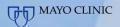
Issues Specific to Native Americans

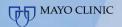
Sheila K. Stevens, MSW



Considerations for Native Americans

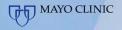
- Recognize diversity between tribes
 - language, culture, and customs
- Research shows variations in patterns, beliefs, and interventions
- Generalizations are prone to significant clinical assessment and treatment implications
- Consider historical trauma, perception of medical advice, etc.
- Research has focused on "risk factors" versus "strengthbased" focus

Whitesell, N. The American Journal of Drug and Alcohol Abuse, 2012; 38(5): 376–382. Epidemiology and etiology of substance use among american indians and alaska natives: risk, protection, and implications for prevention.



Some Ceremonial Uses of Tobacco

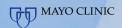
- Honor & welcome guests
- Purify the mind and/or heal the body
- Bless food crops & bless the hunt
- Give thanks to Mother Earth
- Communicate with the Spirits
- Peace treaties & agreements between tribes
- For storytelling



Healing & Medicinal Uses

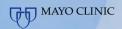
- Protection from bad/evil spirits
- Relief for pains & aches such as headaches, earaches, toothaches
- Remedy for open wounds
- Bring balance to life
- Clarify thoughts





Information Related to Native Americans

- Limited access to tobacco control
- Lack of resources
- Poor public health infrastructure
- Lack of culturally relevant tobacco prevention and cessation services



Assessment

- Previous quit attempt(s)
- Previous relapse(s)
- Support
- Tribal meaning of tobacco

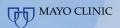


Treatment for Native Americans

- For which purpose or in what context is tobacco used?
- How frequently?
- What product is being used?
- What is the meaning of use?

"Counseling patients to quit smoking without understanding the cultural context may not only be ineffective, but also offensive and counter-productive."

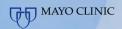
Margalit. R., et al. Lakota elders' views on traditional versus commercial/addictive tobacco use; oral history depicting a fundamental distinction. J Community Health. January 2013



Other Assessment Issues

- Support
- Barriers/Challenges
- Coping Skills





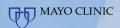
Support Mechanisms for Native Americans

- Best support:
 - Family

- Biggest barriers:
 - Friends
 - Social situations
 - Stressors

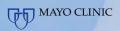


Choi, W., Daley, C., James, A., Thomas, J. Schupbach, R., Segraves, M., Barnoskie, R., Ahluwalia, J. (2006). Beliefs and attitudes regarding smoking cessation among american indians: A pilot study. <u>Ethnicity & Disease</u>, <u>16</u>. 35-40.



Utilize E-P-E

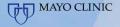
- Elicit "Is it okay if I express my concerns?"
- Provide "What we know is..."
- Elicit "What are your thoughts about that?"



Materials Tips

- "Government" looking brochures and pamphlets may be a turn-off
- Useful to have a lot of color and a lot of pictures
- Bullets vs. paragraphs
- Testimonials from other Natives
- No graphs or charts

Daley, C. M., James, A. S., Barnoskie, R. S., Segraves, M., Schupbach, R. and Choi, W. S. (2006), "Tobacco Has a Purpose, Not Just a Past": Feasibility of Developing a Culturally Appropriate Smoking Cessation Program for a Pan-Tribal Native Population. Medical Anthropology Quarterly, 20: 421–440. doi: 10.1525/maq.2006.20.4.421



Carl -"Our entire tribe is known for good genes. In fact, many people have commented on how healthy we are compared to other tribes. I'm not concerned about cancer."

- A. Reflective Listening followed by an open-ended question.
- B. Open-ended question followed by a closed question.
- C. Closed question followed by two openended questions.



Case Study - Jacy

- 39 year-old male
- Dr. referred him saying, "He must quit smoking because of his chronic bronchitis"
- Hx of 24 yrs of smoking, 2 1/2 ppd
- Four previous quit attempts on his own.
 Longest abstinence 1.5 days
- Refuses medication. Speaks of the addiction model as 'evil.' Believes nothing can control him.
- Uses tobacco as "smudge"



John -"I'm not interested in trying to quit. Smoking helps me relax, and I don't have any health problems from it."

- A. "You really should reconsider because eventually you will have health problems if you don't quit. It's almost a guarantee that if you keep smoking, you will have problems from it."
- B. "One benefit you get from smoking is that it helps you relax, and since you're not experiencing any health effects from tobacco, quitting isn't a priority for you. Would it be okay with you if I expressed my concerns?"
- C. "John, I can help you quit! There are a number of medications available, so please at least give it a try!"



Case Study - Sarah

- 32 year-old female
- Children and family are pressuring her to quit
- Hx of 17 yrs of smoking, 1 ppd
- Tried to quit with Nicorette Gum last year.
 Relapsed after two days
- Elders have always discouraged prescription medications. She is very leery of taking any medication for smoking cessation
- Recently lost 45 pounds and is very concerned about weight gain



Stacy – "I really do want to quit. I was able to quit once before for 2 years, so I know I can do it."

A.Desire and Reason

B. Reason and Need

C. Desire and Ability

D.Desire and Taking Steps



