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# Broken Statues and Broken Treaties:

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REPAIRING INDIGENOUS IDENTITIES DURING TIMES OF TRAUMA



# Learning Objectives

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1. Gain insight into the current events that link to historical trauma of the Native American experience.



2

2. Examine models of acculturation and understand how they can be applied to Native American populations.



3

3. Articulate interventions that explore, affirm, and sustain Native American identities.

# Thanks for being here

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There's a tremendous need in the community for providers who understand the culture and the community.

We appreciate you being here today and for giving the gift of time with us.

# Who's in the room?

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# What are your experiences with Natives?

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Have you ever treated any Native Americans?

Do you come across any Native Americans in your day-to-day life?

What questions do you have regarding the treatment of Native Americans?

What questions do you have regarding Native American culture?

Today's an open conversation for the growth of everyone here.

# Who is a Native American?

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# Who the people are

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## **Demographics/Societal Issues**

Approximately 1.2% of the U.S. population, or roughly 4 million Americans, identify themselves as having Native American or Alaska Native heritage.

There are 573 federally recognized Native American tribes and Native Americans speak more than 200 indigenous languages.

- In comparison there are 195 countries in the world.

Roughly 78% of Native Americans now live in urban, suburban, or rural non-reservation areas

Native Americans have twice the rate of victimization than that of African Americans, and more than 2.5 times that of Caucasians.

Compared to the total U.S. population, more than twice as many Native Americans live in poverty. In 2013, Native American men and women were nearly twice as likely as Caucasians to be unemployed.

# Native American LifeLines

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COMMUNITY-BASED  
PUBLIC HEALTH  
NON-PROFIT

## ABOUT

Native American LifeLines, Inc., a registered 501c3 nonprofit organization, is a **Title V Indian Health Services contracted Urban Indian Health Program** serving the Baltimore and Boston metropolitan areas.

## OUR MISSION

The mission of Native American LifeLines is to promote health and social resiliency within Urban American Indian communities. Native American LifeLines applies principles of **trauma-informed care** to provide **culturally-centered** behavioral health, dental, and outreach and referral services.

## THREEFOLD APPROACH

Community centered, culturally grounded, and trauma-informed.

*Drum making workshop, kids culture class, White Bison AA meetings, Wellbriety Recovery Model, smudge, wilderness therapy, grief ceremony, indigenous foods sovereignty*



# Tribal Recognition

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Historically, most of today's federally recognized tribes received federal recognition status through treaties, acts of Congress, presidential executive orders or other federal administrative actions, or federal court decisions.

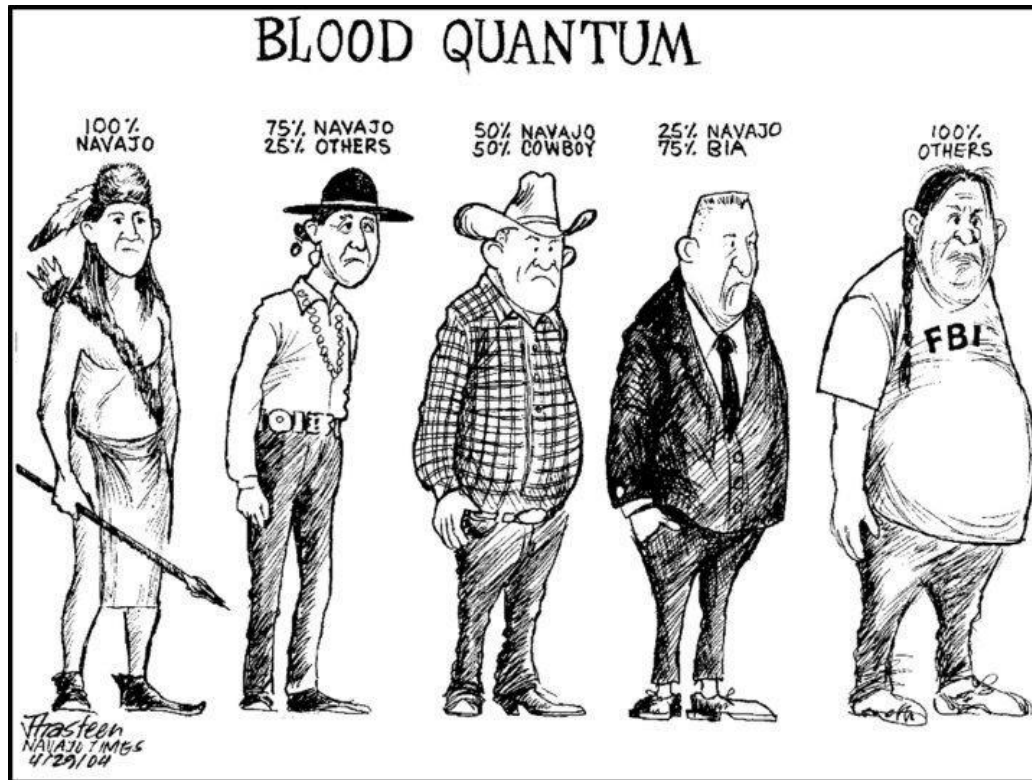
In 1978, the Interior Department issued regulations governing the Federal Acknowledgment Process (FAP) to handle requests for federal recognition from Indian groups whose character and history varied widely in a uniform manner. These regulations – 25 C.F.R. Part 83 – were revised in 1994 and are still in effect.

Also in 1994, Congress enacted Public Law 103-454, the Federally Recognized Indian Tribe List Act (108 Stat. 4791, 4792), which formally established three ways in which an Indian group may become federally recognized:

- By Act of Congress,
- By the administrative procedures under 25 C.F.R. Part 83, *or*
- By decision of a United States court.

However, a tribe whose relationship with the United States has been expressly terminated by Congress may not use the Federal Acknowledgment Process. Only Congress can restore federal recognition to a “terminated” tribe.

# Blood quantum



## Blood quantum

- **Blood Quantum** is the total percentage of your **blood** that is tribal native due to bloodline. All of the Nations use **Blood Quantum** as a requirement for membership. Usually this is detailed on a CDIB (Certificate of Degree of Indian **Blood**) Card issued by the United States Government.

