California Institute for Mental Health
Center for Multicultural Development

Community Defined Practices for Ethnic Populations Webinar Series

Native American Focus
California Consortium for Urban Indian Health

Evidence and Culturally Specific Practices

Wednesday, March 19, 2014
10:00 AM – 12:00 PM (PST)

Moving from Hurting to Healing to Helping:
Evidence-based Practice or Community-based Evidence in Indian Country

Facilitated by
Esther Lucero (Dine’)
Gayle Zepeda (Pomo)
J. Carlos Rivera (Pomo)

Moderated by Barbara Aragon
(Laguna Pueblo)
• Objectives
  – Present key issues regarding research in Native communities including historical issues of “research abuse.” Court cases by tribes, evidence based practice and the case for community-based evidence.
  – Identify core components of community defined practices and strategies for implementation.
  – Discuss a specific community defined practice model used and the evidence that proved its effectiveness.
  – Discuss how to evaluate the effectiveness of community-defined practices through evidence.
• Key Points
  – American Indian Sociopolitical Histories
  – Oppression through Policy and Research methods
  – Historical Trauma Theory
  – Storytelling
  – Evidence Based Practice System
  – Traditional/Cultural Practices as EBPs
  – Indigenous Research Agenda
  – Recommendations:
    Avenues for Policy Change

• Sovereignty
  – Johnson v. McIntosh, 21 U.S. 543 (1823)
  – Cherokee Nation v. Georgia, 30 U.S. 18 (1831)
  – Worchester v. Georgia, 31 U.S. 515 (1832)
  – Indian Self-determination and Education Assistance Act, Public Law 93-638 (1975)
• American Indian Social Political Histories
  – Extermination
  – Removal
  – Assimilation
  – Relocation & Termination
  – Self-Determination

Navajo Long Walk,
navajo-arts.com
Boarding Schools, Wild River Teaching Project, americanindiantah.com

Urban Relocation, National Archives and Records Administration
Indian Self Determination, nixonfoundation.org

- Oppression through Research
  - Manifest Destiny
  - Cultural Inferiority
  - Cultural Exploitation
  - Blood Quantum
THE LONG WALK FOR SURVIVAL
40-50% OF ALL INDIAN WOMEN HAVE BEEN STERILIZED.

Evidence of massive sterilization of Native Americans has been revealed by the U.S. General Accounting Office in a study for Sen. James Abourezk from South Dakota in 1979.

- Most of these women were sterilized without their informed consent.
- The 1974 GAO report also revealed that babies of Indian women taken on "human guinea pigs" by the Federal Government to 58 different medical experiments in most cases without parental consent.
- The Abourezk Report found that approximately 3,400 Indian women had been sterilized in a three-year period between 1972 and 1974, in only four states.

Lehman L. Brightman, President of Global Native Americans, Inc., estimates that between 50,000 and 100,000 Indian women have been sterilized in the last ten years.

- Most of these women were sterilized "unconsciously," without their informed consent, and many were by mistreatment.
- In some cases women were told they were going to lose all children, while they still had their own, in the name of sterilization.
- Two Indian women on the Flathead Reservation in Montana were sterilized with their husbands' consent and came out without their consent.

Voluntary sterilization among the general population of the U.S. of some 200 million women is growing as more women are educated, but in smaller groups of people like the American Indians, it could wipe them out forever, as an example.

- Over 80% of the states of California sterilized, the reason is that there is literature in the state. However, in 1974 California Indian women were sterilized, the decision is based on the federal standards and not on the Indians.

President Carter has volunteered 5 different occasions to blur the sterilization and to remove the Indian Programs in the Department of Health Services. The man must remain the hearer of the woman.
Historical Trauma Theory

– A cumulative, emotional, psychological wounding over the lifespan and across generations emanating from massive group trauma experiences

- Cycle of Violence
- Substance Use
- Self-Destructive Behavior
- Distrust of Government Systems
Microagression

**Microinsults:**
Communications that convey rudeness and insensitivity and demean a person's racial heritage or identity

When a person identifies themselves as AI/AN a common response is “I thought Indians were extinct.” This is a stereotype perpetuated in mainstream media, “the vanishing Indian.”

**Microinvalidations:**
Communications that exclude, negate or nullify the psychological thoughts, feelings, or experiential reality of a person of color

A non-Native person asking someone of AI/AN culture whether or not he or she is a “real Indian.” This demands an explanation that few others are required to deliver. This refers to the government requirement to prove AI/AN identity, which was derived through scientific methods designed to eliminate AI/ANs.

**Microassault:**
An explicit racial derogation characterized primarily by a verbal or nonverbal attack meant to hurt the intended victim

Microassaults against AI/AN people appear in the form of advertisements that depict White models in Native clothing, associations between AI/AN people and aggressive sports teams, and messages that connect AI/AN people with alcohol use.

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**Takani Network**

Healing Model, 2005

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### Healing method

- Confront trauma and embrace collective history
- Understand trauma
- Release traumatic pain
- Transcend trauma

### Example

- Learn AI/AN history
- Reconnect with traditional and cultural practices
- Engage in community sharing and reconnect with community
- Reclaim AI/AN identity, culture, and traditions
“To be without stories means to be without memories, which means something like being without a self”
~ Roger Schank

- Storytelling

- A Question of Epistemologies?
  - Evidence-based Practice System
    - Scientific Method
    - Controlled Studies
    - Rarely tested in AI/AN Communities
    - Approved process rigorous, requires duplication and sharing
  - Cultural/Traditional Practices
    - Native Science
    - Community Defined
    - Practice-based Evidence
    - Right to Self-Determination
    - Often used as to Culturally adapt EBPs
• Indigenous Research Agenda

