

State Technical Assistance Webinar



at Education Development Center

Please introduce yourself in the chat with your name, state, and injury topic you work on







September 15, 2022

1:00 - 2:00 PM ET

State Technical Assistance Webinar



Funding Sponsor

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under the Child and Adolescent Injury and Violence Prevention Resource Centers Cooperative Agreement (U49MC28422) for \$5,000,000 with 0 percent financed with non-governmental sources. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.



Ring Central Controls

Computer

Participants (2) Maria Katradis (Me) Jenny Stern-Carusone (Host) Raise Hand Feature

- 1. Mute/Unmute
- 2. Start/Stop and set up video
- 4. View Participants/Access Hand Raise feature
- 6. Leave current meeting
- 7. Chat with an individual or the entire group ('everybody')

Smartphone and tablet



Technical Tips



Join by phone or computer audio. Click on microphone (bottom left) for settings



Access resources from links in the chat



Mute yourself when you're not talking



This session is being recorded



Use the chat to ask questions at any time

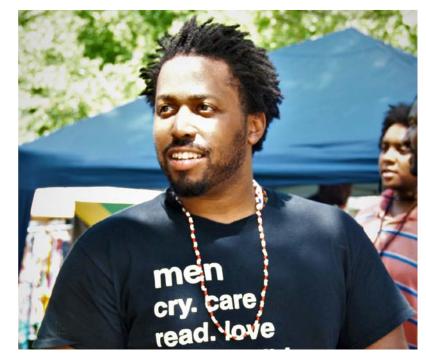


Cultural Approaches to Child and Adolescent Suicide Prevention and Postvention

Maria Katradis, Ph.D.
Children's Safety Network



Presenters



Obari Cartman, PhD

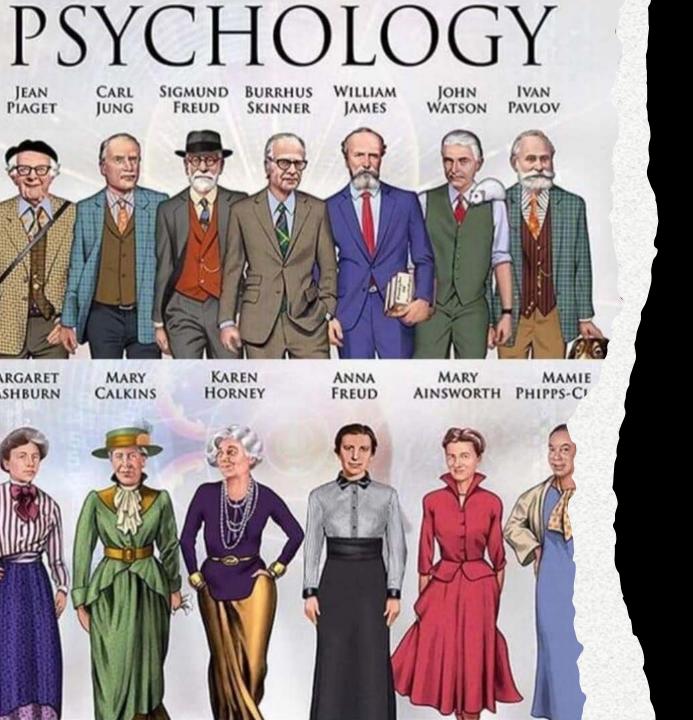
President
Chicago Association of Black
Psychologists



Sadé Heart of the Hawk Ali

Tribal Lead & Senior Project Associate
Zero Suicide Institute
Education Development Center





Cultural Approaches to Suicide Prevention: Dr. Obarí Cartman





Home // News & Advocacy // Press Room // Press Releases //

Date created: October 29, 2021

APA apologizes for longstanding contributions to systemic racism

Acknowledges failures, accepts responsibility, pledges change for psychology

WASHINGTON — As part of the nation's historic

















Newsroom

News Releases

Message from the President

Reporting on Mental Health Conditions

APA Blogs

Annual Meeting Press

Registration

Goldwater Rule

January 18, 2021

APA's Apology to Black, Indigenous and People of Color for Its Support of Structural Racism in Psychiatry

Today, the American Psychiatric Association (APA), the oldest national physician association in the country, is taking an important step in addressing racism in psychiatry. The APA is beginning the process of making amends for both the direct and indirect acts of racism in psychiatry. The APA Board of Trustees (BOT) apologizes to its members, patients, their families, and the public for enabling discriminatory and prejudicial actions within the APA and racist practices in psychiatric treatment for Black, Indigenous and People of Color (BIPOC). The APA is committed to identifying, understanding, and rectifying our past injustices, as well as developing anti-racist policies that promote equity in mental health for all.

Early psychiatric practices laid the groundwork for the inequities in clinical treatment that

Related Pages

APA's Apology to Black, Indigenous and People of Color for Its Support of Structural Racism in Psychiatry

Historical Addendum to APA's Apology to Black, Indigenous and People of Color

[Press Release] APA Apologizes for Its Support of Racism in Psychiatry

APA's Structural Racism Task Force and Resources

APA Town Hall Series on Structural Racism.

Diversity and Health Equity Resources from APA

The Rwandan prescription for Depression: Sun, drum, dance, community. "We had a lot of trouble with western mental health workers who came here immediately after the genocide and we had to ask some of them to leave.

