LEAVE NO ONE BEHIND:
Approaches to Working Effectively With American Indians/Alaska Natives

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funded by —
Social Security Administration
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A special thanks to Ken Galeai for supplying information about the indigenous people of Hawaii and the Pacific Islands. And thanks to the many people who previewed the material and caught the errors I overlooked. If you find errors we missed please let me know so I can correct them.

The original title of these papers was “American Indian 101” as in first-year English or math - a 100 level course. Using AI-101 as a teaching tool has eased tension and helped create a congenial atmosphere for learning about tribal/indigenous people. Parts of it are interactive and fun, the information interesting and challenging. Important issues are repeated, some may seem contradictory as indigenous groups view things differently. Overall, though, the learning approach continues to be informal. Bear in mind that education, time off reservation, employment, and outside religions impact greatly on indigenous traditions.

The term “Indigenous People” is used here because it is inclusive of tribes, native people, Pacific Islanders, Alaskans, Eskimos and other groups, which have their origin in or near North America. We want to address the human interests of these people and not specifically the technical classification of cultures. The terms mentioned above may be used interchangeably to add variation to the text.

Indigenous peoples in the United States are located in almost every state and territory. Even if there are no federal or state recognized groups in a state/territory there are surely urban and rural dwellers from indigenous cultures. Information about these cultures is not a “one size fits all” situation. We will provide specific information about cultures when possible but for convenience we will provide a broader scope of knowledge covering several groups at one time.

Learning requires a person to have basic information before taking a next step to greater knowledge. This manual provides basic information as the first step, and then provides the information needed to take more steps on the path of knowledge of how to interact with indigenous people. The “Steps” are listed instead of chapters.

The last 15 years have seen an expansion of benefits planning and assistance services and supports being provided to Social Security Administration (SSA) disability program beneficiaries and recipients. With the growth in integrated employment service delivery and increased national emphasis on the employment of persons with disabilities the need for access to these types of services and supports has become essential to promoting successful employment outcomes and attachment of beneficiaries and recipients to work.
With this increased focus on benefits planning and assistance comes the need to further articulate the service delivery construct for this growing field as well as identify the essential knowledge and skills required of practitioners to competently work within this specialized area. Important to this discussion is recognition that the field of benefits planning and assistance has grown from existing roles and functions of practitioners in diverse fields. These related fields and professions have included rehabilitation counselors; an insurance rehabilitation specialist, transition planners, advocates and peer counselors, supported employment personnel, vocational evaluators, and others. While these fields and professions have not focused solely on the delivery of benefits planning and assistance services and supports, they have been a valued activity within the context of their existing responsibilities, contributing to the employment success of consumers they have worked with.

STEP ONE information begins with the basics of America’s Indigenous Populations (AIP-101) that will give you a heads-up on the big picture of indigenous cultures. Most of it is more factual (head knowledge) than personal (heart knowledge), but it is important that you have the background facts about indigenous people. The initial information will help you know how to start to build relationships with indigenous groups or individuals.

STEP TWO contains how-to information about establishing a presence with individuals and groups. It is generalized to most indigenous people; specific groups are addressed later.

STEP THREE targets the cross-discipline issues of indigenous people and disabilities. Sometimes a disability is not a disability in one’s own culture. Sometimes there are reasons people do or don’t do things we think they should/should not do.

STEP FOUR contains real-life stories of indigenous people and their experiences with services acquisition.

STEP FIVE is the area where you write your own steps, half steps, or next steps toward your goal for yourself. You may want to cross-reference your steps with material in this Training Manual and in the Outreach Guidebook.
Can you answer these questions?

1. (a) What is appropriate, Native American or American Indian?

   (b) What is appropriate, Alaskan Native or Eskimo?

   (c) Do Hawaiian Natives have tribes? Are they related to other islands’ Natives?

   (d) Do Puerto Rican Natives speak tribal languages or Spanish?

