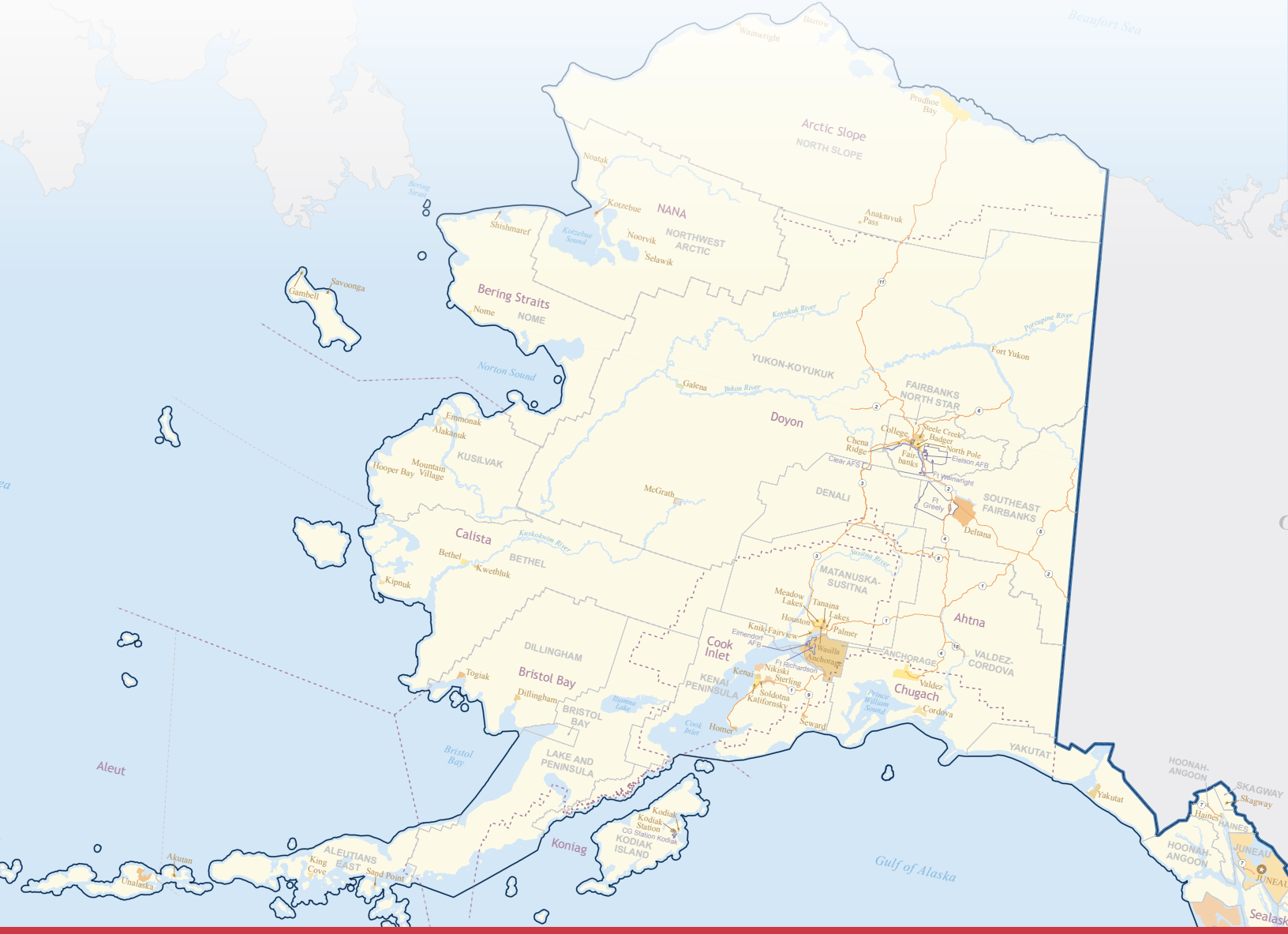
IHEART
INDIGENOUS HEALTH, EDUCATION, AND RESOURCES TASKFORCE

Pipeline to Healthcare Careers:
IHEART Alaska Needs Assessment



PREPARED FOR: Indigenous Health, Education, and Resources Taskforce

SUBMITTED BY: Nokomis Strategies

NOKOMIS
STRATEGIES

nokomisstrategies.co

Table of Contents

Cama-i!

Executive Summary

This executive summary shares the voices of students, educators, and community partners who participated in surveys, interviews, and individual listening sessions as part of the Pipelines to Healthcare Careers initiative. Their insights reveal both the resilience of Native students and the pressing need for earlier exposure, stronger mentorship, and more coordinated support for American Indian and Alaska Native (AI/AN) individuals interested in healthcare professions. The findings provide a roadmap for building culturally grounded, community-driven pipelines that will prepare the AI/AN healthcare workforce of the future. The needs assessment conducted by Nokomis Strategies for the Indigenous Health, Education, and Resources Taskforce (IHEART) combined survey data, stakeholder interviews, and conversations with adult students and new to the healthcare workforce AI/AN individuals to understand the opportunities, challenges, and resources available to support students in pursuing healthcare careers. While much of the information collected will likely resonate with Indigenous people across the lower 48, some findings are unique to Alaska.

The findings reveal that early exposure to healthcare career pipelines is essential —but currently very limited. When students are introduced to healthcare role models, hands-on experiences, and culturally relevant stories starting in elementary and middle school, they are more likely to develop confidence and sustained interest in healthcare careers. A strong sense of culture and belonging plays a vital role in student persistence—students thrive when their identities are respected in educational environments and when they see Indigenous professionals succeeding in the field.

