Supporting Indigenous Youth and Families Through a Trauma-Informed Lens Approach

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Established in Fall 2007 to serve as a Treatment and Services Adaptation Center (Cat II) within the National Child Traumatic Stress Network (NCTSN)

Represents a national expansion of the previously funded Montana Center for Childhood Trauma (BOR approved, 2004)

Mission: In respectful partnerships with tribes, NNCTC will implement, adapt, evaluate and disseminate trauma interventions to decrease the social, emotional, spiritual and educational impact traumatic experiences have on American Indian and Alaska Native children.
Why do we need to talk about trauma?

• Our most pressing health issues can be attributed to traumatic childhood experiences
• Trauma is preventable
• People can heal from the impact of trauma
• Strengths-based model
• Asks the right question
Concepts of Trauma (3 E’s)

A single **event**, multiple events, or a set of circumstances that is **experienced** by an individual as physically and emotionally harmful or threatening and that has lasting adverse **effects** on the individual’s physical, social, emotional, or spiritual well-being.
Types of Trauma

- Acute
- Chronic
- Complex
- Historical
- Secondary
Traumatic Situations

- Automobile accidents
- Life-threatening illness
- Witnessing or experiencing community violence (shootings, stabbings, robbery, fighting at home, in the neighborhood, or at school)
- Natural disasters
- Terrorism
- Traumatic death

- Physical or sexual abuse
- Abandonment
- Witnessing domestic violence
- Bullying
- Neglect
- Living in a chronically chaotic environment
- Military deployment
Almost two-thirds of adults surveyed reported at least one Adverse Childhood Experience – and the majority of respondents who reported at least one ACE reported more than one.
The ACE study looked at three categories of adverse experience: **childhood abuse**, which included emotional, physical, and sexual abuse; **neglect**, including both physical and emotional neglect; and **household challenges**, which included growing up in a household where there was substance abuse, mental illness, violent treatment of a mother or stepmother, parental separation/divorce, or had a member of the household go to prison. Respondents were given an **ACE score** between 0 and 10 based on how many of these 10 types of adverse experience to which they reported being exposed.

### Types of ACEs

#### Abuse
- Emotional: 11%
- Physical: 28%
- Sexual: 21%

#### Household Challenges
- Mother Treated Violently: 13%
- Substance Abuse: 27%
- Mental Illness: 19%
- Separation/Divorce: 23%
- Incarcerated Household Member: 5%

#### Neglect
- Emotional: 15%
- Physical: 10%
Death

Conception

Mechanisms by Which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan
HOW DO ACES AFFECT OUR LIVES?

ACES CAN HAVE LASTING EFFECTS ON BEHAVIOR & HEALTH...

PHYSICAL & MENTAL HEALTH
- SEVERE OBESITY
- DIABETES
- DEPRESSION
- SUICIDE ATTEMPTS
- STDs
- HEART DISEASE
- CANCER
- STROKE
- COPD
- BROKEN BONES

BEHAVIORS
- LACK OF PHYSICAL ACTIVITY
- SMOKING
- ALCOHOLISM
- DRUG USE
- MISSED WORK
“...the ACEs study fails to name racism—structural, personal, and historic—among specific root causes of modern trauma. This absence limits the study while conveying and compounding pathologies surrounding young people of color in the midst of ongoing trauma - pathologies that lead to misdiagnosis, mistreatment, and false assignments that render youth as problematic and risk-laden.”

