

The Re-Indigenization of Motivational Interviewing: Finding the Roots of Integrity

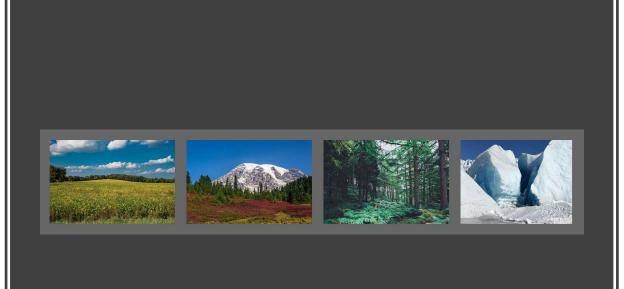
June 13, 2024











AGENDA

Introductions

Northwest MHTTC

Motivational Interviewing

Impacts of Training

Trainee Perspective

Discussion & Questions

Closing & Gratitude

INTENTIONS & OBJECTIVES

Recognize the legacies of colonialization in Native cultures & perceptions of "problematic" behaviors

Discover the roots of Indigenous/Native foundations of MI

Describe the role of integrity & wholeness in Indigenized MI

Hear impacts & evaluations from Indigenized MI trainings

















CHRISTINA CLAYTON LICSW, SUDP She/her

Co-Director, Northwest MHTTC UW Psychiatry & Behavioral Sciences Clinical Assistant Professor, UW Social Work

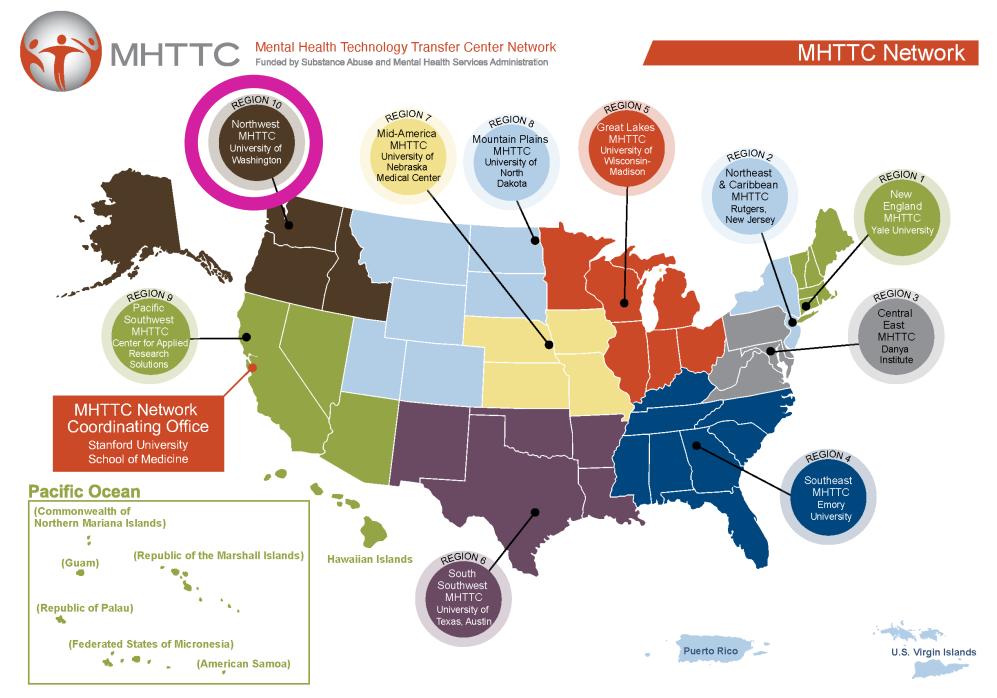
LONNIE NELSON PHD

He/him

Associate Professor & Chair Washington State University Partnerships for Native Health & IREACH AARON FAST AA, Human Services

He/him

Peer Support Specialist Suquamish Tribe Wellness Center











LIVE & RECORDED WEBINARS

OUR GOALS



Support mental health-related EBPs and best practices.



Heighten awareness, knowledge, and skills



Foster alliances and address diversity of training needs



Share FREE, publicly available training and TA.