The barriers that AI/AN students face extend beyond academics. Financial strain, the cost of housing and childcare, travel from rural communities, and competing family responsibilities, all limit participation in training and career programs. Many participants also described feelings of isolation and a lack of mentorship, which compounded academic challenges in math and science. At the same time, mentorship and peer networks stood out as one of the most consistent supports. Students emphasized that guidance from trusted mentors and peers not only helped them navigate systems but also reinforced their belief that healthcare careers were attainable.

Although many scholarships, internships, and programs are already available, they are fragmented, difficult to access, and not coordinated across regions. Students and organizations alike expressed the need for a centralized repository where information is easily available and continually updated. The assessment also underscored that workforce readiness requires more than technical training. Skills such as communication, teamwork, and problem-solving—combined with cultural knowledge—are critical to both individual and community success.

Based on these findings, there could be tremendous benefit by creating a centralized resource hub to integrate scholarships, internships, mentorship, and training opportunities. It calls for expanding early pipeline programs into elementary and middle schools, using culturally relevant storytelling and interactive approaches. Strengthening mentorship networks is essential, connecting students with Native healthcare professionals and peers who can share their experiences and guidance.

Wraparound supports, including stipends, childcare, housing, and flexible training models, are necessary to reduce non-academic barriers. Greater collaboration among Native organizations, schools, healthcare providers, and nonprofits will ensure that resources are aligned and duplication is minimized. Finally, education and training pipelines must prioritize cultural safety and embed workforce readiness skills alongside technical training, preparing students to thrive in healthcare roles while remaining connected to their culture and communities.

Introduction

Despite the presence of numerous high school and college programs aimed at promoting healthcare careers, Alaska continues to face significant challenges in introducing children to the diverse opportunities within the healthcare sector. Alaska's healthcare system is currently grappling with a substantial workforce shortage. A recent report indicates that the state needs to fill over 9,400 healthcare positions annually to meet growing demands.[i] This shortage is even more severe in rural and underserved areas, where access to primary care remains limited.

One promising solution is to develop local healthcare providers. Local professionals are more likely to remain in their communities, possess a deeper understanding of cultural nuances, and build trust with patients. However, AI/AN individuals are markedly underrepresented in the healthcare workforce. As of 2021, only 0.4% of active physicians in the U.S. identified as AI/AN, despite AI/ANs comprising approximately 2.9% of the national population.[ii]

> **"Outcomes are better when you have Native doctors."**
>
> **- Dr. Jason Deen, pediatrician, and IHEART committee member**

To overcome these challenges, it is essential to engage Alaska's Native youth early by exposing them to healthcare careers and relatable role models from their own communities. Early interest and sustained support through structured career pipelines can help build a stronger, more diverse healthcare workforce. This report builds on the Pipelines to Healthcare Careers proposal developed by Nokomis Strategies in partnership with IHEART, which envisioned culturally grounded pipelines to prepare AI/AN students for healthcare careers. The accompanying needs assessment expands on that vision by outlining a framework tailored to Alaska, identifying existing resources, uncovering gaps, and recommending strategies that reflect what is currently working, Alaska Native values, fosters collaboration among partners, and ensures students are supported throughout their educational journey.

To advance this vision, a multi-phase data collection approach was conducted and included a sampling of Native-led and student serving organizations from across the state, in-depth stakeholder interviews, and individual listening sessions with AI/AN students and new healthcare professionals. Each of these components provided unique insights into how organizations and students experience and build healthcare pipelines, the challenges they face, and the opportunities that exist to strengthen supports. Together, they offer a comprehensive picture of the current landscape and a roadmap for action.

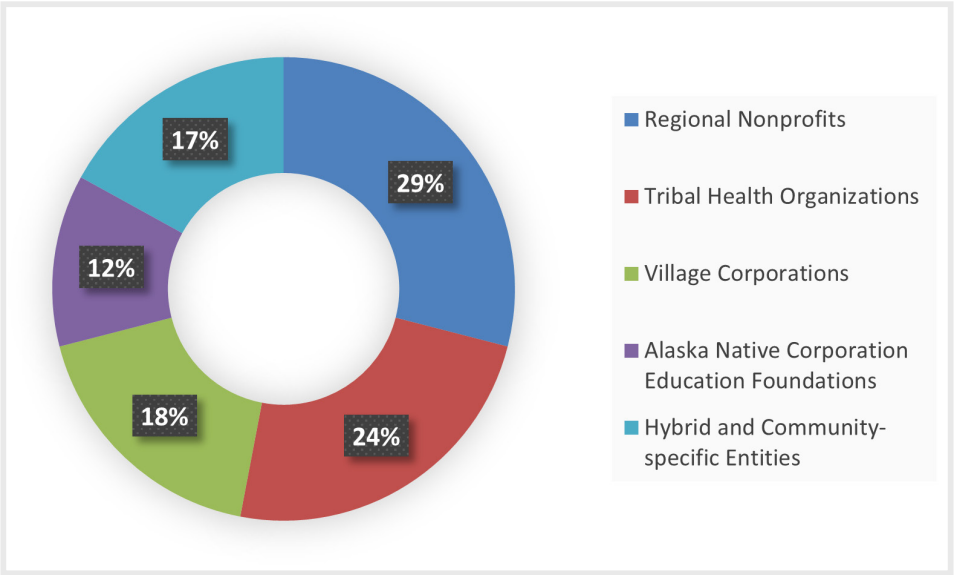
[i] https://alaskapublic.org/news/health/rural-health/2025-01-28/alaska-health-care-industry-needs-more-than-9-400-new-workers-each-year-report-says?utm_

[ii] Equitable representation of American Indians and Alaska Natives in the physician workforce will take over 100 years without systemic change, Lopez-Carmen, Victor A. et al., The Lancet Regional Health – Americas, Volume 26, 100588

