

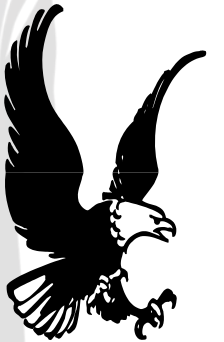


**TRIBAL YOUTH
RESOURCE CENTER**

www.TribalYouth.org

PROMOTING , EVALUATING & SUSTAINING TRIBAL BASED PRACTICES

Presented by:
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BEFORE WE BEGIN..

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TRIBAL AND MINORITY-BASED PRACTICES: MANY PATHS TO FOLLOW

Native people have been conducting and implementing a variety of practices **to reduce risk factors and to increase protective factors** for behavioral and health problems for hundreds of years, and these practices have been **shown** to be **effective** within their own communities.



Yet, these practices **have not been** able to be scientifically validated.

The question to ask here is, ***“do we have culturally relevant tools to measure what we do in Indian and minority communities?”, and “should we be the ones to validate our programs from a culturally relevant perspective?”***

These questions will be discussed from the presenter’s perspective and experience.

▶ OBJECTIVES

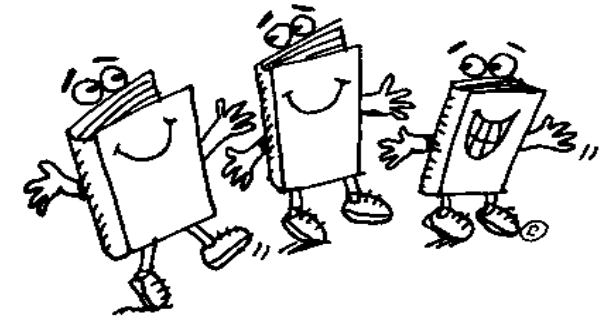
Participants will have an understanding of the challenges Native Americans have faced with “Evidence Based Practices” and examples of programs and current efforts to culturally-validate “Practice Based Evidence for Native approaches and programs.”

Participants will have an opportunity to review tools to codify Tribal practices currently being implemented in Native American communities.

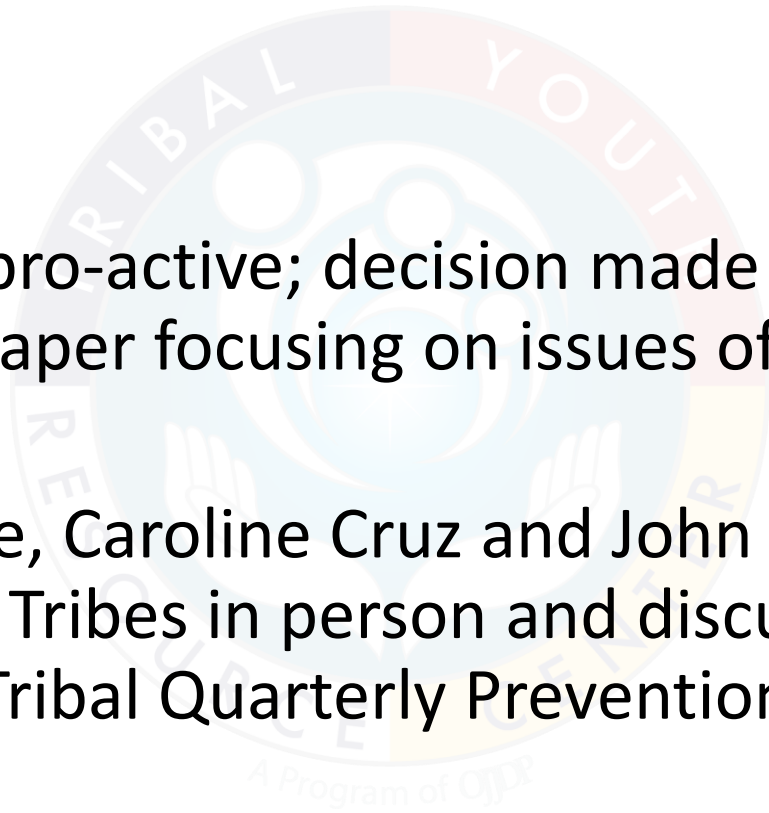


▶ CAPTURING OUR HISTORY WITH TRIBAL BEST PRACTICES

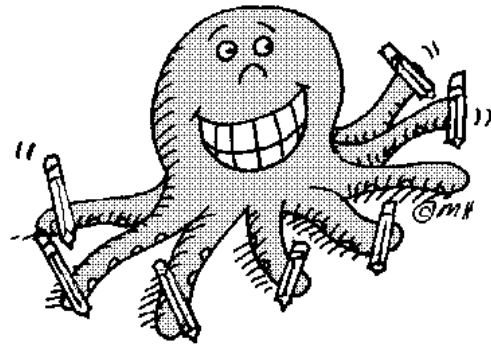
- Overview of the last twenty years.
- Bob Nikkel, former Assistant Deputy Director with Addictions and Mental Health Division (AMH), met with members of the Oregon Indian Council on Addictions (OICA) to discuss the Evidence Best Practice (EBP) bill in 2003.
- OICA brought up issues of concern for Indian people if this bill passed.