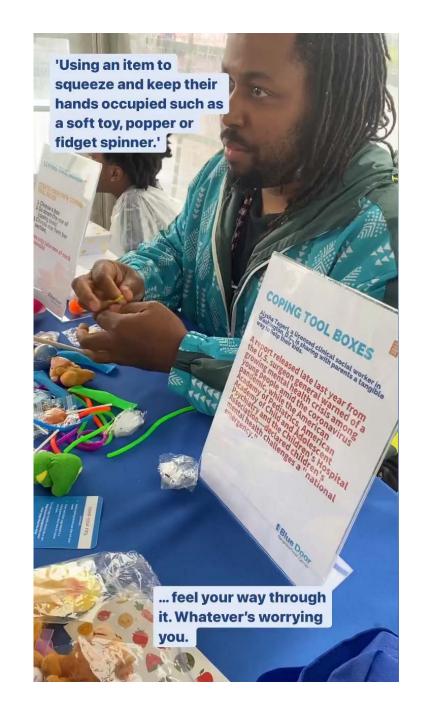


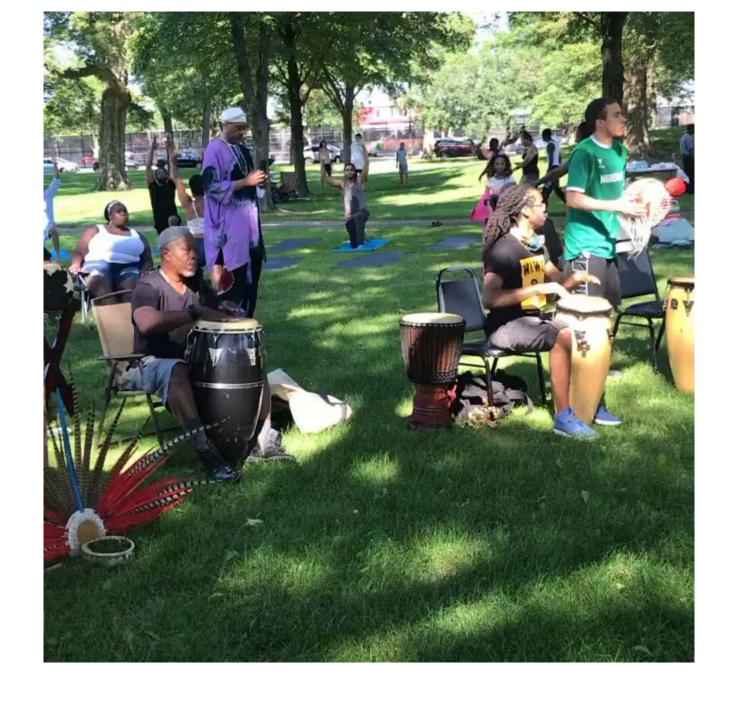
"They came and their practice did not involve being outside in the sun where you begin to feel better, there was no music or drumming to get your blood flowing again, there was no sense that everyone had taken the day off so that the entire community could come together to try to lift you up and bring you back to joy, there was no acknowledgement of the depression as something invasive and external that could actually be cast out again. Instead they would take people one at a time into these dingy little rooms and have them sit around for an hour or so and talk about bad things that had happened to them. We had to ask them to leave." ~A Rwandan talking to a western writer, Andrew Solomon, about his experience with western mental health and depression

















Effects of Group Drumming Interventions on Anxiety, Depression, Social Resilience and Inflammatory Immune Response among Mental Health Service Users

Daisy Fancourt, Rosie Perkins, Sara Ascenso, Livia A. Carvalho, Andrew Steptoe, Aaron Williamon 🗖

Published: March 14, 2016 • https://doi.org/10.1371/journal.pone.0151136

Article	Authors	Metrics	Comments	Media Coverage
*				

Abstract

Introduction

Materials and Methods

Results

Discussion

Supporting Information

Acknowledgments

Author Contributions

References

Reader Comments (0) Media Coverage (7) Figures

Abstract

Growing numbers of mental health organizations are developing community music-making interventions for service users; however, to date there has been little research into their efficacy or mechanisms of effect. This study was an exploratory examination of whether 10 weeks of group drumming could improve depression, anxiety and social resilience among service users compared with a non-music control group (with participants allocated to group by geographical location.) Significant improvements were found in the drumming group but not the control group: by week 6 there were decreases in depression (-2.14 SE 0.50 CI -3.16 to -1.11) and increases in social resilience (7.69 SE 2.00 Cl 3.60 to 11.78), and by week 10 these had further improved (depression: -3.41 SE 0.62 CI -4.68 to -2.15; social resilience: 10.59 SE 1.78 CI 6.94 to 14.24) alongside significant improvements in anxiety (-2.21 SE 0.50 CI -3.24 to -1.19) and mental wellbeing (6.14 SE 0.92 CI 4.25 to 8.04). All significant changes were maintained at 3 months follow-up. Furthermore, it is now recognised that many mental health conditions are characterised by underlying inflammatory immune responses. Consequently, participants in the drumming group also provided saliva samples to test for cortisol and the cytokines interleukin (IL) 4, IL6, IL17, tumour necrosis factor alpha (TNFα), and monocyte chemoattractant protein (MCP) 1. Across the 10 weeks there was a shift away from a pro-inflammatory towards an antiinflammatory immune profile. Consequently, this study demonstrates the psychological benefits of group drumming and also suggests underlying biological effects, supporting its therapeutic potential for mental health.