Survey Results

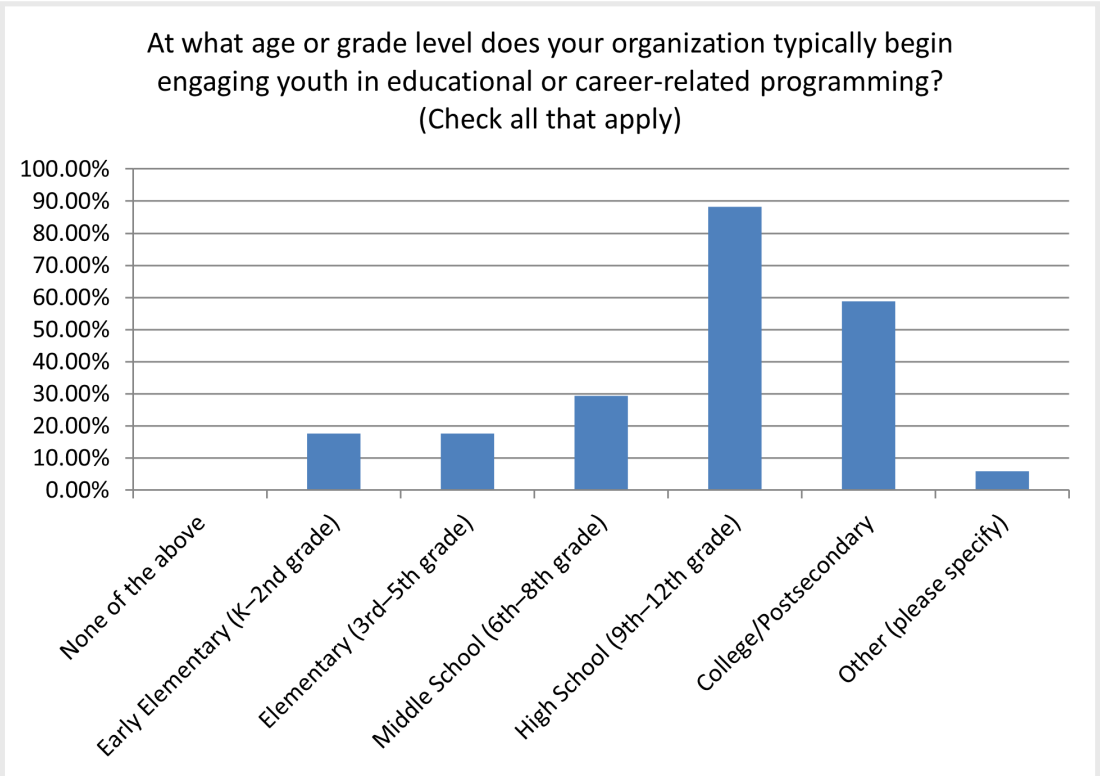
The online survey was distributed to 36 Native-led organizations; 17 responses were received. The respondents reported varying size and capacity, most organizations served over 1,000 AI/AN people – with two reporting to serve over 70,000 individuals. The participating entities collectively serve more than 180 distinct communities in Alaska with a combined population of approximately 150,000 Alaska Native and American Indian individuals, or more than 20% of Alaska's total population. The findings affirm both the need and the opportunity to design structured, culturally grounded pipelines that prepare AI/AN students for healthcare professions.

Consistent with the proposal's aim to engage a broad cross-section of Native-led, educational, and health-related partners, survey responses reflected wide organizational diversity. Regional nonprofits (29%), Tribal Health Organizations (24%), village corporations (18%), and Alaska Native Corporation (ANC) education foundations (12%) all participated, with additional responses from hybrid and community-specific entities. This breadth demonstrates alignment with the proposal's vision of cross-sector collaboration and confirms strong stakeholder readiness to participate in coalition-building.



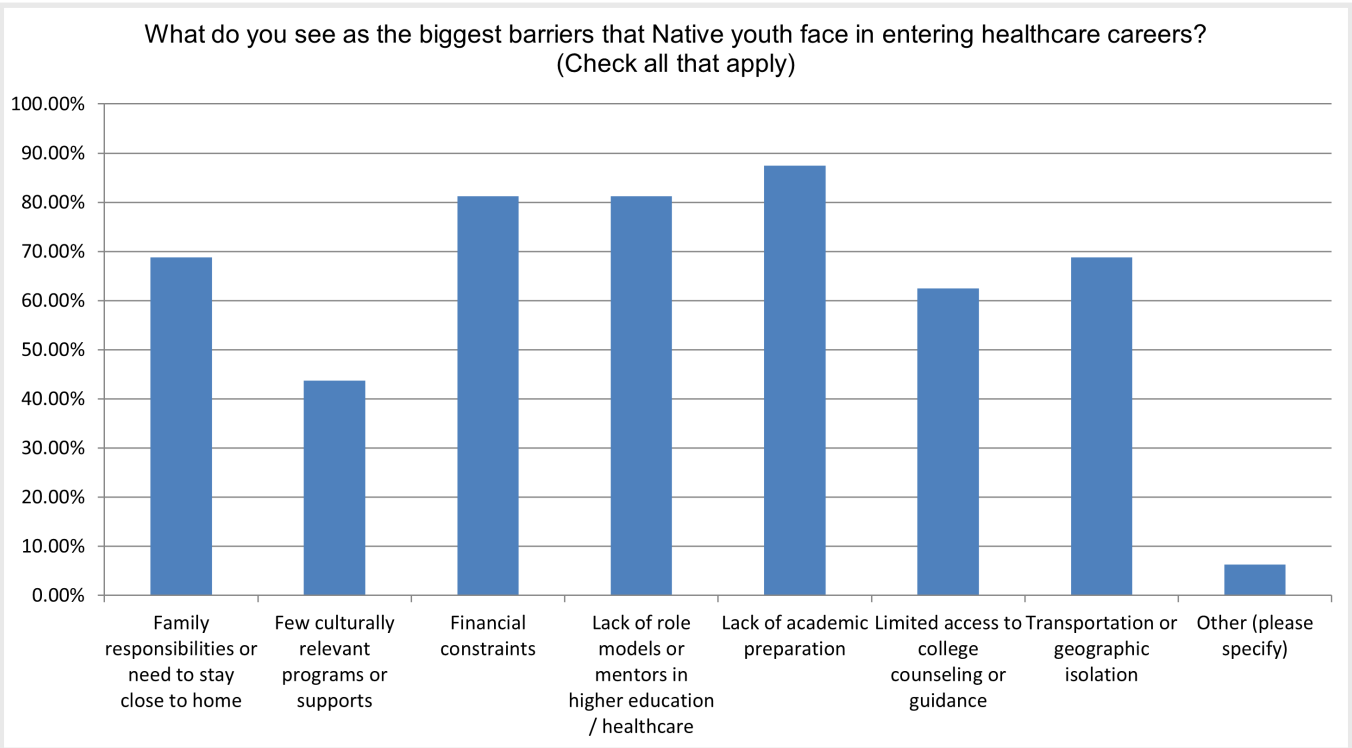
The needs assessment anticipated identifying existing assets that could be leveraged into a healthcare career pipeline. Survey findings show that all participating organizations (100%) are already supporting AI/AN students through scholarships, youth employment programs, internships, and/or job-shadowing opportunities. However, these efforts are often fragmented, vary in scale, and lack regional coordination. This reinforces the proposal's recommendation to create structures that integrate existing resources into a more cohesive system.

