



**UW PACC**

Psychiatry and Addictions Case Conference

UW Medicine | Psychiatry and Behavioral Sciences

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# WELCOME!

## Today's Topic:

Partnering with Native American Communities to Address Alcohol and Drug Problems

Michael McDonell, PhD

PANELISTS:

MARK DUNCAN, MD, RICK RIES, MD, KARI STEPHENS, PHD, AND BARB MCCANN, PHD





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# **PARTNERING WITH NATIVE AMERICAN COMMUNITIES TO ADDRESS ALCOHOL AND DRUG PROBLEMS.**

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**WASHINGTON STATE UNIVERSITY**

**ELSON S. FLOYD COLLEGE OF MEDICINE**



# GENERAL DISCLOSURES

The University of Washington School of Medicine also gratefully acknowledges receipt of educational grant support for this activity from the Washington State Legislature through the Safety-Net Hospital Assessment, working to expand access to psychiatric services throughout Washington State.

# SPEAKER DISCLOSURES

✓ None.

# OBJECTIVES

1. Be able to describe terms relevant to working with Native communities.
2. Describe how colonization has impacted Native peoples, including leading to disparities related to drug and alcohol use.
3. Define the term cultural safety and its importance in health care and how Indigenous and “western” knowledge can be combined to support recovery for Native people.

# Partnering with Native American Communities to Address Alcohol and Drug Problems.



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NCARE P60AA026112

# Disclaimer


- ▶ I am not Native, thus my opinions do not reflect any Native community or group.
- ▶ I am a white man, so despite my best efforts I am dense, make lots of assumptions and believe I am correct unless proven otherwise.
- ▶ If any Native person disagrees with something I say in this talk, they are right.

# My Journey

<2012 focus on health disparities and co-occurring disorders with Rick Ries, MD (Harborview)



2012 approached by Dedra Buchwald, MD and John Roll, PhD to write 2 SUD treatment grants



Immediately led 2 large clinical trials with 5 Tribal partnerships



Result is 7 years of learning, conducting community participatory research backwards



# Terms

- ▶ Indigenous or Aboriginal : A person who is part of a group that is the original inhabitant of a place (can apply to groups around the world)
- ▶ Native American: any indigenous person in the US (including Native Hawaiians). Though many American Indians prefer this term.
- ▶ American Indian (AI): A person indigenous to the lower 48 states.
- ▶ Alaska Native (AN): A person indigenous to the state of Alaska (many people in WA).
- ▶ First Nations or Aboriginal Canadian: A person from a Tribe or indigenous group in Canada.
- ▶ Respect the terms people chose to use for themselves or their culture or community.

# Terms (continued)

- ▶ Tribe: is an AI/AN tribal entity that is recognized as having a government-to-government relationship with the United States, with the responsibilities, powers, limitations, and obligations attached to that designation- 573 Tribes or villages
- ▶ Indian Reservation: Federal land held in trust for AI/AN people. It is therefore exempt from state laws.
- ▶ Indian Health Services: Federal agency responsible for fulfilling our treaty obligations to provide health care to Native people.
- ▶ Colonization: Efforts by European, S and N. American governments to remove or assimilate Native people, thereby disfranchising them (ongoing).
- ▶ Historical Trauma: The concept that colonization continues to cause negative mental, spiritual, and physical health consequences for Native people.
- ▶ Cultural Revitalization: Reclaiming of Native cultural practices, language and identity with a focus on self-determination (health care being one specific focus).

<https://www.bia.gov/frequently-asked-questions>





# WANTED



## CHRISTOPHER COLUMBUS

GRAND THEFT, GENOCIDE, RACISM

INITIATING THE DESTRUCTION OF A CULTURE

RAPE, TORTURE, AND MAIMING OF

INDIGENOUS PEOPLE AND INSTIGATOR OF THE BIG LIE.