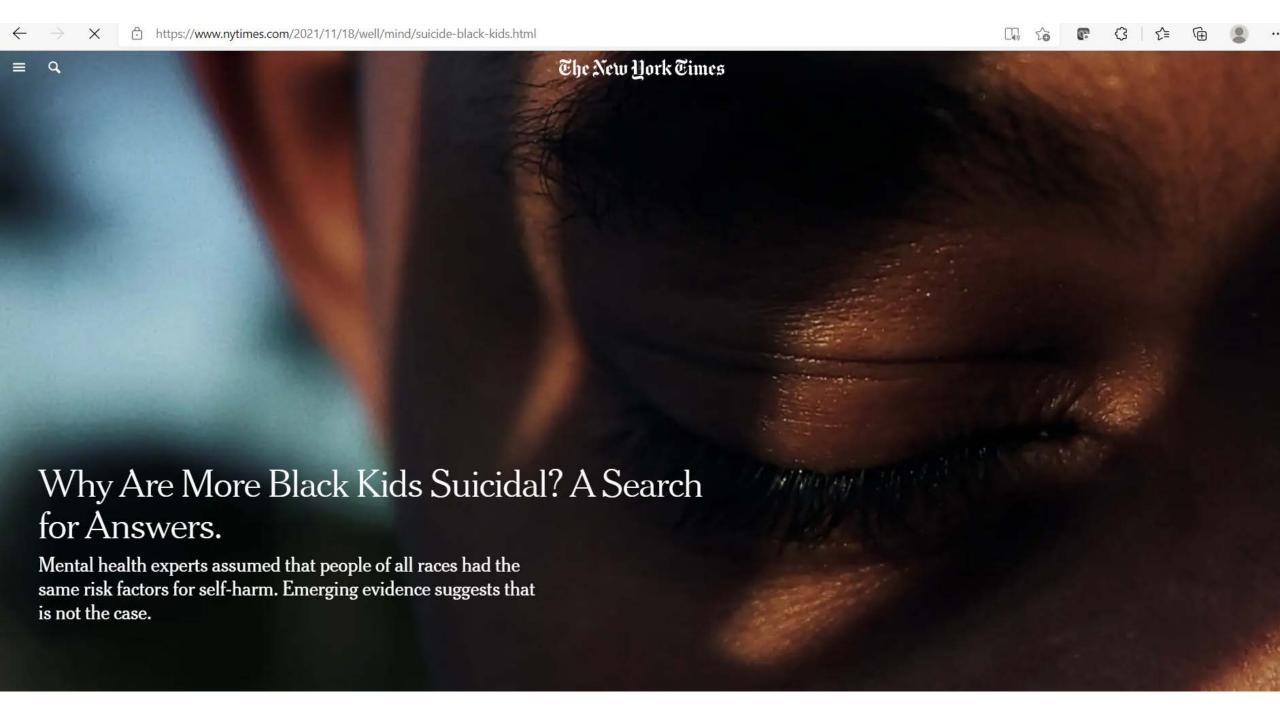
Trial Registration: ClinicalTrials.gov NCT01906892



The Hidden Perils of Compounded Stress







CHICAGO BLACK SUICIDE PREVENTION

Libation-

Dr. Derise Afua Tolliver

Community Breathing Exercise-

Dr. Larry Turner

Moderator-

Dr. Obari Cartman

Artist Spotlight-

Tatiana "MzTaty" Lane (Founder of @MentalHealthMeetsHipHop)

Youth Advocate

Michelle Thompkins (Founder of @TheCornerStoreChicago

Register Free:

https://tinyurl.com /BlackSuicide



Thurs

5/27

6p-8p

CST

Featured Speakers-

Dr. Rashad Saafir

President/CEO Bobby E. Wright Comprehensive Behavioral Health Centers

Dr. Constance Y. Williams

Executive Director- Regions 1 South and 1 North IDHS/DMH

Dr. Sharon Bethea

Coordinator NEIU African/African American Studies

J'Mal Jones

Clinical Manager NAMI Chicago

Presented by Chicago Association of Black Psychologists

Politician. Miss USA. Actor. Son. Daughter.

Depression is real. Suicide is real. It doesn't matter your name, your position, your parents - nothing. My heart aches that these beautiful people lost their lives to such a difficult battle. I also break for their families and those surrounding them.

May we change the narrative - if you struggle with your mental health, do not fight alone. Your best days are coming. I choose to create awareness and refuse to let those around me struggle by themselves. You are not alone. You are wanted. You are loved.

#CheslieKryst #lanAlexanderJr #MayorKevinWard #MosesJMoseley









Black Suicide Prevention

Tragedy to Triumph

The Chicago Association of Black Psychologists

hosts a virtual conversation to plan a live family centered suicide prevention event. We are inviting parents, educators and child therapists to help organize an interactive art, music & wellness gathering to address suicide prevention for Black children.

www.ChicagoBlackPsychologists.com

THURSDAY Elizabeth Gerald

9/30 7:30pm

Zoom: https://tinyurl.com/

BlackLive



The MJGM is a Children's Advocacy organization dedicated to serving as a resource for children and families that are victims of sexual abuse and suicide.