2. What is the relationship of tribes/Native groups to Federal and State Governments?

3. How many federally recognized tribes are there?

4. How many languages?

5. How many Island territories have indigenous groups?

6. Fill in the blanks:  IHS means __________________________
   BIA means __________________________

7. The majority of tribal people live on reservations ___ yes___ no

8. Are tribes getting rich from their casinos?

9. What is “assimilation?”

Answers:

1. (a) According to studies conducted at nine Pow-wows 1999-2000, most tribal people over age 40 prefer American Indian. Why? Because Columbus made an honest mistake when he called them that, but the US Government changed the name to Native American to fit their own bureaucratic needs. Whether that is true or false, middle-years tribal people tend to prefer the term American Indian. Younger people age 16-39 said they preferred Native American because that was what they are. HINT: People prefer to be identified by their tribal name, “I’m Mohawk” or “I’m Navajo.” If you are unsure of what to say, pay attention in your area to the terms used and use the same terms.
(b) There are 205 different tribal groups in Alaska listed in the Reference Encyclopedia of American Indians (1990). Identification of groups were most often described as Eskimo or Indian (those terms are not synonymous). In some places a tribal name (for example Tlingit) was included. Alaskan Native refers to tribal groups. The term “Eskimo” most often refers to the indigenous people of the Bering Strait who are classified as “Mongolian” in past decades, then “Siberian,” then “Eskimo” but not “Native American.”

(c) Native Hawaiians have cultural family names but for most of them their tribe/band affiliation has been lost. Ancestral roots of islanders are blended, and the closer together the islands the greater the chance of common ancestry of the inhabitants. Island cultures of antiquity were similar to Mainland Native cultures but long-term exposure to and oppression by outsiders blended Island traditions with non-Hawaiian influences.

(d) Puerto Rican Natives most commonly speak Spanish but may also have a tribal language. Most business is conducted in Spanish, and tribal languages are used for ceremonies and in communities. According to old records the Puerto Rican indigenous people may have been the first population to have a visit from Europe/Spain.

2. Federally recognized tribes are “Sovereign Domestic Nations.” States do not have jurisdiction over lands of federally recognized tribes. Tribes have “government-to-government” relationships with states and federal agencies.

3. The number of federally recognized tribes increases yearly, and at the latest count was 557 (including Alaskan groups). State recognized indigenous populations increase yearly also; at this time we have no specific count of the number of state recognized groups.

4. There are fewer tribal languages than there are tribal groups. That’s because there are large linguistic groups that include many tribes. However, each tribe has its own dialect or variation and thus is distinct even though the language itself is collective.

5. Island territories, including Hawaii and Samoa, have recognized indigenous family/tribe groups. Rural communities of indigenous people often retain the lineage of leading families, which become the leaders in community affairs of today.
6. **IHS** – Indian Health Service – federal agency that provides health services.  
   **BIA** – Bureau of Indian Affairs – Federal agency that has oversight of tribal affairs.

7. At last census count the percent of off-reservation tribal members was 54%, and on-reservation people 46%.

8. Very few tribes are “rich” from any source. Most of the tribes that have gaming facilities say that it will be thirty years before their gaming endeavors provide income enabling them to bring tribal lands and people up to non-Native standards of living. Revenues are mostly spent on tribal infrastructure such as roads, police and emergency needs, sanitation, power, water, housing, education, and health.

If you can remember even a few of the answers stated above you will know a lot more about indigenous people than most non-indigenous people in the United States! However, that is just the barest of foundational data to get you started. If you didn’t score high on answering the questions don’t worry. You have some answers now, there’s much more to follow.

9. Assimilation is not a good word for Indigenous people. When something is assimilated into something else, the something disappears, like cream disappears in homogenized milk. And it can’t be separated out again, even if it wanted to be. The fear and grief of many indigenous people is the fact that they adapt and assimilate or die, and neither choice is desirable. When we gain by adapting we lose a piece of our culture. Assimilated people are those who walk the “white man’s path.” Assimilation generates scorn and anger (anger is a lid on grief, remember) in other tribal members. Hurtful divisions occur in tribal relations between the “progressives” and “traditionals,” the ones who have been assimilated and those who have not. “Apple Indian” is a name for those who choose the modern life: red on the outside, white on the inside. There is another way, and this is the path most tribal people walk today, the “Two Worlds” path.