The proposal emphasized engaging students across multiple points in the education pipeline. Survey results reveal a critical gap: most support is concentrated at the high school (88%) and college/postsecondary (59%) levels, while only 17% of organizations engage elementary students and 29% engage middle school students. This imbalance highlights the need to expand outreach into earlier grades, ensuring students encounter healthcare pipelines well before postsecondary education.



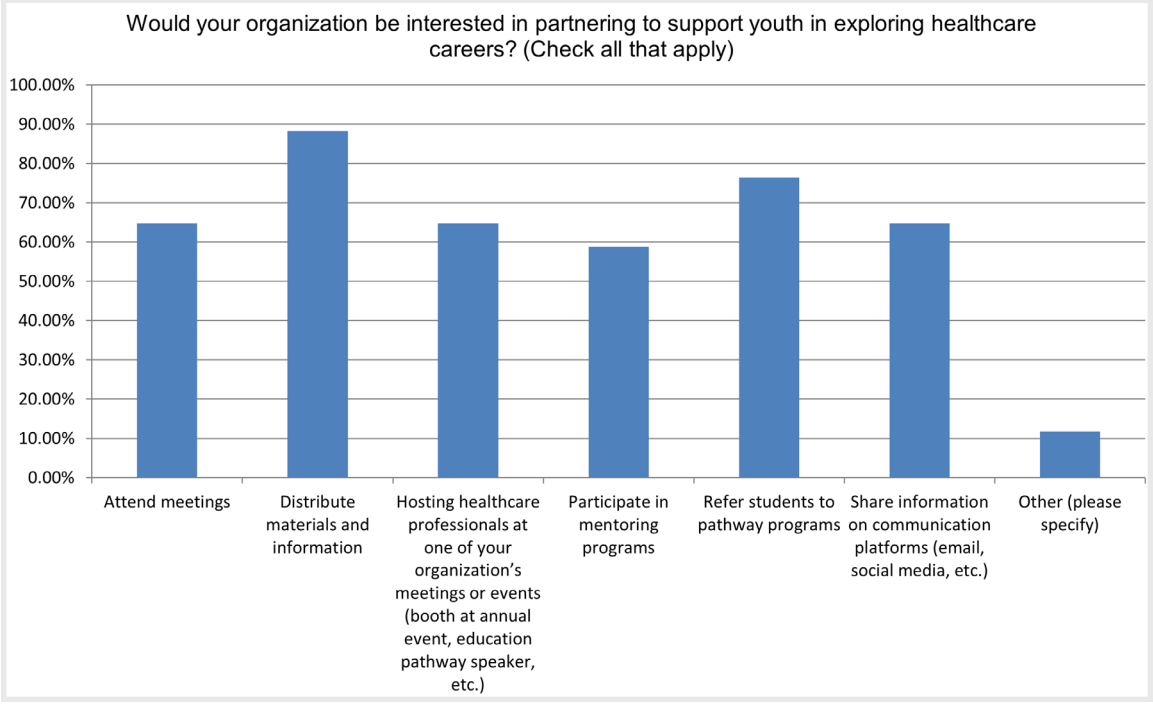
Survey results show youth engagement currently focuses primarily on high school students.