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## 500 YEARS OF TOURISM

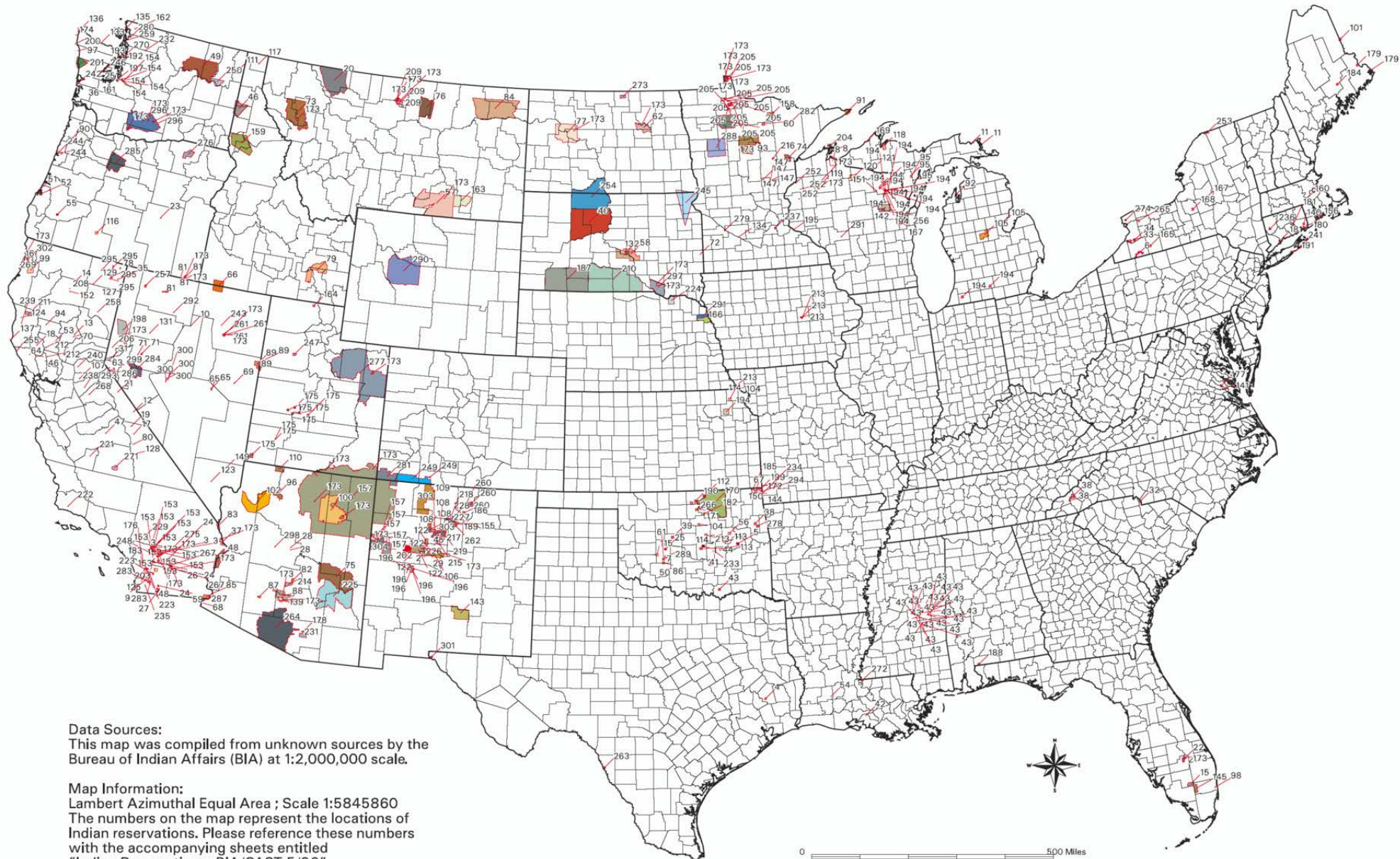
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- ▶ Genocide
- ▶ Colonization
- ▶ Relocation/reservations
- ▶ Boarding schools
- ▶ Unfulfilled Treaties
- ▶ Allotment
- ▶ Alcohol used as a weapon (still)
- ▶ Coerced sterilization
- ▶ Unethical "treatments"





# Indian Reservations in the Continental United States



## Data Sources:

This map was compiled from unknown sources by the Bureau of Indian Affairs (BIA) at 1:2,000,000 scale.

