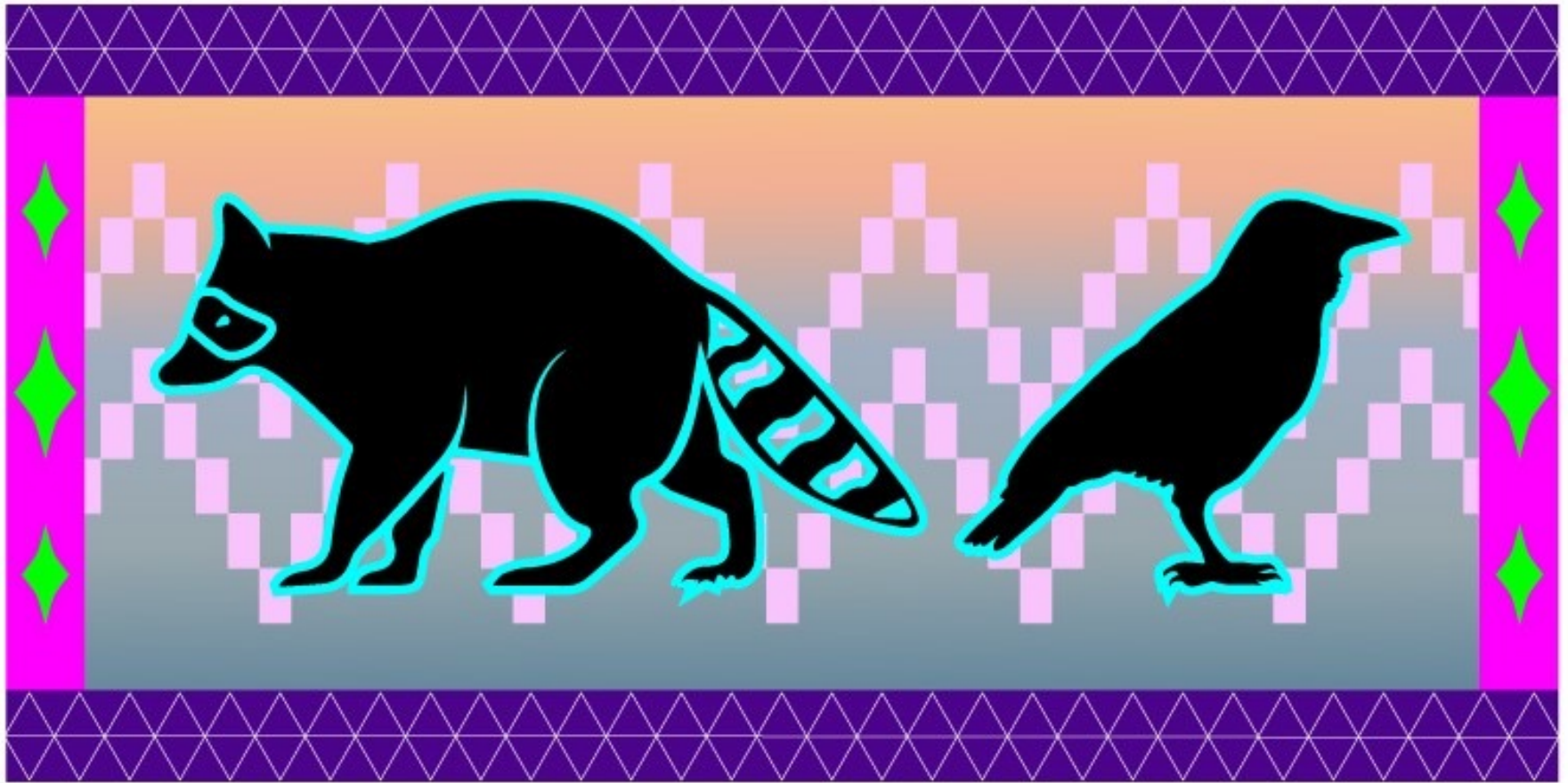


# Indigenous Trauma Care: Trickster Spirits and the Opioid Response



Danica Love Brown, PhD, MSW, CACIII (Choctaw Nation of Oklahoma)  
Northwest Portland Area Indian Health Board Behavioral Health Projects Director

# Objectives

- Tricksters
- Overview of trauma
- Overview of Substance Use Disorders
- Culture as medicine