[\\*americanindiansource.com/bloodquantum.html\\*](http://americanindiansource.com/bloodquantum.html)

# Who serves them?

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## Indian Health Services

- Tribal
  - Focuses on services for those on reservations
    - Dedicated hospitals, clinics, etc.
- Urban Indian Programs
  - For anyone who's not on a reservation
- Independent Providers
  - Basically you
    - Note: It can be hard to get accurate numbers of person(s) served due to misrepresentation of data

# SERVING THE HEALTH NEEDS OF URBAN INDIANS

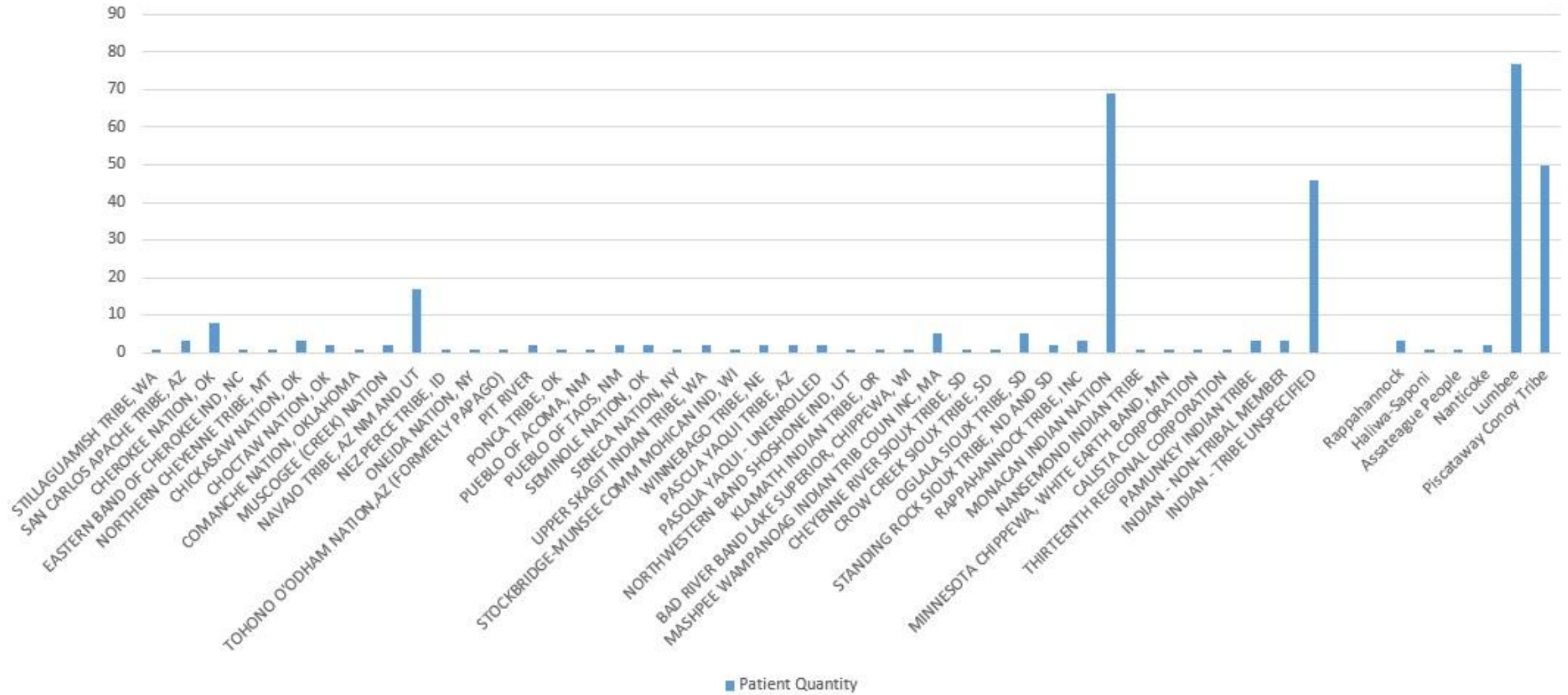
Programs across the United States are providing holistic health care to urban Indians, including private, non-profit corporations receiving partial funding from the Indian Health Service as well as social- and faith-based organizations. UIHI defines the service areas of these programs as Urban Indian Health service areas and are illustrated below in Map 1.



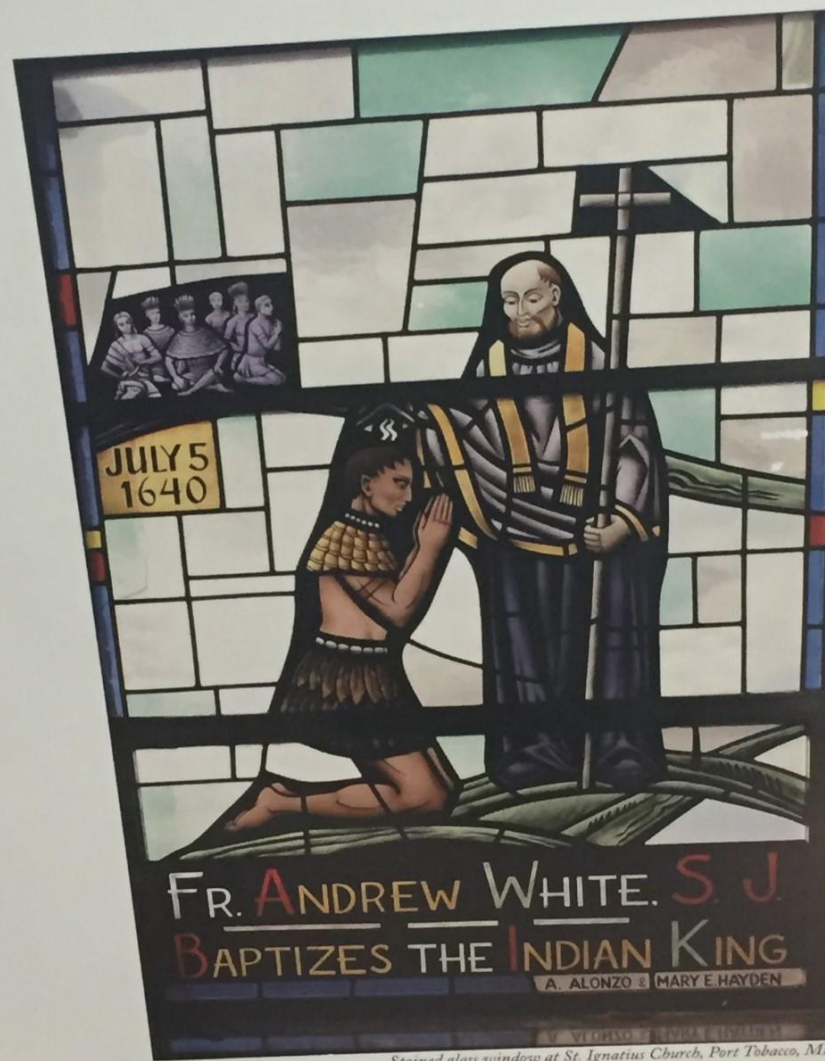
**Map 1. Urban Indian Health Service Areas**

Urban Indian Health Institute, 2018

Patient Quantity







# The Tension of Liberty

A working farm provided a refuge for religion at the cost of freedom for enslaved laborers.

These 4,000 acres became known as Saint Thomas Manor in 1649. Farm revenues supported the Jesuit's works throughout the colonies, and a church building here allowed Catholics to worship on private land undisturbed.

## Plantation Records

By 1700, Saint Thomas Manor, like many farms in the colony, relied on enslaved Africans as farm workers. In 1838, 272 slaves were sold across Jesuit plantations in Maryland, including families here at Saint Thomas Manor.



An aerial view from 1944 shows the other side of the manor from where you stand.

