



Native Center for
Behavioral Health

IOWA



Cultural Elements with a focus on Rural Mental Health

Presenters: Ray Daw, MA

March 15, 2022



Native Center for Behavioral Health

The Native Center for Behavioral Health is supported by The University of Iowa, College of Public Health. 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 the Native Center for Behavioral Health, University of Iowa, or the College of Public Health.





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 over and inhabited.

Past and present, we want to honor the land itself and the people who have stewarded it throughout the generations.

This calls us to commit to forever learn how to be better stewards of these lands through action, advocacy, support, and education.

We acknowledge the painful history of genocide and forced occupation of Native American territories, and we respect the many diverse indigenous people connected to this land on which we gather from time immemorial.

While injustices are still being committed against Indigenous people on Turtle Island, today we say thank you to those that stand with Indigenous peoples and acknowledge that land reparations must be made to allow healing for our Indigenous peoples and to mother earth, herself.

Dekibaota, Elleh Driscoll, Meskwaki and Winnebago Nations

Ttakimaweakwe, Keely Driscoll, Meskwaki and Winnebago Nations

Keokuk, Sean A. Bear, 1st. Meskwaki Nation



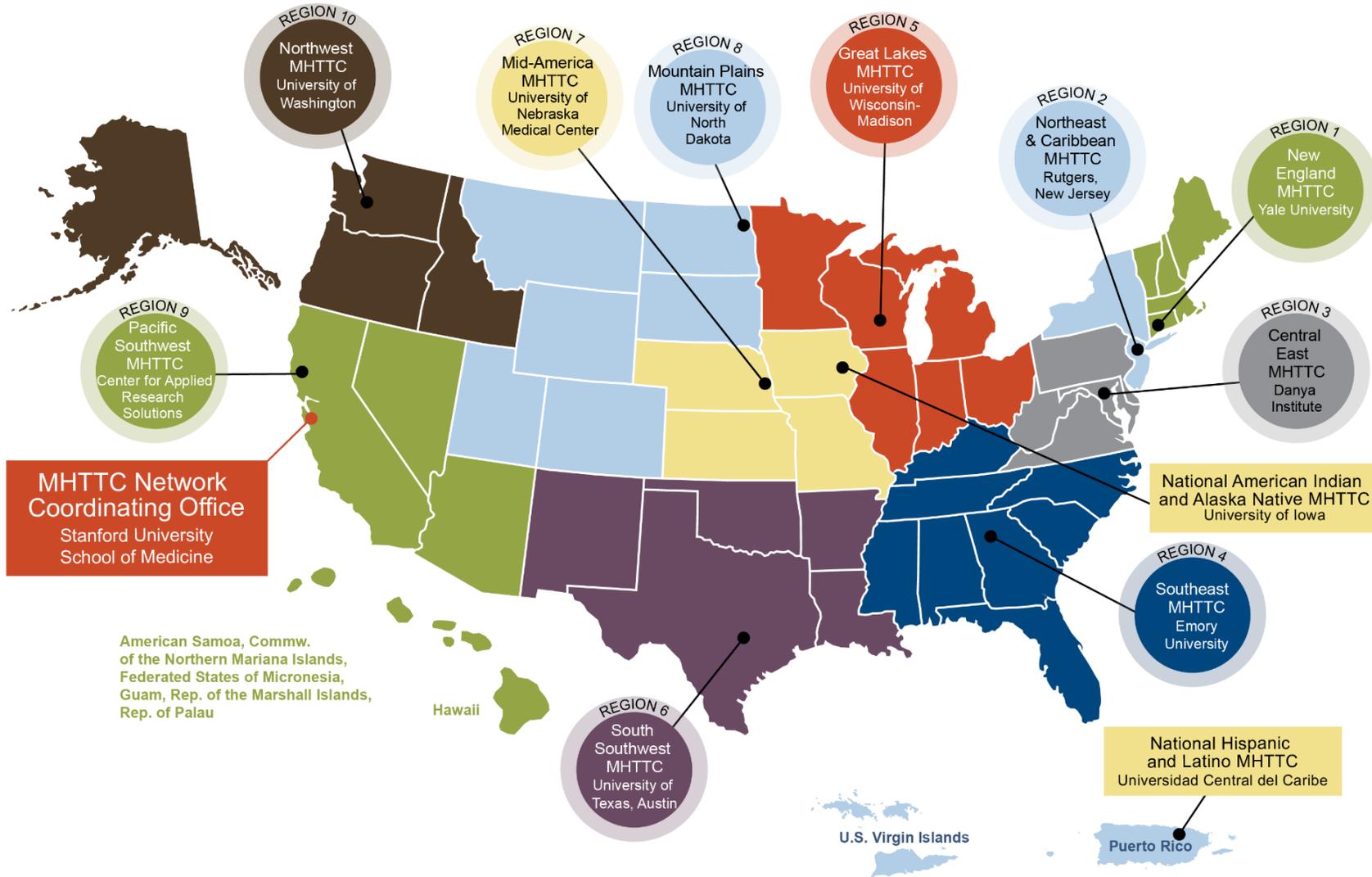
MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

MHTTC Network

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



SAMHSA

Substance Abuse and Mental Health
Services Administration

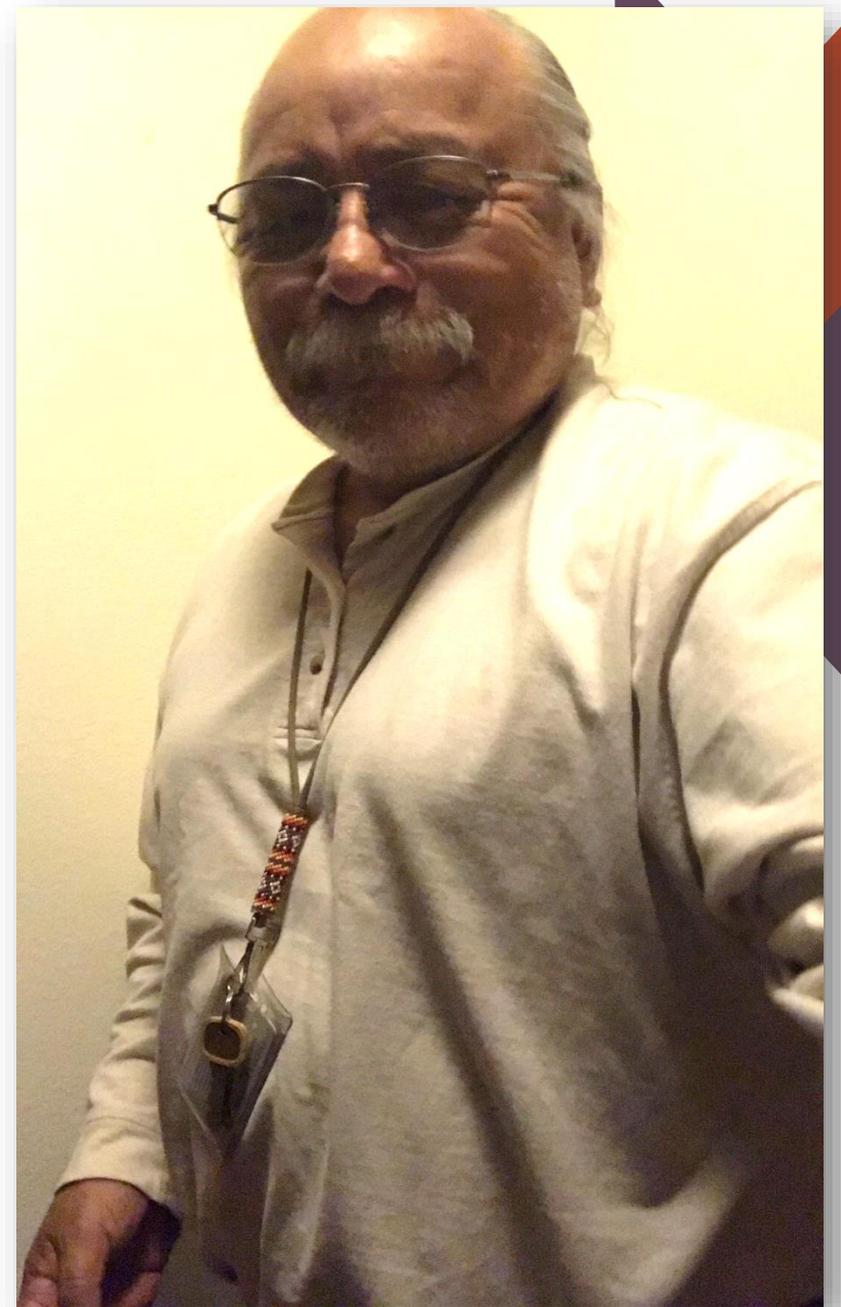
The National American Indian and Alaska Native Mental Health Technology Transfer Center is supported by a grant from the Substance Abuse and Mental Health Services Administration (SAMHSA).

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Today's Speaker

- I am Dine' (Navajo) From New Mexico. I'm currently a Native American behavioral health consultant. My career has been largely within and around the Navajo Nation, Native non-profits and most recently in rural Alaska, in both inpatient and outpatient settings. My work in behavioral health has been heavily towards developing Native trauma-appropriate approaches that are healing and effective in tribal behavioral health prevention, Intervention, and treatment services.
- My work includes extensive experience as a consultant with SAMHSA in program development and evaluation, culturally-based prevention and intervention services, public policy, grant reviewing, and American Indian/Alaskan Native modalities. I'm also trainer in motivational interviewing and historical trauma.



Who am I?