# TRICKSTER

NATIVE AMERICAN TALES

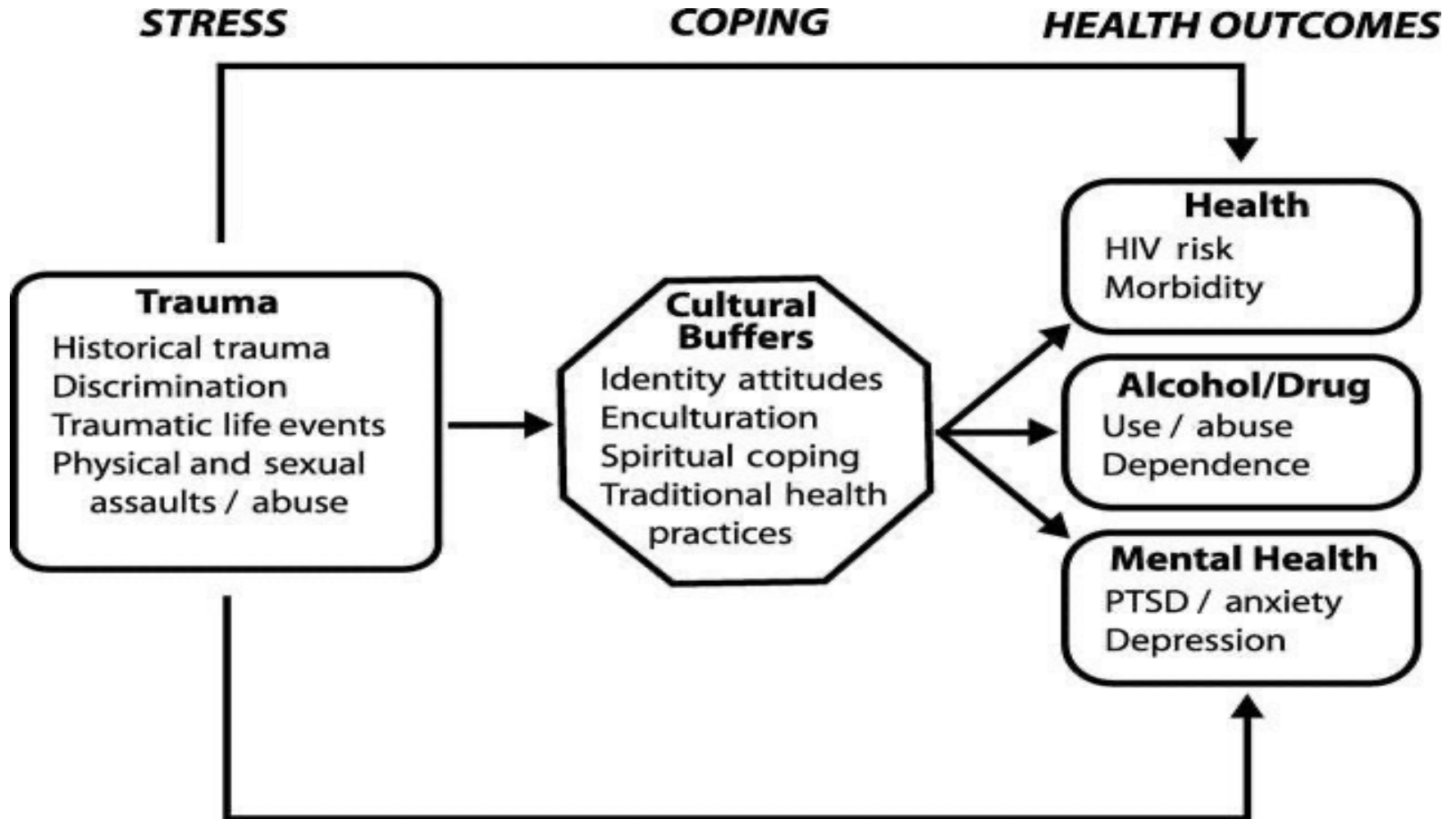
A GRAPHIC COLLECTION

- “Meet the Trickster, a crafty creature or being who disrupts the order of things, often humiliating others and sometimes himself in the process. Whether a coyote or a rabbit, raccoon or raven, tricksters use cunning to get food, steal precious possessions, or simply cause mischief.”



# Indigenist Stress Coping Model

Walters, K., Simoni, J., & Evans-Campbell, T. (2002). Substance Use Among American Indians and Alaska Natives: Incorporating Culture in an “Indigenist” Stress-Coping Paradigm. *Public Health Reports* (1974), 117(3), S104–S117.