Discover more at  
DestinationSouthernMaryland.com

Data Source: U.S. Census Bureau, 2015 American Community Survey (ACS), 1-Year Estimates, ([www.census.gov/acs](http://www.census.gov/acs))

Table 1. Population by Race, Maryland and Massachusetts

	Maryland		Massachusetts	
	Estimated Count	Margin of Error	Estimated Count	Margin of Error
Total Population	6,006,401	---	6,794,422	---
One Race	5,819,107	+/-10,053	6,596,038	+/-10,100
White	3,395,048	+/-10,270	5,373,238	+/-12,798
Black	1,770,161	+/-10,035	499,357	+/-8,709
AI/AN*	15,403	+/-2,830	10,663	+/-1,777
Asian	385,167	+/-4,604	430,739	+/-4,536
NH/PI**	2,911	+/-801	1,410	+/-690
Some other race	250,417	+/-12,016	280,631	+/-12,650
Two or more races	187,294	+/-10,053	198,384	+/-10,100
AI/AN and White <sup>§</sup>	17,623	+/-2,111	21,399	+/-1,660
AI/AN and Black <sup>§</sup>	11,296	+/-2,736	5,731	+/-1,815
Race alone or in combination*	6,006,401	---	6,794,422	---
White	3,544,608	+/-12,887	5,545,771	+/-14,434
Black	1,883,491	+/-6,483	604,736	+/-8,800
AI/AN*	59,795	+/-5,214	46,695	+/-2,684
Asian	441,156	+/-3,917	484,698	+/-3,395
NH/PI**	12,743	+/-3,281	7,469	+/-1,532
Some other race	272,271	+/-12,076	315,213	+/-11,809

\* AI/AN = American Indian/Alaska Native

\*\* NH/PI = Native Hawaiian and Other Pacific Islander

# What does the community face?

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What do you think are issues?





Of those, over  
**21%**  
had a diagnosable  
mental illness in the  
past year.<sup>2</sup>



That is over  
**830**  
thousand  
people



Enough to FILL EVERY major  
league baseball stadium on the  
East Coast TWICE<sup>3</sup>



**x 2**

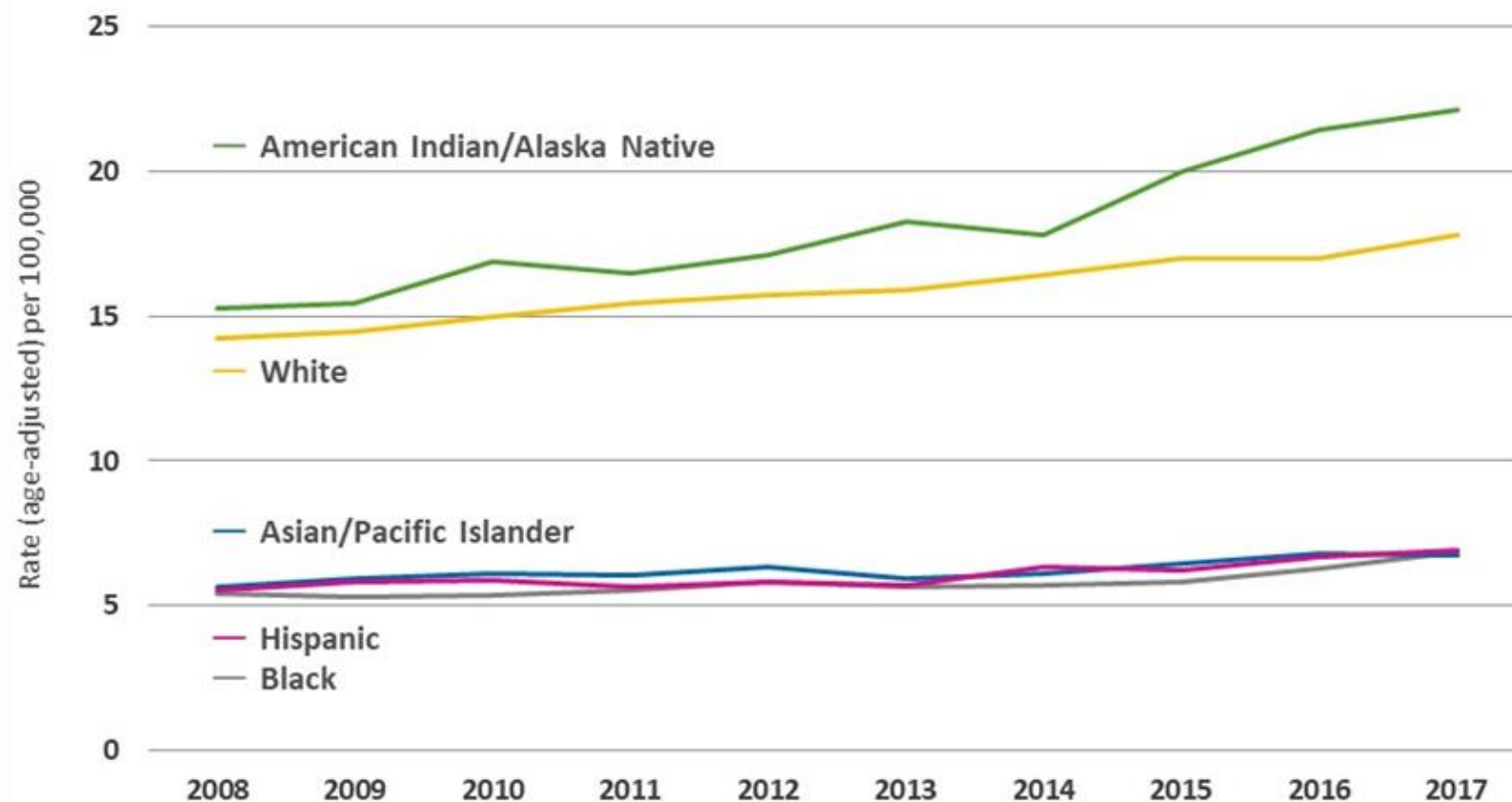
SOURCES

<sup>1</sup>United States Census Bureau. (2014). American fact finder. Retrieved from <http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk>