Kinyaa'áanii

nishíí

Tł'ízi Łání

báshishchiin

Tsi'naajinii

dashicheii

Tódich'íi'nii

dashinali

Objectives

- 1. Provide an overview the United States rural mental health disparities
- 2. Provide an overview of Native American mental health disparities
- 3. Describe Native American cultural elements for improved rural mental health





Objective 1.
Provide an
overview of the
United States rural
mental health
disparities



In general, rural areas are sparsely populated, have low housing density, and are far from urban centers. Urban areas make up only 3 percent of the entire land area of the country but are home to more than 80 percent of the population.

Conversely, 97 percent of the country's land mass is rural but only **19.3 percent** of the population lives there.

[What is Rural America? - The United States Census Bureau](https://www.census.gov/library/stories/2017/08/rural-america.html)

www.census.gov/library/stories/2017/08/rural-america.html

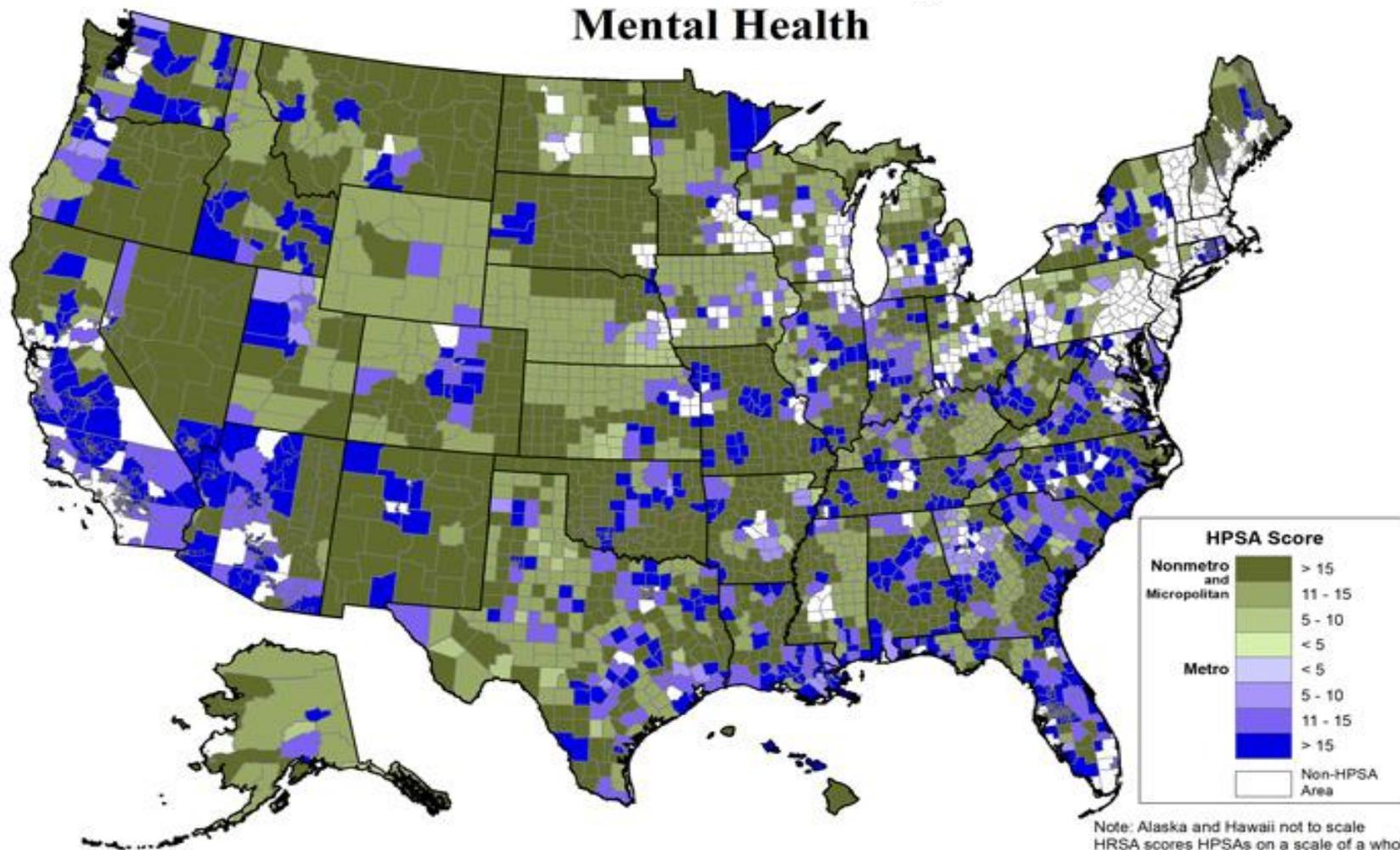


According to the [National Rural Health Association](#), the following factors are particular challenges to the provision of mental health services in rural communities:

- **Accessibility** – Rural residents often travel long distances to receive services, are less likely to be insured for mental health services, and providers are less likely to recognize a mental illness.
- **Availability** – Chronic shortages of mental health professionals exist and mental health providers are more likely to practice in urban centers.
- **Affordability** – Some rural residents may not be able to afford the cost of health insurance or the cost of out-of-pocket care if they lack health insurance.
- **Acceptability** – Rural residents may be more susceptible to the stigma of needing or receiving mental healthcare in small communities where everyone knows each other and fewer choices of trained professionals can lead to a lack of faith in confidentiality, as well as a reliance on the informal care of family members, close friends, and religious leaders.



Health Professional Shortage Areas Mental Health

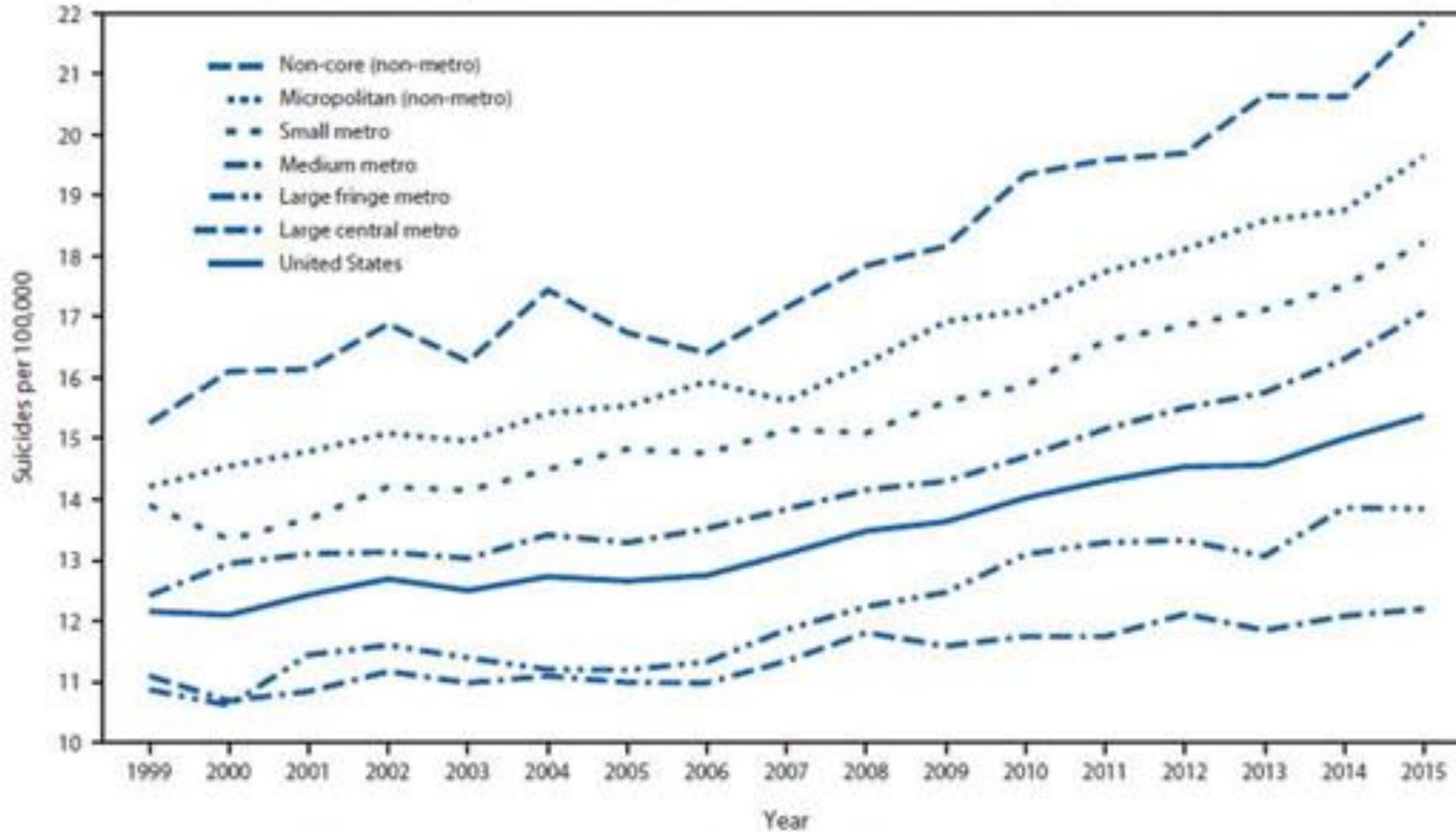


Note: Alaska and Hawaii not to scale
HPSA scores on a scale of a whole number (0-25 for mental health), with higher scores indicating greater need

Source(s): data.HRSA.gov, U.S. Department of Health and Human Services, January 2022



Suicide Rates* by level of county urbanization - United States, 1999-2015



* Per 100,000 residents aged ≥ 10 years, age-adjusted to the year 2000 U.S. standard.

In Chat, respond to the question below

How has the pandemic impacted mental health in rural communities?

_ * _ * _ * _ * _ * _ * _ * _ * _ *

Four participants can raise your hand (virtually) to unmute and speak to this question also.





