

1/18/2026

Dean Eun-Ok Im  
University of Texas at Austin  
School of Nursing  
1710 Red River St.  
Austin, TX 78712

RE: Dr. John R. Lowe — Urgent Notice: “Identity Cover” Through CPAIN and Nonprofit Affiliations Posing as American Indian Nations

Dear Dean Im,

I am writing to raise an urgent integrity concern with direct implications for American Indian communities and for any institution that confers professional credibility, employment, research opportunities, or public authority based on a falsely asserted American Indian identity. You and the University of Texas at Austin administration have previously been notified that **Dr. John R. Lowe** has made false and shifting claims of American Indian identity. Despite that notice, Dr. Lowe continues to be supported in his faculty position—an institutional posture that increases the likelihood that external partners (including federal funders, universities, journals, and professional organizations) will treat his identity claims as legitimate.

The pattern is increasingly familiar: when an individual such as Dr. Lowe’s American Indian identity claims are publicly challenged, refuted and proven to be false, individuals such as Dr. Lowe often seek reputational “cover” by affiliating with entities that appear, to outsiders, to function as tribes. American Indian watchdog groups have described these entities as CPAINs—Corporations Posing as Indian Nations, including Limited Liability Corporations (LLCs) and nonprofit organizations (501c3s) that pose as American Indian nations. These entities are state-recognized and are paid, membership-based organizations people join that adopt the language and symbols of tribal nationhood. They do not have federal recognition as sovereign tribal Nations. Importantly, affiliation with a CPAIN posing as an American Indian nation does not confer American Indian ancestry, identity, or tribal citizenship. It creates the appearance of legitimacy, but it is not a substitute for documented descent and Nation-determined citizenship in a federally recognized tribe.

The scope of the problem is substantial. For example, there are more than 200 self-proclaimed and fraudulent groups that present themselves as “Cherokee tribes.” There are three legitimate federally recognized Cherokee tribes: the Cherokee Nation, the Eastern Band of Cherokee Indians (EBCI) which Dr. Lowe has claimed for decades, and the United Keetoowah Band of Cherokee Indians (UKB). The Echota Cherokee Tribe of Alabama—with which Dr. Lowe now claims affiliation—is not a federally recognized Cherokee tribe and is among the 200 non-federally recognized, fraudulent groups presenting themselves as “Cherokee.”

Similarly, there are three federally recognized Lenape (Delaware) tribes—the Delaware Nation, the Delaware Tribe of Indians, and the Stockbridge–Munsee Community—each with sovereign enrollment and formal citizenship processes. In contrast, there are more than a dozen nonprofit, and membership-based groups using Lenape/Delaware names or formats to present themselves as

“tribes” or “nations” without federal recognition. Dr. Lowe is affiliated with the fraudulent Lenape Indian Tribe of Delaware (Kent County, Delaware).

### **Case example: Dr. John R. Lowe’s shifting claims and recent CPAIN/nonprofit affiliations**

In recent publicly available biographical materials on your website, Dr. Lowe is described as a member of the Echota Cherokee Tribe of Alabama and the Lenape Indian Tribe of Delaware, Kent County, both are state-recognized, membership-based CPAINs posing as tribal nations. Membership in these entities do not establish American Indian ancestry or identity, do not create a legitimate genealogical connection to a American Indian people, and do not substitute for verifiable tribal citizenship in a federally recognized Cherokee or Lenape (Delaware) tribe.

Dr. Lowe’s public identity narrative has changed considerably over time, becoming progressively more expansive and specific, including explicit claims of citizenship in federally recognized Nations and a three-quarter American Indian blood quantum—claims that carry weight in academic, professional, and funding environments.

### **Timeline of shifting claims (as reflected across sources and time periods)**

1. 1996: The beginning. In his dissertation, Dr. Lowe stated that he was born in Chestertown, Maryland and was of “Cherokee descent.”
2. Early 2000s: His narrative shifted from “descent” to belonging and institutional legitimacy—claiming he grew up on the Qualla Boundary in North Carolina and, at various points, representing himself as an enrolled citizen/member of the Eastern Band of Cherokee Indians (EBCI). He also claimed he was raised by a “full-blood Cherokee” father and paternal “full blood Cherokee” grandmother (**a grandmother who, according to records cited by critics, died decades before his birth**).
3. 2010s: His claims expanded to include Lenape and Creek heritage, including assertions of a high blood quantum (e.g.,  $\frac{1}{2}$  Cherokee,  $\frac{1}{4}$  Lenape), thereby broadening the scope of his claimed identity.
4. 2022: He asserted tribal citizenship again, including claims of membership in the United Keetoowah Band of Cherokee Indians (UKB). Claims of being descended from Pocahontas (Powhatan tribe).
5. 2023–2026: After public scrutiny increased and he was called out by our organization, as a fraud he adopted affiliations with two CPAINs, the Echota Cherokee Tribe of Alabama and the Lenape Indian Tribe of Delaware Kent County. His claims have shifted from the North Carolina Context to Alabama and to Delaware.

