



# Engaging American Indian/ Alaska Native (AI/AN) Relatives in Psychotherapy

Presenter

John Jewett, MA NCC  
NM - LMHC,  
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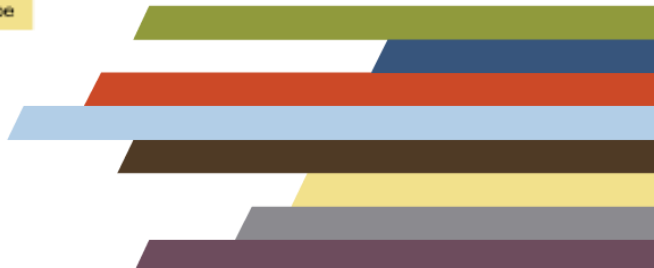
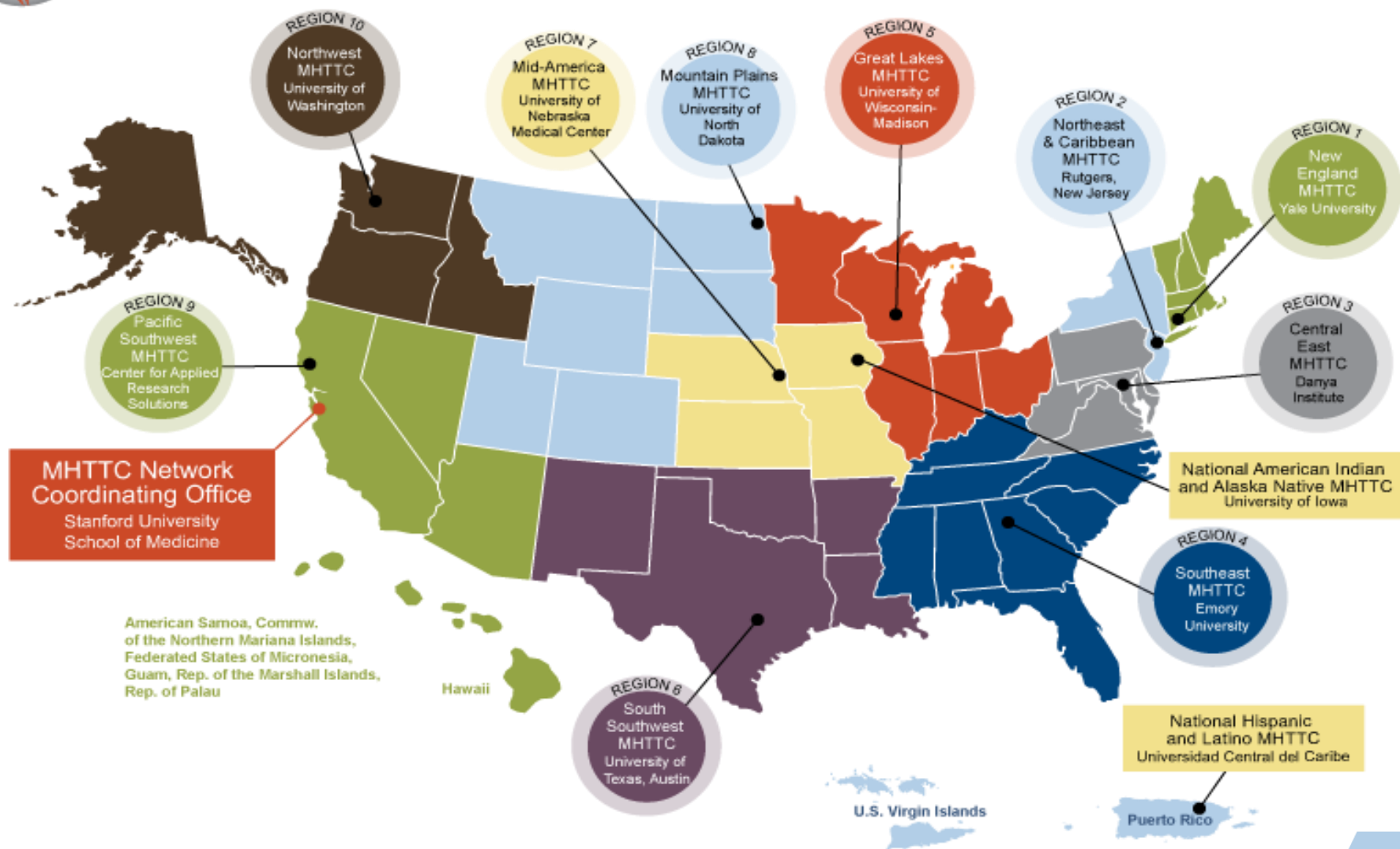