Objective 2.
Provide an
overview of
Native American
mental health
disparities



What percentage of Native Americans live in cities?

- Approximately 70 percent of American Indians and Alaska Natives live in urban areas, with 25 percent of them residing in counties served by urban Indian health programs authorized and funded through Public Law 94-437, Title V.
- [Urban Indian Health Program | Fact Sheets](#)
- www.ihs.gov/newsroom/factsheets/uihp/



Acculturation

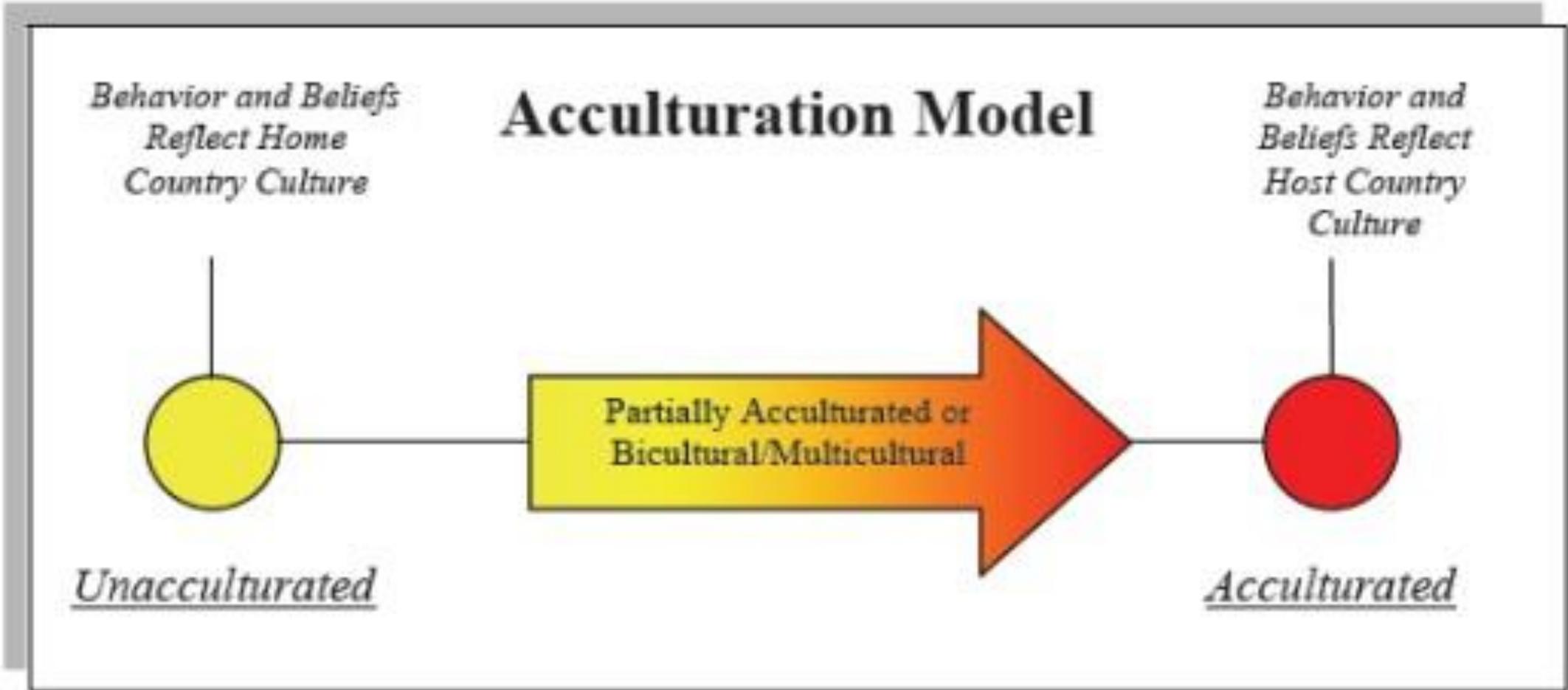


Fig. 1

Assimilation



Suicide Death Rates Per 100K – United States, 2013–2015

Characteristic	Large metropolitan	Medium/ small metropolitan	Nonmetropolitan/ rural
County Urbanization	12.72	16.77	19.74
Sex			
Male	20.20	26.68	31.62
Female	5.91	7.51	8.06
Race/Ethnicity			
White non-Hispanic (NH)	17.24	20.24	21.96
Black NH	6.56	6.89	6.07
American Indian/ Alaska Native NH	14.00	19.60	29.07
Asian/Pacific Islander NH	6.70	8.35	9.35
Hispanic	6.37	7.97	10.21

Source: [Suicide Trends Among and Within Urbanization Levels by Sex, Race/Ethnicity, Age Group, and Mechanism of Death – United States, 2001–2015](#). MMWR Surveillance Summaries, 66(18);1–16, 2017

Health Disparities for Native Americans

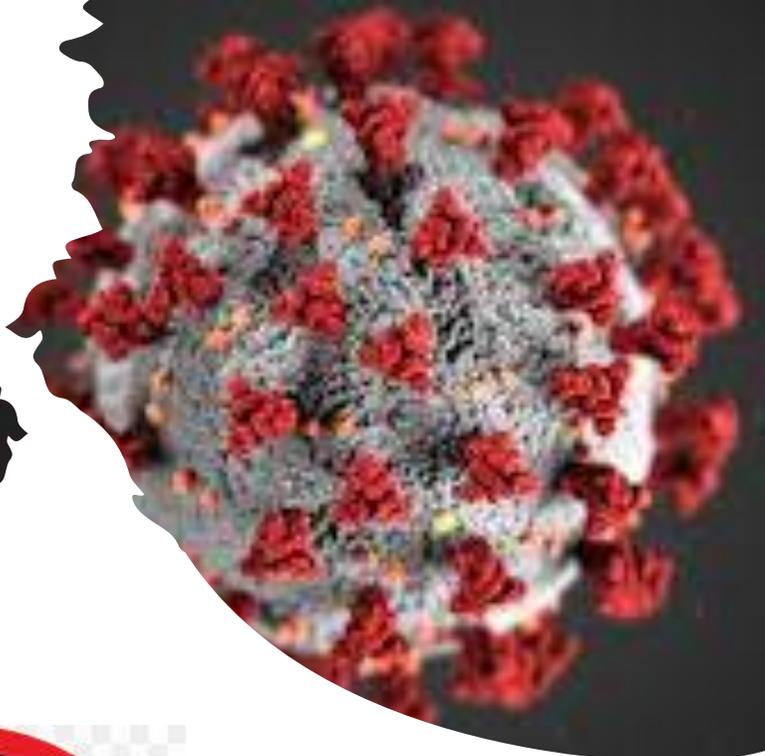
- Major Disparities
 - Diabetes
 - Adult Obesity
 - Homicide
 - Alcohol-related deaths
 - Youth obesity
 - Influenza and Pneumonia

Moderate Disparities

- Suicide

Low Disparities

- Infant mortality
- Smoking
- Prenatal care
- Child vaccinations



Social impact of mental illness



***“Kill the Indian,
Save the Man.”***



The graduating class of 1898 at Carlisle was told to...

***“Let All That Is
Indian In You Die.”***

Trauma

- American Indians appear to experience traumatic events at a higher rate than what was previously reported in the general population. (Beals, et al., 2005; Manson et al., 2005; Robin et.al., 1997)

Defining Trauma



Cultural Trauma – is an attack on the fabric of a society, affecting the essence of the community and its members



Historical Trauma – cumulative exposure of traumatic events that affect an individual and continues to affect subsequent generations



Intergenerational Trauma – occurs when trauma is not resolved, subsequently internalized, and passed from one generation to the next



Present Trauma – What vulnerability, Native peoples are experiencing on a daily basis

Bigfoot, 2007



Adverse Childhood Experiences (ACEs)

- Childhood experiences, both positive and negative, have a tremendous impact on future violence victimization and perpetration, and lifelong health and opportunity. As such, early experiences are an important public health issue. (CDC)