- 2003 – EBP bill pass.
- OICA decided to be pro-active; decision made to work on a position paper focusing on issues of concern for Indian people.
- Over a period of time, Caroline Cruz and John Spence met with all nine Oregon Tribes in person and discussed issues surrounding EBP at Tribal Quarterly Prevention meetings.



- Collected data, recorded practices Tribes have been implementing, covering the total continuum of care with the Institute of Medicine (IOM) for Prevention, Treatment, and Aftercare for substance abuse, mental health, and juvenile crime.
- Researched EBP's that have been done for N.A. and current research for Native American best practices.



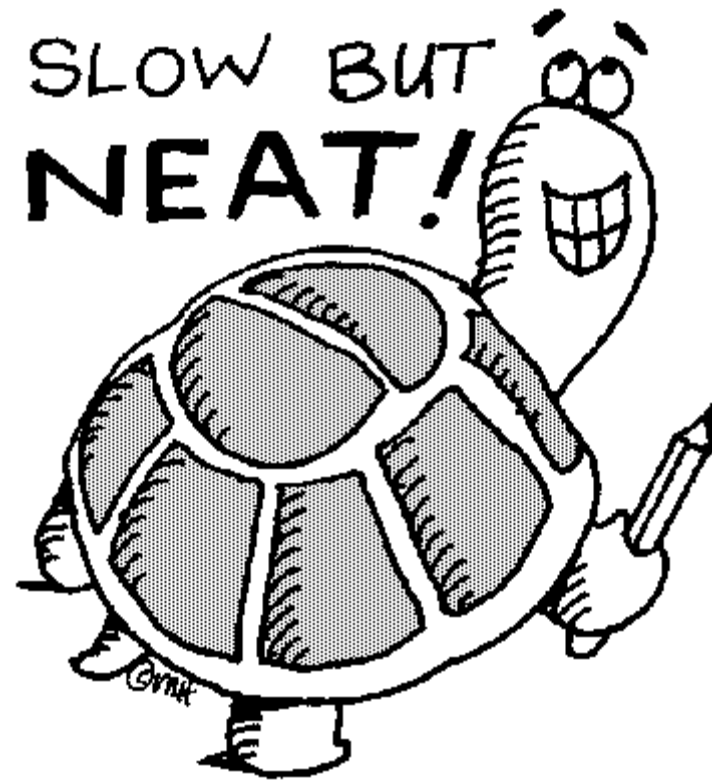
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- After a long process, the paper titled, “Oregon Tribal Evidence Based and Cultural Best Practices,” (Cruz, Spence 2005) was published.

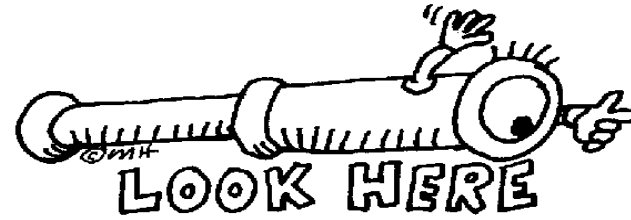


- National and statewide interest in the paper.
- PowerPoint titled, “There are Many Pathways to Follow: The Debate Around Evidence Based Practices,” (Cruz 2005) was developed. Now called, “Tribal Best Practices: There are Many Pathways.”

▶ OTHER

- Journal of Psychoactive Drugs, Growing Roots: Native American Evidence-Based Practices, October-December 2011, Volume 43, Number 4
- Many Pathways to Follow: Tribal Best Practices, Caroline M. Cruz, Associate SAMHSA's Center for the Application of Prevention Technologies (CAPT) West Resource Team, 2014
- Tribal Best Practices State of Oregon, named a Bright Idea by the Innovations in Government Program in 2015, Harvard Kennedy School: John F. Kennedy School of Government





- May 14, 2007 a Tribal stakeholder gathering was held with Oregon tribal researchers and evaluators to strategize the challenges Oregon Tribes face due to SB 267 requirements. The gathering was titled, “Oregon Tribal Perspectives on Evidence Based Practices.”

▶ NATIVE AMERICAN RESEARCHERS PRACTICES BASED ON EVIDENCE (PBE) MAY 14, 2007, PORTLAND OREGON.

Some recommendations from participants are as follows:

- Community-based participatory research approach (CBPR).
- N.A. cultural board at the community level.

“We need to understand that research doesn’t account for changes in the population and trends and environmental shifts. We need to do more and add more and figure out what’s missing from the communities.”

- Allison Ball PhD, University of Oregon



▶ PRACTICE-BASED EVIDENCE

“Most **research** is about practices that has not been **developed** or **investigated** in relation to the actual use or application of a practice.”

“**Danger** of using a **list of practices** is that we **isolate resources** and we **starve programs** that are **doing well** by asking them to **implement programs** into their services when there is **no evidence to support** that they will do well by **increasing** those services.”

- Terry Cross MSW, NICWA




▶ “Allow **people** to tell how they **healed** and what they have **done** as human beings. We have to be **careful** not to just look at **numbers** but rather to **listen** to people.

“**How did you get there?**”

- Bob Ryan Ed.D., Consultant





“If he can get **through** to the **grandmothers** then he has **done** something **that will or may work** in Indian country.”