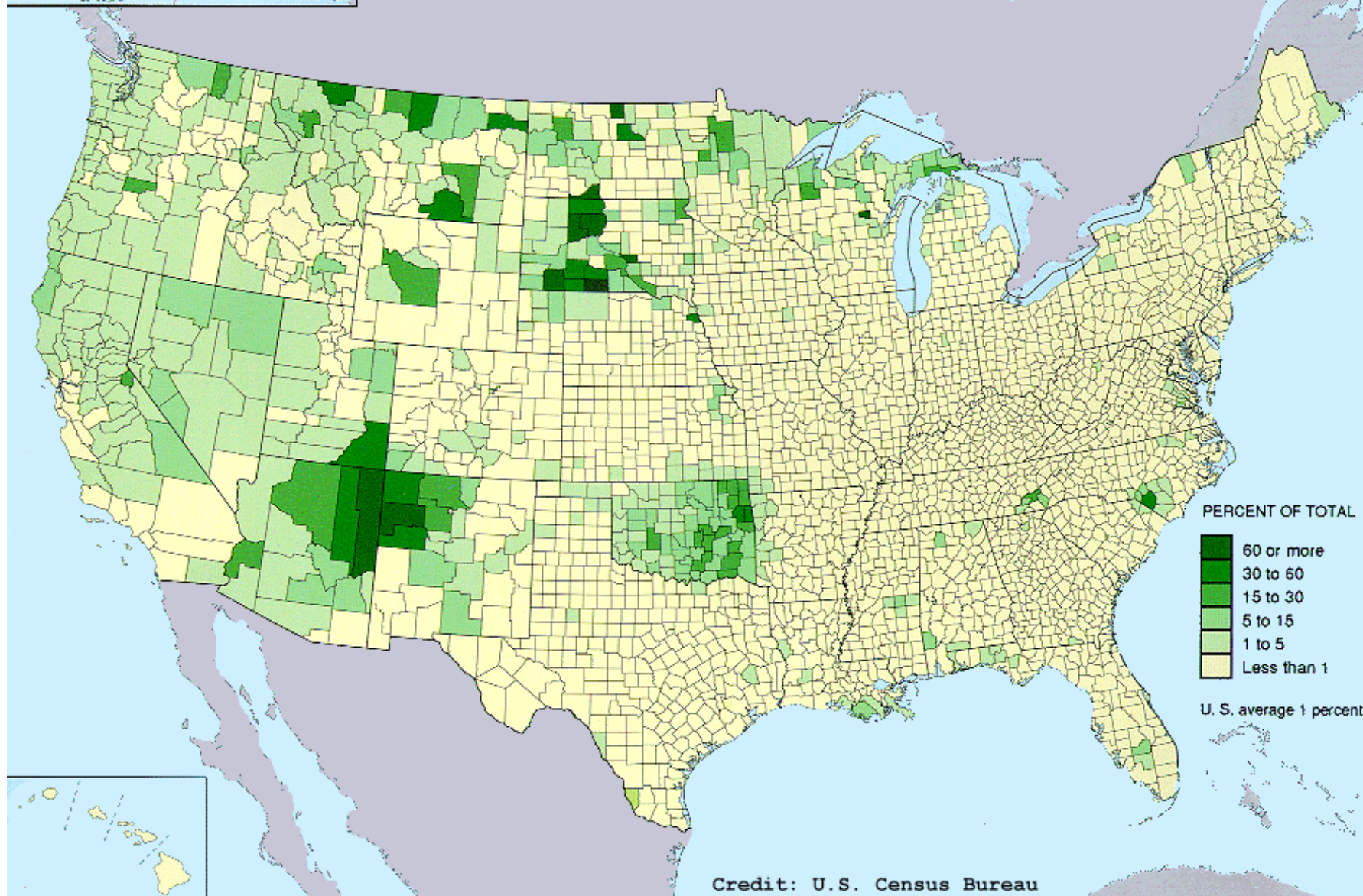
## Map Information:

Lambert Azimuthal Equal Area ; Scale 1:5845860

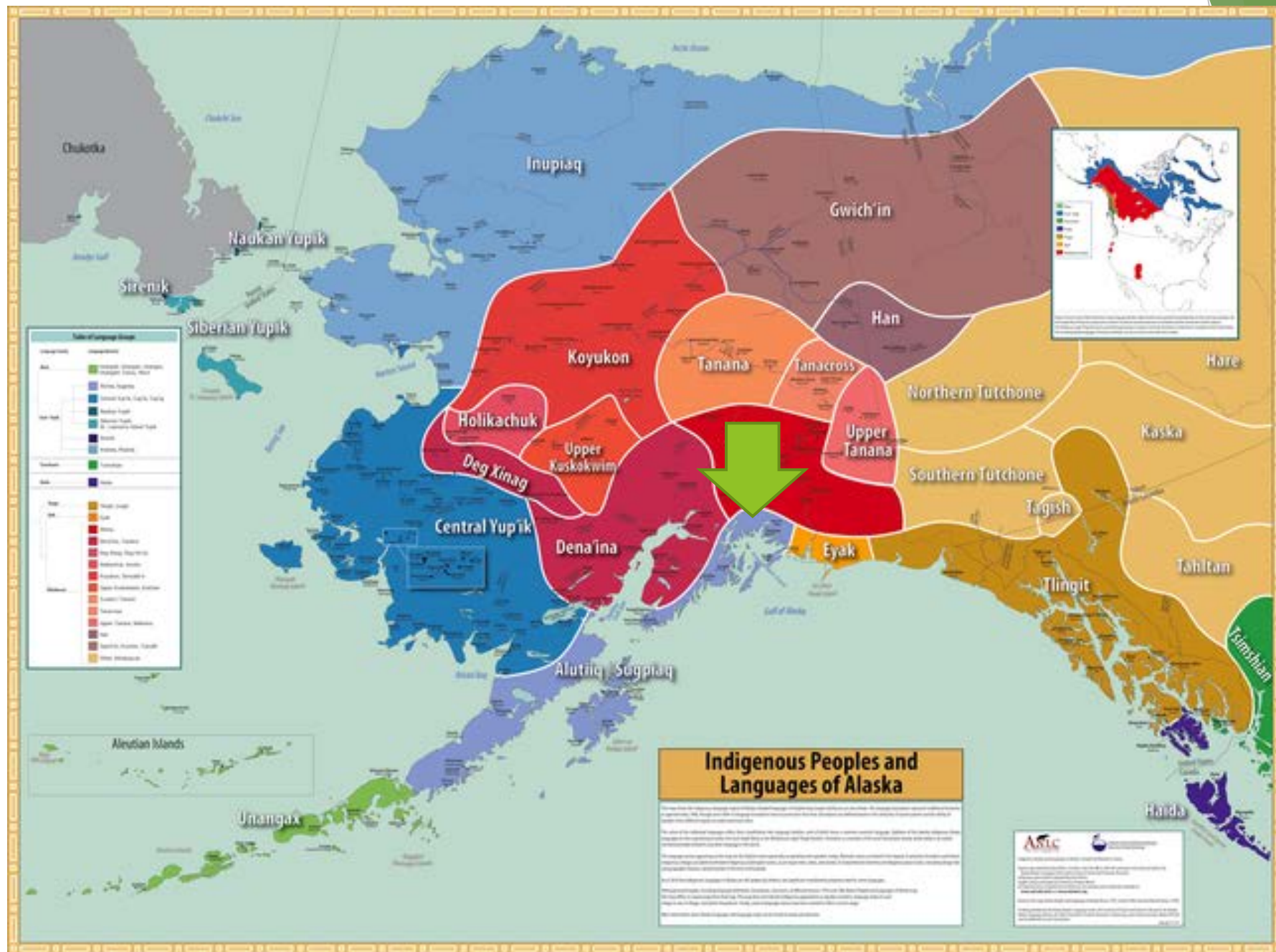
The numbers on the map represent the locations of Indian reservations. Please reference these numbers with the accompanying sheets entitled "Indian Reservations- BIA/CAST 5/96".