Many tribal people feel the BIA boarding schools put children on the assimilation path at a young age. Other tribes view education as the way out of poverty and defeat. But Apples and Traditionals can find a Two-World path of existence that takes the best of both paths. In today’s world it is often the Two-World people that are the leaders because they have the ability to walk in both worlds.

The Bureau of Indian Affairs (BIA) was developed from the Department of War as a means of insuring federal oversight of tribal affairs. During the time of Indian Wars the oversight was conducted through Forts, as in Ft. Apache, Ft. Peck, Ft. Sill. Later the Indian Affairs was placed under the Department of the Interior. Many tribes feel the BIA retains a paternalistic attitude toward them although they are Sovereign Nations.
The Indian Health Service (IHS) also developed from the Department of War and now is under the Public Health System. Health services is a treaty right; the degree of health care, however, was not determined. Today IHS facilities are funded at about 40% of the minimum budget amount submitted to the Government by a tribal council.

Blood quantum is another sensitive issue. Some ancestors refused to let the “blue coats” put their name on any paper; therefore they are not listed on any rolls. The grandchildren of the “hostiles” may or may not be eligible for enrollment in their own tribe because their ancestors were not on the list. When disease and war thinned the indigenous populations and the members had to look outside the tribe for mates, indigenous bloodlines became mingled. Today there are traditional people who are fair, blond, and blue eyed although they function culturally as a tribal member. Among Hawaiian and Pacific Islands groups the cultural blend tends to be Asian more often than white, and the Asian cultures and languages impact the Native cultures of the Islands. This is true throughout the Pacific Islands groups, Micronesia, and Puerto Rico, although the Puerto Rican cultures are blended with Spanish-speaking cultures.

Jurisdiction of state/federal governments often creates barriers to appropriate services. Unless specifically written into the document, most RFP’s (requests for proposals) exclude tribal entities from applying for grant awards. Funds for residential placement of elders, persons with disabilities, or fragile health are usually available only to state or private agencies. The ADA itself specifically excludes tribal lands; the reason being that, as sovereign Nations, they should write their own ADA. This is appropriate except for the fact that there’s very little funding for programs to teach tribal governments what the ADA is and why it is important for tribes to write an ADA of their own.

Urban Indian Centers are eligible for funding from federal and state sources with the stipulation that the centers must serve all individuals, not just tribal/indigenous people. Urban centers provide meeting places for tribal people in urban areas and often are the only link the people have to tribal activities and information. Many indigenous people move to urban areas to find work. Others, however, are the children of Relocates of the 1950’s, when the BIA transported young people and sometimes whole families to urban areas “relocating them for work opportunities.” Some indigenous urban dwellers are full-bloods but were adopted into white homes in urban areas when they were babies. Of these three groups, the workers, the relocatee children and the adopted, the last two have the greatest number of psychological problems.

Substance abuse frequently is a factor. Working with individuals from indigenous cultures who live in urban areas has unique challenges all its own. Loss of personal and tribal identity, loss of culture and language, and internalized grief because of the losses creates psychological and emotional challenges that are difficult to overcome.
Hawaiian Natives and other Pacific Island indigenous groups have been romanticized in music and song as inhabitants of island paradise, gentle breezes and whispering surf. The attributes of the islands may be correct but that is but a tiny fraction of the whole story. Island populations have been subjected to intrusion by outsiders for centuries, including invasion by the United States during World War II. Island cultures, traditions, religions, family histories, trade routes, traditional foods and dwellings have, in turn, given way to the advancing armies of outside people. What remains astounding is that any of their cultures and languages have stayed intact.

At last count there were 875,000 Native Hawaiians and other Pacific Islanders. Of that number, 399,000 reported Native blood only. The others were mixed heritage, much of it Asian Pacific cultures. Hawaii has 283,000 Native Hawaiians, California has 221,000, and the other states have smaller groups of both Hawaiians and other Pacific Islanders. The city of Honolulu has the largest number of Pacific Islanders, followed by New York, Los Angeles, and San Diego. Household incomes for the Hawaiian and Pacific Islanders is slightly higher than non-Hispanic whites, but the number of persons per household is also higher. Although the educational level is high, the earning power does not reflect it.

