TRANSCENDING TRAUMA AND COMMUNITY HEALTH

Karina L. Walters, MSW, PhD
(Choctaw Nation of Oklahoma)

Co-Director, Indigenous Wellness Research Institute
Associate Dean for Research &
Katherine Chambers Hall Scholar
University of Washington School of Social Work

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“Yohmi cha okhina bachoha puta ka ithana kia ahofobi ont ia yummano keyu tokoke”

“The breeze that ruffles the stream knows not the depth below”

From “Iti Hishi Yumma Isht chi’thalyana-li Hoke”: A Leaf that Reminds me of Thee- first poem translated into Choctaw William H. McKinney, 1878
“It meant something to the Hampton School, and perhaps to the ex-slaves of America, that from 1820 to 1860, the distinctively missionary period, there was worked out in the Hawaiian Islands the problem of the emancipation, enfranchisement, and Christian civilization of a dark-skinned Polynesian people in many respects like the negro race.”

—Samuel Chapman Armstrong

*Twenty-Two Years’ Work of the Hampton Institute* Hampton Institute Press, 1890†
The new Kamehameha Schools was modeled on the Hampton Institute and designed to follow the same English-Only model used for American Indian boarding schools complete with military uniforms and prohibition of culture and language. [www.ahapunanaleo.org](http://www.ahapunanaleo.org)

Native Hawaiian scholars note that Armstrong supported enforcing stricter work habits and strong language and cultural prohibitions for Native Hawaiians whom he wrote as being “savage people”-and possibly “doomed” in contrast to African Americans, whom he considered as having potential-although that would take several generations and he noted they would never be able to aspire to higher stations in life or political life.
Impact of Historical Trauma

Colonial impact

• Disruption in our ability to fulfill our original instructions
• Disruption in our relational ways of being
• Disruption in our spatial obligations and relationships
• Breakdown in boundaries: physical, mental, spiritual, land etc.
• Creation of systems of dependency on colonial nation state
• Psychological colonization and lateral violence—“Crabs in Bucket”
• Paradigm shift
Address how historically traumatic events and everyday discrimination erode healthy identity attitudes and behaviors, including lateral violence and internalized oppression (Nahullo story)

1. Original instructions as our foundation, teachings, and restoration
   - Starting from our OI

2. Relational restoration
   - Repair relational ways of being/boundaries; responsibilities to one another
   - Nurture sense of belonging and connectedness

3. Narrative transformation
   - Where did we learn this? Was this part of our OI or is this HT response?
   - How we talk our story matters

   - Iyyi Kowa- broken foot
Choctaw Nation of Oklahoma Team
Sandra Stroud, BA (Choctaw), Yappalli Project Director
Kristi Brooks, LCSW (Choctaw), Yappalli CNO Co-PI, CNO Director, Behavioral Health
Rachel Davis (Choctaw), Yappalli Coordinator
Chad Goggins, Yappalli Logistics Coordinator
*Kari Hearod (Choctaw)- acknowledgement of her development of this project

University of Washington-IWRI Team
Karina L. Walters, PhD (Choctaw), Yappalli Principal Investigator, Director IWRI
Rebecca Marin Cordero, PhD, Yappalli-IWRI Program Director
Katie Schultz, MSW (Choctaw), UW-IWRI, Doctoral Student, RA

Univ of Minnesota-RICH Team
Michelle Johnson-Jennings, PhD (Choctaw), Yappalli Co-Principal Investigator, Director RICH
Miigis Gonzalez, MPH (Ojibwe), UM-RICH, Doctoral Student, RA
The ten states with the largest American Indian populations in 2000.
2011 CNHSA Director noted that by 2050, 1 out of 3 Choctaw children are projected to have Type II diabetes.

70% of the Choctaw Nation will be obese.

And, for the first time in Choctaw history, parents will outlive their children—an unconscionable situation.
The effort led to a pilot effort to first develop a Choctaw-specific health promotion model and approach to obesity prevention by re-walking the Trail of Tears (qualitative study and curriculum development) + a second walk on trail to pilot curriculum.