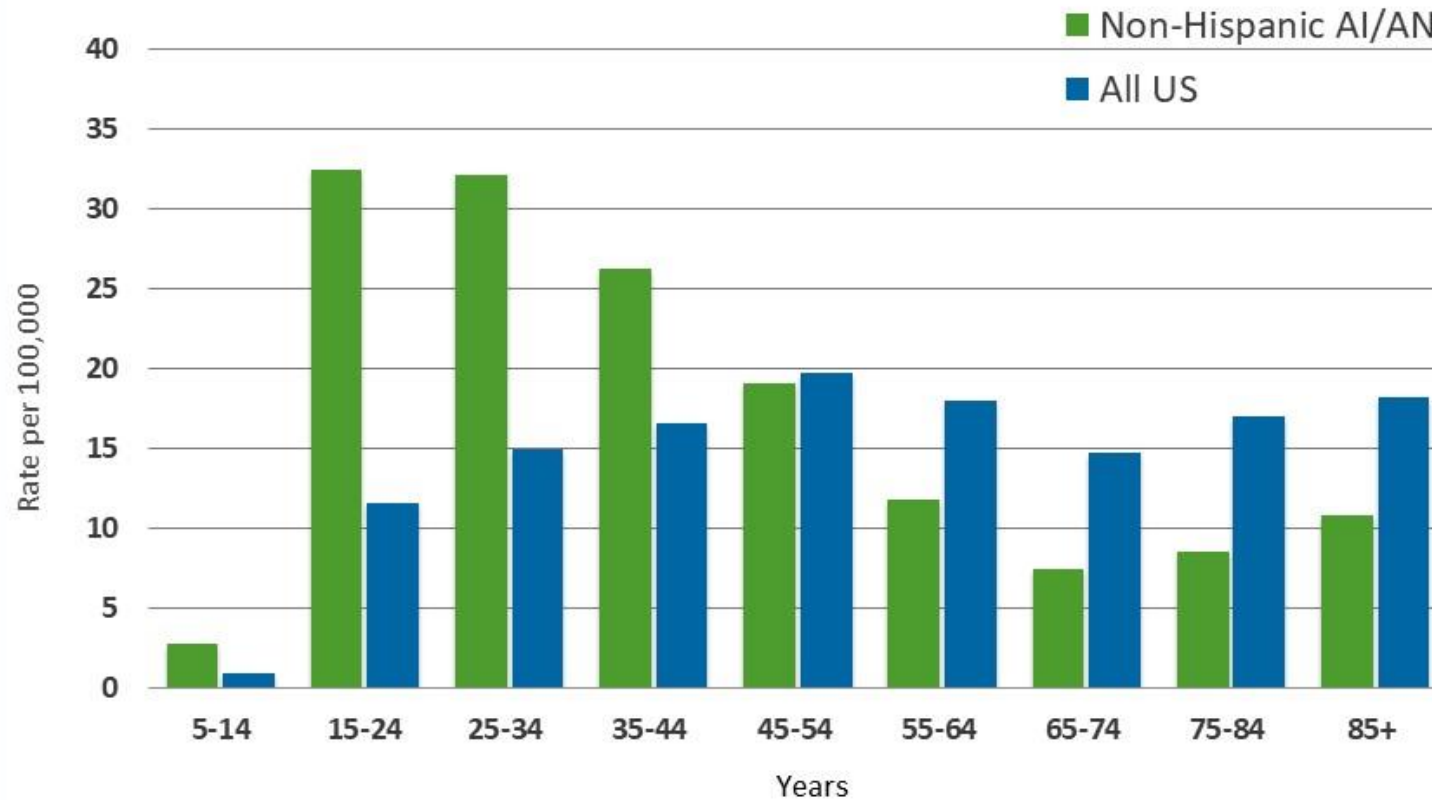
<sup>2</sup>Substance Abuse and Mental Health Services Administration. (2014). Racial and ethnic minority populations. Retrieved from <http://www.samhsa.gov/specific-populations/racial-ethnic-minority>

<sup>3</sup>Wikipedia List of Major League Baseball Stadiums. Retrieved from [https://en.wikipedia.org/wiki/List\\_of\\_Major\\_League\\_Baseball\\_stadiums](https://en.wikipedia.org/wiki/List_of_Major_League_Baseball_stadiums)

## Rate of Suicide by Race/Ethnicity, United States 2008-2017



## Suicide Rate by Age for American Indians/Alaska Natives Compared to U.S. (Average 2008-2017)



# Locally

Top 5 Causes of Death for Americans Indians/Alaska Natives and Non-Hispanic Whites from 2010-2014 in Maryland <sup>+</sup>								
		American Indian/Alaska Native				Non-Hispanic White		
Rank	Cause of Death	Rate (per 100,000)	Lower CI*	Upper CI*	Cause of Death	Rate (per 100,000)	Lower CI*	Upper CI*
1	Vascular Disease	68.9	50.7	87.1	Vascular Disease	231.2	229.1	233.3
2	Cancer	56.5	40.8	72.3	Cancer	179.3	177.4	181.2
3	Diabetes	8.8	2.0	15.7	Chronic Lower Respiratory Disease	40.5	39.6	41.4
4	Chronic Lower Respiratory Disease	6.7	1.6	11.8	Flu and Pneumonia	27.1	26.7	27.6
5	Intentional Self- Harm	5.8	1.4	10.1	Alzheimer's Disease	17.0	16.5	17.6
<sup>+</sup> US Center for Health Statistics, Death Certificates, 2010-2014 <sup>*</sup> CI=95% Confidence Interval								

# Trauma's role in Native American life

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Historical trauma

Intergenerational trauma

Individual trauma

World views as a guide to what is most critical

- What is relevant to the individual?



# Historical Trauma

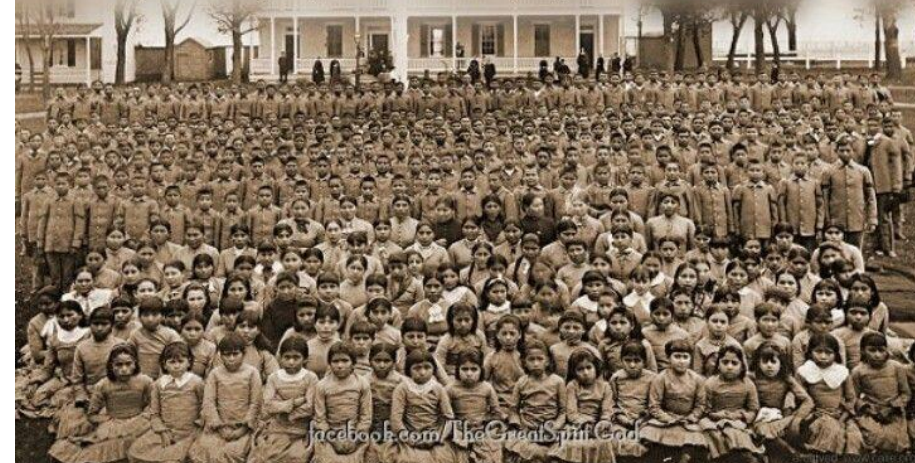
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“Cumulative emotional and psychological wounding, over the lifespan and across generations, emanating from massive group trauma experiences” (Brave Heart, 2003)

Any such events with Native Americans that you can think of?

Historical trauma is entirely different than consciously holding onto the past when it resides in your ancestral memory and DNA. It results in numerous defense mechanisms, developmental malfunctions, and behavioral issues. This is scientific and is supported in studies.

~Tony Ten Fingers/Wanbli Nata'u, Oglala Lakota



# Historical Trauma: Native American Experience

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Accumulation of genocidal acts

Recycling epidemics of disease

War

Forced relocation

Forced assimilation

Disruption and decimation of social systems(economic, sustenance, kinship networks, family ties)

(see Thornton, 1987, Wiechelt & Gryczynski, 2011)

**\*\*This is an ongoing experience for Native American communities and individuals\*\***



Kill the Indian



**No, you don't understand.**



# Trauma

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Experience an extremely stressful event (s) that overwhelm one's coping capacity.

ICD – 10

- Broadly defines precipitating traumatic event “exceptionally threatening or catastrophic event which is likely to cause pervasive distress in almost anyone.”