NEWSLETTERS & OPPORTUNITIES



VIRTUAL LEARNING



COMMUNITIES



ONLINE, SELF-**PACED COURSES**

NETWORK AREA OF FOCUS: Evidence-based practices (EBPs) for psychosis

Including CBT for psychosis (CBTp) & Assertive Community Treatment (ACT)

ADDITIONAL TRAINING TOPICS

Integrated Care ~ Peer Support ~ Leadership ~ Co-occurring Substance Use Disorders Provider Well-being ~ Suicide Prevention ~ Equity & Inclusion ~ Families ~ Trauma-Informed Addressing Stigma ~ Culturally Responsive ~ Crisis Work ~ Grief & Loss

PRIORITIZING EQUITY, DIVERSITY, INCLUSION & PROVIDER WELL-BEING



LYDIA CHWASTIAK, MD, MPH PI & CO-DIRECTOR

> CHRISTINA CLAYTON, LICSW, SUDP CO-DIRECTOR







RESOURCE LIBRARY



"PUTTING IT TOGETHER" **PODCAST**

Time

Energy

Investment

Support

INTENSIVE Tier 3

TARGETED
Tier 2

UNIVERSAL Tier 1

SUSTAINED PRACTICE CHANGE

(implementation project)

LEARNING COMMUNITY

(regular sessions over time)

WEBINAR, ONLINE COURSE

(open to anyone, self-paced)





Northwest MHTTC AI/AN Collaborations



- Suicide Prevention training, "All Patients Safe" to address Native suicide rates
- Topical webinars:
 - Indian Health Care Providers Telehealth Series with Indian Health Service
 - Lummi Nation psychiatric services & integrated care
 - Project Venture (Positive Youth Development for American Indian & Alaska Native Youth)
 - Cultural Elements for Native and rural mental health
 - Washington State Tribal 988 Line
 - Cultural Adaptation of Suicide Prevention Trial for Indian Country
- Train-the-trainer for rural Alaska Native providers to support well-being
- Supporting Native American & Alaska Native Youth in school settings fact sheet
- State coalitions, State provider associations, monthly tribal meetings
- State listening series and planning sessions with Native/Tribal providers





The Northwest MHTTC supports professionals working to improve behavioral health outcomes for those with or at risk of serious mental illness across Alaska, Idaho, Oregon, and Washington (SAMHSA's Region 10). Our region is home to many vibrant and diverse Native, Indigenous and Tribal communities, including the 272 federally recognized Tribes and many non-federally recognized Tribes.

Since receiving funding in 2018, the Northwest MHTTC has endeavored to establish and deepen connections with Native communities, governments, agencies and leaders in our region; understand Native-identified topics and priorities for mental health workforce training and technical assistance (TA); and generate collaborations honoring the strengths and priorities determined by Native communities.

EVENTS

INDIGENIZED MOTIVATIONAL **INTERVIEWING EVENTS**

PARTICIPANTS



The most useful part of the training was gaining an understanding of both the Indigenous history of Motivational Interviewing and how to apply it within this broad community.

– Participant in Dr. Lonnie Nelson's training "Indigenized Motivational Interviewing" Suguamish, WA











COMMUNITY TRAINING OVERVIEW

INDIGENIZED MOTIVATIONAL INTERVIEWING (MI)

- · Nine Indigenized MI events offered across Washington and Alaska, including both virtual and in-person trainings from 2018 - 2024
- · Partnerships with Dr. Lonnie Nelson, Partnerships for Native Health at Washington State University, Portland Area Indian Health Service, and other collaborators.







INDIAN HEALTH CARE PROVIDER SERIES

- · Collaboration with WA DOH, UW Behavioral Health Institute, Tribal representatives & the Indian Health Service
- · Focus on addressing barriers and highlighting innovations in tele-behavioral health
- Topics included defining telehealth, workflow considerations, configuring space and privacy issues, billing, reimbursement and special considerations

Go to resource page

LISTENING SESSIONS FOR NATIVE COMMUNITIES

- · Collaboration with SAMHSA HHS Region 10 Alaska, Idaho, Oregon and Washington States
- · Open discussion on how to support learning opportunities for mental health professionals in native communities





CULTURAL ELEMENTS OF NATIVE MENTAL HEALTH WITH A FOCUS ON RURAL ISSUES

Go to resource page

- Provide an overview of rural mental health disparities in the United States
- · Provide an overview of Native American mental health disparities
- · Describe Native American cultural elements for improved rural mental health

Go to resource page

HEALTHY HEALERS

- · Train-the-Trainer program in Alaska
- · Targeted toward Indigenous rural providers
- · Designed to increase job satisfaction and reduce burnout