ABUSE



Physical



Emotional



Sexual

NEGLECT



Physical

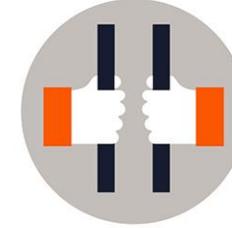


Emotional

HOUSEHOLD DYSFUNCTION



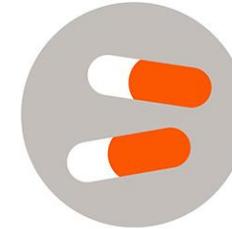
Mental Illness



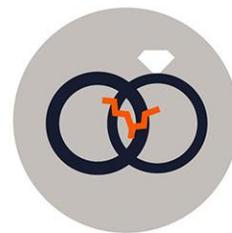
Incarcerated Relative



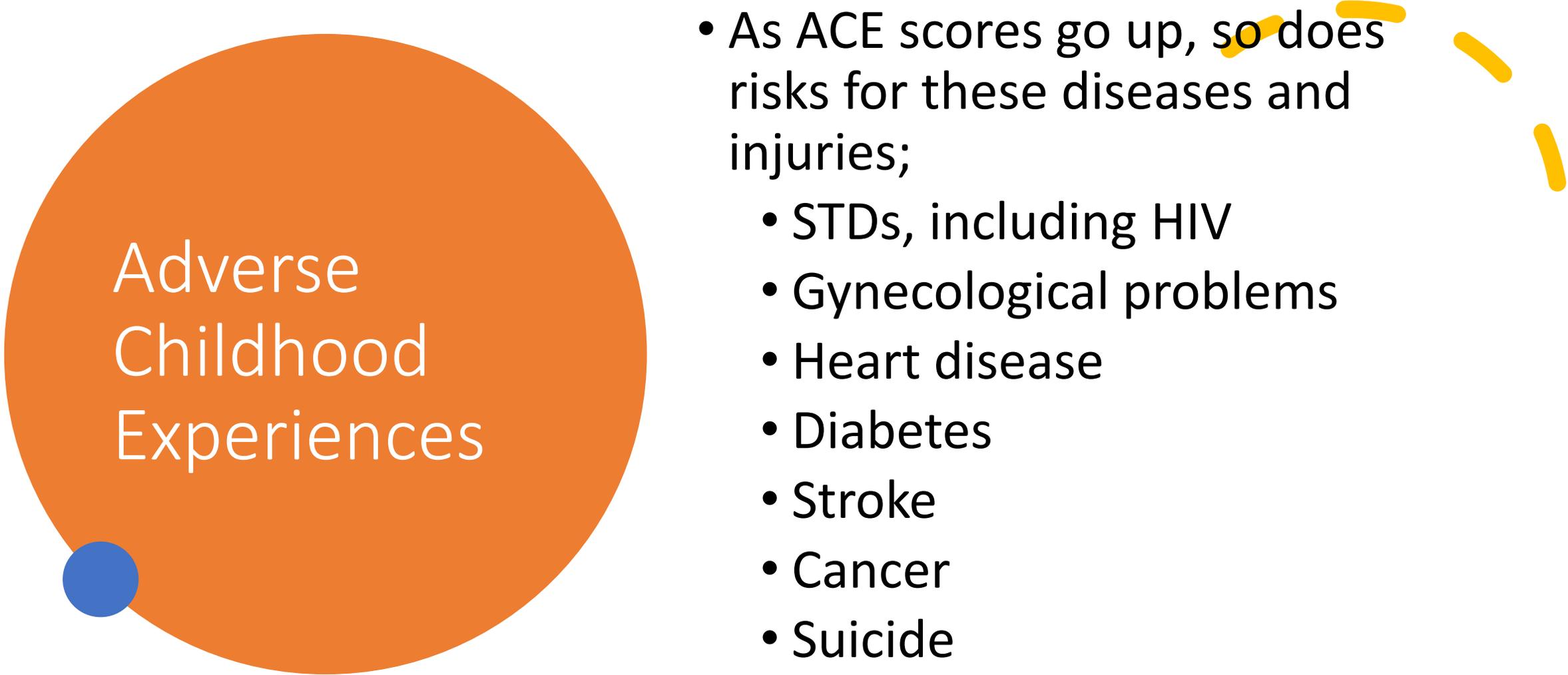
Mother treated violently



Substance Abuse



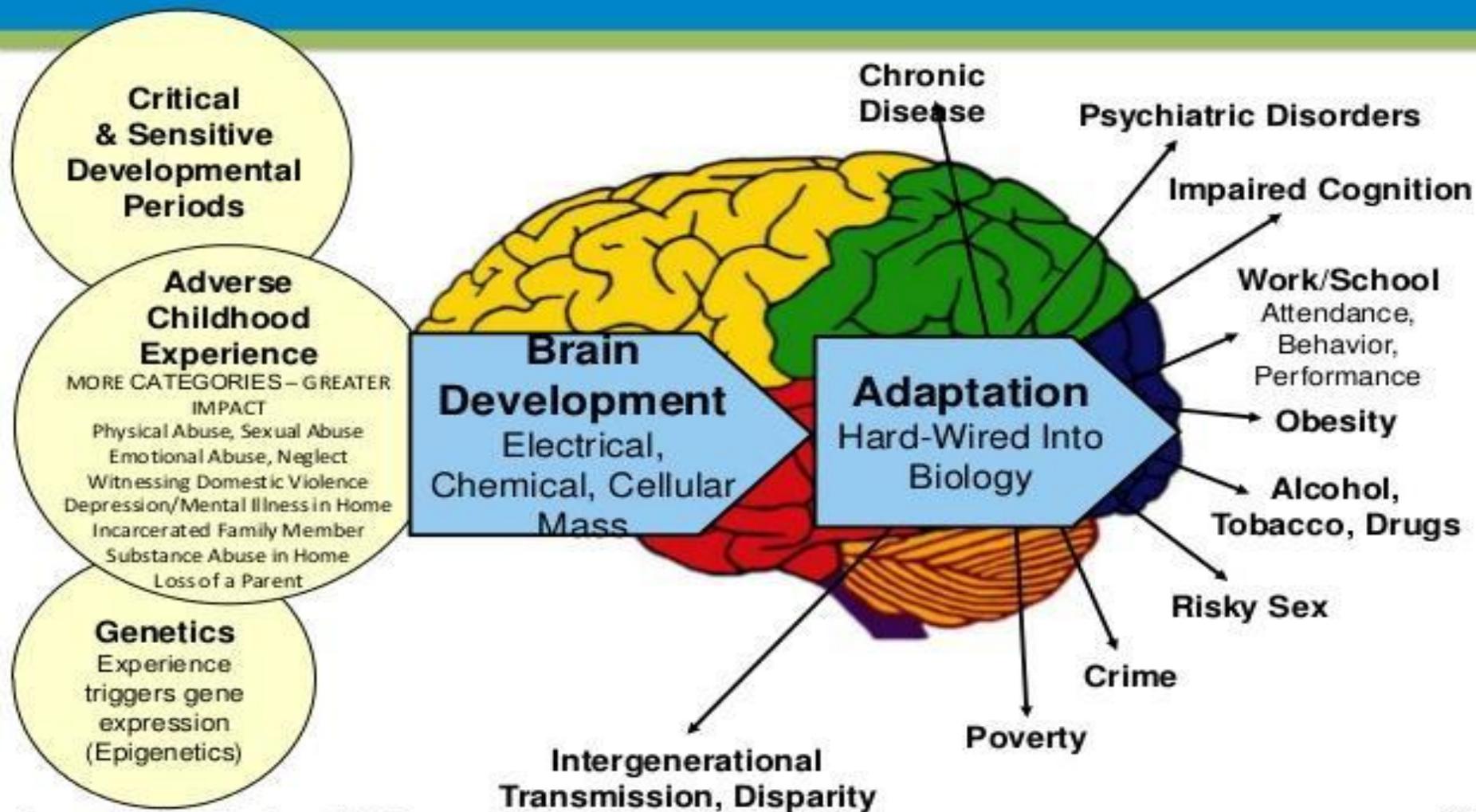
Divorce



Adverse Childhood Experiences

- As ACE scores go up, so does risks for these diseases and injuries;
 - STDs, including HIV
 - Gynecological problems
 - Heart disease
 - Diabetes
 - Stroke
 - Cancer
 - Suicide

Lifespan Impacts of ACEs

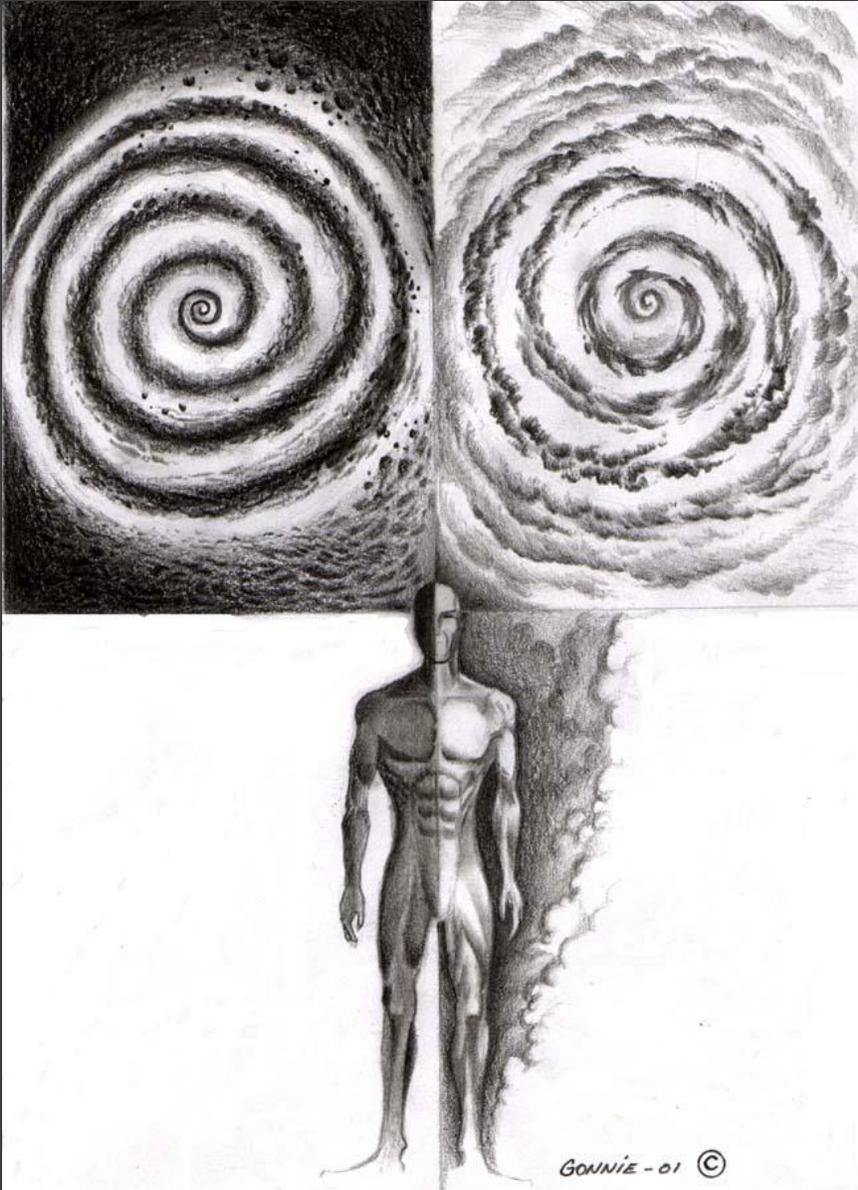


Source: Family Policy Council, 2012

Overcoming ACES

- **Stable, nurturing relationships can prevent or reverse the damaging effects of toxic stress.**





Historical Trauma

- ***Historical Trauma*** – Result of “a legacy of chronic trauma and unresolved grief across generations,” enacted upon them by the European dominant Culture. (Braveheart & DeBruyn, 1998, p. 60)

Historical Trauma

Nazi Holocaust

American Holocaust

Hitler's inspiration for Jewish genocide to the study of the English and United States for how the American Indians and South Africans were treated, exterminated, and defeated by starvation, epidemics, and combat, but also his concentrations camps being placed in distant areas for death marches, like the forced migrations to Reservations, many of which were barren lands.