# Trauma

## What is Trauma

“Using trauma terminology implies that the individual is responsible for the response, rather than the broader systemic force caused by the state’s abuse of power”

Linklater, 2014



# Types of trauma

- Acute trauma
- Repetitive trauma
- Complex trauma
- Developmental trauma
- Vicarious trauma
- Cultural, Historical and/or Intergenerational trauma

# Historical Trauma



Historical trauma - Cumulative emotional and psychological wounding from massive group trauma across generations, including lifespan.

(Brave Heart, 2004)

# Source of the Wound







# Epigenetic transfer of the trauma

**“The memories of our  
ancestors are passed  
down on our blood”**

**Little Joe Gomez**

## The Pair of ACEs

### Adverse Childhood Experiences

Maternal  
Depression

Physical &  
Emotional Neglect

Emotional &  
Sexual Abuse

Divorce

Mental Illness

Substance  
Abuse

Incarceration

Domestic Violence

Homelessness

### Adverse Community Environments

Discrimination

Violence

Community  
Disruption

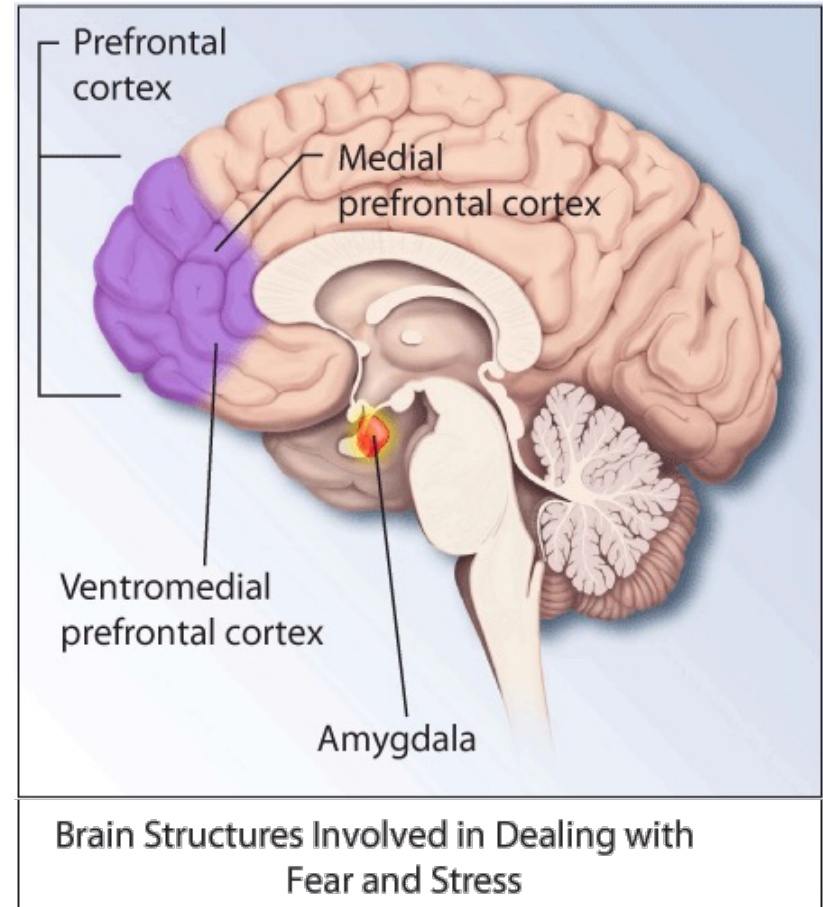
Lack of Opportunity, Economic  
Mobility & Social Capital

Poor Housing  
Quality &  
Affordability

# Effects of trauma on the brain

Lupien, S.; McEwen, B.; Gunnar, M. & Heim, C. (2009). *Effects of stress throughout the lifespan on the brain, behaviour and cognition*. Nature Reviews Neuroscience, 10(6), 434-43445.

- Damages the neural wiring of the brain
- Increases an individual developing mental and physical illnesses
- Increases aggression
- Language failure
- Asthma
- Epilepsy
- Diabetes
- Immune system dysfunction



# Our bodies are designed to remember danger



Each of us begins to maintain a database of threats in the environment.