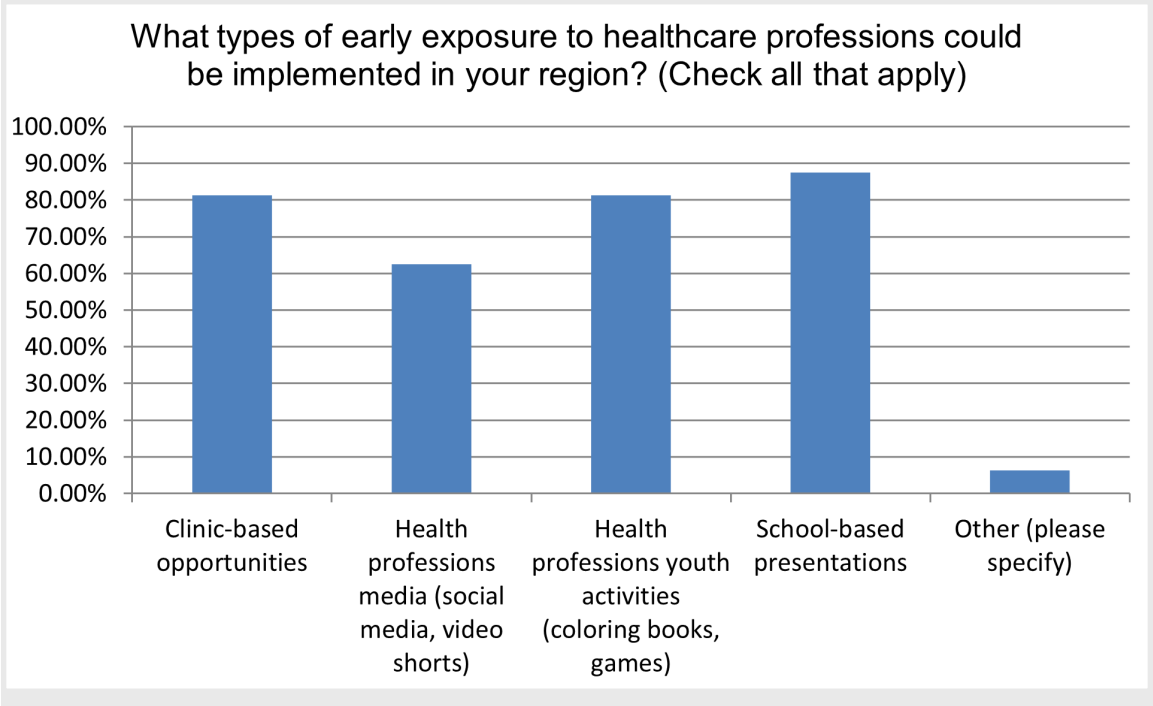
Survey respondents reinforced the barriers outlined in the proposal, highlighting persistent challenges such as financial strain, geographic isolation, and limited access to culturally relevant mentorship. Students from rural communities often face high costs for relocation and travel, lack access to family housing and childcare, and experience a shortage of cultural support within higher education environments. These findings affirm the proposal's conclusion that building equitable healthcare pipelines requires both material supports and culturally grounded strategies.



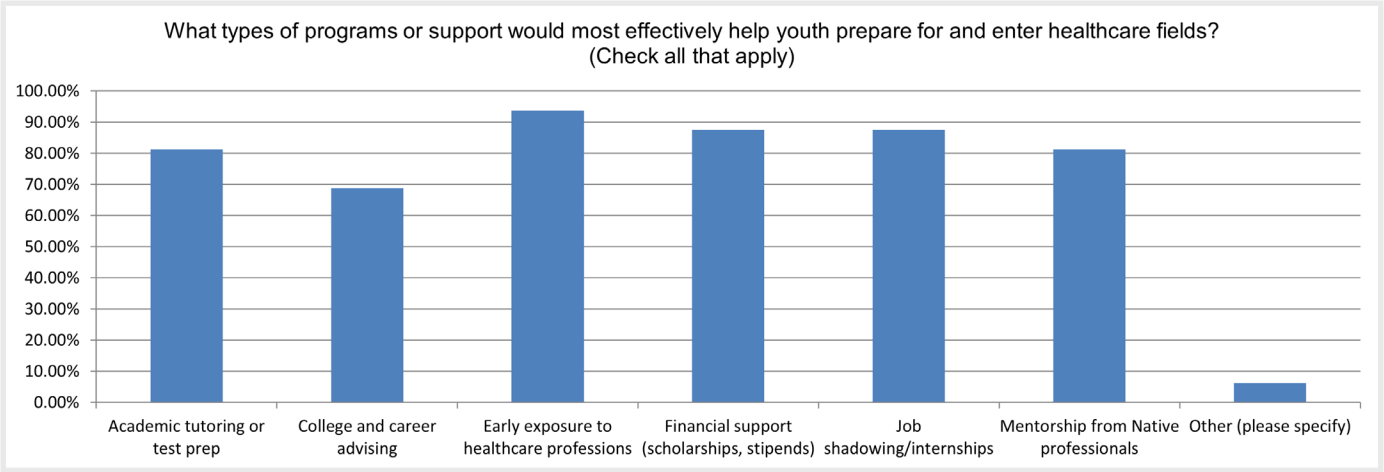
While the top barrier was a lack of academic preparation, survey respondents pointed to additional challenges, such as financial strain, geographic isolation, and limited access to culturally relevant mentorship.

The survey findings confirmed strong interest in coalition-building and identified potential partners who are ready to collaborate. Survey respondents reinforced this priority, identifying the need for a centralized hub to streamline access to program and scholarship information, strengthen mentorship networks, and align outreach strategies across institutions. The enthusiasm reflects readiness to operationalize a coalition model and move toward coordinated statewide action.





Finally, the survey surfaced insights on workforce readiness. Organizations noted that, while many students graduate with technical skills, they often need stronger competencies in communication, professional navigation, and support integrating cultural values into healthcare delivery. These findings support a need for blending technical training with culturally relevant professional development to strengthen both individual success and community impact.



Survey responses promote holistic support for youth entering healthcare fields.

Stakeholder Interviews

> "We'd love to create pathways starting as early as kindergarten — we've even developed dramatic play kits for K-2 with lab coats and vet clinics."
>
> - AHEC

The stakeholder interviews were conducted with AI/AN serving, but not necessarily Native-led, organizations that have workforce development, career readiness, extracurricular and supplemental academic programming. These targeted stakeholder interviews provided valuable insights into both existing efforts and unmet needs in building healthcare career pipelines for AI/AN students. Collectively, they confirmed the proposal's assumptions that early engagement, culturally aligned programming, and stronger partnerships are critical to success.