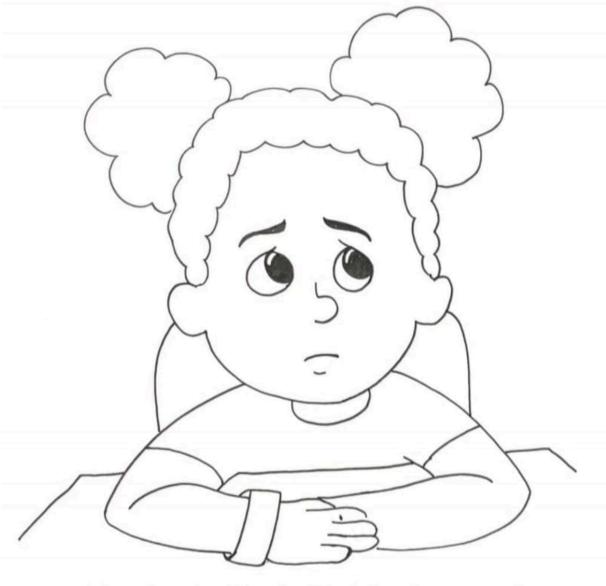




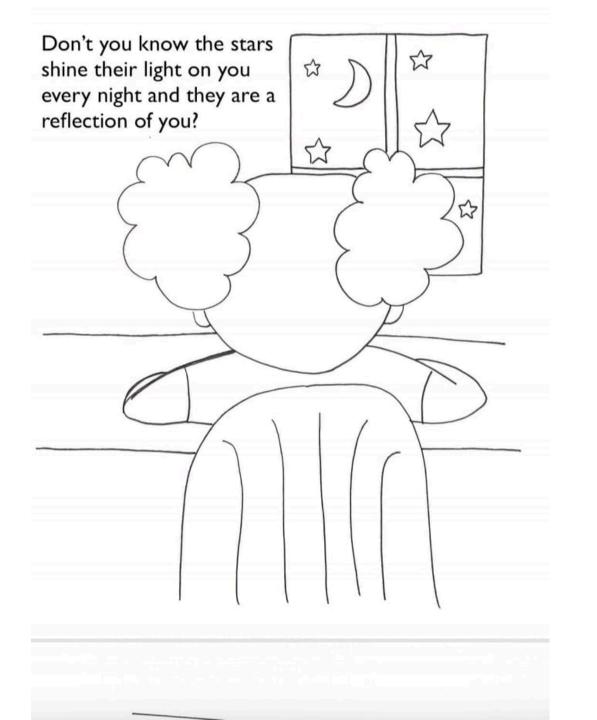


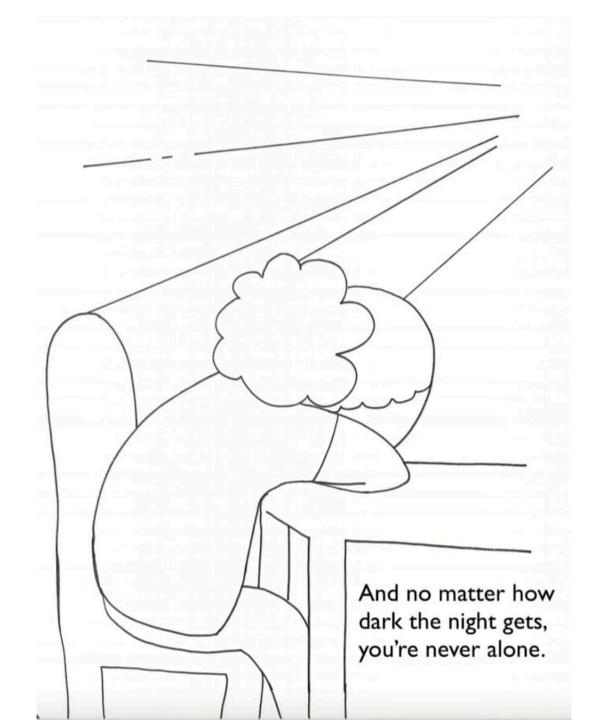






Hey Little Black Girl, looking to be understood, looking to be seen.





"Hey Little Black Girl! Look at how resilient you are.



We'll fly above the Earth so we can see the stars.





Sat Dec 4th 11a-2p

curated byChicago Association of Black
Psychologists,
Brown Books and Paintbrushes
& Blue Door Neighborhood Center

-meet therapists 7

-yoga & meditation

-yeen hip-hop

corner

-wellness crafts -and much more!!!