- As Pulitzer Prize-winning author, John Toland, notes in his book *Adolf Hitler* (pg. 202)



Historical Trauma

From 1819 to the present, the U.S. had **357** Boarding Schools run by the U.S. federal government and churches. **64** of these schools remain open **today**.



INDIAN HORSE www.Indianhorsefilm.com

Symptoms derived from the loss in which their ancestors, and then down to them, experienced traumatic life experiences, due to physical, emotional, and psychological hardships and undue change. This would include removed from lands - change in environment, laws making their practices illegal - not being able to mourn or pray in the manner they were used to.

Historical Trauma – Result of “a legacy of chronic trauma and unresolved grief across generations,” enacted upon them by the European dominant Culture. (Braveheart & DeBruyn, 1998, p. 60)

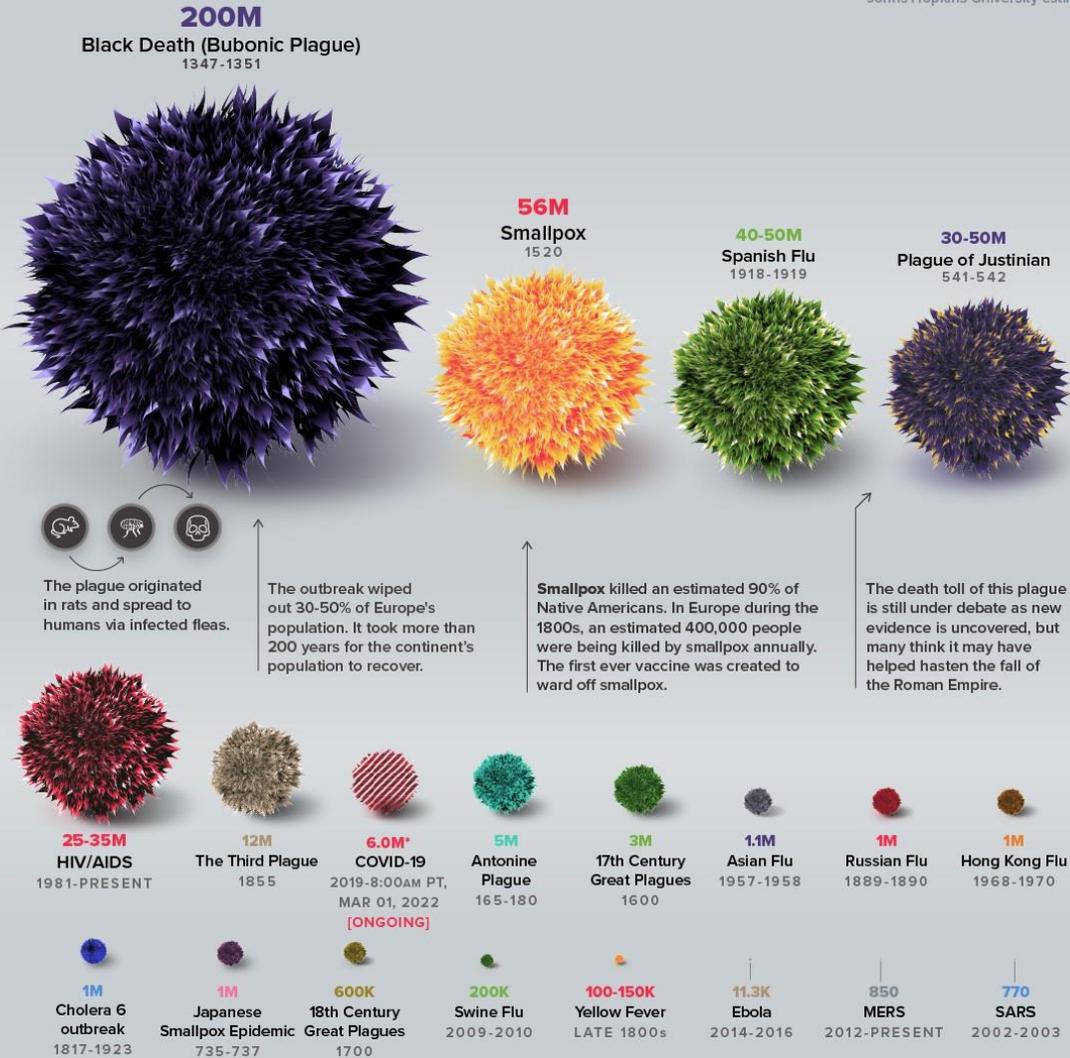
DEATH TOLL [HIGHEST TO LOWEST]

the impact of COVID-19 because the disease is new to medicine, and data is still coming in.

*Johns Hopkins University estimates

World's Deadliest Plagues

- Smallpox killed an estimated 90% of Native Americans, as Europeans landed in the Americas



*Johns Hopkins University estimates

Sources:
CDC, WHO, BBC,
Wikipedia,
Historical records,
Encyclopedia Britannica
Johns Hopkins University



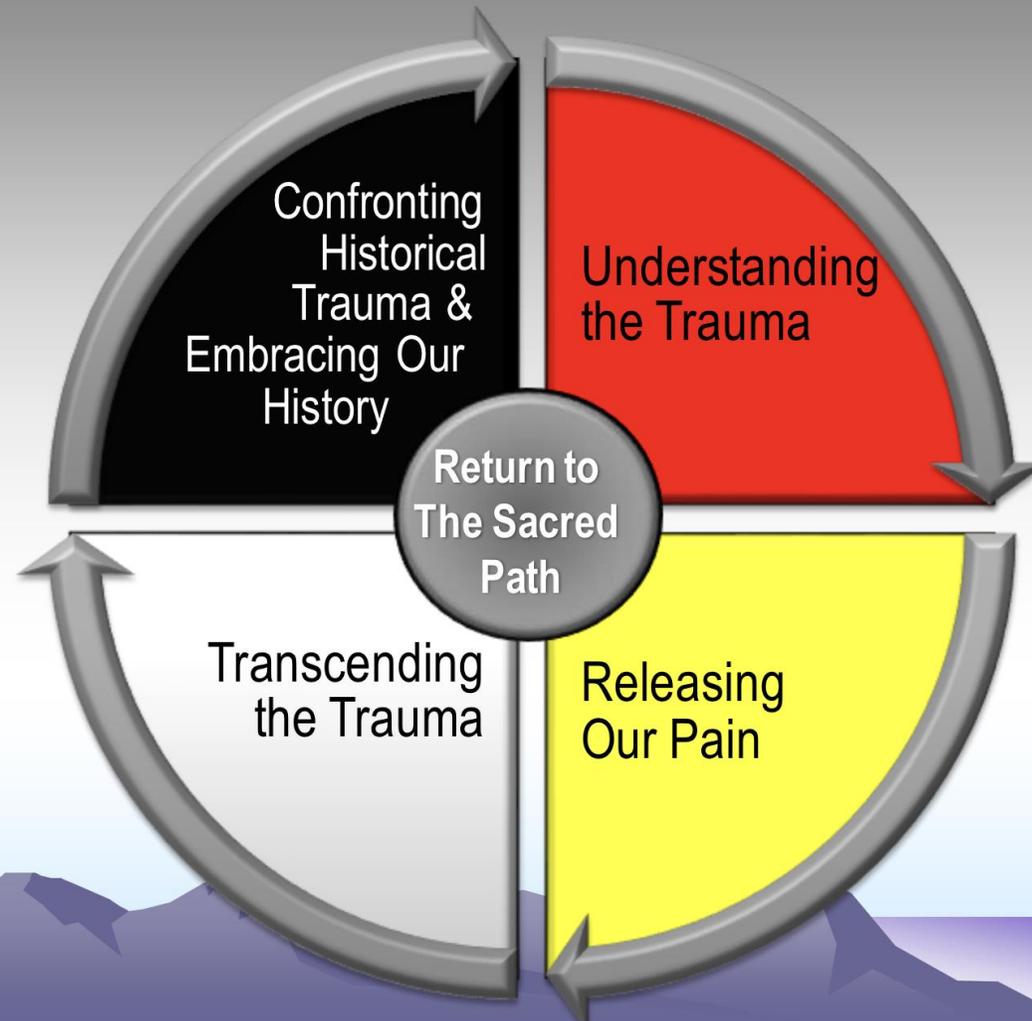
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[visualcapitalist.com](#)



Historical Trauma

We now know that Trauma can be passed to descendants through the genes, biologically, but also psychologically through stories, the education system, the environment, such as other students or adults, and social means

Four Components of HTUG





In Chat, respond to the question below

How the healing practices positively influenced families in the Native communities?

*_ * _ * _ * _ * _ * _ **

- Four participants can raise your hand (virtually) to unmute and speak to this question also.