PSYCHIATRIC SERVICES AT THE LUMMI NATION

- · Describe and discuss the unique challenges to providing psychiatric care in a coordinated and collaborative way to a tribal community during the coronavirus pandemic.
- Topics include trauma experienced by Native Americans and understanding complexities of behavioral and medical health

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CULTURAL ADAPTATION OF A SUICIDE PREVENTION TRIAL FOR INDIAN COUNTRY

- · Methods, results and implications of a community-based participatory research approach in Indian Country.
- Learn more about Caring Contacts (CARE): A Strength-based, Suicide Prevention Trial in Four Native Communities

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THEMES & HIGHLIGHTS

Region 10 has 272 Federally Recognized Tribal Nations + other Tribes not recognized







Host learning community for Native peers focusing on how the community can support its own members

Re-entry from legal systems & incarceration

Adapt Motivational Interviewing for specific Tribes

Support for rural communities & providers

Provide TA for Native providers on billing/funding, acknowledging billing is tied to Western concepts of medicine

Suicide prevention education in Native communities with local Suicide Prevention Coalitions

Train providers on Native-specific cultural & intergenerational trauma, and how these interact with health

Community prevention provider meeting to discuss challenges, support, information

Train providers working with survivors of boarding schools and their descendants to help process and heal from that trauma

Behavioral health prevention strategies for peers working in Tribal communities

Are there EBPs that incorporate traditional & cultural ways of healing? What is missing?

What psychosis looks like in Native culture and what best practices are for treating psychosis in this context

Re-defining best practice so they are centered on cultural relevance <u>rather than "evidence" that is rarely inclusive of Native communities</u>









Indigenized Motivational Interviewing: What is MI, and Why Use it with Native Clients?



Lonnie Nelson, PhD

(Eastern Band Cherokee)

Associate Professor and Chair

Department of Nursing and Systems Science

College of Nursing, Washington State University

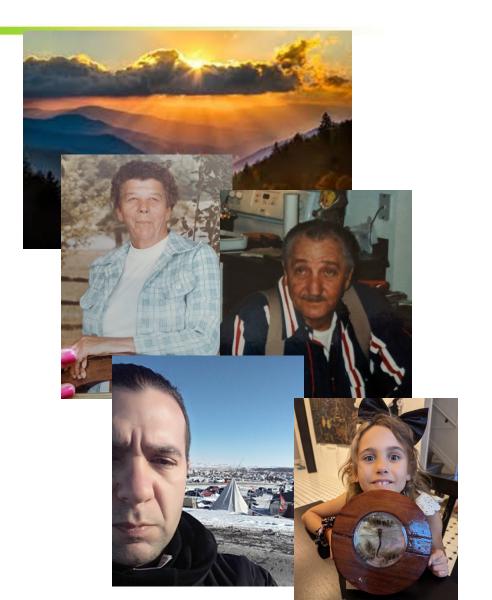
Institute for Research and Education to Advance Community Health (IREACH)



Osiyo!



- My background and training...
 - Who I came from
 - Schooling
 - Partnerships for NativeHealth
 - Why I do what I do
 - My current work



The Spirit of MI



- A "way of being" based on:
- Collaboration between the practitioner and the client;
- Evoking or drawing out the client's ideas about change;
- Emphasizing the autonomy of the client.
- Practicing compassion in the process.

Collaboration

Compassion



Evoking

Autonomy

The MI Prayer*



Guide me to be a patient companion, to listen with a heart as open as the sky. Grant me vision to see through her eyes and eager ears to hear her story. Create a safe and open mesa on which we may walk together. Make me a clear pool in which she may reflect. Guide me to find in her your beauty and wisdom, knowing your desire for her to be in harmony: healthy, loving and strong. Let me honor and respect her choosing of her own path, and bless her to walk it freely. May I know once again that although she and I are different,

yet there is a peaceful place where we are one.

^{*}Miller WR, Rollnick S. (2013). Motivational Interviewing: Helping People Change. 3rd Ed. New York, NY. The Guildford Press. Created in collaboration with Mr. Ray Daw (Dine').

Why MI for Native Populations?



- Self-Determination
- Respect
- Connection
- Responsibility
- Empathy
- Pride
- Integrity

Integrity



• What does **integrity** mean?