> e11840 S. Marshfield Ave Chicago, IL 60643









introducing Elizabeth Gerald's new comic book

in honor of her daughter -Marcie's Marvels!-FREE COPIES





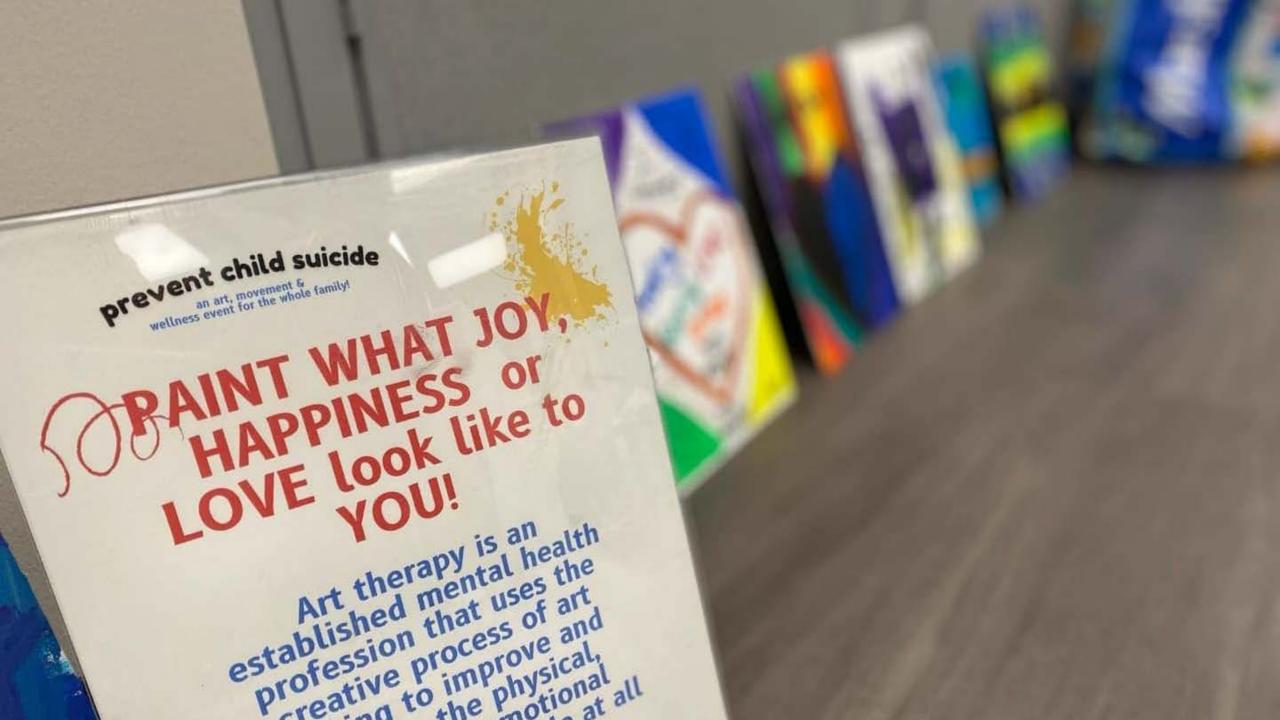














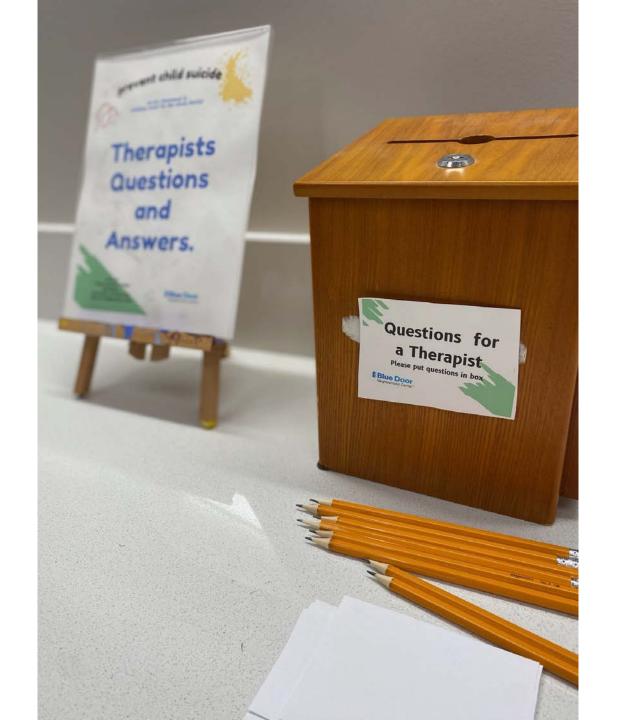
















Being Two Spirit



Sadé Heart of the Hawk Ali, Mi'kmaq First Nation, Zero Suicide Institute Children's Safety Network, 15th September, 2022

Opening in a Good Way



The Presenter



Sadé Heart of the Hawk Mi'kmaq First Nation

The lenses through which I look

- Mi'kmaq First Nation, Nova Scotia, CA
- Two Spirit Elder and Medicine
 Keeper beginning my 76th rotation
 around Grandfather Sun in a few
 weeks
- First generation survivor of the residential schools
- Mother, grandmother, great grandmother (3 times so far)
- Person in long term recovery (52 years)
- Person in long term recovery from a severe mental health challenge
- Multiple suicide attempt survivor
- In the BH field for over 52 years



Setting Group Agreements

All questions will be answered

Our reality may not be yours, but we will respect each others' points of view

It's really all about providing helpful, respectful service in a good way

Our Objectives Today

Objectives

At the end of this presentation, participants will be able to:

Examine

Examine the history and healthcare challenges experienced by Two Spirit people in order to provide the best optimal care.

Employ

Employ suicide-safer care through screening, assessment and safety planning that is resonate with Two Spirit people.

Apply

Apply strategies for ensuring safety for Two Spirit youth, including those affected by bullying.