BPAOs need to be mindful of differences in languages and cultures, which reflect more than 30 different subgroups. Added to this diversity is the generational gap of age and place of origin (born in the United States or foreign born). The subpopulations created by generational differences and cultural differences are as different for each other as much as they are different from other cultures. The subpopulations in particular are marginal in modern society and suffer the lack of health and educational services appropriate for their needs. Tuberculosis rate is higher in this population. Infant mortality is high, and health disparities have increased recently due to the policy of excluding immigrant populations from some federally funded programs. The recent English-only law in California severely limits the ability of members of this group to access the services they need.

BPAOs should determine if a Hawaiian/Pacific Islander’s use of English is adequate for understanding the terminology used in an interview. Make sure the person is aware of all the services available, such as education, counseling, medical services, rehabilitation, and other such programs. The extensive diversity in this group dictates a critical need for BPAO persons to be culturally competent, linguistically aware, and to be able to provide relevant and appropriate services to consumers. With this group, as with most Native cultures, family is extremely important and may be used as Standers, interpreters, for moral support, or to speak up for someone who traditionally will provide only minimal information. Minimal information occurs when such information might make one appear to be boasting, or when it might be negative for the family or the self. Depression and grief are most commonly expressed...
indirectly in mute form or in behaviors or body language. The family’s involvement is fundamental as a means of support for a consumer seeking BPAO services, especially when the consumer expresses the old traditions of modesty and self-deprecating and reluctance to discuss problems or issues that involve the family or the self. What usually occurs is that the consumer will focus on concrete solutions, such as medical help, a job, or something that does not include emotional, psychological or other sensitive areas.

Two things to be aware of: Age/gender roles, and views of disability. Age and gender are important when a younger female BPAO worker is interviewing an older male consumer from a Native Hawaiian or Pacific Island community. Young females are ascribed a low status in contrast to that of an elderly male. If this is the scenario, the BPAO worker would need to demonstrate effective skills immediately in order to establish high credibility with the older man and thus maintain the consumer in the BPAO services.

The Native populations of the Pacific Islands have had interactions and overlays of other cultures that have influenced their thoughts and views about disability. Some of the overlay views are that disability is a punishment for parental sins. It is also associated with the sins of the individual with a disability in a previous incarnation. Since shame and guilt are often associated with disabilities it is extremely important to work with the consumer’s family to educate them about available services.

Remember that Native Hawaiians and other Pacific Islanders are reluctant to seek services of any kind. They are reluctant to disclose personal and intimate feelings, health worries, employment barriers, and especially family problems. Limit the number of BPAO or other agency personnel the consumer needs to talk to. Try to establish a personal give-and-take relationship with the consumer as soon as possible. A gentle touch of the hands, smiles, good works of encouragement are always welcome. Words in the Islands languages for “welcome” and “thank you” are listed in the Outreach Guidebook.

Alaskan Natives have also been romanticized in word and song but not with a vision of paradise in mind. So little has been known about the “vast frozen wasteland” of the North that it was more of a surrealistic place of glaring white ice, polar bears, and igloos. But humans live there, humans who have all the basic needs of other humans with often few means of fulfilling those needs. If we keep in mind that the inhabitants of Alaska are our brothers and sisters upon this earth it is easier to incorporate their lifestyles and languages into our thought processes. The Alaskan Natives have many issues with service delivery of any kind because of the rural/isolated villages and severe weather conditions during most of the year. There are well over 200 distinct villages that need services and while some of the languages are similar, we could expect almost 200 distinct dialects to be spoken. Traditional methods of caring for one another, for protection and basic needs may be in place, but modern services
such as health, welfare, education, police, and emergency protocol may not be in place in the villages. A reliance on outside sources may have developed. Food and clothing may have to be flown in or brought in by sled. There are large coalitions for health care that cover many villages. Indigenous people in Alaska living near populated areas usually seek services in communities close by. While there are numerous communities along the coast the state’s interior is sparsely populated. Inland communities are not numerous and travel may be a barrier. Access to any kind of services may be restricted; however, the need for services is probably great. Working in a state as large as Alaska and having over 200 distinct cultural tribal groups creates an overwhelming workload for the BPAO program.