# MHTTC

## Mental Health Technology Transfer Center Network

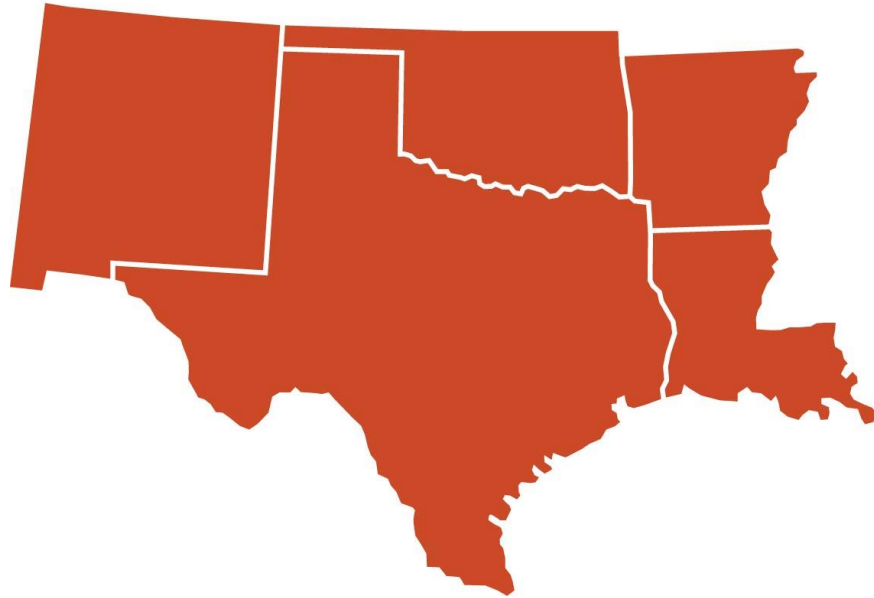
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# MHTTC Network





 The University of Texas at Austin  
Texas Institute for Excellence  
in Mental Health  
*School of Social Work*



# SOUTH SOUTHWEST MHTTC

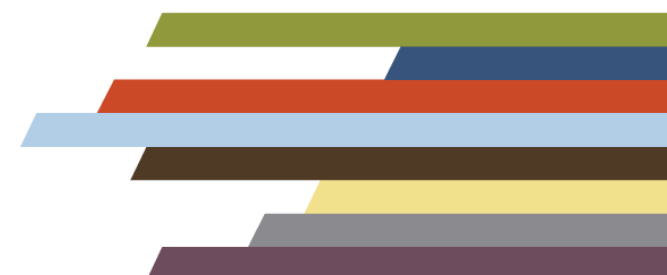


South Southwest (HHS Region 6)

**MHTTC**

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration



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# PRESENTER



**John Jewett (he/him) MA NCC, NM - LMHC, CO – LPC, CAS**

*Psychotherapist @Indian Health Service / National American Indian and Alaska Native MHTTC*

John is a member of the Oglala Lakota Nation, and has spent his entire psychotherapy career in “Indian Country”. He is a Board Certified Clinical Counselor who is currently practicing at the Indian Health Service in Albuquerque, NM. Prior to that he managed the Behavioral Health Programs at Sandia Pueblo in New Mexico and at Denver Indian Health and Family Services in Colorado. In addition to being a Professional Counselor, John is also a Certified Addictions Specialist. Prior to his 10 year career in counseling, John spent over 20 years working for international, national and local non-profit organizations. In his spare time, he enjoys fishing, camping and playing tennis.