> "Elementary is the best time to introduce careers. By high school, students should already be practicing those skills."
>
> - ACPE

Representatives from the following organizations agreed to participate in these interviews:

- Alaska's Area Health Education Centers (AHEC)
- Alaska HOSA – Future Health Professionals
- Alaska Native Science and Engineering Program (ANSEP)
- Alaska EXCEL
- Alaska Commission on Postsecondary Education (ACPE)
- Cook Inlet Tribal Council (CITC)

Interviewees emphasized that exposure to healthcare careers before high school, noting that early exposure in elementary and middle school helps students envision healthcare as a viable path and reduces the need for academic remediation later. There was a consensus on the need for early exposure, however, funding for K-6 programs is limited, with most grants targeting students in eighth grade and above. Stakeholders also stressed the value of experiential and culturally grounded learning—highlighting the impact of combining traditional knowledge with modern science, using tactile, hands-on activities, and storytelling to engage rural students and spark interest.

> "Students hunted seal, then did a necropsy to see the Western science side, and cooked it traditionally — pairing Indigenous knowledge with science makes learning meaningful."
>
> - ANSEP

Several common challenges emerged across interviews:

- Funding instability, with programs reliant on small, short-term grants.
- Staff turnover in schools, limiting continuity of mentorship.
- Restrictions that limit internships for younger students.
- Travel costs that make rural participation in training difficult.

> "We build partnerships with school boards instead of teachers — teachers come and go, but board members stay rooted in their community."
>
> - EXCEL

> "The biggest challenge is not recreating the wheel. We need a hub to coordinate resources — many websites have outdated links."
>
> - ACPE

Stakeholders expressed strong enthusiasm for collaboration, identifying opportunities to share resources, align outreach, and connect students to role models. Many described existing tools and platforms that could be leveraged if brought together through coalition-building.

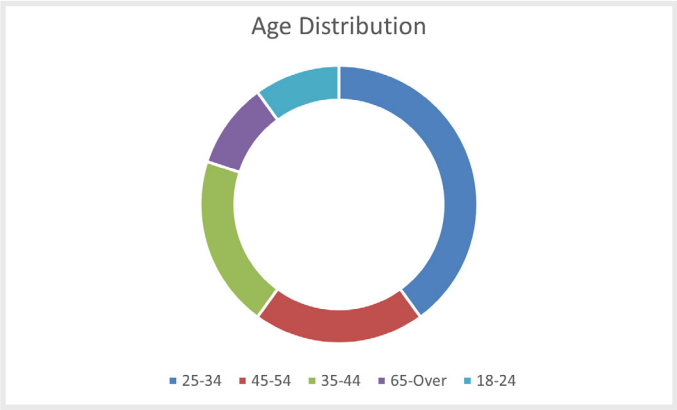
> "We take the other 98% of students — not just the top performers. To reach them, we need more partnerships, especially with behavioral health and healthcare organizations."
>
> - EXCEL

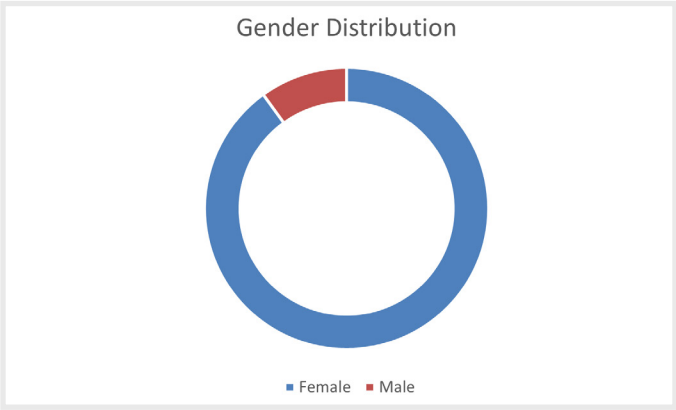
While technical skills were recognized as important, stakeholders stressed that students also need strong communication skills, self-advocacy, and improved study habits. They also identified the importance of wraparound supports to help students overcome challenges such as trauma, substance use, and cultural isolation.

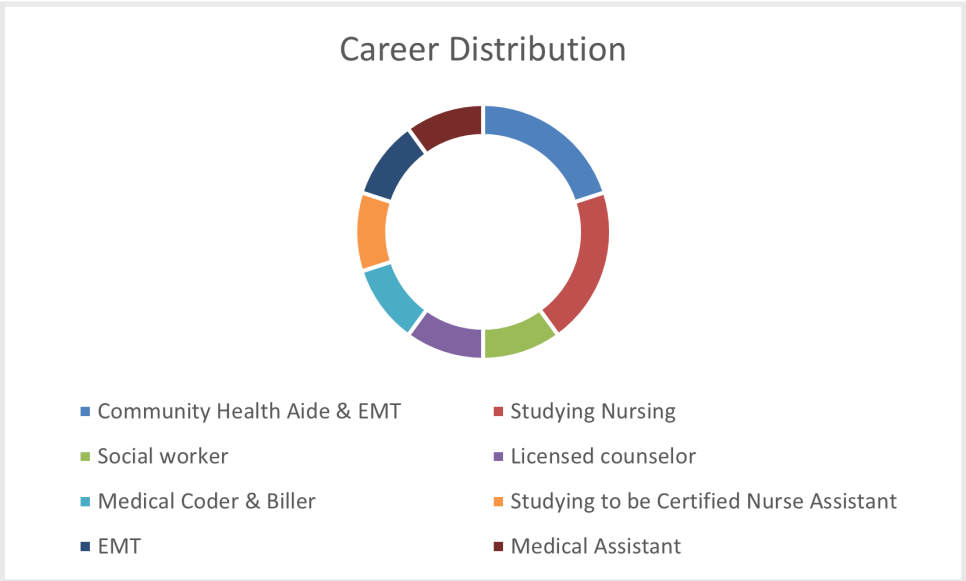
Supporting student success requires meeting them at their current academic, cultural, and social levels. For example, one interviewee highlighted the importance of adapting communication methods—such as shifting from email to text messaging—to better align with student preferences and increase engagement.

