American Indian Combat Veterans

Julie Yaekel-Black Elk, Ph.D. Behavioral Health Director Descendant: White Mountain Apache Ho-Chunk & Delaware

Wesley Black Elk Cultural Traditional Spiritual Leader Rosebud/Pine Ridge

> Ruthmarie Monteith, Ph.D. Clinical Psychologist *Abenaki*

House Keeping

- Please be sure to <u>sign in and out</u> on the Sign In Sheets located near the entrance to this room.
- Please complete the evaluation at the end of this presentation.
- For more information on Continuing Education Units (CEUs), please visit the Registration Desk

Comfort Room

- To promote wellness and self-care, a Comfort Room is available in Atrium Room 8 for your use.
- If you need further assistance, please visit the Indian Health Service Division of Behavioral Health booth.

Partnerships

- Traditional/ Cultural Spiritual Leaders
- Community Members
- Tribal/Indian Health Service Employees
- Department of Veterans Affairs
- Community Veteran Support and Housing
- Vet Centers
- American Indian Veterans

References:

- Beals, J., Manson, S. M., Shore, J. H., Friedman, M., Ashcraft, M., Fairbank, J. A., & Schlenger, W. E. (2002). The prevalence of posttraumatic stress disorder among American Indian Vietnam veterans: Disparities and context. *Journal of Traumatic Stress, 15,* 89-97.
- Green, H. J. (1983). Risks and attitudes associated with extra-cultural placement of American Indian children: A critical review. *Journal of the Academy of Child Psychiatry*, 22, 63-67.
- Kleinfeld, J., & Bloom, J., (1977). Boarding schools: Effects on the mental health of Eskimo adolescents. *American Journal of Psychiatry*, *134*, 411-417.
- Kulka, R. A., Schlenger, W. A., Fairbank, J. A., Hough, R. L., Jordan, B. K., Marmar, C. R., & Weiss, D. S. (1988). *Contractual report of the findings from the national Vietnam veterans readjustment study.* Research Triangle Park, NC: Research Triangle Institute.
- Kulka, R. A., Schlenger, W. A., Fairbank, J. A., Hough, R. L., Jordan, B. K., Marmar, C. R., & Weiss, D. S. (1990). *Trauma and the Vietnam War generation: Report of the findings from the national Vietnam veterans readjustment study.* New York: Bruner Mazel.
- Montour, F. (1992). *Report of the working group on American Indian Vietnam era veterans.* Washington, DC: American Psychiatric Association Press.
- National Center for Post-Traumatic Stress Disorder and the National Center for American Indian and Alaska Native Mental Health Research. (1996). *Matsunaga Vietnam veterans project*. White River Junction, VT: Author.
- National Coalition for Homeless Veterans (2008). Background and statistics. Retrieved February 9, 2008, from http://www.nchv.org/background.cfm
- The National Institute of Justice (1997, June). *American Indians and crime.* Annual conference of the national community sentencing association. *Federal Probation, 61,* 98-99.
- Trimble, J., & Hayes, S. (1984). Mental Health intervention in the psychosocial contexts of American Indian communities. In W. O'Conner, & B. Lubin, B. (Eds.), *Ecological approaches to clinical and community psychology* (pp. 293-321). New York: Wiley.

Contact Information

- Wesley Black Elk <u>wblkelk@gmail.com</u>
- Julie Yaekel-Black Elk 715-638-5124 jblackelk@lcohc.com

• Ruthmarie Monteith -

Purpose of Presentation

Examine pre-combat childhood experiences on post combat adjustment for American Indian Vietnam combat veterans.

Independent Variables

In Home/Out of Home Placement and is related to being consistently reared in one's biological or familial adoptive family during childhood or an American Indian foster home versus being placed in a non-American Indian foster home, boarding school, or orphanage.

Non Veteran/Veteran Primary Care Giver. To ascertain the second independent variable, participants were asked whether or not the parenting care they received was given by a military veteran. Having a veteran primary care giver will include residing in a home where at least one of the parents or custodial guardians was combat veterans.

Dependent Variables

Two trauma assessment instruments (Trauma Attachment Belief Scale and Mississippi-Post Traumatic Stress Disorder Short Form).

Post combat experiences: Incarceration, Alcohol and Drug Treatment and Experiencing actual or threat of Homelessness.

Vietnam Veterans

Approximately 700,000 to 800,000 Vietnam veterans experience PTSD and continue to have their lives affected in a variety of ways.

(Williams, 1980)

Generational Impacts Vietnam Veterans experienced emotional effects from being raised in a home where many fathers had been veterans.

This variable, according to studies reviewed by Rosenheck and Fontana, was found to be a significant factor in Vietnam Veterans, in general, developing PTSD.

(1998)

Post Traumatic Stress Disorder

Emotional reactions to trauma have been recorded since ancient times. In this century, these reactions have been categorized as:

- Shell Shock (World War I),
- Traumatic Neurosis (World War II),
- Gross Stress Syndrome (DSM-I, 1952)
- Transient Situational Disturbance (DSM-II, 1968)
- Post-Traumatic Stress Disorder (DSM-III, 1980)

(DSM-III, 1980; DSM-III-R, 1987; DSM-IV, 1994; DSM-IV-TR, 2000; Bentley, 1997)

This historical overview and review of literature has examined the statistical overrepresentation of American Indians as it relates to both historical and current experiences of grief and trauma.