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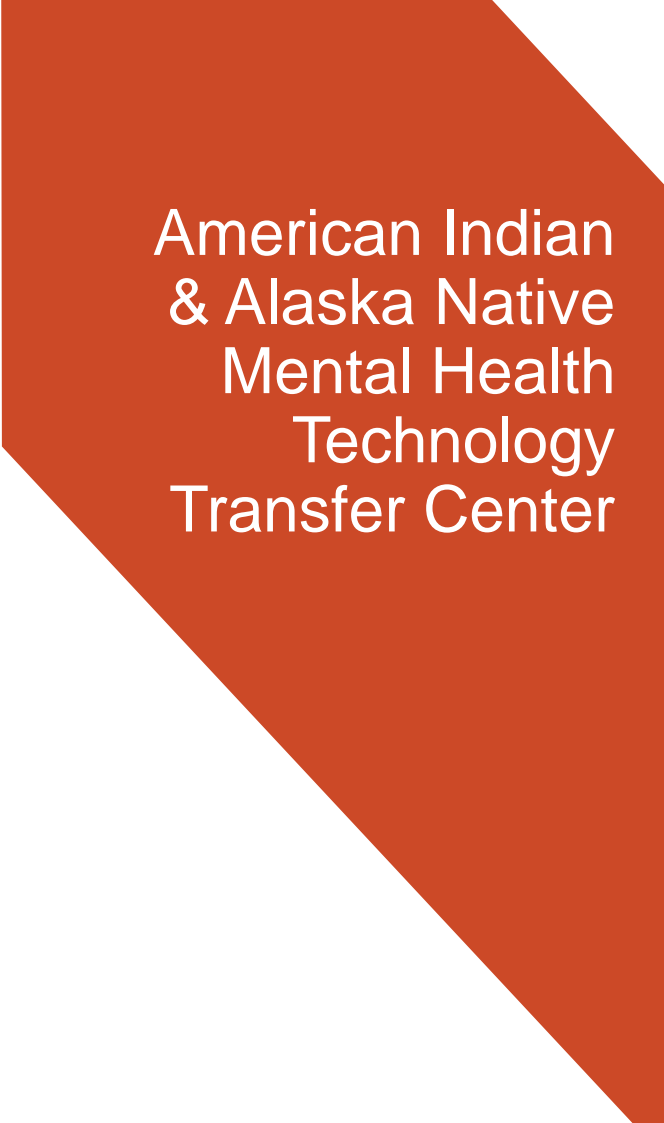


**MHTTC**

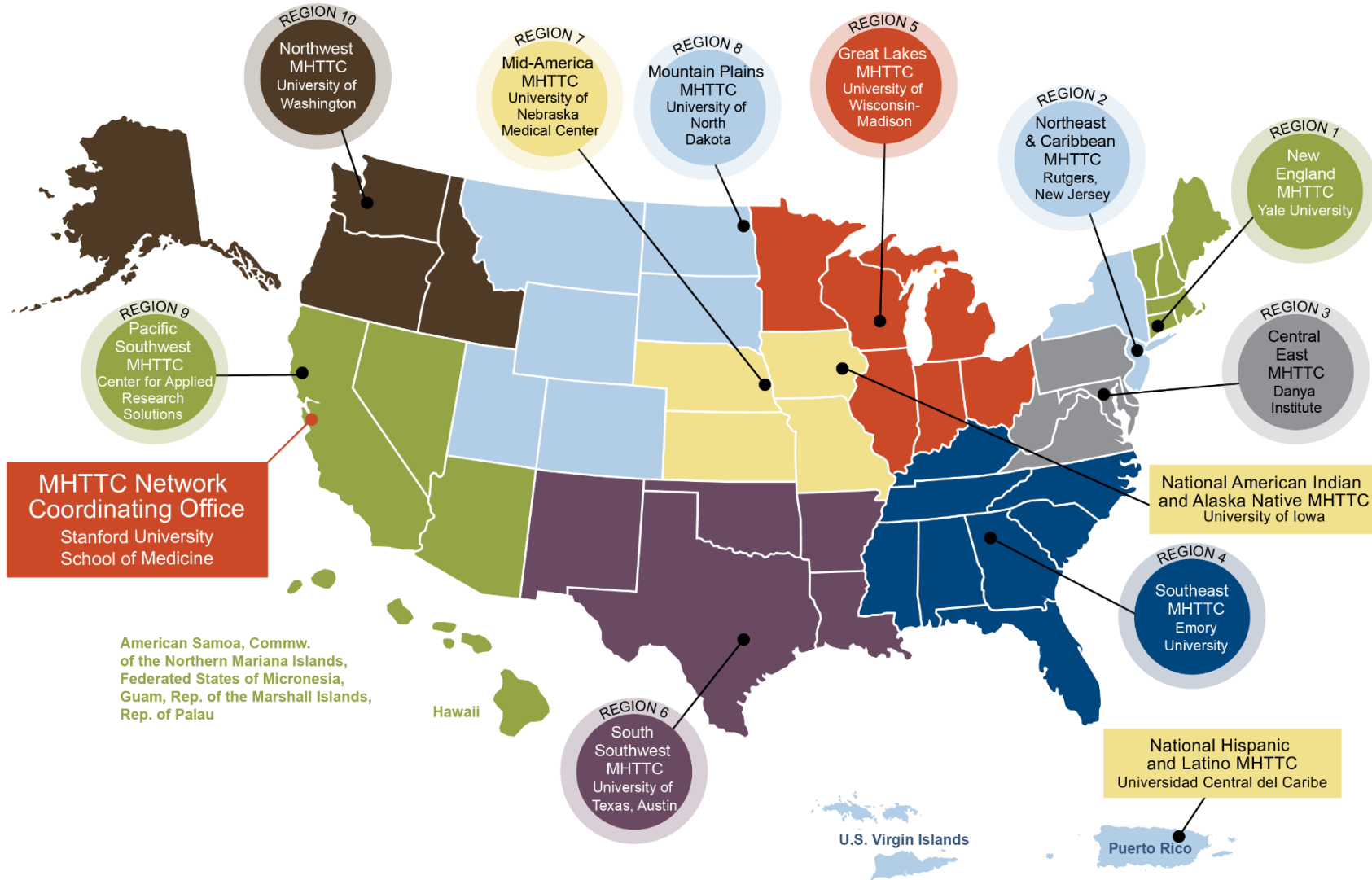
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**MHTTC Network**