Individual Listening Sessions

The initial intent was to convene adult AI/AN individuals – either current students in healthcare programs or recent graduates working in the healthcare field – who were residing in or connected to Alaska, for focus group discussions. Focus group participants were offered a $100 honorarium for their time. There were approximately 112 individuals who registered for the sessions. After concerns with individuals not falling within the target audience, we further screened the registrants to determine if they self-identified as AI/AN, their connection to Alaska and healthcare studies or career path. Through this outreach, respondents preferred to participate in individual listening sessions rather than focus groups. We believe that this was partly due to timing (subsistence activities, school, and work priorities). Additionally, the "COVID-19 pandemic" era students seem more elusive of attempts to gather information and participate in online group activities. The team pivoted to individual listening sessions to meet the students and recently trained healthcare workers where they were comfortable. Ten individual listening sessions were completed.







> "Didn't think I'd ever get this far, but on-the-job training was helpful...I would like to see more of our Native people not afraid of the healthcare field. I didn't have the confidence back then, but there are things people can do."
>
> - Community Health Aide & EMT

> "My father told many stories about the importance of family and village helping each other out...Utilize Elders to influence young students, but do it through stories and examples of other younger community members who are working in the healthcare field."
>
> **- Elder & Social Worker**

The individual listening sessions offered valuable, first-hand insights from Alaska Native students and professionals navigating healthcare career pipelines. Participants shared a deep commitment to helping others, protecting their families and communities, and contributing to the well-being of future generations. Their motivation was often shaped by the influence of role models, elders, and family members, and reinforced by seeing other Native individuals succeed in healthcare, affirming their own potential to thrive. Their experiences highlight both the opportunities and challenges facing AI/AN students and professionals in pursuing healthcare careers.

While participants identified several systemic barriers, their experiences also revealed resilience and resourcefulness. Financial pressures, geographic isolation, and limited access to culturally relevant mentorship presented real challenges, especially for those in rural areas. Academic gaps in math and science, family responsibilities, and mental health struggles added complexity to their journeys. Yet, these challenges were met with a strong desire for culturally respectful learning environments and greater representation.

> "Even though I was top 3 in my class, the math at UAA was too hard, and I couldn't switch into a remedial class...ended up getting bad grades, which I was not used to at all."
>
> - EMT

> "The nursing program was either in Valdez or Anchorage. No local access...I still had bills to pay and mortgage to pay."
>
> - Nursing Student

> "Majority of training did not embrace culture and only taught about the majority culture."
>
> - Elder & Social Worker

Participants emphasized the power of hands-on, visual, and story-based learning—approaches that honor Indigenous knowledge and make healthcare careers more accessible and meaningful. They called for deeper family and community involvement in outreach efforts, and highlighted the importance of mentorship, financial aid, flexible training options, and wraparound supports. A centralized hub for navigating scholarships, internships, and career resources was seen as a key opportunity to strengthen pipelines and ensure students are supported every step of the way.

Overarching Insights

Early exposure to healthcare careers is critical. Introducing healthcare concepts and role models before high school helps prepare students academically and builds long-term interest in career pipelines.

Key takeaways from data collection themes include:

» ***Culture and belonging strongly influence persistence.*** Students thrive when their culture is visible and respected in training environments.

» ***Barriers extend beyond academics.*** Non-academic challenges such as childcare, family responsibilities, travel costs, and financial strain are just as limiting as academic preparation.

» ***Mentorship and networks are essential.*** Trusted mentors, peers, and community role models sustain motivation and help students navigate unfamiliar systems.

» ***Resources are fragmented.*** Programs exist across many organizations, but are not well coordinated or easily accessible.

» ***Workforce readiness depends on more than technical skills.*** Communication, teamwork, confidence, and problem-solving are key to student and workforce success.

Recommendations for IHEART

IHEART's role in the *Pipelines to Healthcare Careers* initiative is strategic and focused. While the overall vision is broad, IHEART's capacity is limited, making it essential to prioritize efforts where the organization can have the greatest impact. The recommendations outlined in this report reflect areas where IHEART can lead with confidence — leveraging existing strengths, aligning with its mission, and advancing meaningful change through partnerships and coordination.

- **Create a centralized resource hub** that brings together scholarships, internships, mentorship opportunities, and training programs in one accessible place. This hub should be maintained collaboratively to ensure accuracy and sustainability.
  This recommendation was specific to Alaska; however, a component of the need might be met by expanding the Healthcare Pipeline Programs Map into a scholarship, internship, and resources dashboard.
- **Expand early pipeline programs** by embedding healthcare awareness into elementary. Storytelling, cultural examples, and interactive activities can help students begin to imagine themselves in healthcare roles.
  Specific examples generated by the participants in the needs assessment included read-aloud books featuring Native providers and age-appropriate stories and expansion of the use of experiential learning station kits. Other examples could include games or age-appropriate activities (like coloring books) highlighting Native people in healthcare careers.
- **Strengthen mentorship networks** by connecting students with Native professionals, as well as peers who have successfully navigated similar pipelines. Sharing personal stories and visible examples of success is key to building confidence.
  While mentorship is already happening in some communities, participants emphasized its value and the need for more consistent, structured approaches. There is significant evidence and well-established best practices demonstrating effectiveness of mentorship programs in supporting student success.

Additional Recommendations

Throughout this project, participants identified several needs and opportunities that extend beyond IHEART's direct capacity or mission. While IHEART may not lead these efforts, they remain essential to building a strong and equitable healthcare pipeline for AI/AN students. These broader recommendations are included to inform partners, policymakers, and funders, and to guide future collaboration. They represent opportunities where IHEART can support, advocate for alignment, or serve as a connector—even if not the primary driver.