“There will be **three Indian grandmothers** who will be there to **watch**.”

“Prefers the **three Indian grandmother** rules as opposed to the **journals**, etc.”

“To do **research** in Indian country you have to have a **hard shell** and **move** very slowly.”



Tom Crowfoot PhD, EWU




Like the **whale hunters of Alaska** saying that the **solution to hunger** is the **Whale**

and that the **people of the plains** must hunt whale,

or that the **corn growers of the southwest** will only receive **whaling boats and harpoons** as implements for over coming hunger in their communities.

It doesn't make sense.
(T. Tafoya)

Developing Culturally-Based Promising Practices for Native American Communities, 2001 White Bison, Inc.




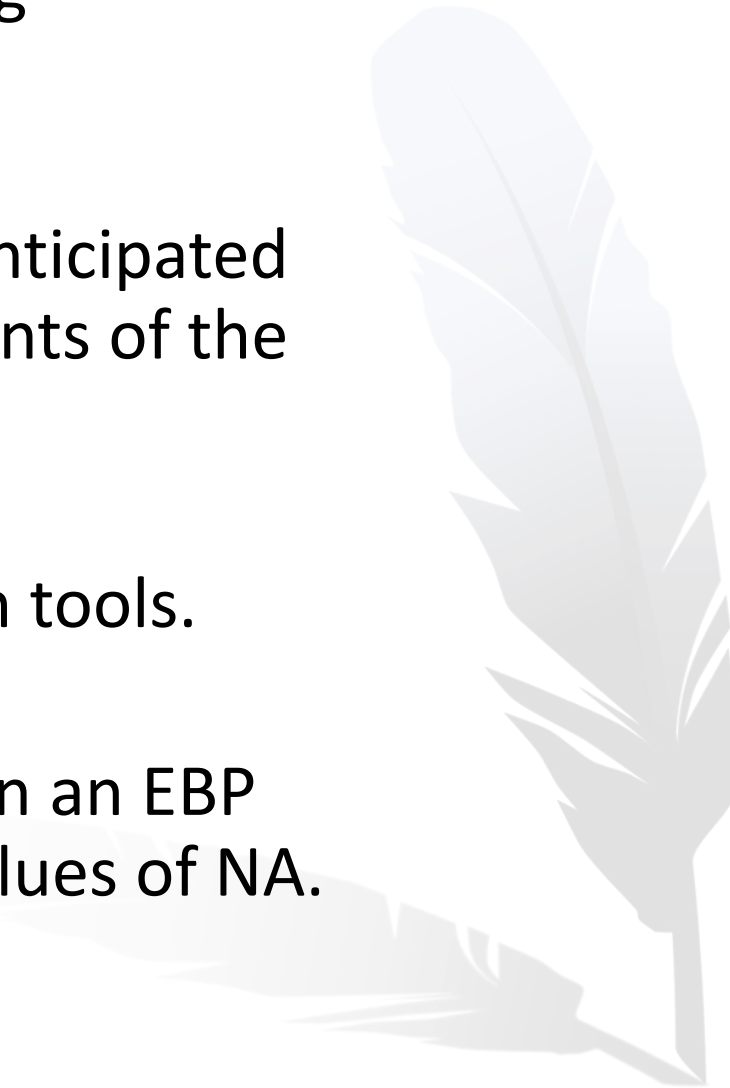
What else doesn't make sense is the growing concern that people in Native American communities **are going without treatment and prevention programs** because the ones they would implement are **ineligible for funding**, while the ones that are recommended do not fit their needs. (Tafoya)





ADDICTIONS & MENTAL HEALTH DIVISION (AMH) POSITION PAPER ON NATIVE AMERICAN TREATMENT PROGRAMS AND EVIDENCE-BASED PRACTICES (BOB MILLER) SEPTEMBER 21, 2007

- Acknowledge NA concerns about EBP
- AMH does not believe that an EBP on list should be assumed to be better than a culturally validated practice
- AMH concludes that we need a different framework for NA stakeholders

- 
- NA stakeholders must take the lead in defining what works.
 - Addictions & Mental Health Division (AMH) anticipated that this framework would incorporate elements of the recommendations of the “paper.”
 - Time should be allowed to develop evaluation tools.
 - AMH will collaborate to establish and maintain an EBP framework consistent with the culture and values of NA.
- 

TRIBAL CULTURAL BEST PRACTICE: 2ND GATHERING OF TRIBAL RESEARCHERS AND EVALUATORS

MAY 14, 2008

- “Meeting the EBP Standard” (One Sky Center): Michelle J. Singer, Douglas A Bigelow, PhD
- “University of New Mexico Center for Rural & Community Behavioral Health”: Charlene Poola, LISW
- “Re-Indigenizing our Science: Ethical and Respectful Research Partnerships with Tribal Communities”: Lisa Thomas, PhD
- Identifying Success in Native American Youth: Building Practice-Based Evidence from the Ground Up, Native American Youth Association: Korinna Wolfe, PhD

▶ OREGON REVISED STATUTE

- ORS House Bill 3110 was proposed in 2011 relating to substance abuse programs.
- Original proposal only stated Evidence Based language and did not include TBP.
- This was challenged and language now includes Tribal Based Practices where ever EBP is listed.
- Passed the House and Senate 2011.