**American Indian  
& Alaska Native  
Mental Health  
Technology  
Transfer Center**



# ***SAMHSA***

Substance Abuse and Mental Health  
Services Administration

The National American Indian and Alaska Native Mental Health Technology Transfer Center is supported by a grant from the Substance Abuse and Mental Health Services Administration (SAMHSA).

The content of this event is the creation of the presenter(s), and the opinions expressed do not necessarily reflect the views or policies of SAMHSA, HHS, or the American Indian & Alaska Native MHTTC.





# Land Acknowledgement

We would like to take this time to acknowledge the land and pay respect to the Indigenous Nations whose homelands were forcibly taken and inhabited. Past and present, we want to honor the land itself and the people who have stewarded it throughout the generations.

While injustices are still being committed against Indigenous people on Turtle Island, today we say thank you to those that stand with Indigenous peoples.



# Engaging American Indian/ Alaska Native (AI/AN) Relatives

3 C's of integrating Indigenous consideration  
into your practice (**Stately** (Ojibwe) & **Waltman** (Lakota))

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**Context** (Understanding the story)

**Comfort** (Welcoming)

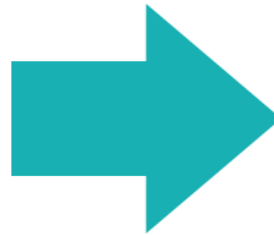
**Communication**(Relationship building)





Contextualizing historical & contemporary experiences provides a bridge to better understanding AI/AN mental health needs.

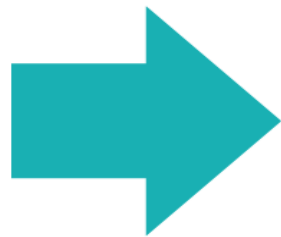
- Many programs are often not culturally relevant or sensitive to AI/AN *relatives*. Many Indigenous people feel stereotyped, ignored, and disrespected by non-Indigenous providers.
- Healthcare providers working with AI/AN *relatives* often report feeling overwhelmed by the diversity within Indian Country. (Navajo/Goodwill)
- As Psychotherapists, we must also contextualize our own personal cultural identities and beliefs, to better understand how our perspective impacts our values, biases and practice.