-Kanwarpal Dhaliwal, RYSE Center
<table>
<thead>
<tr>
<th>Study</th>
<th>Population Sample</th>
<th>Trauma Category</th>
<th>Trauma Exposures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Robin et al., 1997</td>
<td>247 adult members of one SW tribe</td>
<td>Lifetime</td>
<td>1+</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Multiple/Severe</td>
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<tr>
<td>Manson et al., 2005</td>
<td>3,084 ages 15-57 on one SW and two NP reservations</td>
<td>Lifetime</td>
<td>81.4%</td>
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<td></td>
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<td></td>
<td>66% (Median number of exposures = 6.47)</td>
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<tr>
<td>De Ravello, Abeita, &amp; Brown, 2008</td>
<td>36 incarcerated Al/AN Women in NM</td>
<td>Childhood ACEs</td>
<td>97.2% (35 of 36)</td>
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<td></td>
<td></td>
<td></td>
<td>81% (53% reported childhood SA)</td>
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<tr>
<td>Ehlers, Gizer, Gilder, &amp; Yehuda, 2013</td>
<td>309 adults from 8 geographically contiguous reservations</td>
<td>Lifetime</td>
<td>94%</td>
</tr>
<tr>
<td>Brockie et al., 2015</td>
<td>288 youth ages 14-24 from one NP reservation</td>
<td>Childhood ACEs</td>
<td>78%</td>
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<td></td>
<td></td>
<td></td>
<td>40% (37% reported 3-6 exposures)</td>
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<tr>
<td>Loss of our land</td>
<td>Never</td>
<td>Yearly or special times</td>
<td>Monthly</td>
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<td>-----------------------</td>
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<tr>
<td></td>
<td>25.2</td>
<td>32.7</td>
<td>13.8</td>
</tr>
<tr>
<td>Loss of our language</td>
<td>11.9</td>
<td>21.3</td>
<td>15.0</td>
</tr>
<tr>
<td>Losing our traditional spiritual ways</td>
<td>11.3</td>
<td>18.9</td>
<td>15.1</td>
</tr>
<tr>
<td>The loss of our family ties because of boarding schools</td>
<td>44.3</td>
<td>26.6</td>
<td>11.4</td>
</tr>
<tr>
<td>The loss of families from the reservation to government relocation</td>
<td>52.2</td>
<td>23.3</td>
<td>8.8</td>
</tr>
<tr>
<td>The loss of self respect from poor treatment by government officials</td>
<td>29.1</td>
<td>22.2</td>
<td>19.6</td>
</tr>
<tr>
<td>The loss of trust in whites from broken treaties</td>
<td>28.7</td>
<td>28.7</td>
<td>12.1</td>
</tr>
<tr>
<td>Losing our culture</td>
<td>10.6</td>
<td>20.0</td>
<td>21.3</td>
</tr>
<tr>
<td>The losses from the effects of alcoholism on our people</td>
<td>7.5</td>
<td>13.2</td>
<td>15.7</td>
</tr>
<tr>
<td>Loss of respect by our children and grandchildren for elders</td>
<td>8.8</td>
<td>10.0</td>
<td>16.3</td>
</tr>
<tr>
<td>Loss of our people through early death</td>
<td>9.4</td>
<td>15.6</td>
<td>20.6</td>
</tr>
<tr>
<td>Loss of respect by our children for traditional ways</td>
<td>11.9</td>
<td>18.2</td>
<td>17.0</td>
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<td>--------------------------------------</td>
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<tr>
<td>Often feel sadness or depression</td>
<td>4.4</td>
<td>11.3</td>
<td>44.0</td>
</tr>
<tr>
<td>Often feel anger</td>
<td>6.9</td>
<td>16.9</td>
<td>38.1</td>
</tr>
<tr>
<td>Often anxiety or nervousness</td>
<td>1.3</td>
<td>8.1</td>
<td>23.1</td>
</tr>
<tr>
<td>Uncomfortable around white people when you think of these losses</td>
<td>11.3</td>
<td>10.1</td>
<td>22.6</td>
</tr>
<tr>
<td>Shame when you think of these losses</td>
<td>5.0</td>
<td>9.4</td>
<td>18.8</td>
</tr>
<tr>
<td>Loss of concentration</td>
<td>1.3</td>
<td>5.0</td>
<td>25.6</td>
</tr>
<tr>
<td>Feel isolated or distant from other people when you think of these losses</td>
<td>3.1</td>
<td>5.0</td>
<td>21.3</td>
</tr>
<tr>
<td>A loss of sleep</td>
<td>0.0</td>
<td>1.3</td>
<td>10.0</td>
</tr>
<tr>
<td>Rage</td>
<td>3.1</td>
<td>1.9</td>
<td>11.9</td>
</tr>
<tr>
<td>Fearful or distrust the intentions of white people</td>
<td>8.8</td>
<td>6.9</td>
<td>18.9</td>
</tr>
<tr>
<td>Feel like it is happening again</td>
<td>5.0</td>
<td>3.8</td>
<td>22.6</td>
</tr>
<tr>
<td>Feel like avoiding places or people that remind you of these losses</td>
<td>3.8</td>
<td>4.4</td>
<td>22.8</td>
</tr>
</tbody>
</table>
Historical Trauma

Whitbeck, Walls, Johnson, Morriseau, & McDougall, 2009

• “The historical losses experienced by North American Indigenous people are not ‘historical’ in the sense that they happened long ago and a new life has begun. Rather, they are ‘historical’ in that they originated long ago and have persisted.”

Ehlers, Gizer, Gilder, Ellingson, & Yehuda, 2013

• People younger than 30 had similar historical trauma scores to those of people older than 30.

• Individuals with substance dependence experience more distress related to historical losses than people who are not dependent on alcohol or drugs.
Trauma affects the way people approach potentially helpful relationships.
  • Not surprisingly, those individuals with histories of abuse are often reluctant to engage in, or quickly drop out of, many human services.

Trauma has often occurred in the service context itself.
  • Involuntary and physically coercive practices, as well as other activities that trigger trauma-related reactions, are still too common in human serving organizations.

Many trauma survivors do not seek mental health services, but look for help in primary care settings, presenting with physical symptoms.
  • Neither provider or patient/client may be aware that current physical complaints may be connected to past traumas.

TTA

Engage in Authentic Partnerships

Universal Trauma and Healing Trainings

Unique Technical Assistance and Consultation

Specialized Training by Child Serving System
Engage in Authentic Partnerships

Respect Tribal Sovereignty

Collaborative Effort
  • Leadership Team
  • Cross Sector
  • Multidisciplinary

Open and Ready for Change
Universal Trauma, Healing and Resilience

- Childhood Exposure to Trauma: For Tribal Communities
- Current Impacts of Historical Trauma
- Secondary Traumatic Stress and Self-Care
- Trauma-Informed Court Self-Assessment
- THINK Trauma
- Resource Parent Curriculum
- Family Group Conferencing
- Family Engagement
Specialized Training by Child Serving System

Child Welfare
Juvenile Justice
Education
Health Care
Unique Technical Assistance and Consultation

Heterogeneity
- Over 560 tribes
- Urban and Rural
- Reservation and non-Reservation
- State, Tribal, and National Requirements
- Program Policy & Procedures

SAMHSA Trauma-Informed Approach
- 4 R’s
- 6 Principles
- 10 Domains
Thank you for your participation