

## Incorporating Traditional Healers and Cultural Leaders in Patient Care

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## Manahüü!

Kiana Maillet is from the Lone Pine Paiute-Shoshone Tribe where she is currently part of the Cultural Resource Protection Committee and was previously an ICWA Representative. She is the Program Manager and Therapist with the Youth Behavioral Health Program at Southern Indian Health Council where she works with youth 18 years and younger, and their families. She has over 25 years of experience working with youth and families, is a Licensed Clinical Social Worker, a Board Certified-TeleMental Health Provider, and an Adjunct Professor/Lecturer of Child Development and American Indian Studies. Kiana's educational background includes degrees in Child Development, Liberal Studies, Psychology, Public Administration, Social Work, and she is currently a doctoral candidate in the UCSD / CSUSM Joint Doctoral Program in Educational Leadership where she is researching Native American experiences with microaggressions and racism in early childhood education.

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## Aiy-yu-kwee'

Shoshoni Gensaw-Hostler is the Noh-sue-no-wow' (We grow up) Program Manager for the Yurok Tribe. She is an Associate marriage and Family Therapist who has worked in various capacities for tribal communities over 20 years. She received her BA in Psychology with Minor in Native American Studies from Humboldt State in 2006. She received her MA in Psychology in 2020 from Humboldt State. Her areas of study/interest include eating disturbances amongst ethnically diverse women, suicidality and program development. She is also a mother of four and a devoted regalia maker.



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We recognize, as Native women, that we are advocates and sometimes we are the only ones shedding light on these difficult topics in the spaces we navigate. We hope to do this in a respectful way and we will also be diving in.

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## Learning Objectives

Through this presentation you will:

- #1 Learn how to apply new traditional wellness and relationship building skills to better serve Native American youth.
- #2 Acquire new knowledge and understanding of traditional practitioners currently working within mental health system
- #3 Understand the complexities of weaving traditional practices into current mental health practices.

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## Evidence Based Practices

We acknowledge the usefulness of evidence-based practices AND we KNOW that traditional practices are evidenced based

Indigenous people have always been researchers

Through an Indigenous Lens we have continuous conversations within communities and do continuous research.

Just because you don't know about it, or that it is not done in a way that you deem appropriate, doesn't mean it doesn't exist or that it isn't correct.

"Western systems of knowledge appropriate and at the same time devalue information created by Indigenous ways of knowing. When working with Indigenous knowledge in an academic context, it is vital to respect Indigenous knowledge's authority, agency, and voice. Do not treat Indigenous authorities as mere "informants," but rather as equals in the knowledge creation process" (University Libraries, University of Colorado).

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## Indigenous Ways of Knowing

"Indigenous Ways of Knowing" is a useful term that recognizes the beautiful complexity and diversity of indigenous ways of learning and teaching (Queen's University).

"In traditional native knowledge systems there is respect and trust for inherited wisdom, often communicated through an oral tradition, and for knowledge that has proved its utility in everyday practices. There is respect for stories that connect the particulars of knowledge to holistic worldviews, values, and life ways. Knowledge is often collective, evolving in a community of users, knowers, and actors. Authority is not conferred via systematic processes of Western bureaucracy, but rather through community decision making and respect for the knowledge and authority of elders" (Barnhardt and Kawagley, 2005 as cited in Indigenous REsearch & Knowledges in North America: Indigenous Ways of Knowing).

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## Practice Based Knowledge

20,000 year old ash – finely tuned and deeply connected.

"Only the power to define what is sacred and access to it will enable Native American communities to remember who they are and fashion a future towards it."

LaDuke, Winona. *Recovering the Sacred: The power of naming and claiming*. NYC: South end Press, 2005. Print.

Can both exist at the same time?



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## Traditional Practitioner/Natural Helper

Spiritual Component that other modalities don't have  
Understanding things on a deeper level- through language and philosophy

Identity Formation - inclusive of spiritual identity and tradition

Social character. Relational

Adolescents' Anxiety in Dating Situations: The Potential Role Of Friends and Romantic Partners, *Journal of Clinical Child and Adolescent Psychology*



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## Where do you start?

Build relationships with the community and begin having the conversations.

- \* What does wellness look like in your community? What would you like it to look like?
- \* Who should be involved
- \* Who/what is missing
- \* changing of traditional culture – are they willing to change? Do they need to? Or do they just need space and support?
- \* Obstacles and considerations
- Tribes need to lead

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## Considerations

Advisory Board	Billing	*Sessions with therapist and traditional practitioner separate?
*Therapist and traditional practitioner case manage together	*ROIs?	*Traditional practitioners in advisory role?
*Referrals?	Compensation?	Maintaining integration?

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## Urban Area Considerations

- Whose land are you on? Who is connected with the land?
- What Tribes are represented in your service area?
- What is the history?
- Different Cultural Practitioners to meet different cultural ways?
- Include Cultural Practitioners from local Tribes?


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## All parts of the health system


prevention-medical-dental-mental health-Nutrition Education-Diabetes Prevention-Outreach-Community Health Representatives-Prenatal Care (Indigenous Midwives)-Menstrual Care -etc ....



<https://www.facebook.com/MONativeMoon/> SNAHC Chief Traditional Health Officer



Indigenous midwifery.org



Traditional Food Diabetes Programs/  
Traditional training for physical health

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## Integration



Medicinal Gardens/Herbals appointment & Prescription



Culture Groups



Sweat Lodge



Traditional Practitioner Appointments/case consult



Clinical Interventions



Music Therapy

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## Levels of Participation

On the ground-Direct services in as many areas of care

\*Provide space and supplies, funding

\*Vetting procedures, system of payment, scheduling/ service

Advocacy-

State and national Level

Cal AIM medi-cal changes

[CCUIHI](#)

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## References and Examples

California Consortium of Urban Indian Health- Executive Director, Virginia Hedrick  
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## Questions

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