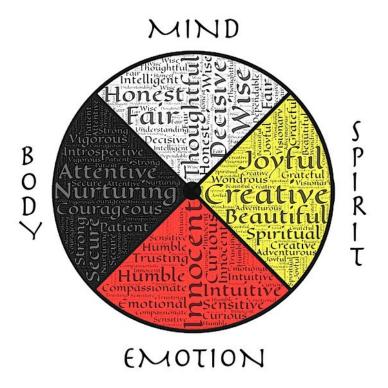
Integrity



What does integrity mean?

in·teg·ri·ty, in tegrade/noun

- 1. the quality of being honest and having strong moral principles; moral uprightness.
- 2. the state of being whole and undivided.



MI: Guiding Toward Integrity



- MI Conversational style
 - Open by connecting with cultural practices as appropriate.
 - (Smudging, singing a song, prayer, etc.)
 - "Guiding" participants
 - Not telling people what to do
 - Not judging where people are
 - Understanding and working with ambivalence
 - Recognizing that people are experts on their experience

Indigenizing MI: What's the Difference?



- Emphasis on Integrity
 - Above all, we're striving to help people make decisions that make them feel and be "whole".
- Using a "Spiral Learning" model
 - In Native cultures, we don't consider learning to be a linear process....
- Connecting with cultural practices as appropriate.
 - (Smudging, singing a song, prayer, etc.)
 - Tying these to action plans (i.e., cultural practices are strong medicine)
 - "Guiding" participants as a companion, not an advisor.
 - We will not presume to know what's best for them.

Indigenizing MI: What's the Difference?



- Not telling people what to do
 - Psychopathic behavior in many Native cultures (unless you're their grandma ☺).
- Not judging where people are on their path
 - We accept our relatives as they come to us.
- Understanding "the pull of two worlds"
 - Dysfunctional behaviors are often the result of abuse, neglect, addictions in the previous generation, etc. – the "second-hand smoke" of the fires of colonization.
- Recognizing that people know their own path; you're a visitor, with limited knowledge of that path.
 - It's a privilege to be let in, if they let you in. We will hold ourselves to respect that privilege.

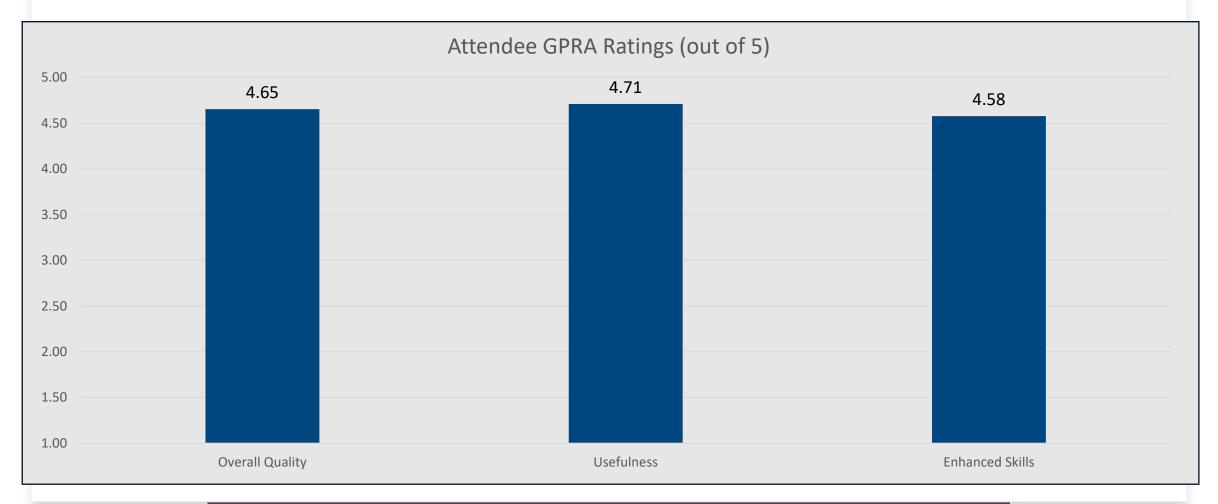


IMPACTS OF TRAININGS

Event Date	Location	Attendance
November 2018 Yakama Nation Corrections	Yakima, WA	19
Jan 2019 Seattle Indian Health Board	Seattle, WA	26
June 2019 University of Alaska Southeast	Juneau, AK	27
June 2019 Providence Health & Services	Anchorage, AK	26
November 2021, Virtual	Virtual	31
November 2023 Suquamish Tribe Wellness	Suquamish, WA	18
February 2024 Project NATIVE	Spokane, WA	17
June 2024 Upper Skagit Indian Tribe, Swinomish Indian Tribal Community	Bow, WA	26
July 2024 Suquamish Tribe Wellness	Suquamish, WA	TBD
TOTAL		190