Walters, K. L., Mohammed, S. A., Evans-Campbell, T., Beltran, R. E., Chae, D. H., & Duran, B. (2011). BODIES DON'T JUST TELL STORIES, THEY TELL HISTORIES Embodiment of Historical Trauma among American Indians and Alaska Natives. *Du Bois Review*, 8(1), 179–189. <https://doi.org/10.1017/S1742058X1100018X>

# Physical Indications of Fight or Flight Response



dilated pupils

pale or flushed skin

trembling

rapid heart beat  
and breathing

## ANCIENT SURVIVAL RESPONSES

- Bracha, H. (2004). Freeze, flight, fight, fright, faint: Adaptationist perspectives on the acute stress response system. *CNS Spectrums*, 9(9), 679-685. Stanton, S. (2016), "Intuition: A Silver Lining for Clinicians with Complex Trauma". Dissertations. <https://surface.syr.edu/etd/615>



مریم حسنا

@Maryamhasnaa



Many of your emotional triggers came from when you were so young that the part of your brain that records memories wasn't even formed. This is why you might not be able to access the memory of the trauma. But the body remembers, in your muscles, tissue, bones and especially spine



informedtrauma

# Trauma Response

"It is important to recognize that traumatic events do not always result in psychiatric distress; individuals, as well as societies, differ in the manner in which they experience, process and remember events"

Denham, A. R. (2008). Rethinking Historical Trauma: Narratives of Resilience. *Transcultural Psychiatry*, 45(3), 391–414.  
<https://doi.org/10.1177/136346150809467>



# INITIAL REACTIONS TO TRAUMA CAN INCLUDE

- exhaustion,
- confusion
- sadness
- anxiety
- agitation
- numbness
- dissociation
- confusion
- physical arousal
- and blunted affect.

Most **responses** are normal in that they affect most survivors and are socially acceptable, psychologically effective, and self-limited.

Center for Substance Abuse Treatment , issuing body, publisher. (2014). *Trauma-Informed care in behavioral health services : A treatment improvement protocol*. (Treatment improvement protocol (TIP) series ; 57). Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment.



# Cognitions and Trauma

- **Cognitive errors**
- **Excessive or inappropriate guilt**
- **Idealization**
- **Trauma-induced hallucinations or delusions**
- **Intrusive thoughts and memories**



Center for Substance Abuse Treatment , issuing body, publisher. (2014). *Trauma-Informed care in behavioral health services : A treatment improvement protocol*. (Treatment improvement protocol (TIP) series ; 57). Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment.

# Using Information About Biology and Trauma

**Frame reexperiencing the event(s),**

**Communicate that treatment and other wellness activities can improve both psychological and physiological symptoms**

You may need to refer certain clients to a

**Discuss traumatic stress symptoms and their physiological components.**

Explain links between traumatic stress symptoms and substance use disorders, if appropriate.

**Normalize trauma symptoms.**

# What is “addiction”

A close-up photograph of a hand in a white shirt tipping a domino in a line on a wooden table. The dominoes are arranged in a line, and the hand is positioned to tip the last one. The background is blurred, showing the person's torso and arms.

“Is a complex condition, a complex interaction between human beings and their environment.” Gabor Mate’

# WHY 'SUBSTANCE ABUSE' IS A LABEL WE SHOULD ALL REJECT

- “Abuse” is an ugly word.
  - “Child abuse,”
  - “sexual abuse,”
  - “physical abuse,”
  - “emotional abuse,”
  - “domestic abuse.”
- And then, of course, there’s “substance abuse.”