Tom, a young man who lived near North Slope in the Nome areas had an accident on his snowmobile. He had no access to alcohol, he was not drunk, but he did have access to gasoline and had sniffed the fumes. He was mentally and physically impaired when he smashed the snowmobile into the side of a building. Help was immediate but airlifting to the nearest medical facility was not; Tom sustained severe spinal cord damage, was airlifted to Fairbanks and treated there, then air lifted again to Anchorage. He survived the accident as a quadriplegic but was unable to live in his village due to his disability. Within a few years he had committed suicide.

Tom could have benefited greatly from having a BPAO help him plan for his future. If he had any hope of assistance, of benefits, of possible job training he might be with us today. Distances are great, there’s few activities during the long, dark days of winter, and Tom could not see beyond his disability to a productive life. Although he might not have been able to live in his village he could have contributed to his family and village in some way if someone had been available to help him plan. Today’s BPAOs are the ones who can make a difference in the Tom’s of the world.
This Step contains hints on behaviors that, in most indigenous cultures, are not offensive. Knowing the issues that are sensitive is a good thing; knowing how to handle the issues without being offensive is better. Few people would deliberately be offensive, but lack of knowledge creates tense moments when inappropriate behaviors are demonstrated.

Children in all cultures grow up learning that certain things they do are rewarded with beaming smiles of approval. They also learn that other behaviors bring unwanted consequences. All cultures have approved and disapproved behaviors; we know them as manners, protocol, etiquette, or customs. Learning a few basic manners and customs of cultures around us can smooth the waters of cultural differences and create an atmosphere of harmony and peace.

American Indians/Alaskan Natives, Native Hawaiians and Puerto Rican Natives, like other cultures, have behaviors that are identified as desirable or undesirable. There is no one set of behaviors that is applicable to all indigenous cultures because they differ among themselves.

However, there are a few basic guidelines that can help keep someone from making blatant social blunders in “Indian country.” The guidelines identified here are based on socially correct behaviors that are generally acceptable in indigenous cultures throughout the Americas. However, there may be certain behaviors that are socially correct for one particular tribe but not for another. It is strongly recommended that one learn as much as possible about the tribes in their area so as not to trespass on social graces or traditional spiritual protocol.

The following list of behaviors (manners), plus a short explanation of each item, is by no means all inclusive and is only the bare bones of proper protocol. But learning about and practicing them will help build a bridge of understanding between the non-indigenous and indigenous community members. Working with other cultures can be an exciting and rewarding experience. It can also be frustrating and defeating. The outcome frequently depends on the beginning, on the friendship and trust that is formed before any networking or cooperative program planning is ever begun, before program goals and objectives are developed. And in the very beginning is the initial contact of the non-indigenous agency or program staff person and tribal/band/community members. The following sections focus on ways to make that initial contact a good experience for both parties.
1. **Proper Protocol for Finding Contact Persons**

Long years of repression by the government has made the America’s First Nations suspicious and distrustful of outsiders. This is not only true for reservation dwellers but to an extent the urban dwellers also. If you wish to gain entrance and acceptance in a community of people from an indigenous culture, either urban or reservation, first try to acquaint yourself with the social structure of the group. For example, reservation dwellers have several social segments usually focused around education, health, churches, or sports. Urban groups have Indian Centers, much like community halls, where social events and community services might take place. With either group there will be specific individuals who organize and orchestrate events.

A word of wisdom here: don’t sit in your office and wait for indigenous people to come to you. The urban dwellers may be slightly more inclined to visit an agency but that is the exception instead of the rule. Too many barriers may confront a reservation-based family that would prevent them from leaving their community. True, you have something good to offer, you can help someone access disability benefits, help plan assistance and prepare for employment. But if they don’t know about such benefits and assistance they are not likely to go hunting for them. If they don’t know no one from an indigenous culture comes to you, how do you assist them?

Another word of wisdom: your first contact is not likely to be an indigenous person in need of your services. Why? If someone has the experience and training sufficient to be a contact person they can probably get their own services. So plan on contacting someone in a community that can assist you in establishing services for other people. This means you need to start with an indigenous person who is accustomed to interacting with agency/program people. This is your initial outreach activity and a vital link to future activities.