MORE...

- AMHD provide minimum funding to continue to develop and update TBP.
- TBP was also added to the new Early Learning Council/Youth Development Council (Previous Commission on Children and Families).
- 2014 focus on cross walking TBP with accepted practices to qualify for reimbursement.
- Stakeholder meetings held Oct. 2013, Oct. 2014, Nov. 2015 and Oct. 2016.



MORE...

- Numerous request for TBP assistance: Alaska, Montana, California, Nevada, Minnesota, Michigan, Maine, New Mexico, 1St Nations in Canada, NPN, SAMHSA, NACE, Tribal Tech...
- Published: CAPT Factsheet 3.13 included in SAPT's, Prevention Journal, Bright Idea...
- June 2013 NASADAD recommended TBP be nominated for Innovations in American Government Award – Jason Yarmer submitted, awarded 2015, received plaque 2016.

▶ THE DOOR OF HEALING

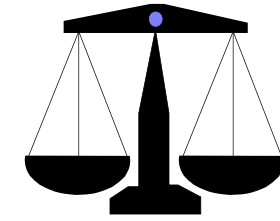


▶ TRIBAL BASED PRACTICES (TBP)

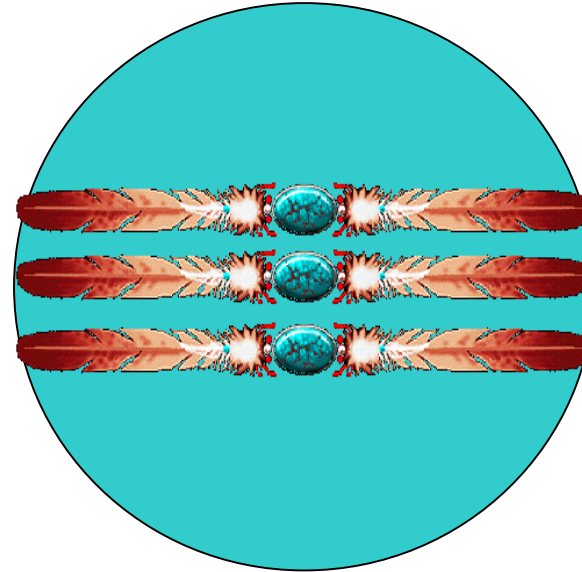
- Also known as Culture-Based Intervention (CBI)
- TBP's are culturally focused programs, policies, or practices that is based on the philosophy that culture is prevention, treatment and a way of life.
- TBP's uses culture to reduce risk factors, reinforce resiliency and other protective factors in tribal communities.



Science –
Validated



Cultural –
Replicated



Cultural –
Validated

Science –
Replicated

HO 1

Developing Culturally-Based Promising Practices for Native American Communities 2001 White Bison, Inc.
Modified by C. Cruz with permission