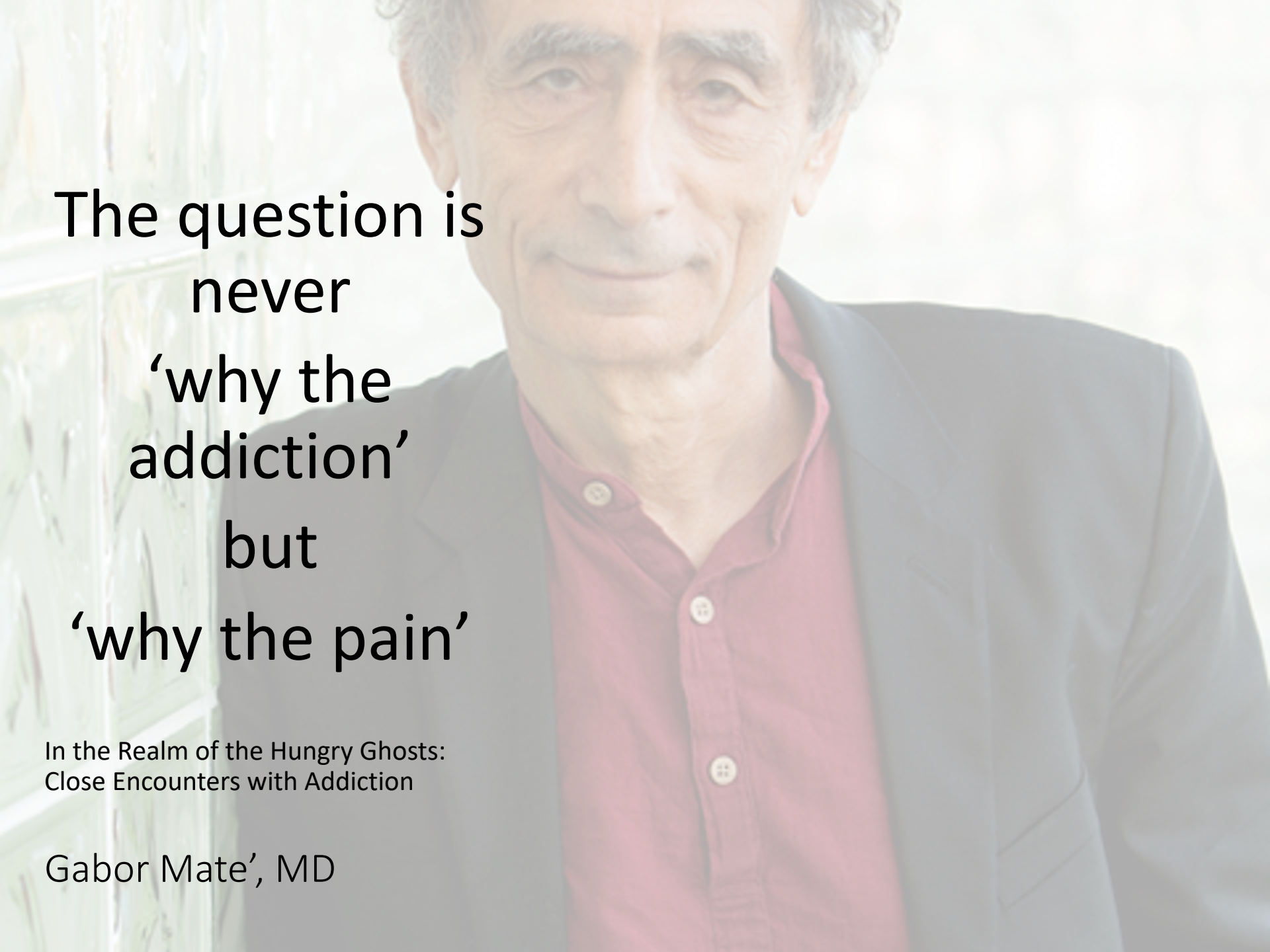
MAIA SZALAVITZ MAR 26, 2014

<https://psmag.com/social-justice/substance-abuse-label-reject-77416>

# Factors in Substance Use Disorders



- ***Susceptible organism***
- ***(the human being)***
- ***A drug with abuse potential***
- ***Stress***



The question is  
never  
'why the  
addiction'  
but  
'why the pain'

In the Realm of the Hungry Ghosts:  
Close Encounters with Addiction

Gabor Mate', MD

# Do not despair!!!

Mate, G. (2009)

- Our brains are resilient organs
- Some important circuits continue to develop throughout our entire lives
- They may do so even in the case of persistent and chronic substance dependency
- Be patient with science, we are continuing to learn more about this complex human condition and how to intervene





**STRONG  
RESILIENT  
INDIGENOUS**



# Resilient Responses to Trauma



Center for Substance Abuse Treatment , issuing body, publisher. (2014). *Trauma-Informed care in behavioral health services : A treatment improvement protocol*. (Treatment improvement protocol (TIP) series ; 57). Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Treatment.



Culture as  
prevention

# Guiding principles for Prevention Partnerships With Native American Communities



# Wellness

Sacred Tree: Four Worlds  
International Institute.  
<https://www.fwii.net/profiles/blogs/the-story-of-the-sacred-tree-1>



# THE UNKNOWN: Our unique risk & protective factors



NICWA (2022). Cultural Connectedness and Indigenous Youth Well-Being, <https://www.nicwa.org/wp-content/uploads/2019/11/2019-10-30-Cultural-Connectedness-Fact-Sheet.pdf>

# What works

- Those who are fluent in many theories and models of treatment.
- Who are client centered/counselor driven.
- Focus on strengths and protective factors
- Who are able to develop trusting therapeutic relationships.
- Who are work within their area of expertise.
- Culture as prevention



**If trauma impacts the epigenetic transfer of trauma, culture and connection can mitigate these affects. If we want to prevent substance misuse we need to focus more on stress, trauma, and poverty while providing intervention options that are grounded on Traditional Indigenous Knowledge.**