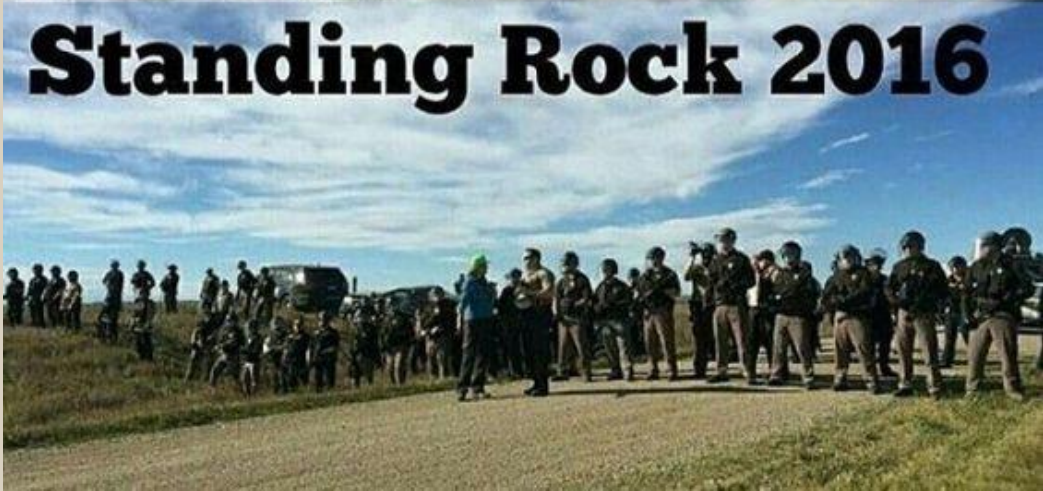
(World Health Organization, 2007)