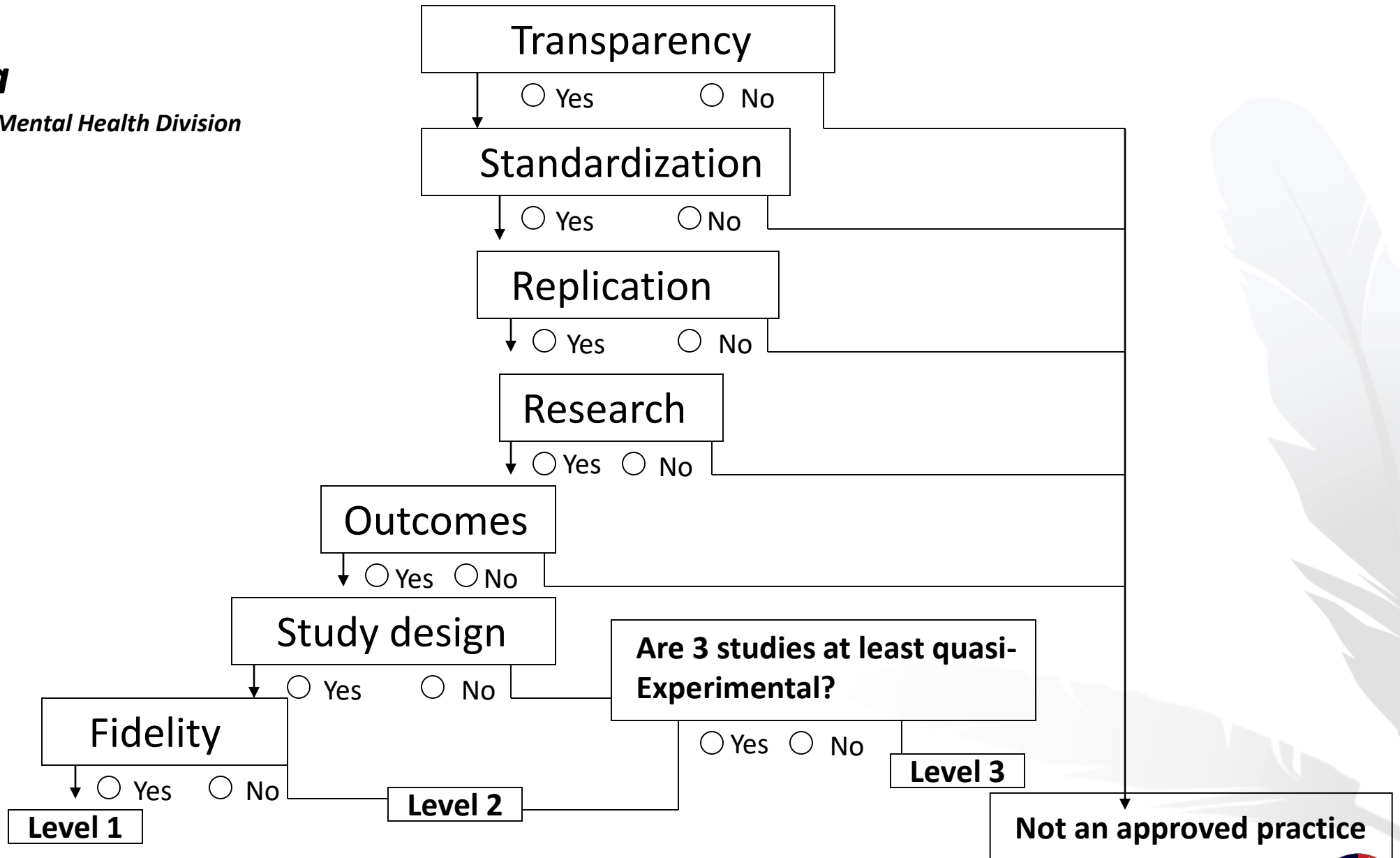
	Level	Transparency	Research	Standardization	Replication	Fidelity Scale	Meaningful Outcomes
Evidence-Based Practices	I	Yes	>=3 studies in peer reviewed journal. Minimum of one study should be based on a randomized control trial.	Yes	Yes	Yes	Yes
	II	Yes	>=3 studies in peer reviewed journal. Studies should be at least quasi-experimental.	Yes	Yes	In development or no	Yes*
	III	Yes	>=3 studies in peer reviewed journals. Less rigorously controlled studies will be considered.	Yes	Yes	No	Yes*
Non Evidence-Based Practices	IV	Yes	None	No	No	No	Yes
	V	No	None	No	No	No	No
	VI	No	Yes	Yes	Yes	No	No