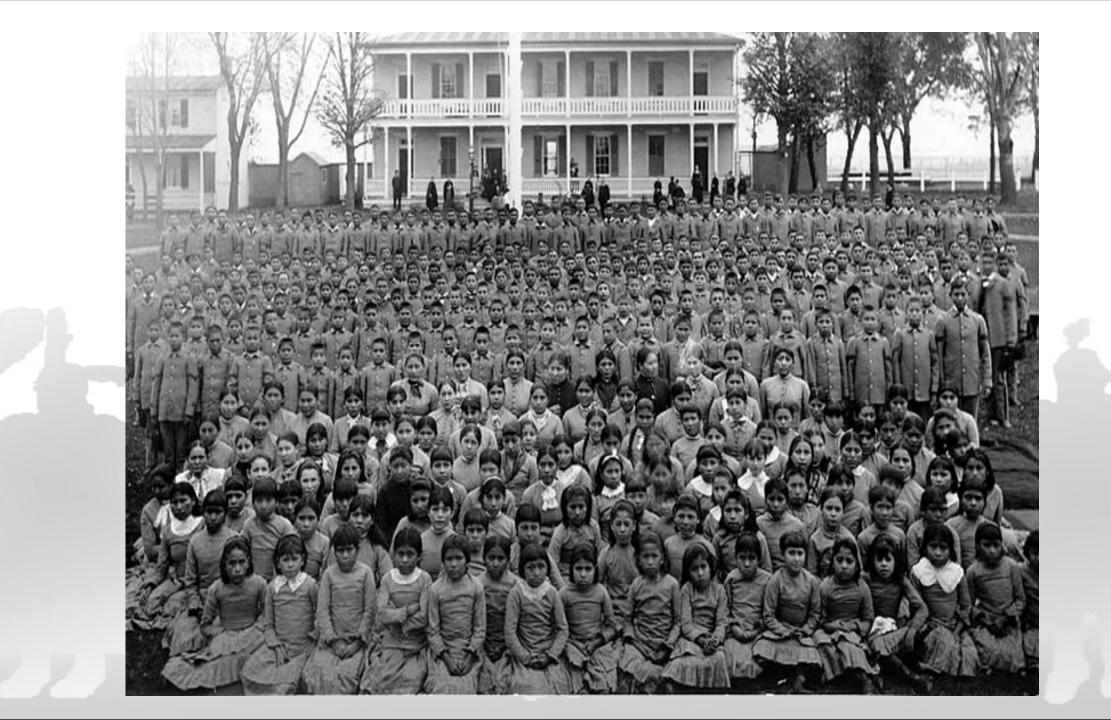


INDIGENOUS HISTORY IS THE REAL HISTORY OF THIS COUNTRY...

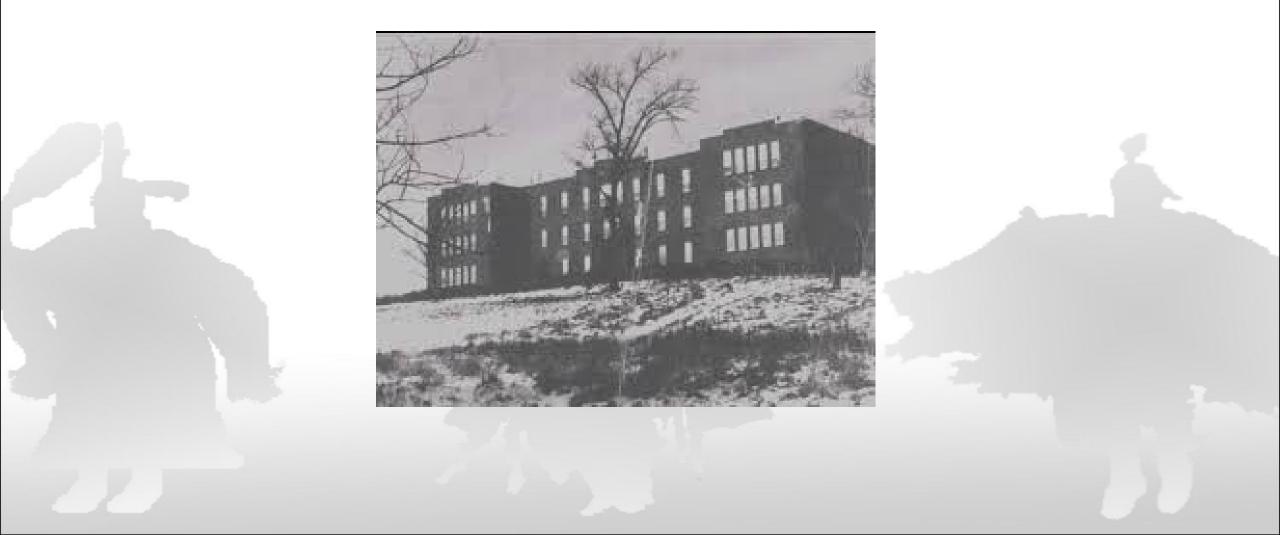
Many things contributed to the discrimination faced by Two Spirit people today, but none more powerful than the Residential/Boarding School era...

THE CARLISLE INDIAN INDUSTRIAL SCHOOL

This school was the model for a nation-wide system of boarding schools intended to assimilate American Indians into mainstream culture. Over 10,000 indigenous children attended the school between 1879 and 1918. Despite idealistic beginnings, the school left a mixed and lasting legacy, creating opportunity for some students and conflicted identities for others. In this cemetery are 186 graves of students who died while at Carlisle.



Shubenacadie Indian Residential School







Concept of Two Spirit

- The term/identity of Two Spirit does not make sense unless it is contextualized within a Native American/First Nations framework
- Two Spirit within a traditional setting was a **gender analysis** and not sexual orientation or gender identity
- Today, most people associate the term with LGBT Natives; however, these terms are not interchangeable
- Two Spirit is more aligned with the traditional understanding of the sacred roles within Tribes



