Wakháŋyeža: Working with communities to solve suicide

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Collaborative Partnership

Established partnership with Fort Peck Assiniboine and Sioux Tribes in 2010 during Historical and Contemporary Trauma-Related Factors Study

Tribal Advisory Board and key stakeholders were consulted in development of a logic model to address stress and trauma symptoms

All project phases have employed community-based participatory research approach



Fort Peck Assiniboine and Sioux Tribes **Timeline of Collaborative Activities**

Tribal Data Dissemination





Support the Inclusion of Authentic Voice in Development of a Head Start

Wa' Kan ye' zah (Little Holy One)

Intergenerational intervention to address stress & trauma related symptoms among parentchild dyads in the Fort Peck Head Start Program

Adapting and Implementing the Indigenous informed intervention Wa' Kan ye' zah to reduce stress and promote wellbeing and resilience in **Tribal Head Start Teachers**

2018

2019

Promoting Safe Passage from Adolescence to Adulthood for Native American women

To design and evaluate a culture-based digital app, called "Safe Passage" (SP), to connect Native American girls ages 13-17 with resources to promote healthy passage through adolescence

Social Networks among Native American caregivers

2020

To analyze additional individual social network data to understand the relational factors that may increase both risk of suicide and opioid use and the relational characteristics of networks that act as protective factors for suicide and opioid use.

Background: Historical and Contemporary Trauma-Related Factors Study



Previous study of N=288 adolescents and young adults:

 Historical trauma associated with suicidal ideation & attempts



 Communal mastery, tribal identity, and attachment to education was protective against substance use/suicide risk. Community members were consulted to determine next steps in addressing issues of substance use and suicide

Suicide Rate per 100,000 by IHS Area





Participating Communities: Fort Peck Indian Reservation



Target Population

- Children 3 to 5 years old and their primary caregiver
- 120 caregiver/child pairs will be enrolled in the study
- Sioux and Assiniboine Tribes





Study Goal To increase protective factors and decrease risk factors related to youth suicide and substance abuse, starting in early life

This goal will be addressed through 3 components:

- lessons)

 Coping/Trauma prevention using Common **Elements Treatment Approach (CETA): Sessions** to help parents and caregivers address their own stress or trauma (4 lessons)

Family Spirit lessons on parenting skills (4)

Cultural components (4 new lessons)

Innovative Intervention Development

- Tribal Advisory Board provided direction on lesson topics and content
- Cultural lessons were developed specifically for Fort Peck Tribes community
- Evidence based lessons from Family Spirit and CETA were adapted for the Fort Peck Tribes community
- Tribal Advisory Board reviewed each lesson and provided feedback
- Pilot was conducted with participants participants and interventionists provided feedback on lessons

Family Spirit

-Encouraging Early Learning -Daily Routines -Monitoring Your Toddler's Routine -Skills for Effective Parenting

Cultural Components -Promoting Positive Tribal Identity -Promoting Smudging -Enhancing **Community Mastery** -Healing Historical & Contemporary Trauma

Coping Skills (CETA)

-Learning About **Emotions and Mental** Health

-Cognitive Coping Skills

-Substance Use -Trauma Narrative

Four Cultural Components

Tribal Identity

Traditional naming connects one to the Creator and responsibility to live a good life by understanding and walking on spiritual path

Promoting Smudging

Therapeutic healing practice, used to resolve unsettling thoughts and feelings, used in ceremony and daily prayer and meditation

Communal Mastery

"Making of relatives" and "moccasin telegraph" activities will help participants understand their sacred relationships to others-their roles, responsibilities, and the therapeutic value of connectedness

Healing Historical Trauma

Wiping of Tears ceremony and story-telling narrative for healing will be used to address historical and contemporary traumas

Expected Outcomes



Long-term **Child Outcomes** (Not measured in this study)

- Reduced Substance use and suicide risk



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| OMPETENCE OUTCOMES | |
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| actices | Responsivity |
| | Monitoring/supervision |
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| | Substance abuse risks |
| | Tribal identity |
| ty | Communal mastery |
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| | • Education & |
| | occupational goals |

Study Design

Randomized Control Trial (RCT) with

Conducting an RCT with an embedded SCED will determine whether and how the prevention program works to improve outcomes, and what is the immediate impact of cultural components on caregiver functioning.

Embedded Single-Case Experimental Design (SCED)





Control Group

Sessions will be attended by children and their parent/caregiver

Two modules from Healthy Youth Control curriculum will be adapted to create the 6 sessions: **Everyday Eating – Nutrition Basics** Energy to Win – Energy to Play

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Control participants will receive an optional 30-60 minute nutrition session every other week for 12 weeks

If Little Holy One is found to be effective it will be implemented at all Head Start sites in Fort Peck

Little Holy One has potential for implementation in additional spaces that provide services to children (daycares, clinics, WIC programs)

Potential for Little Holy One scaling in other Native/Tribal settings

Little Holy One is a starting point for future intervention in Fort Peck

Potential for future innovation

Thank you!