**Wounded Knee 1890**



**Standing Rock 2016**

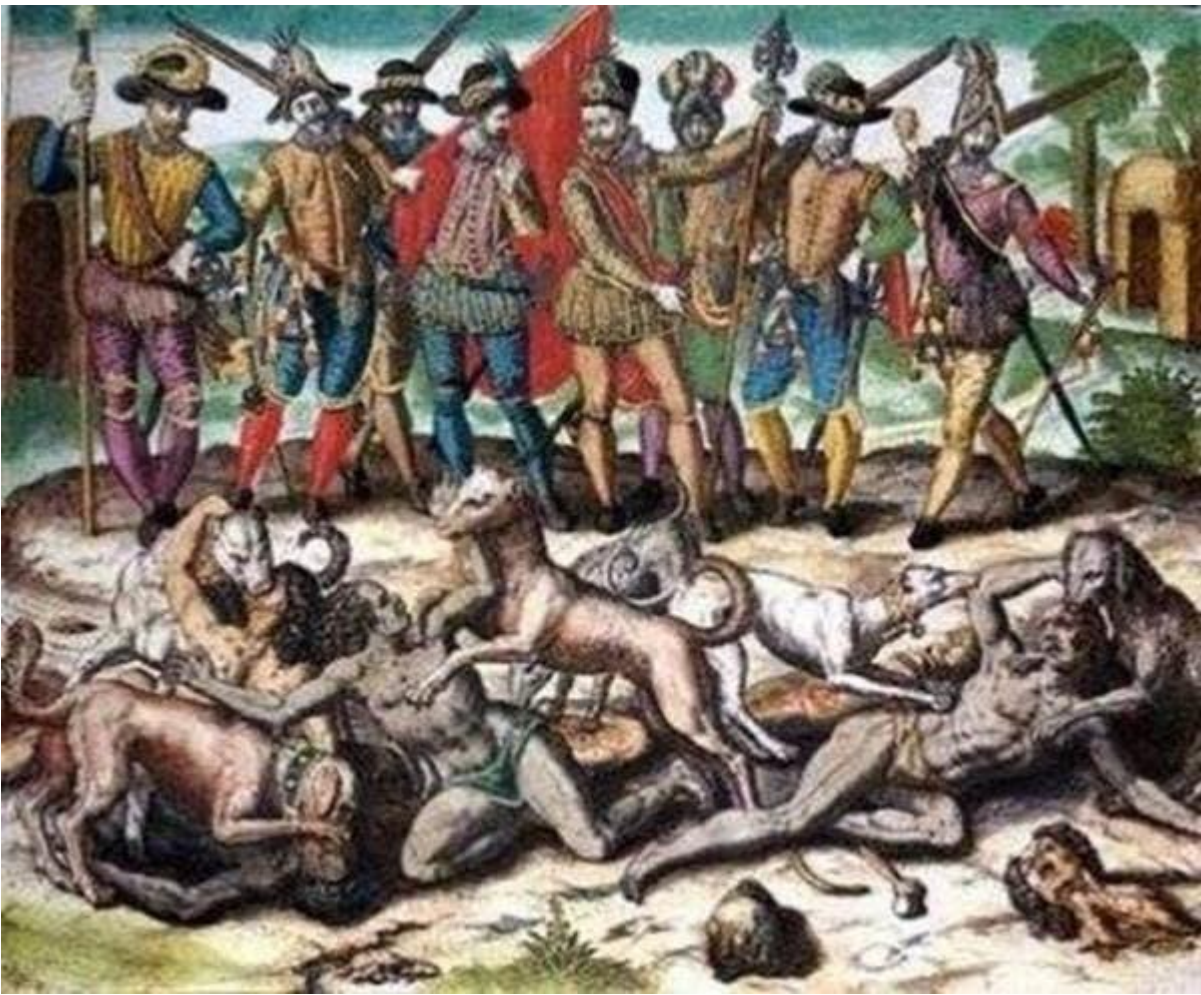


Land and Rights



## Old and New Troubles with Disease





Columbus

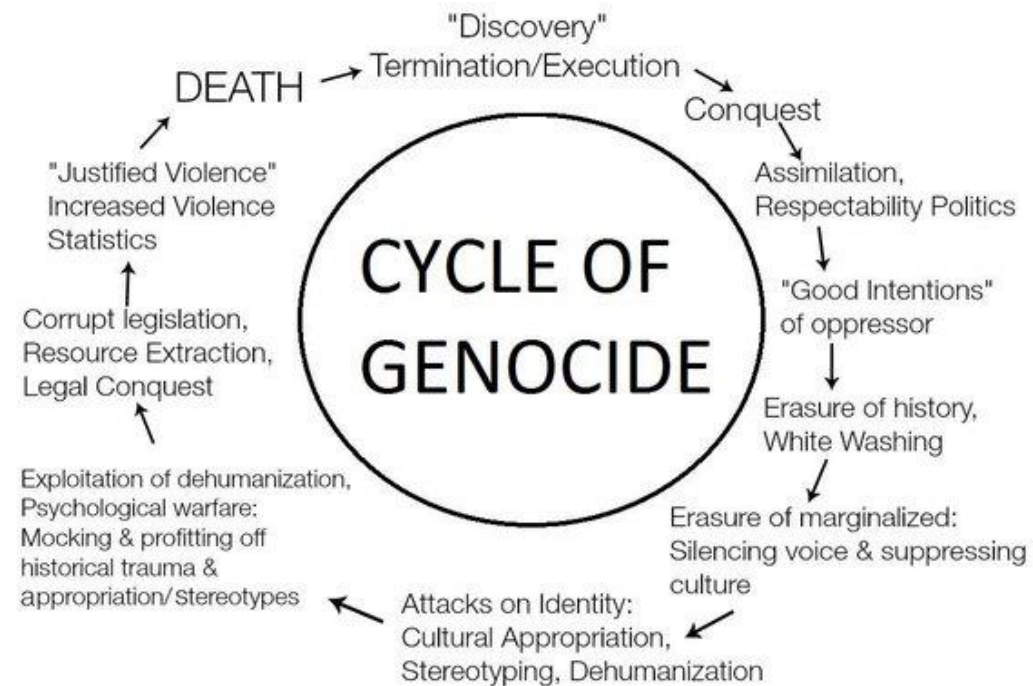


What gets broken and finding healing



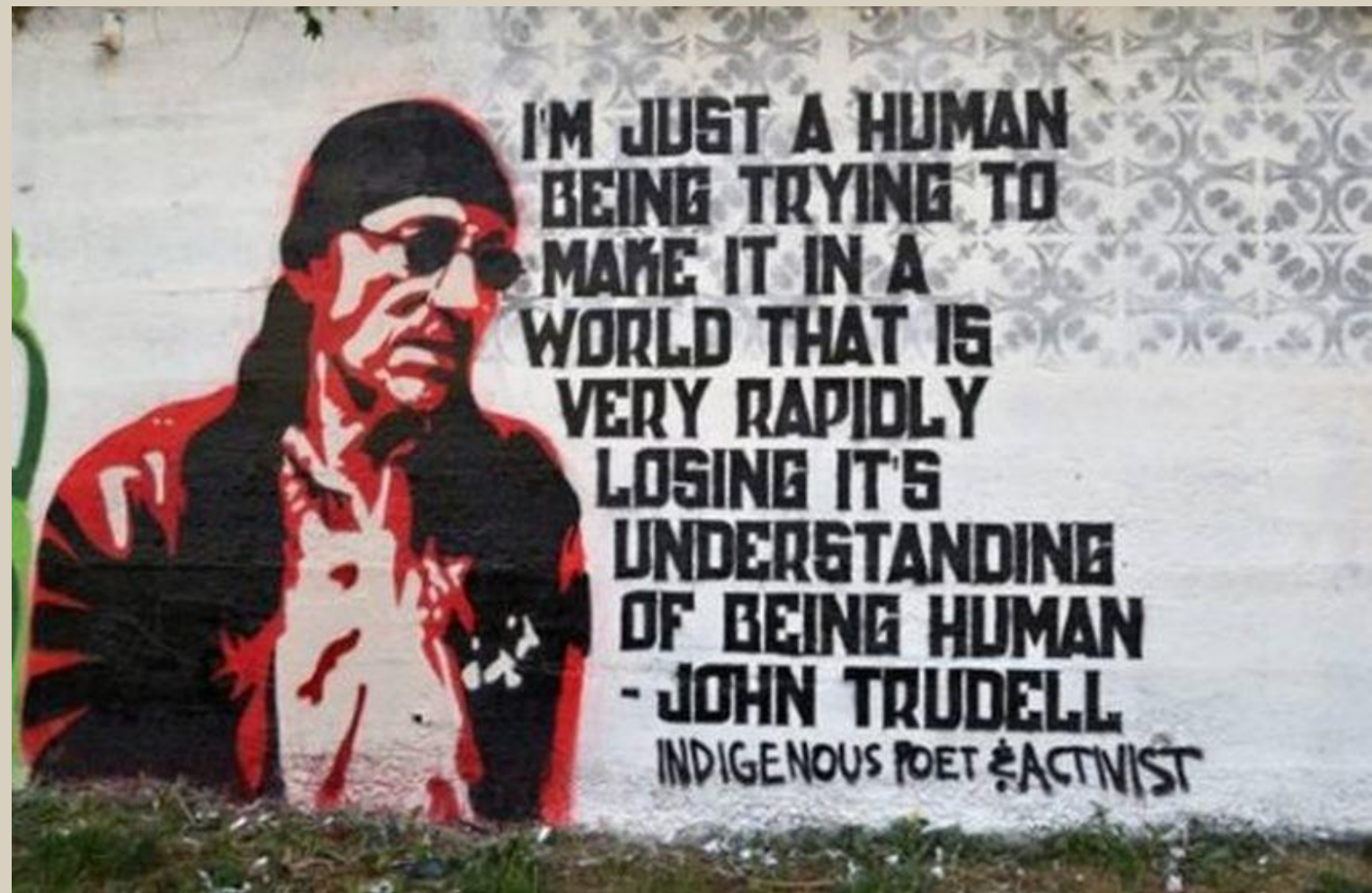
# Culture of trauma

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**"Someone needs to explain to me why wanting clean drinking water makes you an activist, and why proposing to destroy water with chemical warfare doesn't make a corporation a terrorist."  
- WINONA LADUKE**



Resist and Resilience



# Supreme Court Rules That About Half Of Oklahoma Is Native American Land

July 9, 2020 - 7:17 PM ET



LAUREL WAMSLEY



## Victories

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The Supreme Court ruled Thursday that about half of the land in Oklahoma is within a Native American reservation as stated in treaties.

Brandon Smolawski/APR via Getty Images

# Interracial Indians

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# Acculturation

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		<i>Lose Indigenous Culture</i>	
		Yes	No
<i>Gain Anglo Culture</i>	Yes	Acculturated	Bi-cultural
	No	Marginalized	Traditional

- The process of social, psychological, and cultural change that stems from blending between cultures. The effects of acculturation can be seen at multiple levels in both the original (native) and newly adopted (host) cultures.
  - Can view Native Americans as having indigenous and Western identities

# Models of Racial Development

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Black American Racial Identity (William Cross)

Biracial (Poston)

White Racial Identity Model (Helms)

# Importance of Broaching Culture

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Broaching behavior refers to a consistent and ongoing attitude of openness with a genuine commitment by the counselor to continually invite the client to explore issues of diversity. In essence, the counseling relationship becomes the vehicle for navigating a discussion concerning issues of difference related to race, ethnicity, and culture” (p. 402, Day-Vines et al., 2007)

- Inquires about role of culture in presenting problem
- Places the responsibility on the counselor

For example: “We’re both from different ethnic backgrounds. I’m wondering how you feel about working with a White European American woman on your concerns.” (p. 402, Day-Vines et al., 2007)

# Traditional cultural norms

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## Respect for Elders

- Elders are traditionally respected for their knowledge and their place in the community

## Respect for Women

- Traditionally most Native American societies were matrilineal and still many tribes operate on this principal

## Respect for Veterans

- Warriors have traditionally been appreciated for their service to the community
  - Native Americans serve in a higher rate than any other minority

## Acceptance and appreciation for LGBTQ+

- Everything has a purpose



# Stigma on treatment

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Due to distrust and modalities of treatment that are not culturally-informed many Natives are hesitant to engage in treatment

Many also have don't like discussing mental health or substance issues that are occurring personally

- This can be due to complex trauma that surrounds these issues that is difficult to address



# Laws regarding treatment of Native Americans

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## Indian Health Improvement Act (<https://www.ihs.gov/ihcia/>)

- Focuses on allowing Native Americans independence and autonomy in treating themselves
- Improves overall access to healthcare for Native Americans in the U.S.
- Important to know as you might want to offer to help link an NA individual with someone within their community for services.
- Also important because if you have an NA client who is part of a federally recognized tribe they qualify for medical assistance as long as they are under the income ceiling.