IMPACTS OF TRAININGS





IMPACTS OF TRAININGS

"Supporting me in applying a decolonizing framework when using those tools. Implementing deconstructive framework in the system (dismantling racism)."

"The spiral approach to learning facilitates deeper understanding and implementation of MI. One of the best trainings I have attended."

"Learning MI is a game changer. It's culturally relevant and will help when working in Native villages." "The fact that it was Native centered and reinforced the Native paradigm was enlightening, and I would say vital."

"it will help me to be a more patient and unbiased clinician. It also increased my cultural sensitivity and shifted the way that I will approach clients in the future."

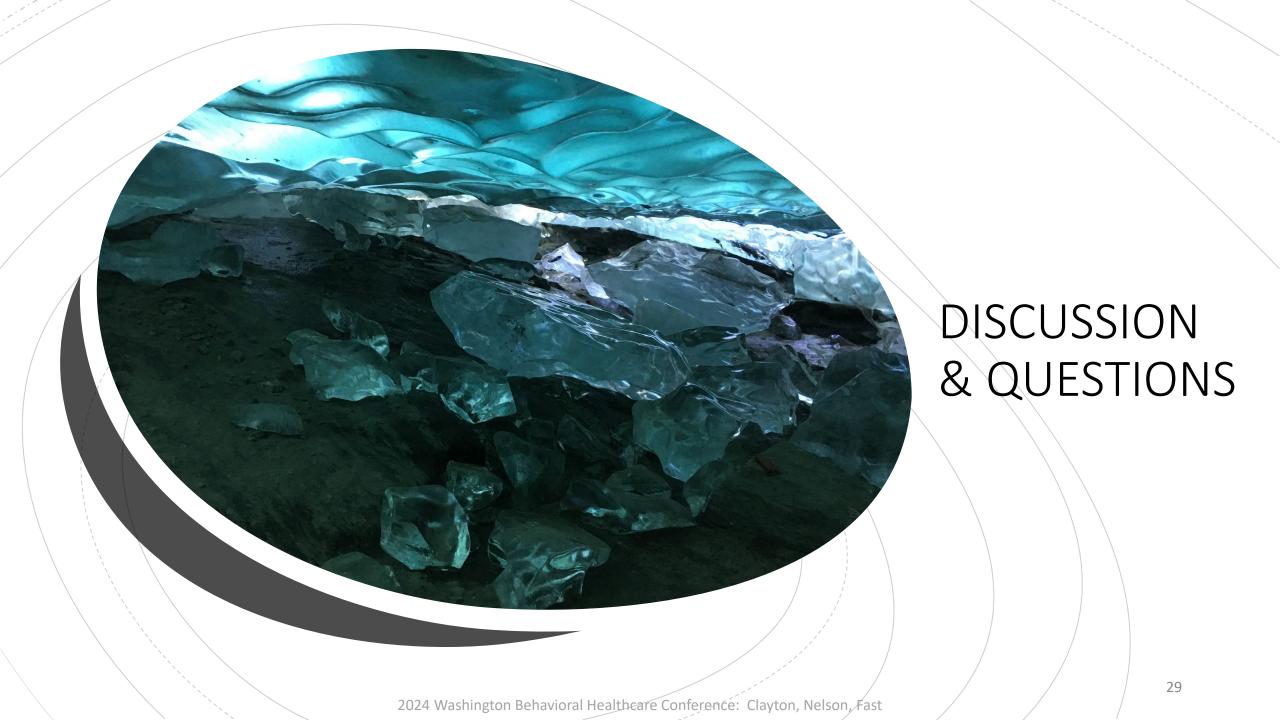
"It will help me remember that we are not here to "fix" things for our Relatives. It will be helpful to remember our Relative can come up with their own steps in their lives."

"Understanding the Indigenous history of MI."





TRAINEE &
PEER
PROVIDER
PERSPECTIVE





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Northwest MHTTC



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