Criteria

Addictions & Mental Health Division



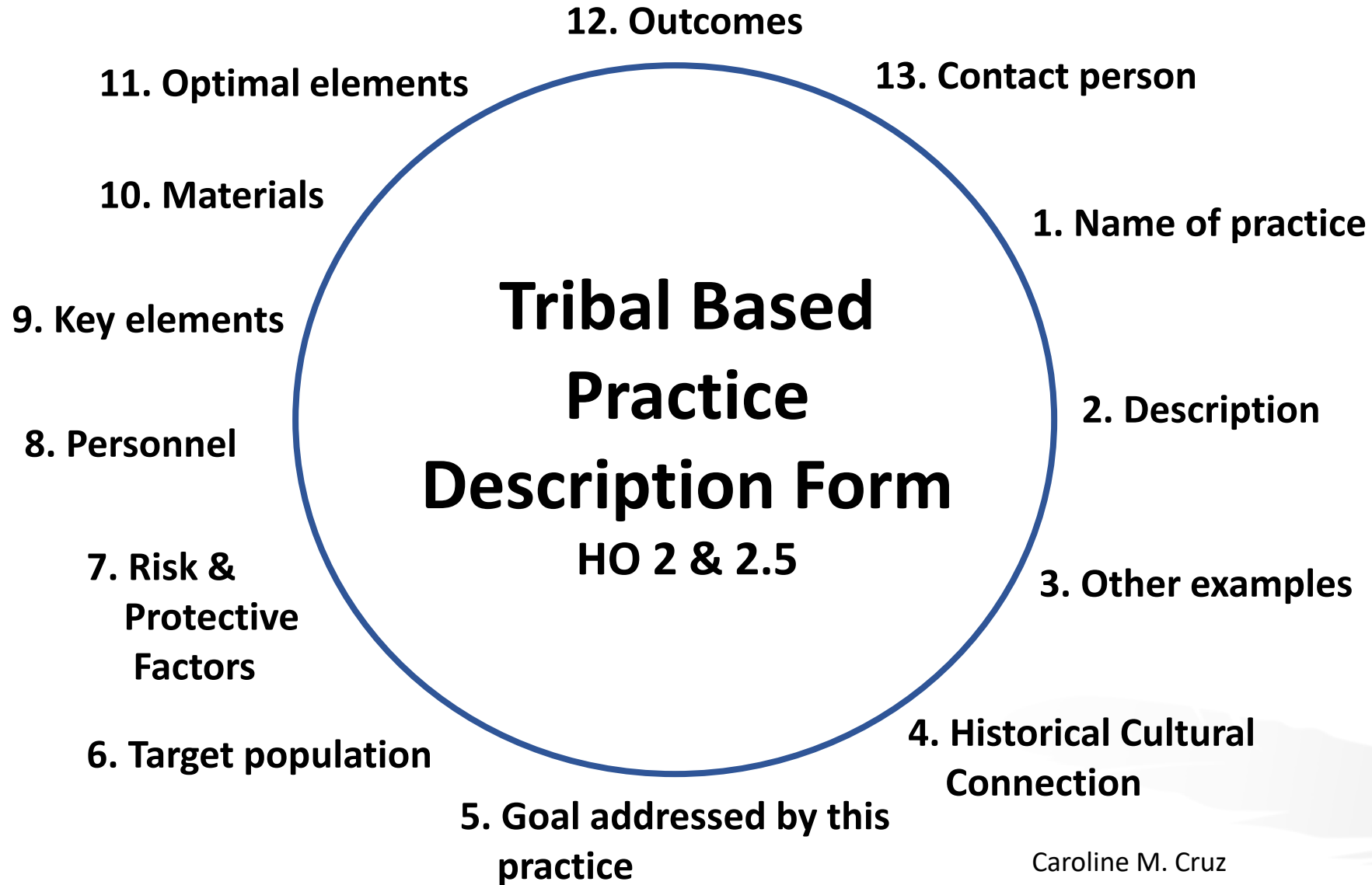


CREATE A BRIDGE BETWEEN SCIENCE AND N.A. CULTURE VALIDATION

Scientifically Validated	Culturally Validated
<ul style="list-style-type: none">• Transparency• Standardization• Replication• Research• Outcomes• Study design• Fidelity	<ul style="list-style-type: none">• Longevity in historical tribal history• Tribal Based Practice manual• Cultural replication within tribe and/or other tribes• Meets Tribal principles• Outcomes• Traditional Worldview applies• According to Tribe/Tribal Nation

Caroline M. Cruz





Caroline M. Cruz





Engagement in planning

Historical trauma

Family/Tribal history

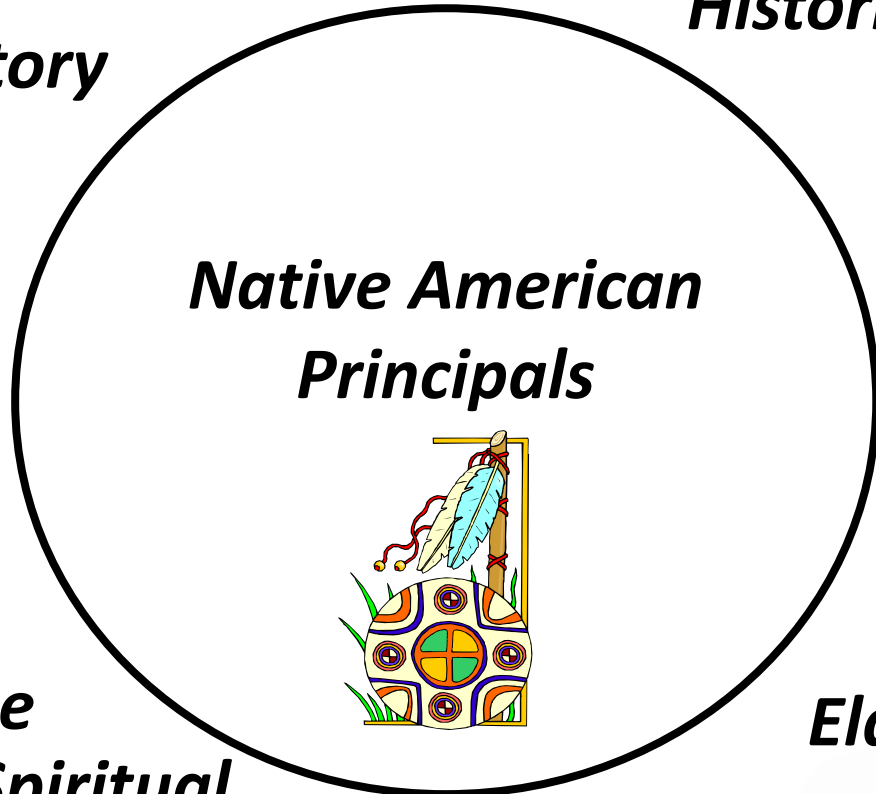
Stories

Traditional practices

Sovereignty

Multigenerational

Youth involved



Risk/protective

Communalism

CBPR

Tribal language

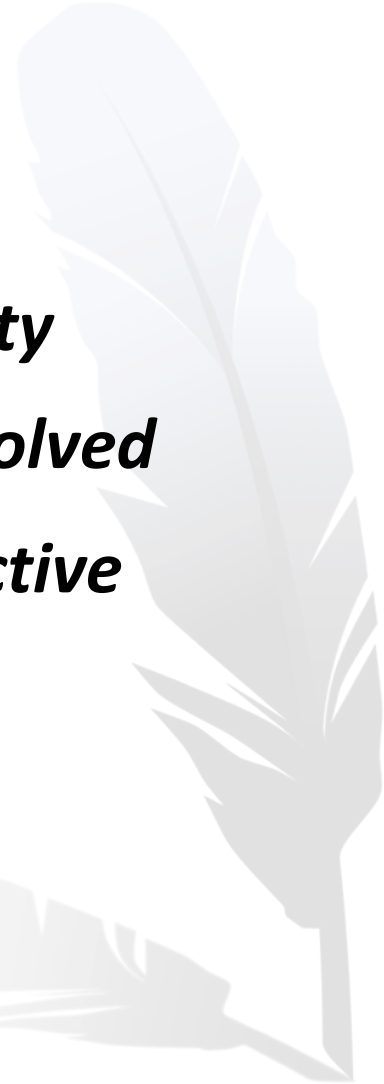
Elders

Spiritual

Accepted

Natural world

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Accepted? Date of approval

Adherence to
key elements
(Fidelity)