Objective 3.
Describe Native
American cultural
elements for
improved rural
mental health

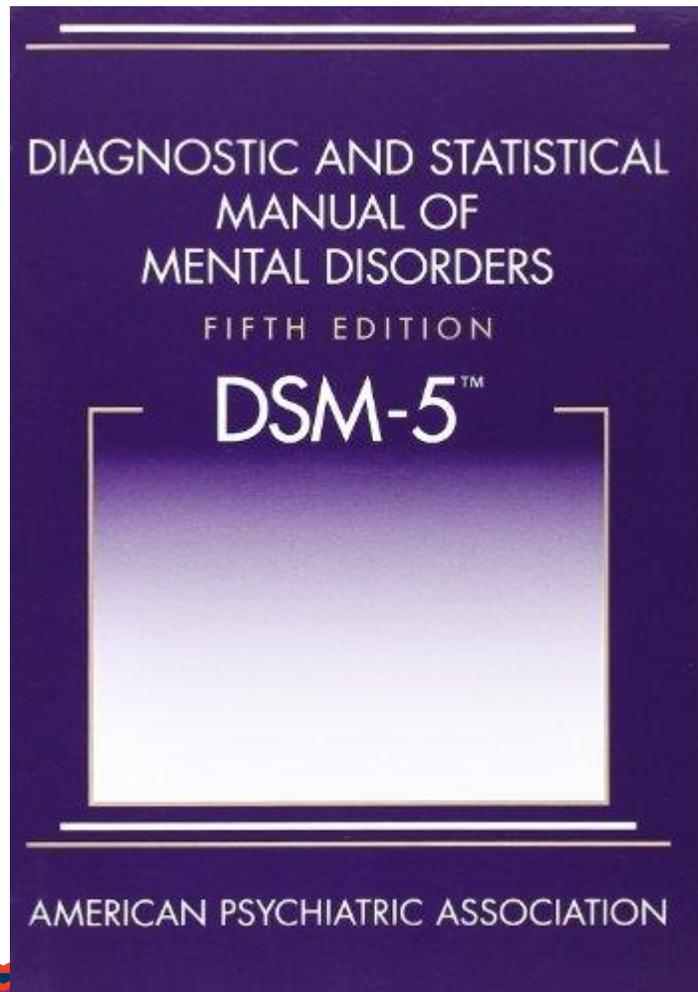


Raise your hand and react to the question below.

How has the pandemic negatively impacted Native American mental health?

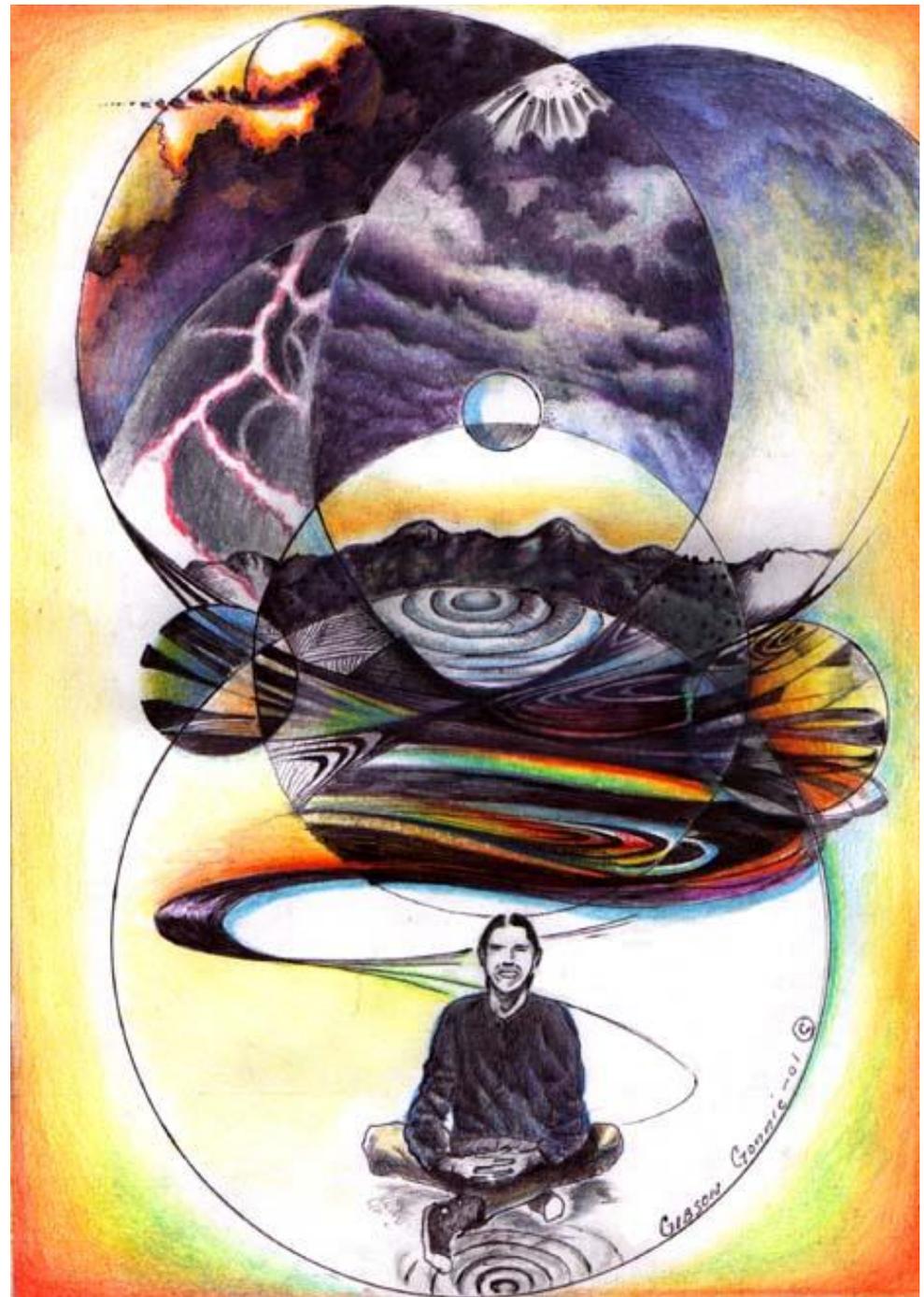


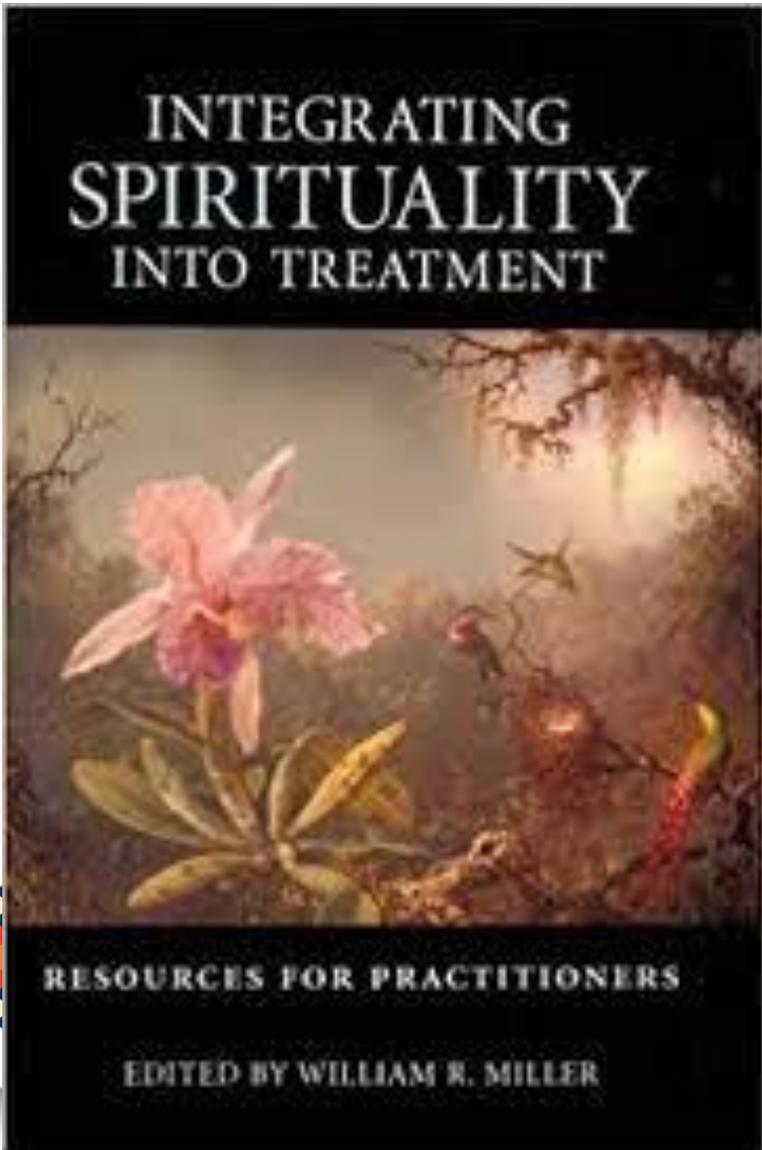
Mental Health: Euro-American &/OR Native American