## American Indian, Eskimo, and Aleut Persons





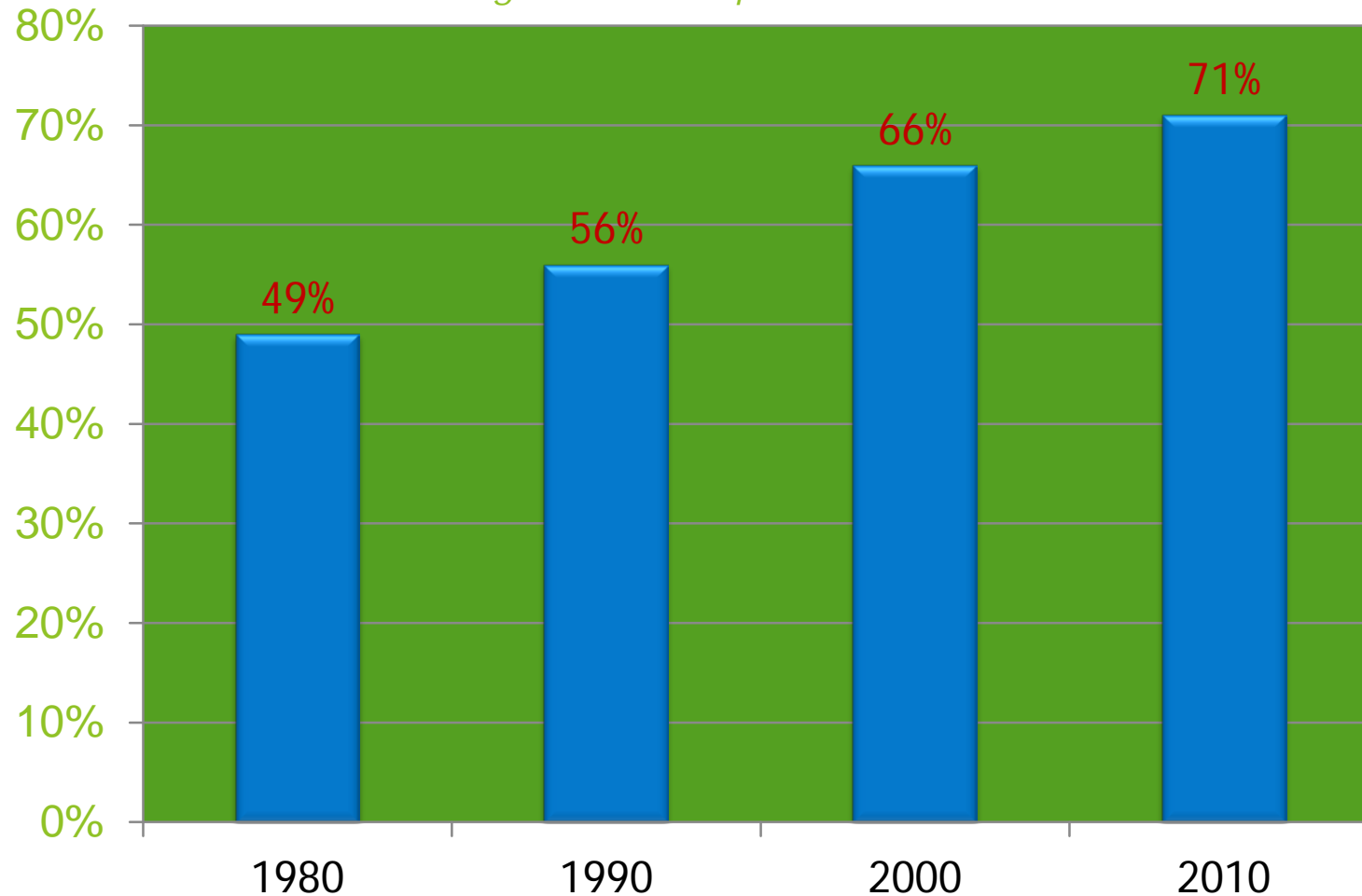




# Urbanization of American Indians and Alaska Natives



*Urban Percentage of AIAN Population: US Census Data*



# Cultural Safety General Points



- AI/AN peoples are extremely diverse in every way imaginable and should not be grouped as a whole (though most statistics do this)
  - Colonization accentuates these differences (e.g., boarding schools, relocation)
- Many AI/AN groups do share common values and practices (e.g., collectivist, respect for Elders).
- Important to ask each individual about their story, their culture, their community. Each patient is the expert.
- Most non-Native people have little experience working with Native people and know very little about Native culture, language, or issues.

# Cultural Safety



- Cultural Safety: All people feel respected and safe when they interact with the health care system. Health care services are free of racism and discrimination. People are supported to draw strengths from their identity, culture and community.
- Cultural Awareness: The journey of cultural humility often starts with cultural awareness - recognizing that differences and similarities exist between cultures. Learning about the histories that impact Native people.