Longevity in
Tribal History
(Transparency)

Study Design
(Non-
experimental)

**Review Criteria
By
Tribal Best
Practice Panel**

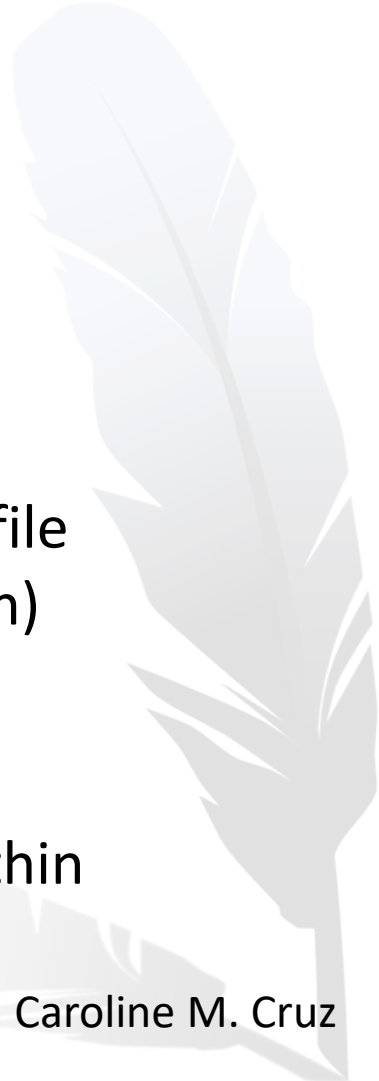
Description on file
(Standardization)

Measurable
Outcomes
(Outcomes)

Cultural replication within
Tribe or other Tribe
(Replication)

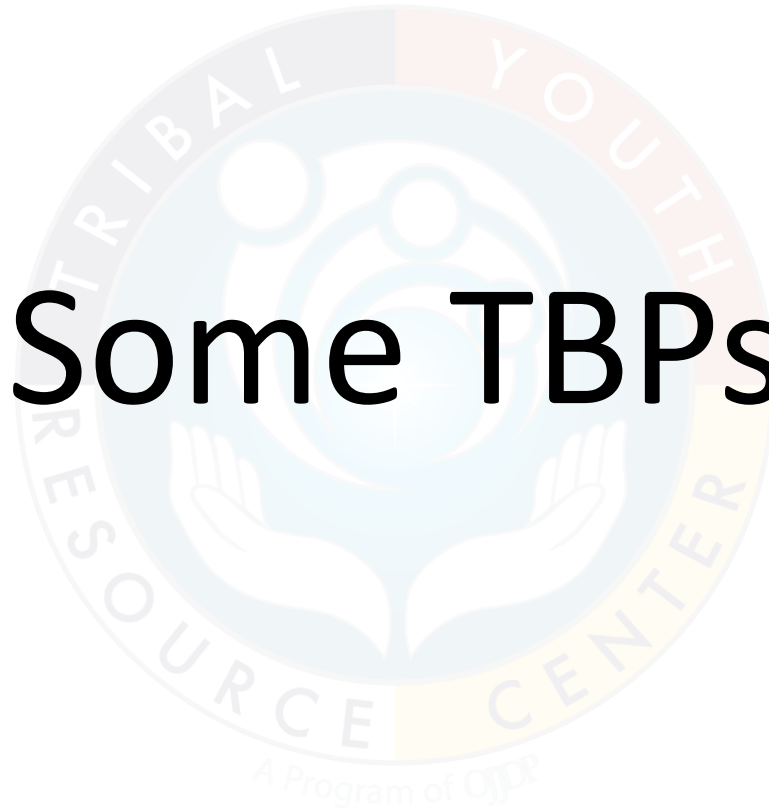
Meets Tribal principles
(Research) – See next slide

Caroline M. Cruz






Some TBPs





Cradle Boards: Strategy is to return back to the board (to traditional ways) by returning the baby “back to their backs,” by utilizing a form of a cradleboard indigenous to the tribal community to reduce the incidents of SIDS (Sudden Infant Death Syndrome), and the non-use of alcohol and drugs including tobacco. This is a form of parent training. (HO 4)