Of those, over  
**19%**  
reported having a  
mental illness in the  
past year<sup>2</sup>



That is over  
**827**  
thousand  
people



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



**x 2**

SOURCES

<sup>1</sup><https://www.census.gov/quickfacts/fact/table/US#>

<sup>2</sup>Substance Abuse and Mental Health Services Administration (SAMHSA)'s public online data analysis system (PDAS)

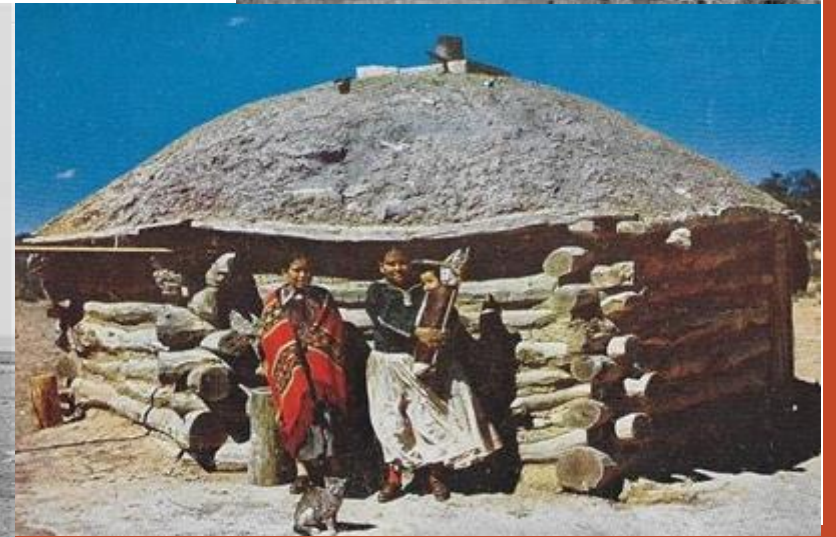
<sup>3</sup>Wikipedia List of Major League Baseball Stadiums. Retrieved from [https://en.wikipedia.org/wiki/List\\_of\\_Major\\_League\\_Baseball\\_stadiums](https://en.wikipedia.org/wiki/List_of_Major_League_Baseball_stadiums)



## DEFINITIONS / DIVERSITY (Location/Cultures/Food/200+ Languages/Spirituality)

American Indians include : Tribes that have treaties and government to government relationships with the United States.

Native Americans include: Native Hawaiians and Indigenous people in American Samoa and Guam.



# Demographics

Approximately 4.2 million Americans (**1.3%**) identify themselves as having American Indian or Alaska Native heritage

574 federally recognized tribes, 231 are located in Alaska.

Tribal Enrollment/Membership (blood quantum): Determined by each of the Sovereign nations (eligibility impacts healthcare/ ICWA/ scholarships)

Today, only 1/3 of AI/AN pop. live on reservations. The majority now live in urban, suburban, or rural non-reservation areas.

## **Context: Issues Impacting Behavioral Health**

### **Historical Trauma:**

Having an accurate history of colonization is essential. Genocidal practices, forced relocations, and the rupture of family systems & and lifeways/cultures was pervasive in the settlement of the U.S. This history of trauma has resulted in intergenerational trauma.

## **CONTEXT: Societal Issues (social determinants of health)**

**AI/AN Poverty**(<sup>2016</sup>): 28% adults & 35% Kids (12.7% in Gen Pop.).  
Gaming success? Geography?

**Unemployment:** Typically AI/AN people experience 4-5% higher rate than US pop. COVID April(26.3%) June (12.4%) rate.

**High School Graduation Rates:** 65% National (75% US pop).  
50% (avg for 7 states with the highest # of AI/AN students).

**Safety** – More than 4 out of 5 AI/AN adults (83 percent) have experienced some form of **violence** in their lifetime.