2. **Contact Persons and Outreach Planning**

Finding a contact person is the first step in planning Outreach. Make a phone call to a reservation tribal/band office or an urban Indian Center director and ask to speak with the person in charge of social services (this office seems to be the most appropriate for Social Security Benefits). Because there may be no parallel structures in tribal or urban settings, you may be connected with someone in education, health, or some other office. Introduce yourself to that person and tell them who you are and what you do. Explain how you are funded, the line of authority starting from top down to you. Explain what your job is.
Introductions

Don’t skimp on this first opportunity to share and don’t rush through it. Speak slowly and softly; remember tribal people have a tendency to be suspicious. Also there is a tribal custom of one person introducing him/herself to another by explaining where they are from (state and tribe), who their family is (clanship and family relations are very important), and who they are married to or where they work. Follow this informational pattern substituting who you are, where you work, what you try to do in your work, and why you are calling.

Bad manners? Bad manners would be to: say things like my great-great-grandmother was a real Indian Princess (unless you can name the Tribe’s King and Queen); or say I have some “Indian” in me (if you cannot name the tribe, the agency, your family lineage); or say I was an Indian in a past life (bad, very bad); or say I want to come out to see you (not at this stage of the game); or say my agency can do so-and-so for you (indigenous cultures get a lot of promises that are broken). Those are “say” items you need to avoid.

Good manners? Talk as friend-to-friend, not as service provider to client. Be human. Comment on the weather, you just dropped your pencil you need to move the phone so you won’t spill your coffee, etc., any human-to-human communication to relay to the person on the other end of the phone line that you are friendly. Tell them you live in this or that part of (what city), but that you were raised in (a town and state) along with (number of) brothers and sisters. You might add that you spent two years going through the (junior college/university) but then you went to work for (SSA) when your little (boy/girl) turned two years old.

You’ve said a whole lot; what you’ve really said to the indigenous person is that you trust him/her enough to share personal information about yourself. You’ve followed the tribal way of identifying oneself by tribe/clan/village by substituting appropriate settings for yourself. This kind of conversation will go a long way in helping bridge that chasm of distrust.

Talk about BPAO - Tell the listener what you have to offer his organization or tribe (brochures, information about your work, etc.) and ask if there is a need for that kind of information in (that particular) community. You may get a no, and if so, ask if you might send some information to be kept on file in case that service might be needed in the future. Probably, though, since services for indigenous people historically have been lacking there will be a need for your services. Note that there are many ambiguous words you need to use, e.g. might, try, possibly, probably, perhaps. The reason is that the spoken word is sacred; don’t break your word, don’t say you can do something unless you are 100% certain you can do so. If you say you will and then don’t, you lose the trust of the people you are trying to help. Using phrases like “we try very hard to” or “perhaps I might” will keep you out of a lot of trouble.
The Right Contact Person - Your next question would be to ask who would be the right person for you to talk to about possibly getting information into the community. When you are given a name and you contact the new person follow the same communication pattern used for the initial contact. Don’t push yourself and your program when you talk to the new person. Let him/her take the lead in saying what the next steps will be. With some indigenous groups you might be able to set up a meeting right away, but with others you may feel some reluctance. Offer to personally deliver information (no meeting, but a face-to-face, let-me-see-who-you-are encounter). This offer is seldom refused, and you will get to meet the people you have been talking with. Say you would like to discuss the possibilities of providing BPAO for the people who qualify for it on a day when the people might be available. Leave this first step open-ended unless the indigenous person takes the initiative to set up future meetings. If you cannot personally deliver brochures and information, be sure to mail it immediately.

You have a contact person now; be prepared to work. Be sure to have your paperwork and applications available because you may very quickly see the results of the “Moccasin Telegraph.” Once you have made contact with one person you can be sure that he/she knows someone with a disability, and that both of them know others who have disabilities and are interested in what you can do for them. Word gets around; that’s why it is called the Moccasin Telegraph. While words go fast, action usually doesn’t, so don’t get impatient and don’t give up. Remember, five hundred years of history and a lot of broken promises may have to be laid to rest before you gain the confidence of indigenous people enough to start an effective outreach program.

