20
https://europepmc.org/article/med/33003036
https://uofuhealth.utah.edu/notes/2022/08/breaking-barriers-health-and-biomed-careers
https://www.instagram.com/nari_uofu/
https://www.facebook.com/NARIUOFU

UNIVERSITY OF UTAH HEALTH

University of Utah Health is proud to be the Sundance Film Festival's Official Health & Wellness Partner. During the festival, we extend our community to include the 100,000+ artists, creatives, industry insiders, and film lovers from around the globe, as well as the thousands of staff and volunteers who work so hard to make the magic happen.

https://uofuhealth.utah.edu/sundance
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https://uofuhealth.utah.edu/notes/2022/02/meet-me-where-i-am
https://utah-health.shorthandstories.com/trust-as-currency
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https://attheu.utah.edu/facultystaff/one-in-a-million/
https://giving.utah.edu/imagine/u-of-u-health-premieres-one-in-a-million-during-sundance/
https://uofuhealth.utah.edu/center-genomic-medicine/news/2019/01/u-of-u-health-premiers-one-million-film

NEW NARRATIVES IN HEALTH SCREENING + PANEL

We harness the power of science, art, and storytelling to center the health needs of historically marginalized patients.

Thanks to support from the Kahlert Foundation, *New Narratives in Health* is designed to raise awareness, philanthropy, and impact policies that improve the quality of life for our communities. Based on the concept that scientists and artists need to work together to more broadly communicate advances in knowledge, New Narratives does just that.

"One in a Million"

By the time Tyler turned 10, he lost his ability to walk, see, and hear, but the cause remained a mystery. His family eventually turned to University of Utah Health, where scientists searched Tyler's DNA for clues to his condition. What they discovered led to a life-changing treatment. This film helped to raise more than $5 million for genomic clinical science and was used to help pass a bill requiring insurance companies to pay for genome sequencing for rare conditions.

"Meet Me Where I Am"

The film follows Adolphus Nickleberry through his journey at University of Utah Health's Intensive Outpatient Clinic as he rewrites his story with help from compassionate providers. Overcoming the ripples of health disparities and racism that last generations while surviving the loss of his parents and a lifetime of substance abuse, Adolphus looks to the future, relishing time spent with his family. "That's the best love in the world," he says. "It's like a gift given back to me." This film helped to double the size of the University of Utah Population Health Center.

"The Language of Care"

An emotional six-minute film about Deaf patients working with diabetes researchers to co-design care in American Sign Language, "The Language of Care" premiered at Filmmaker Lodge on Monday, January 23, 2023. Navigating health care is hard enough when English is your first language—imagine the difficulty when American Sign is your first language. How can we bridge the linguistic and cultural gaps needed to better care for patients? This film recently appeared on NPR's Science Friday to discuss ways to better improve health care for patients who are deaf.

THE KAHLERT FOUNDATION

The Kahlert Foundation is a distinguished private family foundation with a philanthropic focus on the following: Medical, Youth, Education, Veterans, and Human Services. Our grants and initiatives seek to make a meaningful and lasting impact in the states of Maryland and Utah

FAST FACTS

Origin story:

NARI was started in the Department of Pediatrics at University of Utah Health. Ed Clark, the previous chair of the Department of Pediatrics, wanted to enroll more Native American people in a national children's study. He was looking into how genetics, lifestyle, and environment impact the health of children. He reached out to local and regional tribal leaders and asked what he could do to enroll more Native Americans in the study. They responded by saying, "We need more Native Americans in medicine. Engage them in research and help support their careers in medicine."

Carrie Byington, MD, directed the first cohort of four invited students for a six-week summer research internship. Dr. Byington passed the NARI program to Maija Holsti, MD, MPH, in 2010.

Dr. Holsti has developed and directed the NARI program that supports the research and career development of nearly 30 students for 10 weeks every summer.

The NARI program is supported by numerous grants from the National Institutes of Health, the Department of Pediatrics at the University of Utah, campus partners, and Dr. Byington.

What can our support help NARI achieve?

Short-term: Help raise funds to grow the program and provide the resources (test prep (MCAT, DAT, NCLEX), conferences, research support, infrastructure support, leadership development, scholarships) to NARI participants and teams. Offer more research positions to Native American students interested in careers in medicine. This film will also help to secure NIH grants.