Roles



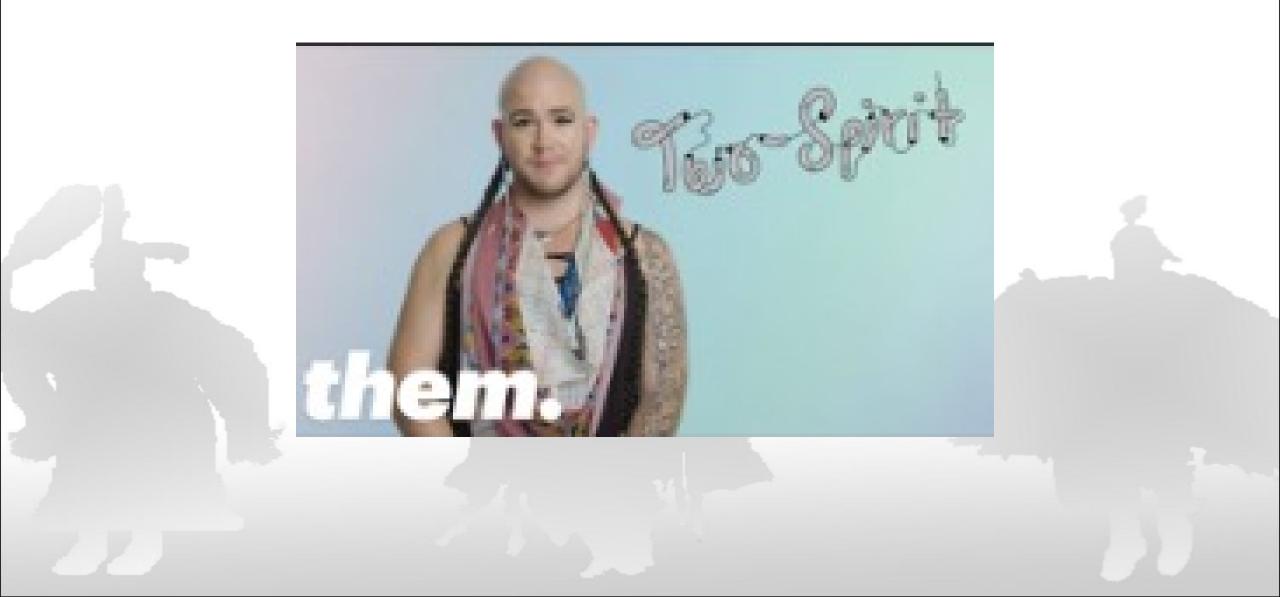
Held in Esteem...

Although Two Spirit people were historically respected in many Nations, they were also, at times, feared because many were said to be people of strong medicine.

Roles of Two Spirit people within Tribal communities

- Namers and protectors of children
- Counselors
- Healers
- Interpreters of dreams
- Warriors
- Mediators between genders
- Brought by Tribal Leaders to negotiations of war and peace with other Tribes because they were said to be able to "see" beyond the physical

What is Two Spirit?



Almost every Tribe had a name for us...



And those names usually had something to do with transformation or change

Revitalizing the roles once held by Two Spirit people

- Gay American Indians, San Francisco (1st Two Spirit-focused group started in 1975)
- Creation of many Two Spirit Societies and Alliances on Turtle Island (North America)
- Two Spirit people included in diversity celebrations, and other events such a major conferences and presentations, just like today's
- Coming In ceremonies, especially for youth, on and off Reservation
- National and International Two Spirit gatherings held on Turtle Island (North America)

Our young ones matter...



Many still acknowledge us as people of medicine



- Carrying on the Traditional roles our Two Spirit Ancestors once held within their Tribes
- Going into the helping fields of social work, medicine, psychology, education, Tribal law, and politics
- Learning our languages and reclaiming our Traditional places in ceremonies
- Advocating for an end to the loss of our people to suicide, especially our Two Spirit Relatives, and most especially, our Two Spirit children

LGBT Coming Out Process

... "coming out" is typically a declaration of an independent identity: an LGBT person musters their courage and, anticipating conflict, announces their sexuality or gender identity to a friend or family member - at the risk of being met with anger, resistance, violence, flat-out rejection or abandonment...

Two Spirit *Coming In Process*

...an Aboriginal person comes to understand their relationship and value to their own family, community, culture, history and present-day world. "Coming in" is not a declaration or an announcement; it is simply presenting oneself authentically and being fully present as an Aboriginal person who understands that they have a spiritual responsibility to their People and to the Ancestors...

Fiction

- Many Two Spirit (and LGBT Natives) youth who end their lives have gender dysphoria or are having trouble with their sexual orientation
- Two Spirit people are all Trans-identified, or gender queer
- Competent health care is widely available for Two Spirit and LGBT Natives
- The residential/boarding school era which removed our children from their Tribes, Villages, homelands, kinship, and families didn't impact Two Spirit children any more than it did other Indigenous children

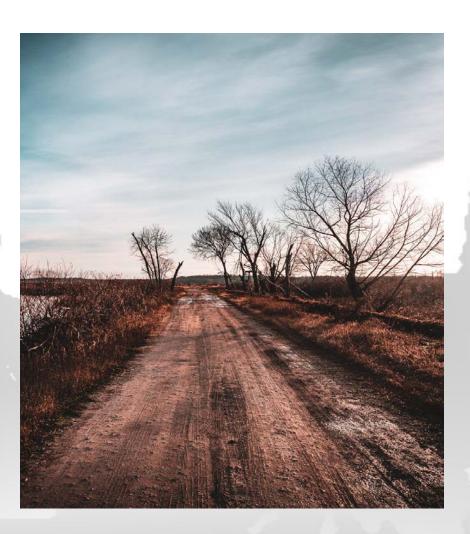
Fact

- Many Two Spirit (and LGBT Native) youth who end their own lives do so because of bullying, lack of support from their Tribes and their families, and because they feel helpless and unsafe
- Two Spirit people are Trans-identified, gender variant, gender nonconforming, asexual, same-gender loving, cis gender, ALL of those, or NONE of those!
- Rarely is competent health care available to Two Spirit people or LGBT Natives in general
- The residential/boarding school era was doubly hard on those Two Spirit babies who were punished severely when they were identified (usually through clothing) and the other children were taught to taunt and torture them with laughter and harsh words