Recovery

Healing





MHTTC

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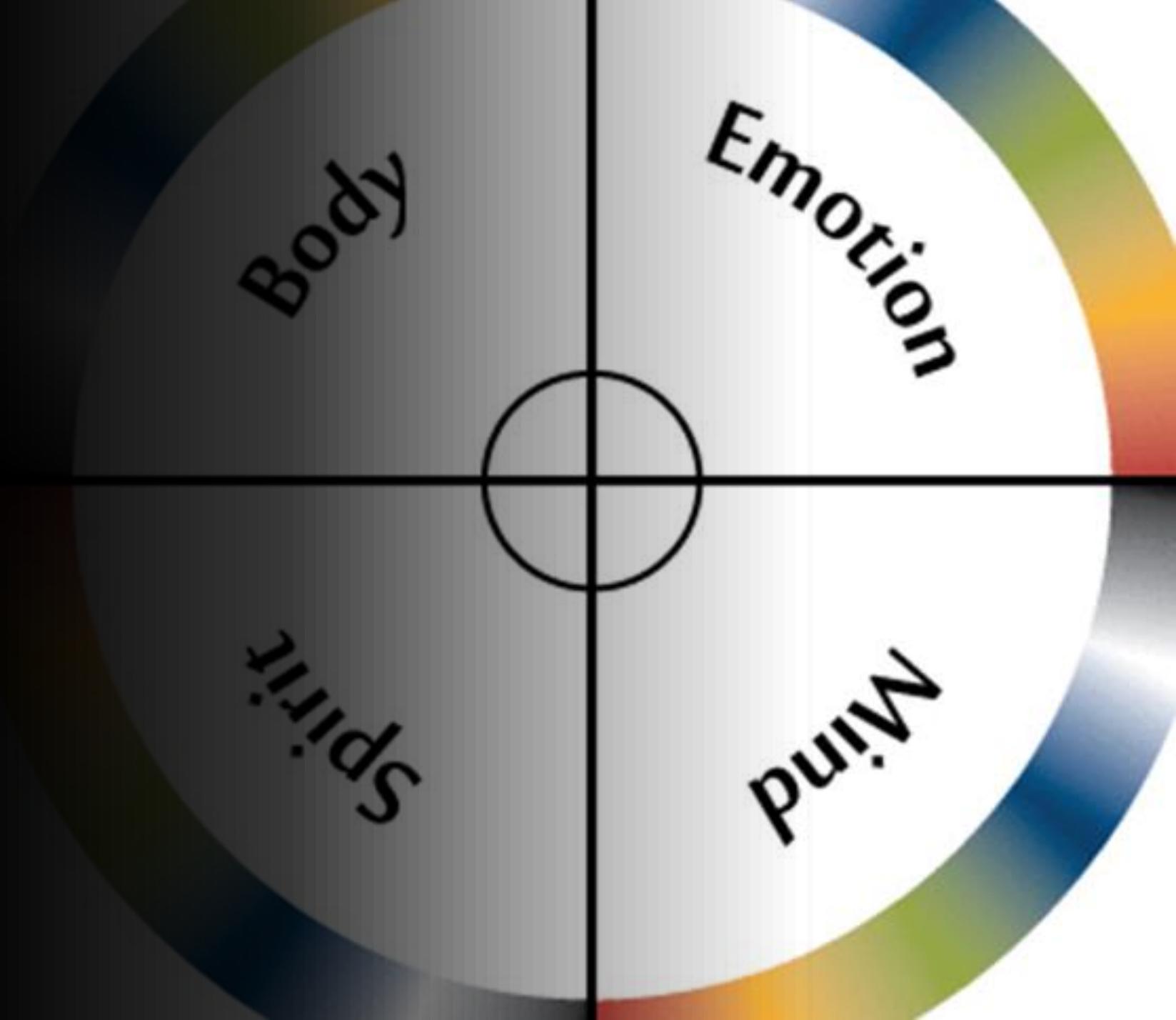


National American Indian & Alaska Native

ATTC

Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

Mental Wellness



American Indian & Alaskan Native Spirituality

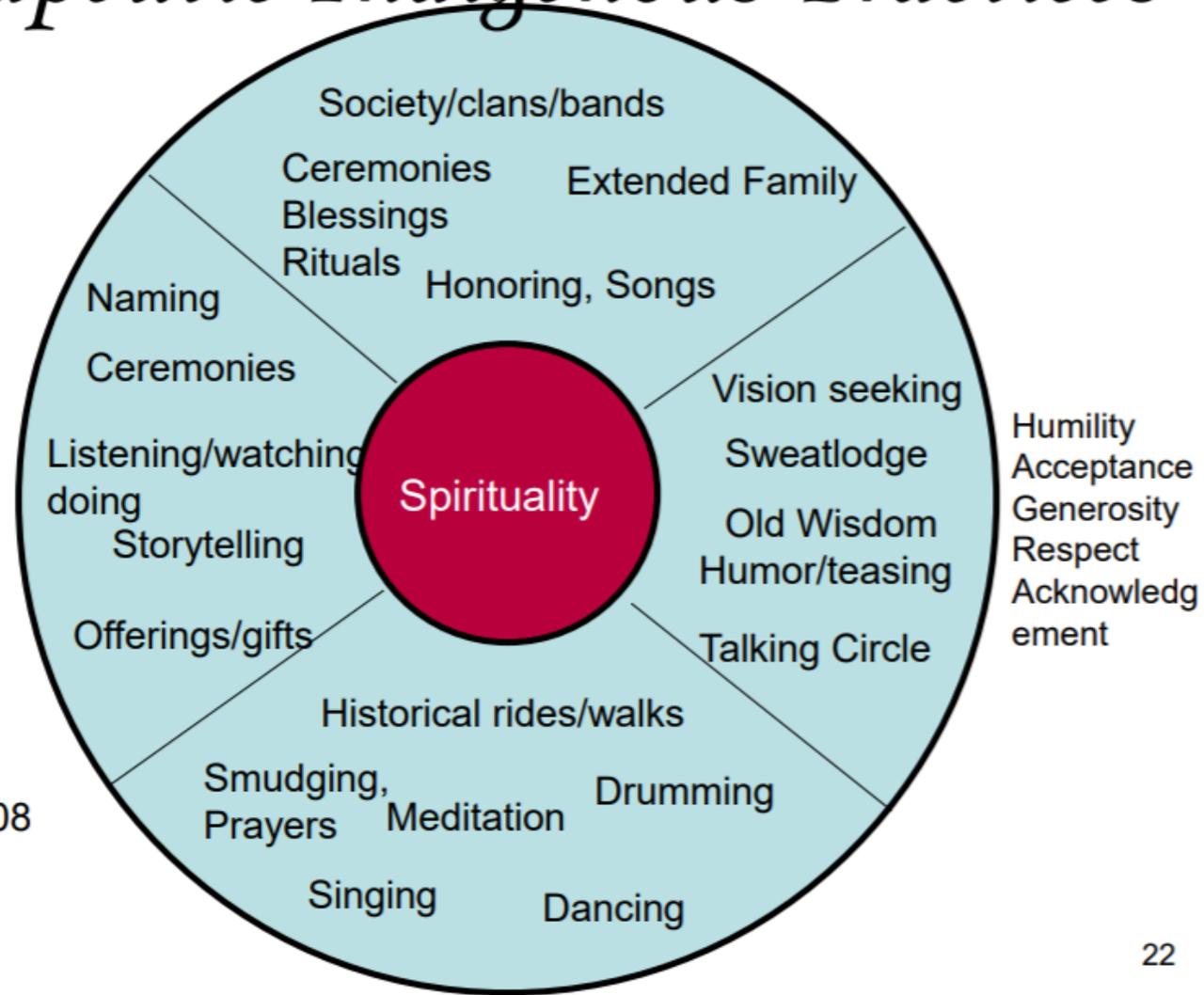
- “The Lakota culture had specific rituals and practices for grieving that allowed for a year of publicly expressed mourning, followed by a ceremony to heal that grief. U.S. policies outlawing native ceremonies interrupted the process of grieving over events such as the Wounded Knee Massacre of 1890, in which the U.S. Army killed between 150 and 300 Lakota men, women, and children.”

**Treatment Improvement Protocols (TIP) 61,
Behavioral Health Services for American
Indians and Alaska Natives, page 20
(SAMHSA)**

TIP 61, page 46

- Behaviors that mainstream providers might label as symptoms of mental illness may be seen among American Indians and Alaska Natives as the expression of special gifts (e.g., hallucinations, manic symptoms). Native peoples may also perceive physical conditions as sacred; for example, dementia may be viewed as a process or sign that the person's spirit has already crossed over into the next world. Although the body has remained behind as it prepares to leave, the person's spirit is already communicating in the spirit world, making it difficult for those left behind to understand the person's language and behavior. Therefore, caring for individuals who are transitioning may be perceived as sacred work.

