

National American Indian Heritage Month: Celebration of a proud history

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Editor's Note: This Op-Ed/Editorial is the first editorial installment of our [Special Series on Addiction and Recovery among Tribal Communities](#). Dr. Anne Helene Skinstad of the National American Indian and Alaska Native Addiction Technology Transfer Center and Dr. Dennis Norman of the Harvard University Native American Program describe the history of, and current need for, American Indian Heritage Month. They then describe some important lessons they have learned conducting Community Based Participatory Research within tribal communities.

November, the American Indian Heritage Month, has become more and more acknowledged and visible. However, when celebrating this month, we suggest that we need to reflect on the fact that it took a whole century before this month became as visible in the U.S. as it is today.

This belated recognition of American Indian Heritage Month has been expanded from a daylong observance to a week and now a month, with a variety of celebratory activities across the country. American Indian Day was first celebrated in 1914 by the state of New York, as the day for First Americans to acknowledge their rich culture. Dr. Arthur C. Parker, a member of the Seneca Nation and the Director of the Museum of Arts and Sciences in Rochester, NY, initiated the first American Indian Day. Subsequently, the second Saturday in May became American Indian Day, but no official resolution was ever proclaimed; the day was rather an appeal for recognition of Indians as citizens of this country. Other states followed suit, and chose other days in September or even renamed Columbus Day as their American Indian Day/Indigenous Day. It was not until 1990 that President George H.W. Bush approved a joint resolution designating November National American Indian Heritage Month.

The principal goal for this recognition each year is to celebrate the rich and diverse cultures and traditions enriching both urban Indian and tribal communities. Specifically, the month is intended to build bridges between tribal sovereign nations and the rest of the United States. In recent years, inspired by

the civil rights initiatives that began during the 1960s, such as the Red Power movement and the 1975 Indian Self-Determination and Education Act, , authorities initiated legal efforts to atone for the atrocities inflicted on American Indian communities. The Joint Commission on American Indian Religious Freedom Act, signed into law by President Carter in 1978, was another such effort. Accordingly, we have seen an Indian cultural renewal (Nagel, 1997). Many tribal communities have begun to use their own language and created opportunities for children to learn the language in school. The right to practice their own religion, observe their own cultural rituals and ceremonies, and speak their own languages was taken away from the tribes many years ago. By taking all of these cultural essentials away from the Native communities, the federal government created a cultural void that contributed to widespread despair, and a range of public health problems. This effort at cultural suppression had a serious impact on Indians' capacity to retain their very rich indigenous knowledge accumulated through centuries. As a consequence, there are renewed efforts toward preserving Native languages, further developing tribal sovereignty and self-determination, and celebrating their own proud histories.

Look forward but never forget what happened to the people in the past (Mackey, 2006). This poignant motto has proven to be very important for tribal communities as well as non-tribal communities, when practicing cultural humility in interacting with tribal communities. The mission of the [National American Indian and Alaska Native Addiction Technology Transfer Center \(ATTC\)](#) is to provide workforce development opportunities for American Indians and Alaska Natives (Skinstad, 2013). In trying to accomplish this mission, we spent an entire year listening to concerns of Native behavioral health professionals; we called this part of our project *The Year of Listening*.

One of the most important lessons we learned during that time was the need to listen and learn to better understand the needs of the Native workforce. We also found that one of the best ways we can assist the workforce is to use the model of Community Based Participatory Programming/Research (CBPPR) and to provide information about evidence-based practices that they then can implement in a culturally-informed way in their communities. We all continue to be impressed by how tribal communities with limited resources struggle with treating their people for behavioral health issues and create prevention programs based on the principals of evidence-based practices, but culturally adapted.

As addiction professionals, what do we need to know about history to better treat behavioral health problems in American Indian and Alaska Native community members? It is important for us all to understand the history behind some of the substances that cause trouble in American Indian and Alaska Native tribal and urban Indian communities. Substances like alcohol were introduced to American Indian and Alaska Native communities by settlers, and the tribal communities were not prepared for the catastrophic consequences alcohol brought to the communities. Many of our American Indian colleagues consider alcohol the most serious threat to a healthy American Indian Community.

Tobacco, on the other hand, is a substance that is well known and well-accepted in American Indian communities. Tobacco has a special status in American Indian communities and has a special role in a number of ceremonies and rituals. Tobacco is sacred, and often times used as a peace offering. Of course, it is not meant to be abused. Likewise, peyote, a hallucinogen, is used in the Native American Church and is not to be abused either, but rather used in special ceremonies within the church.

The increase in the number of gaming venues developed in tribal communities has had both positive and negative consequences for the communities, resulting in a clear level of ambivalence by tribes towards the industry. Tribal communities exercised their sovereignty and their right to self-determination by establishing their own gambling regulations and venues, resulting in a dramatic increase in numbers of tribal casinos developed in recent years. Income from tribal casinos has enabled tribes to build much-needed infrastructure: schools, health care, roads, jobs, and start the process of diversifying their economic foundations. However, not all tribal casinos are as successful financially as the most visible ones, and the income from them are not evenly distributed across Indian country. The communities have also had to confront the problem of tribal members unable to handle the temptations of gambling. From a public health perspective, it is very encouraging to see that tribal communities are starting both to realize the positive impact of the casino industry even while they intensify efforts to look after community members who are not able to handle the lures of gaming.

Gaming successes have stirred controversy within and beyond tribal communities. Non-tribal communities often claim that American Indian communities are indigenous communities that should not engage in capitalistic

pursuits. Within the Native communities, there is debate about how the income from the casinos should be used, to develop infrastructure or to make regular per capita payment to individuals and families. The diversity in ways of using the income from the gaming industry reflects the diversity of American Indian and Alaska Native communities, cultures, and ways of thinking.

What do we need to know as behavioral health researchers? Community-Based Participatory Research should be the basis for our initiatives in this cultural domain from the beginning. In order to engage our Native communities, we must build trust, become visible, and participate in cultural events to learn how the community works. Our wish to answer a research question may not mean it is an important question for the community to answer. Helicopter research refers to dropping into the community to collect the data necessary for a project, and then leaving the community to fend for itself— even if the data are stigmatizing. This can be both harmful and unethical. It is also important to form collegial relationships that foster research and grant management skills in the communities in which we conduct research and encourage community members to be co-principal investigators rather than just subjects of research.

Listening to how the community thinks a research project would work in the community is crucial as well. Our Center has had to learn how to communicate, behave, and be respectful to our Native behavioral health providers, and by showing a real effort, we have been able to secure genuine and helpful interaction with our Native behavioral health providers. We have also learned that we cannot take ourselves very seriously, and we need to be prepared for the humor that is a part of many tribal communities.

How should we celebrate American Indian Heritage Month? Our suggestion is to try to learn about the tribal communities in your State and your neighborhood, visit one of the many extraordinary Native American museums across the country, listen to Native radio and Native music, read Native newspapers, and periodicals, and be prepared to experience the feelings you may not have known you had about the 566 Sovereign Nations within the United States. Much of their history is invisible, because history books are written by the winners of wars and conflicts. However, learning about the history should make us more appreciative of how Native Communities have survived in face of centuries of atrocities and challenges, and should lead us to focus on the positives and not the negatives we have read about in the history books. As researchers

and practitioners, celebrating their rich history is an absolute necessity in preparing to work with American Indian and Alaska Native communities, colleagues and clients.

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