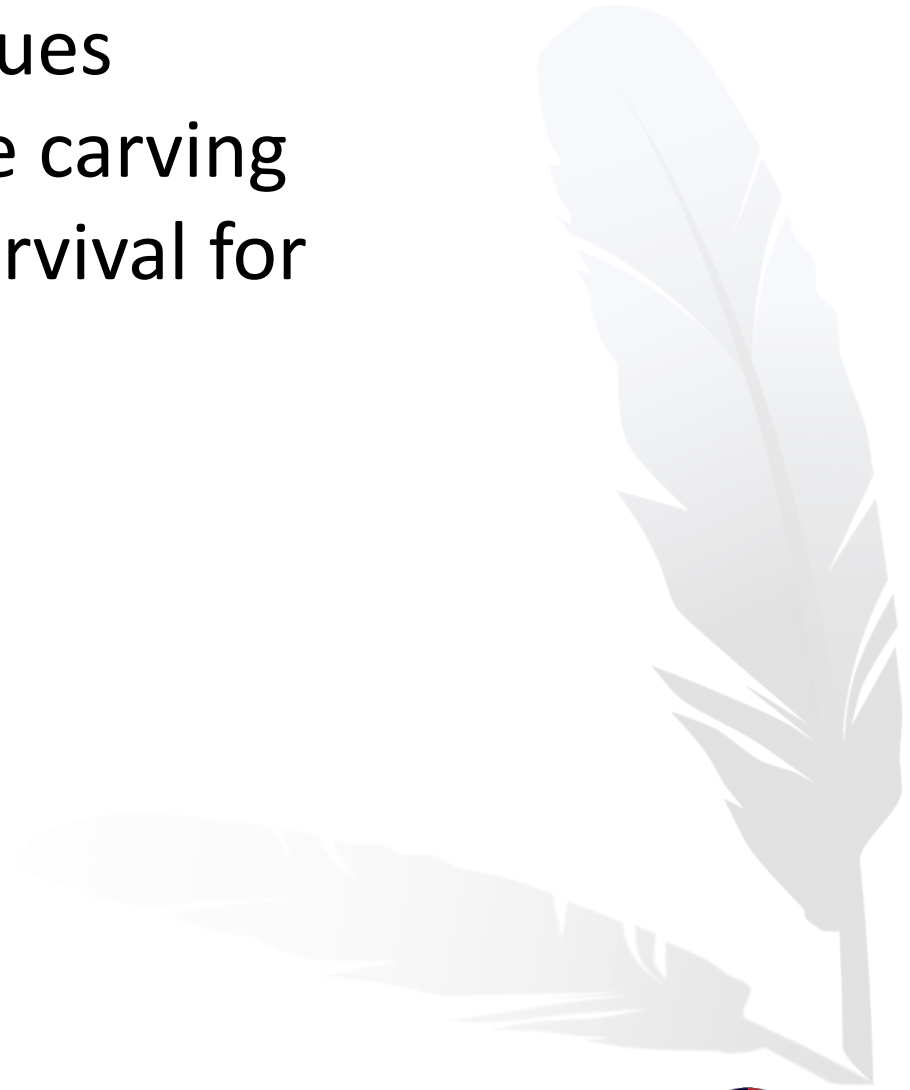


Horse Program: In partnership with horses, tribal youth, and families, this program improves attitudes, behavior, mood management, sense of responsibility, communication and relationship skills; regular individually-mentored and small group sessions include equine care, ground work, and riding training sessions.






Canoe Family/Journey: Strategy is to teach and model proper etiquette and tribal values associated with the tradition of canoe carving and paddling as a basic element of survival for tribal communities.




Tribal Family Activities: Alcohol and drug-free family and community gatherings are promoted at all 9 Oregon tribal communities at various times throughout the year-especially during traditional food gathering seasons.





Cultural Camps: Summer culture camps for all ages of students. Gender-specific activities are also stressed (for example, rite of passage, Elders and storytelling, instruction in berry picking, fishing, bead work, arts and crafts, carving, drumming, singing, dancing, stick games, native language, canoe building, archery, horseback riding, etc.).





Adventure-Based Programs: Organized outdoor activities for both prevention and treatment programs. Most common examples are kayaking trips, rope courses, skiing trips, and whitewater rafting.

POW-WOW: Native celebration of drumming, dancing, and singing for everyone in the community to participate. A gathering in a safe and drug and alcohol-free place to build community and cultural identity and social ties.





Cultural Sobriety Recovery Recognition Dinner: is a multi-generational community gathering to recognize and celebrate sobriety and recovery. Community members have an opportunity to speak about sobriety and recovery. Community members are also asked to speak and represent healthy role models in recovery and sobriety.





Family Unity Model: Has been utilized for several years as a tribally based intervention practice by the Confederated Tribes of Grand Ronde and the Confederated Tribes of Warm Springs.

BAAD Tournament: Basketball Against Alcohol and Drugs is an annual alcohol and drug-free tournament. Every team agrees to random drug testing to participate and attends sessions on alcohol, tobacco and other drug prevention/awareness.






Ceremonies and Rituals: The Tribes participate in various ceremonies and rituals that are important to the traditional and spiritual beliefs.

Talking Circle: Culturally based spiritual discussion and support group.

Tribal Youth Conference: Alcohol and drug-free gathering of youth. Examples include: Westwind Youth Gathering, He He Gathering, etc.





Sweat Lodge Ceremony: Some of the tribes utilize sweat lodge ceremonies for renewal and return to traditional healing methods.

Round Dance: The Round Dance and alcohol and drug-free 1-day traditional community-wide ceremony.





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