  – Systematic Acceptance: Encourage the system to legitimize the use of AI/AN practices as stand alone EBPs
    • Increase AI/AN representation on NREPP
    • Increase visibility for AI/AN practices through academic publications, presentations, etc.
    • Increase research capacity for Tribal and Urban Indian Communities

  – Exercise Sovereignty: Provide a political platform for AI/ANs to exercise their sovereign rights to self-determination, and exempt them from the required use of non-AI/AN specific EBPs
    • Create a parallel EBP model utilizing Community Defined Evidence
      – Oregon Model
    • Hold Cultural property sacred so only general information is shared
    • Take legal action if necessary when/if AI/AN practices are refused as EBPs
Gathering of Native Americans (GONA): A Framework for Healing, Hope, and Community Action

A Presentation by
Gayle Zepeda
(Pomo)

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• History and Background

  – In 1994, the Center for Substance Abuse Prevention (CSAP) initiated a Community Partnership Training Program to assist Community Partnership grantees in support of community efforts to reduce and prevent alcohol, tobacco, and other drug abuse.

  – 250 Community Partnerships were funded, including 15 American Indian specific Community Partnerships.
• The Gathering of Native Americans (GONA)
  
  – *The Native American component of the cultural specific institutes*
  
  – *Created by a group of Native American consultants: The who’s who of Indian Country*
  
  – *Provided under a technical assistance and training contract*

• The GONA Process
  
  – The four parts of the GONA incorporate the values of four levels of human growth and responsibility that are found in Native cultures.
• Indigenous Knowledge
  – Is local knowledge unique to a given culture or society; It has its own theory and philosophy which is used as a basis for decision-making for all of life’s needs.

• Traditional Medicine
  – The sum total of health knowledge, skills and practices based on theories, beliefs and experiences indigenous to different cultures...used in the maintenance of health.

World Health Organization 2002
• **Goals of the GONA**
  - To provide a training experience which offers hope, encouragement and a positive basis for community action.
  - To provide Native communities with a framework to examine historical trauma and its impact.
  - To provide a training experience which emphasizes skill transfer and community empowerment.
  - To present a prevention strategy framework which is based on values inherent in traditional Native cultures.

• **GONA is based on Key Concepts**
  - Community healing is necessary for substance abuse prevention;
  - Healthy traditions in the AI/AN community are key to effective prevention;
  - The holistic approach to wellness is a traditional part of AI/AN belief systems;
  - Every community member is of value in empowering the community; and
  - GONA is a safe place to share, heal, and plan for action.
• Belonging
  – A place for all ages. A place for all kinds of people. The first level represents infancy and Childhood, a time when we need to know how we belong. It is the most important first lesson a person must learn to live comfortably and to work effectively.

• Mastery
  – Empowerment, for individuals and for the Community. The second level honors adolescence as a time of vision and mastery. Understanding AI/AN communities and the local contexts that inform work in partnership with other tribes/communities/governments.
• Interdependence
  – Action, community leadership. Adults, integral and inter-dependent within their families and their communities. Explores how we are interconnected with our environment and social network of our community.

• Generosity
  – Teacher / Elder, and resources in the Community. Honoring our elders, who give their knowledge and teachings to our generations of the future. Looking at our responsibilities to give back to our communities and share graciously.
• Key Elements of the GONA
  – Altar Set Up
  – Drum Call
  – Prayer and Ceremony
  – Storytelling
  – Affirmation & Ritual
  – Give Away
  – Planning for Action

Twenty years later, the GONA continues to offer hope and healing to Native communities
Walking the Red Road

A Presentation by
J. Carlos Rivera, CADC II
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Gifts of The Sacred Hoop

Forgiving the unforgivable

Healing

Hope

Unity

• Walking in Balance
  – The Good Red Road
  – Sense of Well Being
  – Harmony of Mind, Body & Spirit
  – Life Fulfillment (Visions)
  – Purpose In/Of Life
  – Sense of Joy
Talking Circles

• Provide:
  – Support for Men, Women & Youth
  – Relationship Building
  – Peer Support
  – Intrapersonal Skill Development
  – Healthy Risk Taking
  – Modeling Emotional Wellness

Sweat-lodge

• Offers
  – Spiritual Connection
  – Cultural Identity
  – Traditional Teachings
  – Sacredness
  – Healing and Cleansing
White Bison

- Teaches
  - Native Approach to 12-steps Using Medicine Wheel
  - Principles, Laws and Values
  - Peer Support
  - Relapse Prevention
  - Recovery Skills Development
White Bison

100 Native Communities in Healing By the Year 2010

- Warrior Down
  - Re-entry Peer Support
  - Job Training/Placement
  - Transitional/Clean & Sober Living
  - Traditional Model of Warrior
  - Cultural Awareness & Identity
Sober Spirits

- Youth Group
  - Leadership Development
  - Establish Cultural Identity
  - Peer to Peer Support
  - Healthy Role Models
  - Models Healthy Risk Taking
  - Build Self-Esteem/Worth
Brotherhood

• Questions?

Thank You
Upcoming Webinars

Community Defined Practices for Ethnic Populations Webinar Series

Asian Pacific Islander Focus – Special Service for Groups Alliance

Outreach & Engagement Practices with Diverse Asian Pacific Islander Communities

Wednesday, April 2, 2014 | 10:00 AM – 12:00 PM (PST)

Intervention within the contexts of Asian Pacific Islander Families and Communities Across the Age Span

Wednesday, April 16, 2014 | 10:00 AM – 12:00 PM (PST)

Community Defined Practice: Lessons Learned from Caring for Our Families in the Asian Pacific Islander Population

Wednesday, April 30, 2014 | 10:00 AM – 12:00 PM (PST)