Dr. Lowe has fraudulently represented himself as a “Cherokee tribal citizen” in federal contexts, including on NIH grant applications, where asserted American Indian identity can affect credibility and access to resources intended for authentic American Indian people and communities. He has claimed to be one of twenty-five American Indian PhD nurses and the first American Indian male to achieve this status. This is not true; Dr. Lowe is not one of them. When he lost credibility in Indian country and with American Indian nurses and other academic colleagues, he scrambled to join CPAINs to protect himself and to cover his previous fraudulent claims in order to mislead outsiders into thinking that these are legitimate Indian nations.

I include his record because it reflects a recurring and consequential pattern of identity shifting: when one claim is questioned, another is advanced—moving from “descent,” to “raised on the Qualla Boundary,” to multi-tribal heritage, to explicit claims of citizenship in federally recognized Nations (including EBCI and UKB), and then to CPAINs that falsely function as a protective credential when verification is demanded. In institutional contexts where American Indian identity influences hiring, contracting, speaking invitations, scholarships, and eligibility for federal research dollars, this pattern is not benign. It diverts the limited opportunities and resources away from verified tribal citizens and the sovereign Nations those resources are intended to serve.

### **Research Integrity is Compromised**

This has huge implications beyond representation—it also implicates research reliability and validity among authentic American Indians. Research conducted with CPAINs is methodologically compromised when the participants are not verifiably American Indians. In those circumstances, findings and data characterized as from “American Indian participants” misinforms policy and practice.

### **Why this matters: tribal citizenship is political, verifiable, and Nation-determined**

Federally recognized tribes are sovereign political Nations with formal citizenship processes. They determine their own citizens through Nation-specific enrollment rules grounded in documented descent and governance authority. In many Nations, dual enrollment is prohibited as a matter of political allegiance and jurisdiction (policies vary by Nation). For example, the Cherokee Nation, the UKB and the Eastern Band of Cherokee Indians have publicly stated that they prohibit dual enrollment.

By contrast, state-recognized groups, CPAINs vary widely in documentation standards and do not require rigorous, records-based proof of descent comparable to federally recognized tribal enrollment offices. They have a paid membership. This is precisely why “membership” or “enrollment” in these entities should not be treated as proof of American Indian ancestry, American Indian identity, or as an “authentic American Indian voice.”

Cherokee Nation Chief: Chuck Hoskin: [State Tribes are not Indian Tribes](#)

### **Concerns raised publicly about Dr. Lowe’s ancestry claims**

Our publicly posted report on Dr. Lowe on the Tribal Alliance Against Frauds website asserts that a genealogical review found **ZERO** documented American Indian ancestry and no connection to a legitimate tribal Nation. The Cherokee are best documented American Indian people in the United States, and Dr. Lowe is not one of them. I am not asking you to accept any allegation on faith. I am asking you to do what responsible, ethical institutions must do: verify before endorsing, credentialing, or platforming people like Dr. Lowe who make these claims.

Genealogy: <https://tribalallianceagainstfrauds.org/dr-john-low>

## Bottom line

When a person's identity narrative changes over time—especially when it shifts toward state-recognized CPAINs after public scrutiny—institutions should treat that as a serious **red flag** and conduct due diligence. American Indian communities bear great harms when false or unverifiable claims are normalized as in the case of Dr. Lowe: resources are diverted, misinformation spreads under the banner of “American Indian representation,” and tribal sovereignty is undermined.

Respectful requests:

I respectfully request that your organization:

1. Do not represent Dr. Lowe as “American Indian” based on self-identification or CPAIN/nonprofit/state-recognized affiliations.
2. Require verifiable documentation, such as enrollment/citizenship verification from a federally recognized tribal Nations.
3. If American Indian representation is needed, consult appropriate tribal authorities for guidance.
4. Adopt an internal standard that clearly distinguishes federally recognized tribal citizenship from state-recognized CPAINs and nonprofit organizations posing as American Indian nations to prevent future harm and confusion.

Thank you for your consideration. Due diligence protects American Indian communities, protects your institution, and reduces the risk that UT Austin will be used—intentionally or unintentionally—as a vehicle for identity fraud.

Sincerely,

Lianna Costantino

Director

The Tribal Alliance Against Frauds