## Indian Child Welfare Act

- Enacted in 1978 in response to a crisis affecting American Indian and Alaska Native children, families, and tribes.
  - Large numbers of Native children were being separated from their parents, extended families, and communities by state child welfare and private adoption agencies.
    - 25%–35% of all Native children were being removed; of these, 85% were placed outside of their families and communities—even when fit and willing relatives were available.
- In essence, Native American child need to stay with Native American families in foster or adaptation processes.

# Needs of the community

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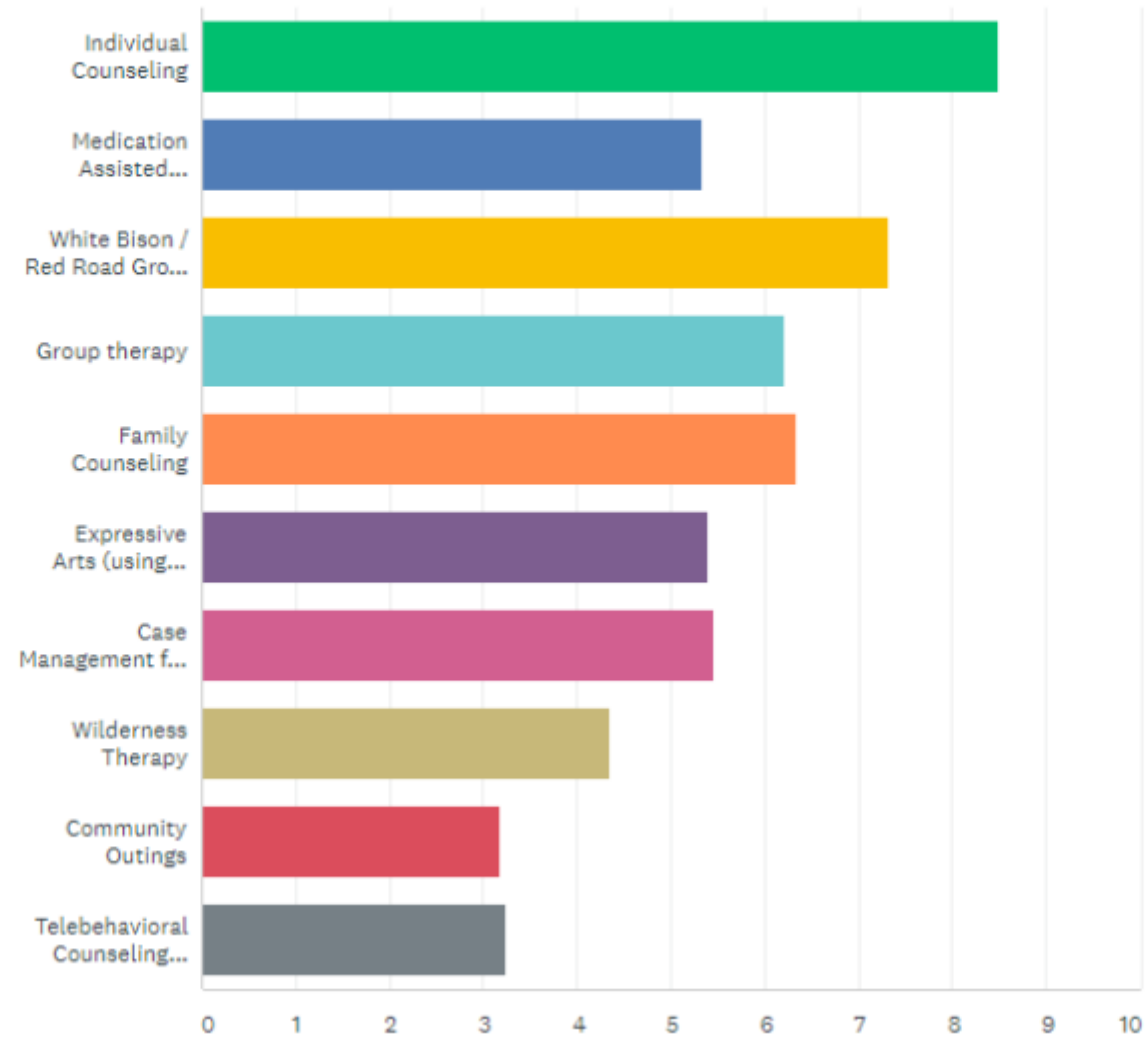
Are vast

- Economic improvements
- Social justice
- Public health
  - Increased access to mental health treatment
  - Increased access to substance use treatment
  - Increased access to medical care

What can you do?

Please rank what types of treatment you think the community could most benefit from (1 the highest priority and 10 being the lowest).

Answered: 45   Skipped: 0



# Interventions with Native Americans

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## Trauma-informed Care

- How would you define trauma?

## Cultural as a part of clinical intervention

- Repairing trauma, reconnecting with identity

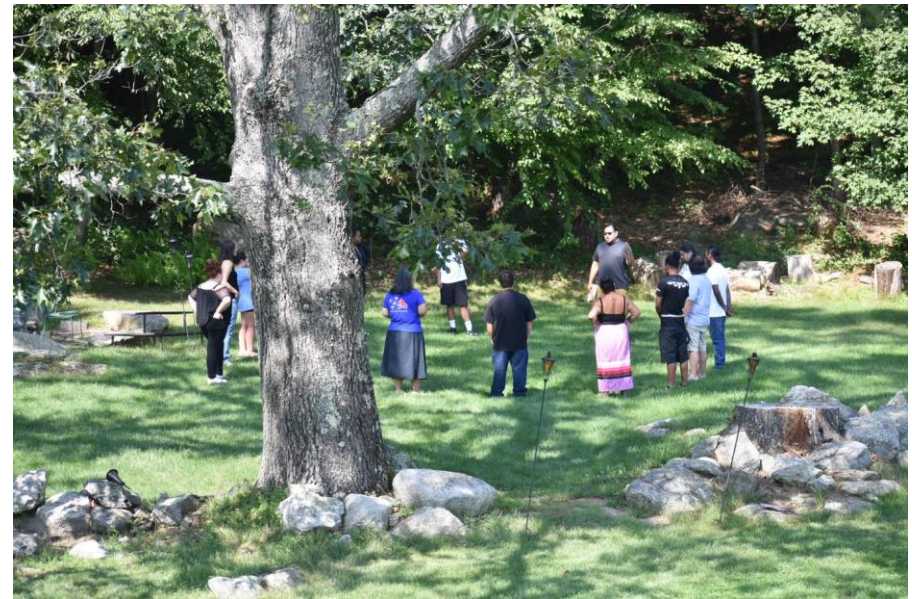
## Adapting existing modalities of treatment