- Cultural Sensitivity: Cultural sensitivity grows when we start to see the influences of our own culture and acknowledge that we have biases. This can be an eye-opening experience, and it may take courage and humility to walk this path. Cultural sensitivity is NOT about treating everyone the same. With cultural awareness and sensitivity comes a responsibility to act respectfully.
- Cultural Competence: Developing knowledge, skills and attitudes for working effectively and respectfully with diverse people. It's about reducing the number of assumptions we make about people based on our biases. Cultural competency does not require us to become experts in cultures different from our own.
- <https://www.indigenoushealthnh.ca/initiatives/cultural-safety#cultural-humility>

# Alcohol and Drug Use Disorders



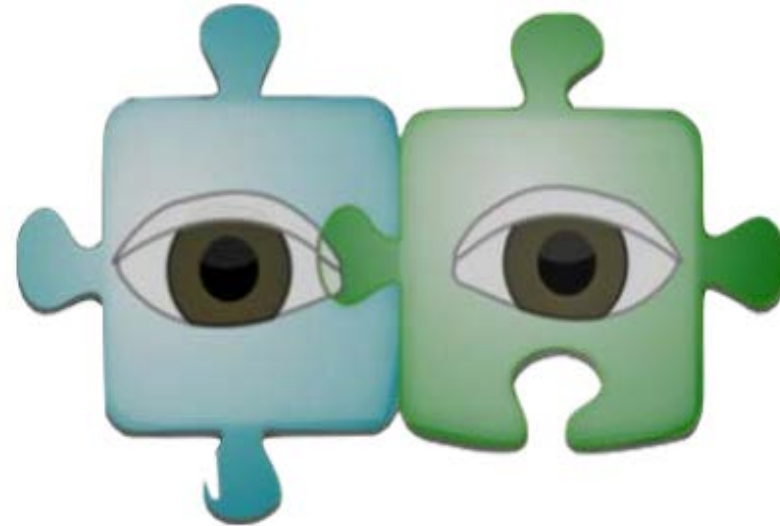
- 2009-2013 National Survey on Drug Use & Health: alcohol use
  - Abstainers: AI/AN = 60% vs. Whites = 43%
  - Light/moderate drinkers: AI/AN = 15% vs. Whites = 33%
  - AI/ANs and Whites = for heavy (8%) and binge (17%) drinking
- AI/AN cirrhosis deaths are 6 times higher, fetal alcohol spectrum disorders prevalence is 3-25 times higher, and alcohol-related motor vehicle deaths are 7 times higher than Healthy People 2010 goals.
- 5 of top 10 causes of death in AI/ANs – accidents, alcoholism, suicide, homicide, and cirrhosis – are alcohol related.
- Disparities in drug use are similar, but drugs used vary by location.
- AI/AN people are more likely to seek out treatment, but more likely to drop out.