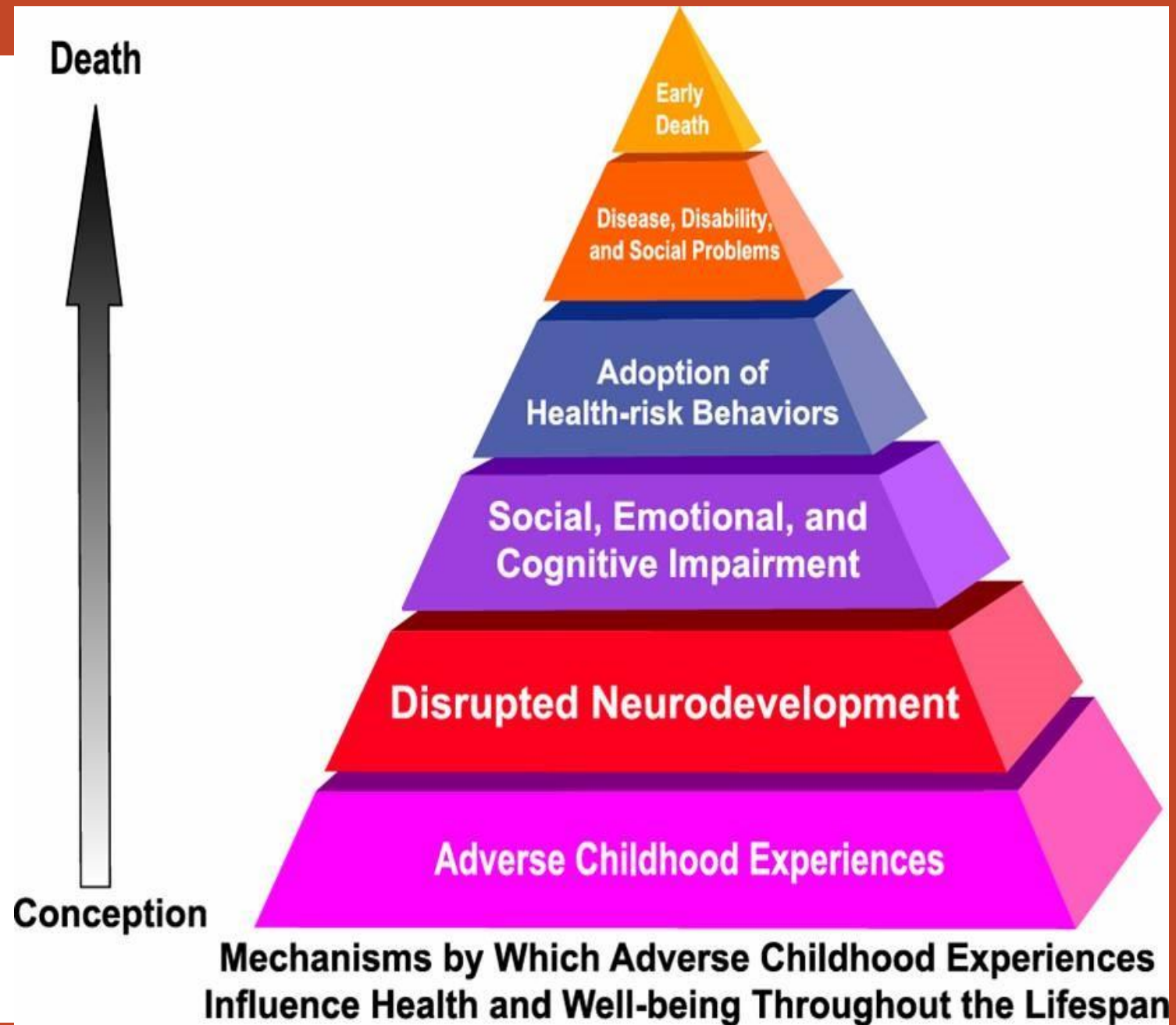


# Context: Issues Impacting Behavioral Health

**Adverse Childhood Events (ACES) – Abuse/Neglect/Household Dysfunction:** Income deprivation, witnessing or experiencing violence, racial/ethnic discrimination, divorce, household substance abuse, domestic violence, parental incarceration, and death of a parent. ACE's correlated w/numerous health and social problems including mental health and early death.

- AI/AN children were more likely to have had 8 of 9 ACE's
- 40% of AI/AN children experienced at least two ACE's

The findings from the ACE study have led to the design of a pyramid of risk that defines how ACEs can lead to poor adult health outcomes.



# Context: Issues Impacting Behavioral Health

- Rates of PTSD among AI/AN adults is akin to rates amongst war veterans, with estimates ranging anywhere from 6-19%.
- AI/AN children are 50% more likely to be victims of sexual abuse than are white children.
- AI/AN children are exposed to violence at higher rates than any other race.
- 39% of AI/AN women identify as intimate partner violence survivors.
- AI/AN people are 526% more likely to die from alcohol use than are non-indigenous people, However they also have the highest rate of abstinence.