Therapeutic Indigenous Practices

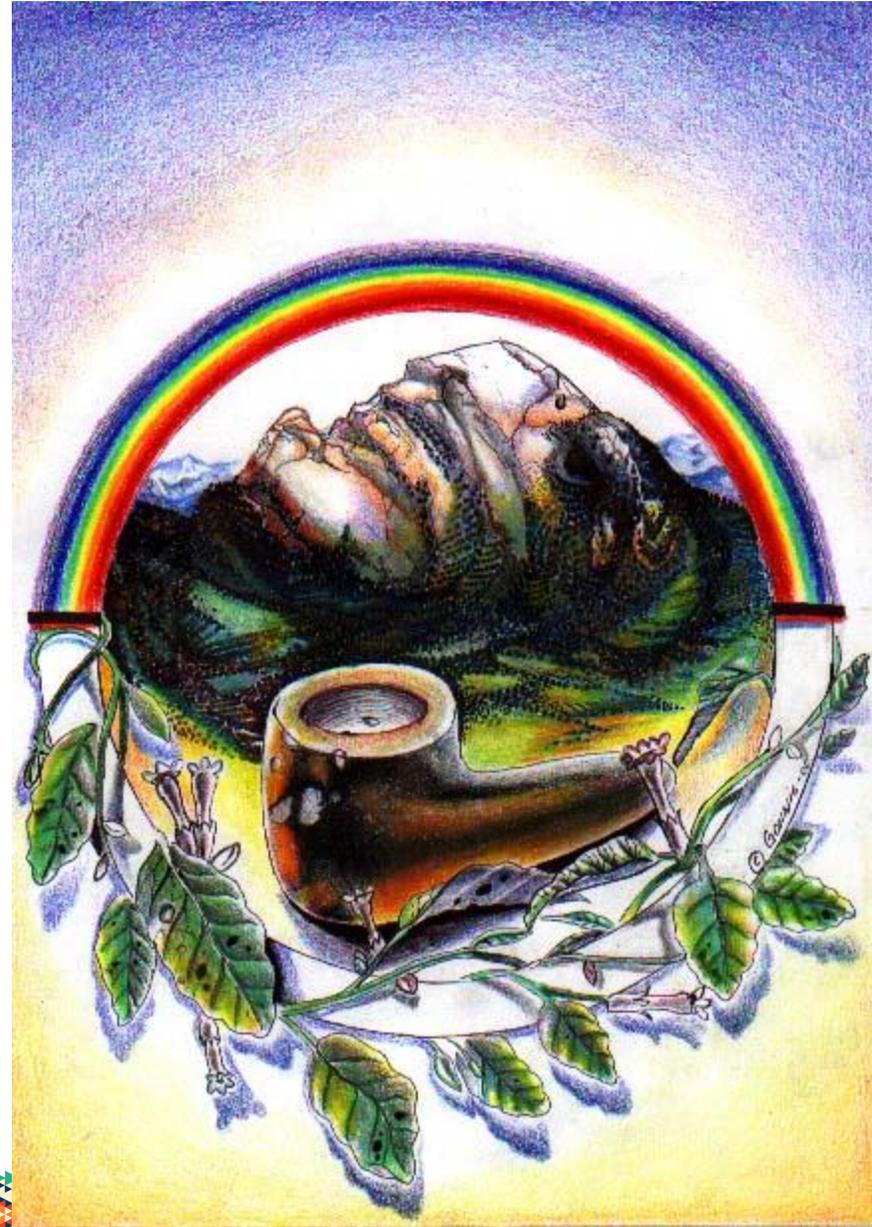


BigFoot 2008

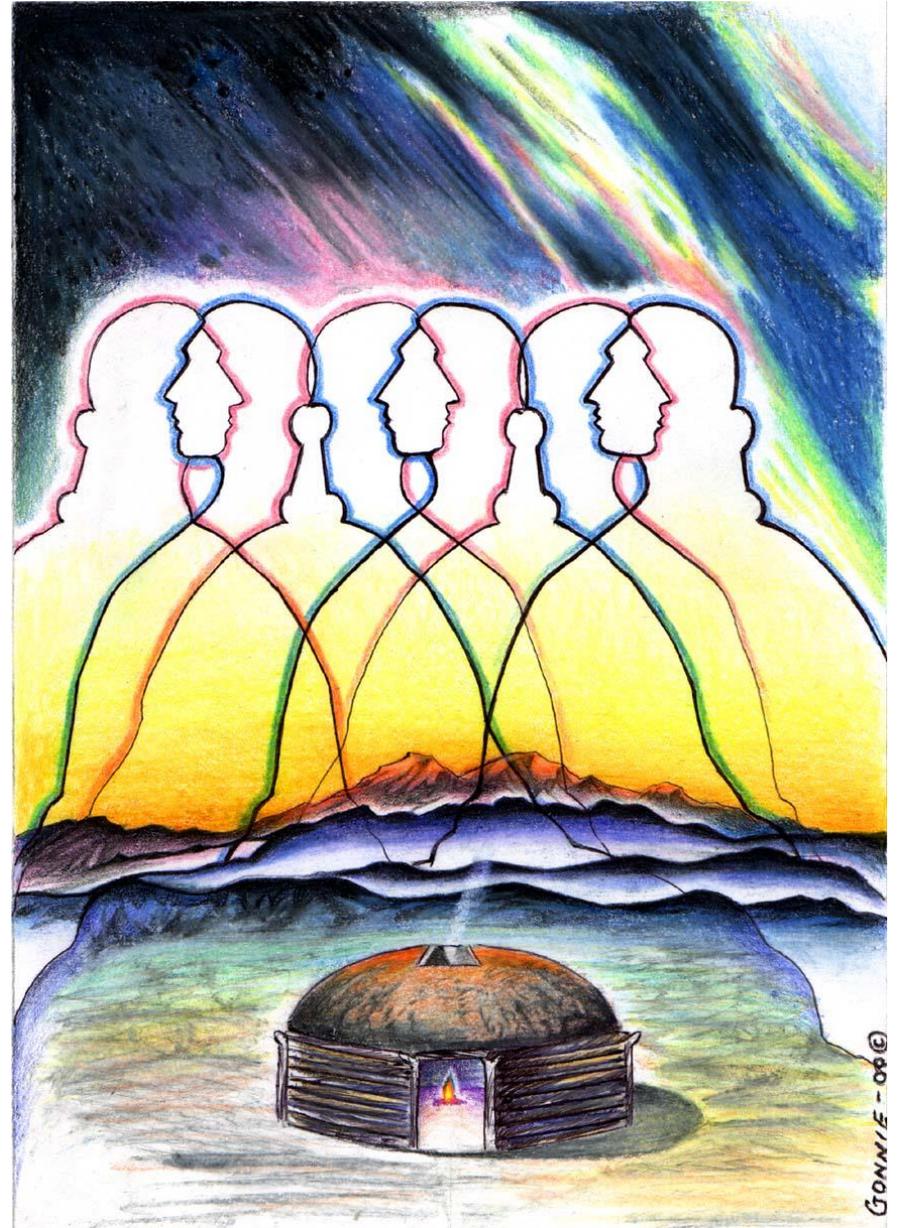
Practicing
beliefs



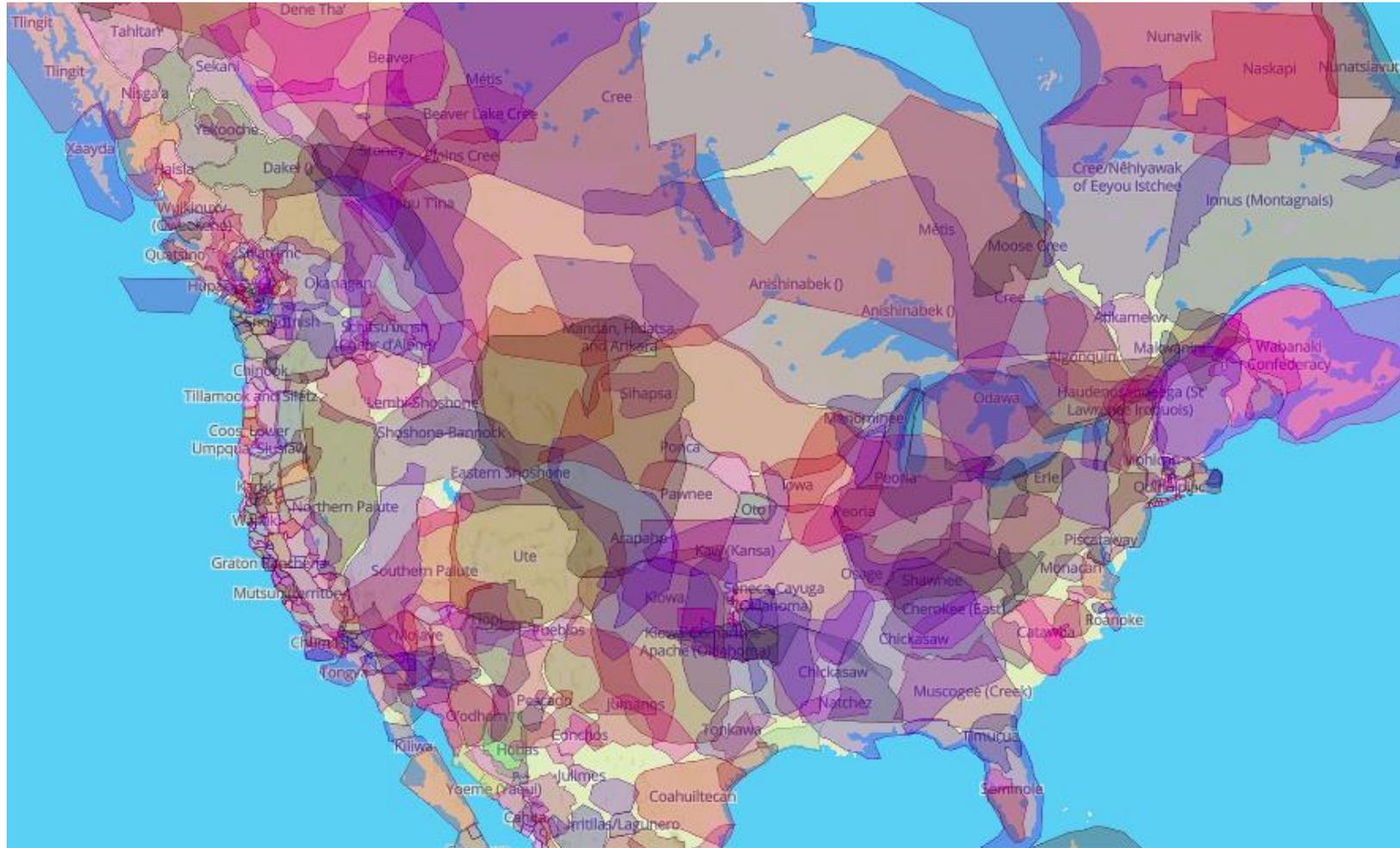
Offerings



Protective Practices



Historically, tribes had dynamic relationships.





In Q&A,
present
questions.

Contact information



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PhotoScan by Google Photos