# Two-Eyed Seeing:

## An Indigenous Approach to Integrative Science and Co-Learning



Two-eyed seeing is learning to see from one eye with the strengths of Indigenous knowledge and ways of knowing, and from the other eye with the strengths of Western knowledge and ways of knowing ... and learning to use both eyes together for the benefit of all.



# Treatment



## Culturally Adapted Western Treatments

### Only 3 Published RCTs

- ▶ Motivational Interviewing/Enhancement (modified and effective)
- ▶ MATRIX Model (Methamphetamine) (adapted not tested)
- ▶ Contingency Management (2 RCTs recently completed)
- ▶ Culturally-based buprenorphine programs (implemented but not tested)
- ▶ Naltrexone for alcohol (overall effective)
- ▶ AI/AN adapted AA Wellbriety (widely implemented, not tested) (White Bison)
- ▶ Culturally adapted inpatient treatment (implemented not tested)

# Treatment



## Culturally Based Treatments

- ▶ Sweat Lodges (widely implemented, large RCT reductions in drinking)
- ▶ Wellbriety (widely implemented, not tested), clinician lead, AA like, and bibliotherapy options
- ▶ So many other options, from Native healers, plant based medicines, cultural and language learning.
- ▶ So much potential for two eyed-seeing approaches, as evidence for culturally based interventions is just as strong as western approaches.

# Acceptability and Effectiveness



**Cultural Acceptability:** the extent to which an approach must be adapted so that it reflects the values, interests and language of a new group. The manner in which it is delivered changes, but the active ingredients do not.

**Cultural Effectiveness:** an intervention is less effective for a group, due to its components not having the same impact on outcomes as they did in the initial population it was developed for.

Acceptability is typically what needs to be modified when adapting interventions, with notable exceptions. Likely what you need to change as a provider.



# Challenges and Opportunities



## Challenges

- ▶ Social determinants of health
- ▶ Effects of colonization
- ▶ Discrimination
- ▶ Lack of treatment access
- ▶ Medical comorbidities
- ▶ Rurality
- ▶ Transportation Challenges

## Opportunities

- ▶ High rates of abstinence
- ▶ Collectivism
- ▶ Strong families
- ▶ Elders/Grandparents
- ▶ Cultural and language revitalization
- ▶ Economic revitalization
- ▶ Ties to Traditions
- ▶ Connections to place
- ▶ Spirituality/religion
- ▶ Laughter
- ▶ Resilience, pride
- ▶ Sovereignty and self-determination

# Things You Can Do



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Practice cultural humility

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Be curious

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Respect Native knowledge as equal to or superior to your own

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Hear each patient's story, their journey, their people's journey

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Work closely with families

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Check your stereotypes

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When in doubt seek consultation or ask for a referral

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Train the next generation, a more diverse work force improves everyone's health

# More Information



Wellbriety

<http://www.coyhispublishing.com/store.php>



NCARE

<http://www.p4nh.org/ncare/>



Truth and Reconciliation Commission of Canada

<http://www.trc.ca>



SAMHSAs Tribal Behavioral Health Agenda

<https://store.samhsa.gov/product/The-National-Tribal-Behavioral-Health-Agenda/PEP16-NTBH-AGENDA>