Long-term: Build an American Indian Center for main and health campuses—one that provides a home to all the initiatives across campus. This space would engage tribal leaders, students, faculty/staff, and programs to engender and develop trust between our local Native communities, University of Utah, and our surrounding community.

FROM JENNA MURRAY

What are the traditional culturally centered practices that helped with your sobriety? How do they compare to the more standardized practices, especially regarding patient outcomes in your community?

The thing that was most helpful to me was accessing care at a dual Indian Health Center/tribally funded health care center. Although I was accessing care at a facility for the Paiute Tribe (Paiute Health and Human Services in Las Vegas, NV) and I am Eastern Shoshone, it was incredibly helpful. All therapy was done in a decolonized methodology, incorporated traditional practices, spirituality, and was centered around the Medicine Wheel. My drug/alcohol use disorder therapist was a Native American man who had a very similar story to me. He had been to seven different treatment centers and nothing had worked for him until he started utilizing culturally centered practices.

I also attended Alcoholics Anonymous meetings at the Urban Indian Center of Las Vegas, NV, which was great to connect with community members. Today, I still attend recovery sessions centered for Native Americans and have channeled energy into learning traditional beadwork to support long-term recovery and wellbeing.

What are some specific treatments you have been researching?

I am specifically interested in how culturally tailored treatment centers differ in outcomes for Native Americans when compared to traditional Western medicine rehabilitation programs. I am currently doing research on substance use disorder in pregnant Native Americans and hope to really expand this and finalize some projects when I enter my PhD in 2024.

What do you see as some of the biggest failings of the current standard practice of medicine as it relates to your studies?

In my opinion, the biggest failing of current medical practices is the lack of focus on the whole person versus treating a disease. I think it's difficult to provide holistic care under the parameters of the current U.S. health care system (little physician time with patients, overloaded schedules, etc.). But it really isn't enough to treat the disease. We need to address social determinants of health, including race/ethnicity/poverty status, in order to make sustainable change and mitigate health disparities. This is one of the reasons why I love indigenous medicine so much—it really focuses on the whole person, their environment, their support system, and their community.

Have any of the traditional culturally centered practices been used more widely outside the Native American community?

I think the current push to incorporate social determinants of health in modern medicine is something indigenous people have been doing for centuries. In many tribal communities, it is known that you cannot be healthy without balancing mental, physical, spiritual, and emotional health (as expressed on the traditional medicine wheel).

More scientifically, a lot of research is being done on traditional medicines of indigenous peoples (sage, sweetgrass, and cedar primarily) and how they have antimicrobial properties that can be used with antibiotics to mitigate the issue of antibiotic resistance.

In relation to indigenous change in diet once forced onto reservations:

Yeah. I think the stereotypes about the alcoholism, the drug use, crime, those things exist. They exist in any community. And I think a lot of people don't understand the historical context of why this is happening in Native communities and on reservations. When we were forced onto the reservations and into the system, and we were removed from our traditional lands, we couldn't hunt, gather, or fish like we used to. Our diet completely changed. There were food commodity programs where the government gave us flour and things that we never ate, very Western diets. And over time, scientifically that's going to lead to changes in health, and that's been diabetes, obesity, etc.

How SLC was once part of Eastern Shoshone territory:

I know the Shoshone were nomadic people. We moved around quite a bit, would move south and move with the weather patterns. We would follow the bison. And so our traditional lands actually went all the way from around Yellowstone National Park up toward Montana, all the way down into Salt Lake City past the valley. We moved around a lot, and I think that's true for a lot of Shoshone bands.

We didn't have this one spot reservation where we stayed. That's already vastly different. When the government started entering treaties with tribes around the 1860s, our last great chief, Chief Washakie, was one of the first to work with the government because he really saw the writing on the wall and knew

that if he wanted to preserve our culture, preserve our people, he needed to enter into these treaties and agreements with the government to try and find peace. So, actually, the original reservation boundaries went all the way down into Utah and Salt Lake. And tale as old as time, the government kept taking a little bit more, a little bit more, and a little bit more. I think it's the seventh-largest reservation by area in the U.S. or somewhere around there. It's still a lot smaller than it was. And even that was a fraction of our traditional land. So, we were really lucky that we had a chief that was so forward-thinking and willing to work with the government though, because we were the only tribe that was able to pick where our reservation was, which is why we got the Wind River Range. And a lot of those sites in the mountains are really sacred to us. I do feel grateful that we do still have that.

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