- ***Encourage collaboration*** among Alaska's Native-led organizations, educational institutions, healthcare providers, and nonprofits. Shared planning and aligned outreach will help reduce duplication and ensure that resources reach students more effectively.
- ***Incorporate cultural safety*** throughout training and education pipelines. Programs should honor Indigenous traditions, integrate traditional knowledge, and provide culturally responsive student services.
- ***Prioritize workforce readiness skills*** by designing programs that teach communication, teamwork, problem-solving, and resilience alongside technical knowledge. These skills help students succeed not only in healthcare settings but also in their communities.
- ***Provide wraparound supports,*** such as stipends, childcare, housing, and travel assistance. Flexible and community-based training models are needed so that students can pursue education while staying connected to family and cultural responsibilities.

Looking Ahead

This needs assessment amplifies the voices of Alaska Native communities who shared their experiences, challenges, and aspirations for a stronger healthcare career pipeline. Their stories reflect not only the resilience and brilliance of AI/AN students, but also a collective call to dismantle systemic barriers and build pipelines rooted in culture, equity, and opportunity.

The desire to collaborate is clear — and powerful. Across Alaska, Tribes, ANCs, educational institutions and nonprofits are ready to work together. No single organization can do this alone, but every partnership begins with open, respectful communication.

The findings are more than just a snapshot — they are a roadmap. They offer actionable guidance for creating programs that are culturally grounded, community-driven, collaborative, and sustainable. By acting on or supporting others to act, the recommendations can help shape a healthcare workforce that reflects the communities it serves.

This work is not an end point, but a foundation. With continued collaboration and commitment, Alaska can create the conditions for Native students to thrive in healthcare careers and, in doing so, strengthen the health and well-being of generations to come.

Appendix A - IHEART Survey Questions

Question 1
What is your name, organization, title, email, phone number?

Question 2
What is your organization type?

Question 3
How many AI/AN people, clients, tribal members, and shareholders does your organization serve?

Question 4
Does your organization currently offer any programs related to youth education, career exploration, or workforce development?

Question 5
If yes to 4 - At what age or grade level does your organization typically begin engaging youth in educational or career-related programming? (Check all that apply)

Question 6
Would your organization be interested in partnering to support youth in exploring healthcare careers? (Check all that apply)

Question 7
What types of programs or support would most effectively help youth prepare for and enter healthcare fields? (Check all that apply)

Question 8
What types of early exposure to healthcare professions could be implemented in your region? (Check all that apply)

Question 9
What do you see as the biggest barriers that Native youth face in entering healthcare careers? (Check all that apply)

Question 10
Is there anything else that you'd like to add, or ideas on how to support Native youth entering healthcare professions?

Appendix B - IHEART Stakeholder Interview Prompts

Collect organization & interviewee information

Nokomis Strategies is conducting a needs assessment to support the Indigenous Health, Education, and Resources Taskforce (IHEART) in Alaska. The goal is to identify and create pipelines and programs that encourage American Indian and Alaska Native students to enter the healthcare workforce. We have completed a short survey, and are conducting these stakeholder interviews now, and will conduct focus groups with recent graduates and current students (over 18yo) studying in healthcare or STEM fields to speak directly with them regarding career programming. All information will be aggregated and used to further pipelines.

Tell us about your organization's role in education/workforce development/scholarship/etc. What ages/grades do you work with?

What ages/grades do you think is the best time to start introducing healthcare and/or STEM careers? What tactics do you believe are most appropriate for this age group?

What types of programs or activities are currently available locally or in Alaska to introduce healthcare and/or STEM careers to elementary-age students (if any)?

Have you seen successful examples of early career exploration initiatives in any field that could be adapted for healthcare? Could existing tools or materials be reworked?

What kinds of formats (e.g., classroom visits, storytelling, hands-on activities, cultural demonstrations) do you think work best for engaging elementary-age students?

Do you work with students exclusively, or is there family/community involvement as well? How can families, communities, and Elders be involved in encouraging early interest in healthcare careers?

Is career exploration a priority for your organization? (No wrong answer, if it's not them – who should it be)? What resources (curriculum, training, funding, materials) would your organization need to support exposure to healthcare careers?

Does your region/organization work together with local school districts, village corporations, tribe(s), and regional non-profits? If not, what are the barriers?

What barriers exist to implementing healthcare career programming?

What opportunities do you see for creating programs that inspire curiosity about health and science among young AI/AN children?

How could a healthcare career pipeline be designed to grow with the child—from elementary to high school and beyond?

If resources were made available, would you support early career exploration programming?

If any of their funding is in jeopardy or been impacted by recent federal changes?

Would you (your organization) be willing to help promote the focus groups?

Is there anything else that you want to share related to this?

Appendix C - Individual Listening Session Prompts

1. Motivations and Influences

- What initially inspired you to pursue healthcare training or a career in healthcare?
- Did you have role models, family members, or community members who influenced your decision?
- How important was serving your community in your decision to enter healthcare?

2. Barriers and Challenges

- What difficulties or barriers did you face while considering or completing your healthcare training?
- Were there any aspects that almost made you decide against pursuing this field (e.g., financial, academic, cultural challenges)?
- What kinds of support were most helpful to you during your training?

3. Perceptions and Cultural Fit

- What messages or stories about healthcare careers resonate most with Native youth, in your experience?
- How important was it for you that your training experience reflected or respected Native culture?
- Did you see or use any materials (e.g., posters, videos) that felt truly culturally relevant? What stood out about them?

5. Message Testing and Content Preferences

- What kind of imagery, language, or stories best capture your attention or motivation?
- Can you recall any particular campaign, ad, or social media post that had an impact on you? Why?
- How do you prefer information about healthcare careers to be presented? (e.g., videos, infographics, peer stories)?

6. Community and Family Role

- How involved were your family and wider community in your interest or decision to pursue healthcare training?
- What would help get more support from families and communities when marketing healthcare careers to Native youth?

7. Resources and Support

- Which resources were most valuable to you as you pursued healthcare training (such as mentors, financial aid, preparatory programs)?
- What additional support would have made your journey easier?