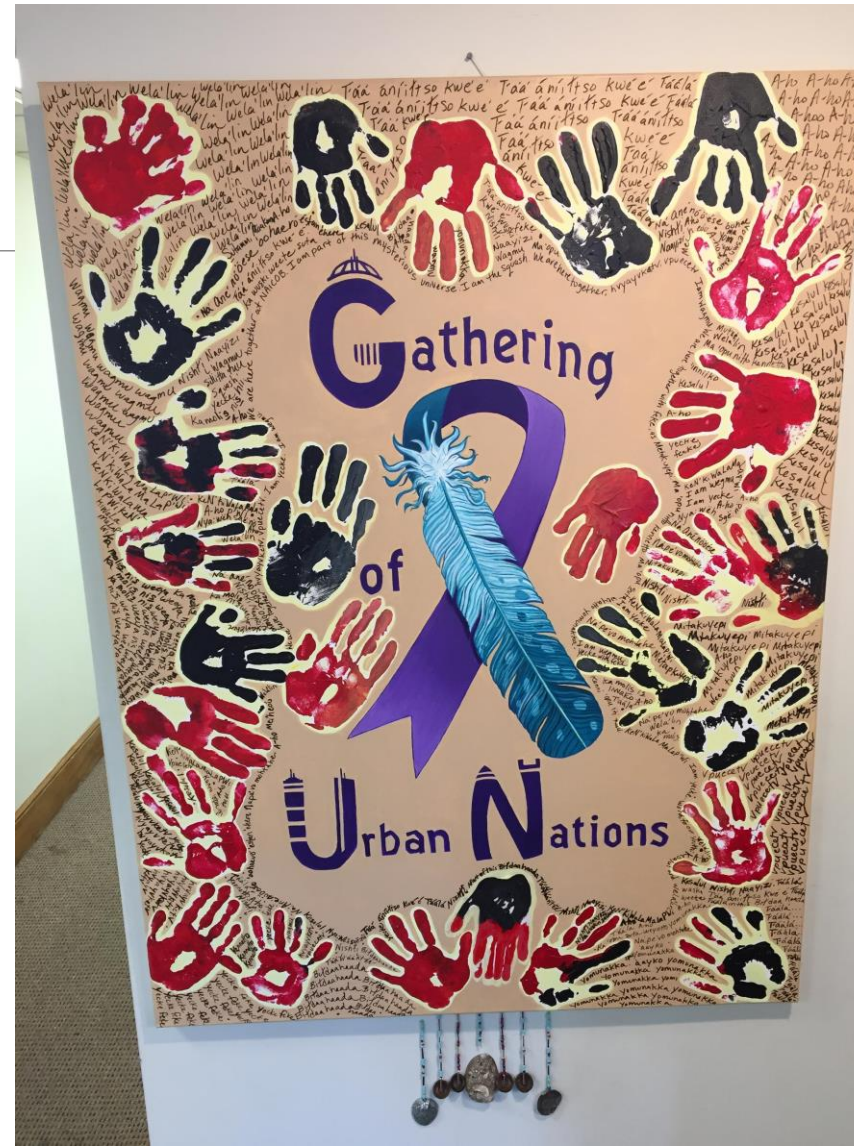
- Any treatments that you are interested in using or trying?
- Anything that you feel works?

# Gathering Of Native Americans

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A GONA is a culture-based planning process where community members gather to address community-identified issues. It uses an interactive approach that empowers and supports AI/AN tribes. The GONA approach reflects AI/AN cultural values, traditions, and spiritual practices.







# Outward Bound Expeditions

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Week long trips that focused on nature, life skills, leadership and grief processing.

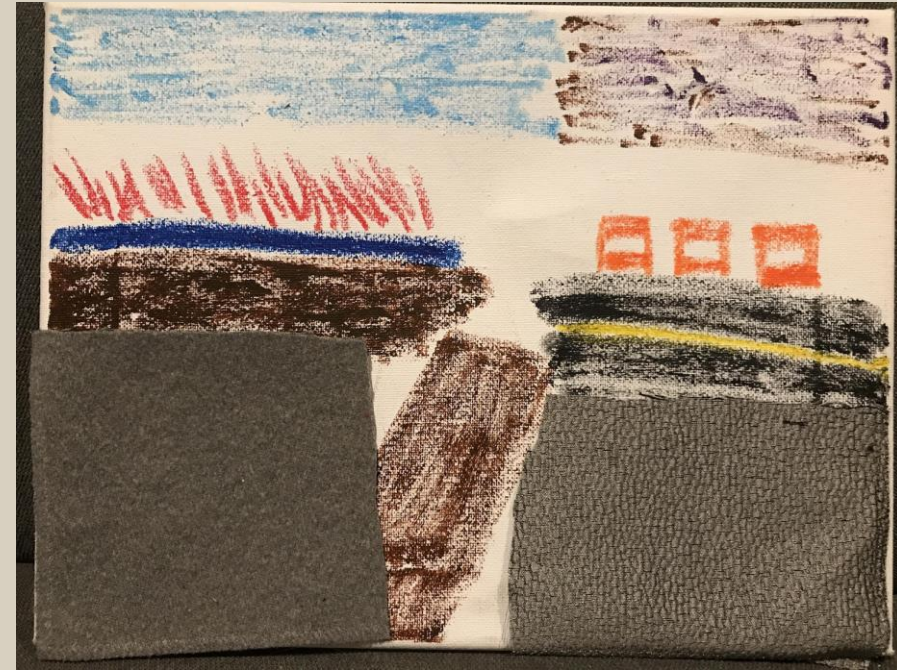


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Art therapists are encouraged to “**tap into Indigenous roots and arts practices** to facilitate healing, as **response to ‘the previous one-sidedness and closed mindedness of religious belief systems’** that had constructed ‘an equally one-sided denial of spiritual realities within the dogma of empiricism.’”

(McNiff as cited in Napoli, 2018)





Walking two paths

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Art therapy is particularly relevant to the healing process of Native Americans due to the historical and cultural context of their trauma. Native American people have traditionally used art-making for both utilitarian and spiritual practices. Native beadwork, textiles, jewelry, clothing and contemporary works of visual art reveal a **rich heritage of utilizing the creative process for balance and community wellness**. Within this culture there is **already a context for the use of art as a pathway to healing and balance**.

(Bien, 2005)



## Reflecting on your response



# Take-aways

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- Build rapport / explore presenting problem
- Evaluate culture / acculturation
  - Can need to specifically look at tribe or even band/clan
  - What generation are they living away from their community?
- Evaluate trauma history
  - Know that they will have historical trauma in their background
- Make appropriate referrals / consult
  - Indian Health Services, Native American Health/Treatment Centers
- Be genuine
  - Broach, be present, be mindful/respectful of cultural norms

# Questions?

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# Exposure to Native American culture

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Finding local Powwow's

- <https://www.powwows.com/>

Baltimore American Indian Center

- <http://baltimoreamericanindiancenter.org/>

National Museum of the American Indian

- <https://americanindian.si.edu/>





# Sources/Further learning

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<https://www.ihs.gov/urban/aboutus/>

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