Healing Spirits



Suicide lives at this intersection



Thwarted belongingness

(I don't belong here or anywhere)

Feelings of being a burden on others

(I'm an embarrassment to my family and my Nation)

Lack of fear of dying

(I just need the pain to end)

Dr. Thomas Joiner – Interpersonal Theory of Suicide

What I wish my clinician knew (or even cared about) when working with me

Tips for working in culturally-affirming ways with Two Spirit people in general and youth in particular



- If and when a Two Spirit young person trusts you enough to tell you who they are, honour and believe them
- Be extremely attentive to pronouns, even if presentation may seem to you to indicate something contrary to how the person identifies themselves
- It's not up to us to identify the person coming for services...they are who they say they are
- Do not ask "What are your *preferred* pronouns?" Instead, always ask "What are your pronouns?" Using the word "preferred" minimizes their reality and assumes choice

And..

- If you make a mistake, apologize, slow down, and be more deliberate in the future
- Respectfully ask for assistance from others with identifying Two Spirit Elders in the Tribe. If the Tribe is less Traditional in their ways, do an internet search for the nearest Two Spirit Society or Alliance and ask for help
- Consult with behavioral health organizations such as <u>WeRNative</u> for advice, and materials. Pamphlets in your waiting room, and posters on your walls focusing on Two Spirit people act to indicate to them that they are welcome there and that it is a safe space

Additionally...

- Check your intake forms and other paperwork used in your services. Do you use binary gender markers? Is there room to talk about domestic partnerships rather than just the M, the S, and the D? (Kudos to the National Indian Health Board who uses *Two Spirit* on their conference registration form.)
- Whether you think you work with Two Spirit people or not, you probably do. Not all of us have completed our Coming In process
- With that in mind, there are many fine YouTube videos and other information about the sacredness of Two Spirit people and how we were once honoured in our Tribes, Villages and communities. Learn a little about us...but make sure what you watch or read comes from us and not someone studying us

And finally...

- Check your assessments and screening tools for language that could be re-traumatising to *any* Indigenous person
- Once we've returned to a more normal way of living, consider having a Two Spirit Talking Circle with Two Spirit Elders and allies and let the community know that it is happening – and come to the one today!

But most of all

- Be aware of your own biases
- The re-traumatisation of people who come for services is real
- If you have difficulty moving beyond your own biases, get supervision and remove yourself from working with Two Spirit individuals
- Remember that it's not about you...it's about them



Our Elders say.....

Our Culture is our Cure

OUR FAMILIES



TWO SPIRIT PEOPLE ARE BUSY RE-CREATING THE ROLES HELD TRADITIONALLY BY OUR TWO SPIRIT ANCESTORS

While we might not all be people of medicine in the narrow sense of the definition, medicine is more than tobacco, sage, sweetgrass, cedar and corn pollen.

Medicine is also western and Traditional healing and healers, psychology, law, the arts, counseling, suicide prevention, and any other profession that lifts our People up...

We are Leaders of our Nations, psychologists, doctors, lawyers, and Tribal court judges. We run for presidency of the largest Tribal Nation on this side of Turtle Island. We star in movies, on and off Broadway, and on television. We write plays, music and novels.









...and we even win Amazing Race Canada

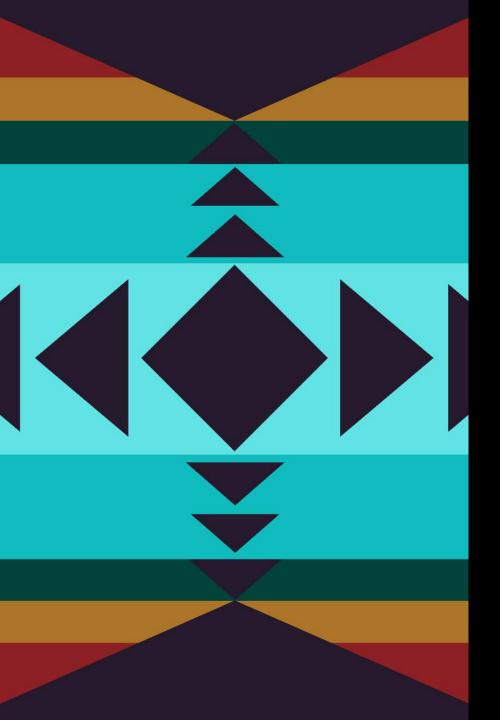
Best and Promising Practices for the Implementation of Zero Suicide in Indian Country



QUESTIONS & REFLECTIONS

Resources

- Zero Suicide Toolkit for Indian Country
- Two Spirit People Guide
- What is Two Spirit?
- What is Two Spirit (Youth)
- Two Spirit Documentary



Wela'lioq!

(Thank you everyone)

sali@edc.org

How CSN Can Help Your State/Jurisdiction

- Request <u>Technical Assistance</u>
- Access <u>CSN Resources</u>
- Subscribe to <u>CSN's Newsletter</u>
- CSN's Health Equity Tools:
- https://www.childrenssafetynetwork.org/child-safety-topics/health-equity
- Health Equity Planner to Implement and Spready Child Safety Strategies in Communities
- Health Equity: Diversity, Equity, and Inclusion Assessment Guide for Multidisciplinary Teams



Thank you!

Please fill out our evaluation: <u>STAW September 2022</u>





at Education Development Center

Visit our website:

www.ChildrensSafetyNetwork.org