# Comfort – Creating a Welcoming Environment

- AI/AN *relatives* report comfort working with non-Natives when they have a contextual understanding of their history and experience in this society.
- Native *relatives* feel more welcomed when offered water, coffee, or tea.
- Many Cx decorate the room w/ a piece of local art, pottery, baskets, or rugs.
- At intake: Welcome/ Skip paperwork/ Introductions/ Assess connectedness to their culture/ prior exp w/therapy? / brief Psycho-ed re TX (Stigma).
- Focus the first session on demonstrating your interest in getting to know your *relative*, understanding their experience and validating their emotions.

*Please remember: Cultural competence is always an aspirational journey.*

# Communication:

## Mindful Hand Shaking Exercise

- Focus on building rapport/alliance quickly
- Re-balance the power dynamic – think servant leadership
- Listen Respectfully, Don't interrupt. Long pauses indicate consideration.
- Go at their pace – remember the circle vs. linear thought process.
- Take your cue for eye contact and volume from your *relative*
- Avoid being loud (verbally/physically – can be perceived as aggressive).
- See MH issues as imbalance not disorders and disease
- CBT Pays – Wholistic bal approach Pays off (mind/body/spirit/emotion/social)
- Non-Native providers should not attempt to use tribal spiritual or healing methods or ceremonies in tx. If appropriate, use AI/AN music for meditation.

## Clinician Tips :

- Assess quickly for level of acculturation, trauma, substance abuse, spiritual development.
- Focus on relationship, don't be the expert, use humor & appropriate self-disclosure (go first).
- Provide psycho-education 1<sup>st</sup> about imbalance and Tx plan
- Begin with Relaxation skills (Breathing/Progressive muscle relaxation).
- Utilize Values Cards – approach change from their known values

# Clinician Tips:

- Assess need for and complete psychoEd for:
  - Emotion recognition (experiential), Somatic connection, SUDS level
  - Basic CBT (cognitive triangle/ABC Model pathway)
  - Mindfulness (present moment orientation & grounding practices)
  - Useful Books: Don't Sweat the Small Stuff/ Slowing Down to the Speed of Life (Both by Richard Carlson PhD.)
- Archetype work (to identify unbalanced & choose balanced aspects of self). ? For Cx – What caused this client to respond to life in this way?

# Clinician Tips:

## AI/AN Adaptations of Evidence-based Treatment Models:

- Motivational Interviewing (MI) – Tomlin et al and Venner et al.
- Trauma Focused(Family) CBT (TF-CBT) – Oklahoma State University.
- MATRIX Model (SUD Tx)

## Additional Helpful Clinical Perspectives:

- **Narrative Therapy-** Helps people embrace being an expert in their own lives. As we experience events and interactions, we give them meaning – turning them into stories that influence how we move through and process our life story.
- **Acceptance and Commitment Therapy-** uses mindfulness and values-based behavioral activation to increase distress tolerance and increase psychological flexibility.
- **Harm reduction** (SUD) an alternative way to manage drug and alcohol use. The individual and therapist work together to reduce negative effects of substance abuse, without having to abstain from using entirely.



## Helpful Resources:

- 1) TIP 61: Behavioral Health Services for American Indians and Alaska Natives (SAMHSA)**
- 2) American Indian and Alaska Native Culture Card**  
SAMSHA: A Guide to Build Cultural Awareness  
<https://store.samhsa.gov/sites/default/files/d7/priv/sma08-4354.pdf>



Connecting  
Prevention  
Specialists  
to Native  
Communities



Connecting Prevention  
Specialists to Native  
Communities

*Sacred and Ceremonial  
Use of Tobacco in Native  
American Communities*



Connecting Prevention  
Specialists to Native  
Communities

*Culture is Prevention*



Connecting Prevention  
Specialists to Native  
Communities

*Engaging Tribal Leaders and  
Other Tribal Stakeholders  
for Prevention Efforts*

# Culture Cards

These can all be found at this  
link:

<https://pttcnetwork.org/centers/national-american-indian-alaska-native-pttc/culture-cards>

*Thank You*  
*For Your Time and Attention*

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## American Indian & Alaska Native MHTTC

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# QUESTIONS & ANSWERS



# EVALUATION INFORMATION

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Please take a moment to complete a **brief** survey about this presentation.