It is imperative to improve mental health services to American Indian Veterans that we bridge the past to current issues of adjustment so that mental health service providers may be better informed with the unique issues surrounding this population.

In Memory

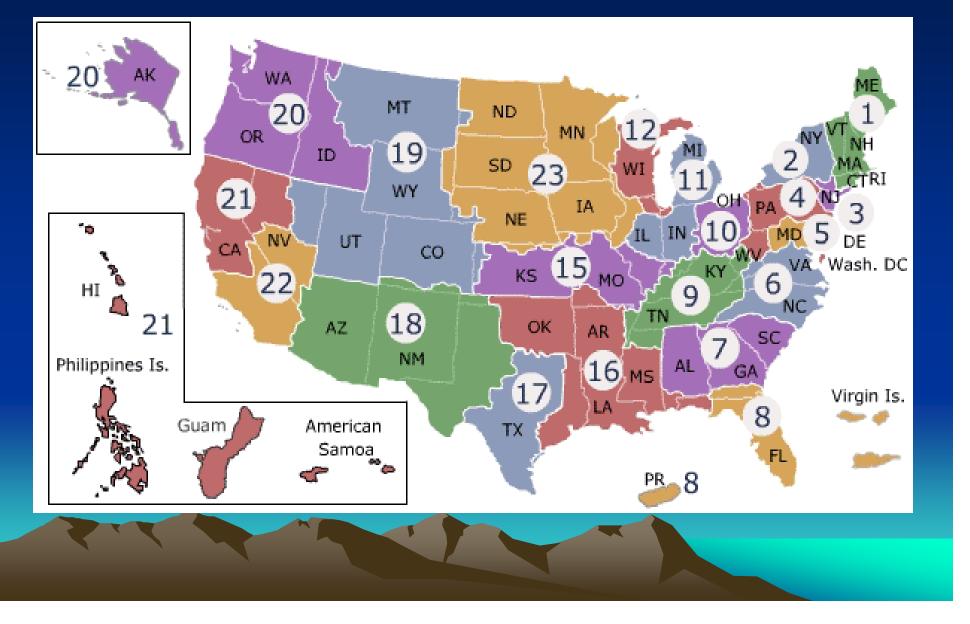
Sgt. Joseph Alfred Platzkoester E5 MIA-Korea on 5-30-1951 Army: ER55001215 Unit HCO 38th Infantry

Utilizing Clinical Outpatient VA Services

The VA Mission Statement

 To fulfill the US promise to the veterans: "To care for him who shall have borne the battle, and for his widow, and his orphan" by serving and honoring the men and women who are America's veterans.

VA System



VA Service Locations

- Medical Centers
- Residential Rehabilitation Treatment Centers
- Community Based Outpatient Clinics (CBOC)
- Vet Centers
- Veterans Homes
- National cemeteries

Services offered

- Medical
- Mental Health
 - Psychiatry
 - Psychology
 - Social Work
 - Homeless Outreach
 - Substance Abuse
- Compensation and Pension Examinations
- Via telehealth all of the above services
- Chaplain ("oversees" inipi)

The VA and Tribal Veterans

- VA-IHS Memorandum of Understanding (2003)
- Individual facilities vary in level of involvement
 - Albuquerque VA-IHS Psychology Internship/joint trainings
- Tribal Veterans Service Officers (VSO's)
 - Enter office through appointment
 - Assist with benefits, access, liaison
- Minority Veterans Programs Coordinators at VAs:
 - Promote the use of VA benefits, programs, and services
 - Support/initiate education to staff
 - Target outreach efforts through community networks
 - Advocate for veterans

Mental Health Services

Assessment

- Individual and group treatment
- Case management
- Psychiatric medication management
- Homeless outreach
- Home based primary care (MH Component)
- Caregiver support
- Traditional ceremonies (Through Chaplain)

Residential Treatment for MH

- PTSD
- SUD
- Dual Diagnosis
- General mental health concerns/homeless
- Psychosocial rehabilitation long term
- Ceremonies (*inipi*) are often conducted at these programs

Treating Native American Veterans

- Barriers
 - Distance
 - Poverty
 - Mental health symptoms (e.g., isolation, paranoia)
 - Historical (mis)trust issues with government
 - Limited number of Native American providers
 - Focus on Evidence Based Practices, rather than Practice Based Evidence

Hypothetical case scenario #1

- 24-year-old Native American male OIF/OEF
- Combat history of IED blast, foot amputation
- VA can offer
 - TBI evaluation and treatment
 - PTSD evaluation and treatment
 - Pain management
 - Compensation and pension examination
 - Family caregiver support
 - Ceremony may be available

Hypothetical case scenario #2

- 64-year-old Native American Vietnam infantry
- Combat history: heavy exposure
- Long history of heavy drinking
- VA can offer
 - PTSD evaluation and treatment
 - Compensation and pension examination
 - Ceremony may be available

Overcoming barriers

How do we change a system?
✓ Advocacy
✓ Education
✓ Persistence
✓ Collaboration
✓ Dedication

Crisis Hotline Numbers

Suicide Prevention Lifeline Number:
1-800-273-TALK (8255)

National Domestic Violence Hotline:
1-800-799-SAFE (7233) or TTY 1-800-787-3224

National Child Abuse Hotline:

• 1-800-4-A-CHILD

Sexual Assault Hotline:1-800-262-9800