Then led to the development of Yappalli intervention—an experiential, outdoor-based health promotion intervention targeting adult Choctaw women at risk for obesity and ATOD abuse to become community health leaders.
Women-led-culturally sanctioned
4 Parent-child/youth pairs
Researchers = Participants

Triangulation
Dreams
Archival research
Oral history [dresses bones]
Elder/traditionalist permission/support
Fasted
Abstained
Walked
Sweat on Choctaw Land
Medicine instructions
“know how they took care of the trail”
Trail and ceremony
Sacrifice and giving back—earn knowledge
Trail will bring up things that still need to be worked through
Approach each morning-day-prayer, reflection as we walk
Not the drama, but the love
Qualitative data gathering—many methods
GIS and blogging
Focus Groups and Individual Interviews (pre and post)
Journaling
Digital Stories

Participants given pedometers, journals, cameras

Followed curriculum developed for each day along with daily reflections on major themes and Choctaw words to incorporate throughout the trail route (10 days)

13 Choctaw walkers, 5 Native allies, 3 non-Native allies
150 Choctaw women from tribal districts (30 per 5 districts)

Health Leadership Model to Facilitate individual and community-level changes

2 month preparation/curriculum before 10-day walk

Ancient iksa to guide health change model and steps toward healing

Naming ceremony and initiation into “societies” for health within all districts

Start with women to restore balance and health—traditional and family oriented
5-region longitudinal study—(1) overall AOD use and intentions to use and (2) weight/BMI change as well as the effect on activity levels, and healthful food habits among adult Choctaw women at risk for obesity and AOD.

The cluster randomized stepped-wedge design is a type of cross-over study in which clusters of women per region cross over from the control arm to the intervention arm at randomly assigned time points (one time per year, per site).

The cluster randomized stepped wedge design is best suited to address environmental (weather) and logistical (<50 on trail) constraints.

We created 5 regions grouped by Choctaw demographic and cultural similarities based on historical clan and family residential patterns.
B: baseline; C_1: first control assessment; C_2: second control assessment; C_3: third control assessment; T_1: post-intervention; T_2: second follow-up; T_3: third follow-up
Yappalli Curricular Framework

**Information/Knowledge +**
- Cultural Knowledge Immersion-Chanspo Ikhvnanchi
- Relational Restoration & Narrative Transformation
- Ceremonies/naming/vows
- Leadership Development
- 3 MI sessions + 8 Ikṣa Based groups + 2 day camp + 10 day Trail of Tears Walk

**Motivation +**

**Behavioral Skills +**
- Managing stress, strong emotions, identifying triggers
- Tools to cope with cravings
- Addressing trauma and health consequences
- Self-care skills and accessing supports
- Leadership & community organizing skills
1. What kind of ancestor did my ancestors envision me to be?
2. What kind of ancestor do I want to be?
3. What kind of ancestor do I want or envision future generations to be?
Importance of experiential learning: Transforming the trauma.

"I heal others when I keep or make myself healthy."

Relational healing and reconnecting to land and ancestors.

Narrative Transformations: Choctaw-specific understandings of health emerged—Shilombish and PTSD.
Trail Song

Hina ushi pisalih  Bok Chitto onalih
yayalih  yayalih

Chukka chitto pisayachih  lukfi Houma nowalih
nowalih  nowalih

Sa alla ahnilih  himosa alla ahnilih
Yakpalli  Yakpalli

Hina ushi pisalih  Nani Bok onalih
yayalih  yakpali

Yohmi ho!
2 cases of soda - now none
No veggies - now some
1000 steps to 10 miles
3 liters a day to water
Mobilizing community to action
100 gathered to embrace and celebrate songs sung and recognized in taking this vow
Impact on staff/us
Creating interventions from ground up

Incorporating OI and Relational Restoration

Healing Disruptions in Relational Ways of Being

Focus on land/water-based settings

Move from Services orientation to Sustainability in Community orientation
1. What kind of ancestor did my ancestors envision me to be?

2. What kind of ancestor do I want to be?

3. What kind of ancestor am I dreaming future generations to be with my actions today?

MLK Once said “I have a dream”—Our Ancestors said “I am dreaming you.”
Circling back—Water & Fire

Possum
Crow
Buzzard
Spider
Love
Power
Vision
Responsibility

Photo: Adapted from Bear Medicine walker