Meeting Protocols

Meeting People Behaviors: Hand Clasp - When you meet with tribal people you will carry with you your own meeting-people behaviors, which are appropriate for your culture. Indigenous people have their own meeting-people behaviors, which are appropriate for their culture. For example, some tribes/bands of Native people traditionally did not shake hands but instead clasped hands gently, no shake, slightly firm pressure but no more. Reason: a hard shake indicates a show of force that is bad manners. Some of the indigenous groups may have adopted the hard handshake policy due to the centuries of living with white brothers and sisters. If in doubt, use the soft handclasp; it is seldom offensive among indigenous people.

Meeting People Behaviors: Eye Contact - Extended eye contact is not only rude but may be considered harmful in some indigenous cultures. The spirit can be seen through the eyes, and staring may lead to someone gaining power over your spirit. Brief eye-contact with tribal people is important to remember, especially in the first few minutes of contact. Tribal/Native people are polite enough to not to stare, other people should show them the same courtesy. The lack of eye contact and keeping one’s head down are sadly misunderstood by the non-indigenous world. The interpretation has been that (a) indigenous
people have no self esteem, (b) are subservient, or (c) they are surely guilty of something. In reality keeping one’s head and eyes down is an act of respect and manners comparable to people standing when a judge enters the courtroom. So if you are sitting with an indigenous client, preparing for a good BPAO meeting, and the person doesn’t look up very often and avoids eye contact, you know you have done things right.

Meeting People Behaviors: Not Calling Attention To Yourself. This is important. When you finally get out on the reservation, into an indigenous rural community, or even to an urban Indian Center, try not to go there in a shiny car with a state seal on the door. Try to remember not to speak loudly or forcefully. Smile a lot. If there’s a difference of opinion, don’t argue or disagree. It is best to say things like “there’s other ways of looking at it,” or “perhaps we can come to a compromise.” Also, the world won’t fall apart if you don’t complete your day’s agenda or if it turns out to be different from what you planned. Remember, Native people will see you, know you are there, and the who, what, and why of your visit will get around. The Moccasin Telegraph in the community will get the message to people with disabilities and their families who really need your help. You will be judged by your behaviors; be known by your smile, soft-spoken manner, your willingness to listen, and as a person who is interested in helping others.

When you don’t get the responses from people you think would be in their best interest; there may be other reasons, other forces at work. Cultural concepts dictate that no person lives in a vacuum, that we are all related, and that everyone’s actions have an impact on everyone else. There are two interpersonal and family concepts you should be aware of: 1) Native loyalty is to the family, clan, and tribe, not agencies, institutions, or governments. 2) Unity of the group (family, clan, and tribe) is binding and dictates responses and responsibilities.

Understanding tribal loyalty and group unity means that one cannot expect commitments from tribal/indigenous people if those commitments are contrary to loyalties to the community, or if the commitments interfere with group responsibilities. Getting help from an agency or program may require a person with disabilities to spend time out of the home and community. That may not appear to be an insurmountable task to a service provider, but it may mean that the tribal/indigenous person must ask to be driven to an appointment, perhaps ask to borrow a car or borrow gas money, must adjust the whole family’s daily schedule.

An older child may need to miss school to baby sit younger children, or an aunt may need to be called over to watch grandmother. The family supplying the car must arrange to be without it for the day - the list could go on and on. If the demands of meeting the service providers are greater than what the family can accommodate, the indigenous person may not keep appointments, no matter how great the desire to do so.
The Standers - This is an old term that may not be in use today but may be translated to “Advocate.” The concepts are the same no matter what it is called. The Standers are needed because of a tradition that is still in use today in some areas: Your pride as an indigenous person does not let you ask for things for yourself if it means someone else might go without, or someone might be inconvenienced. So you would not assume the arrogance of asking for help. What, then, occurs in this situation? The BPAO staff person should find out who takes care of the tribal member with a disability. It might be a wife/husband, mother, brother, cousin, or grandparent. But whoever it is, that person is the right one to go to for accommodations for the person who needs assistance because they are traditional Standers, those who “stand up” for someone else. Your mother or cousin can Stand for you, and probably would be a great advocate for your benefits. So the BPAO worker lets the Stander know what you need, when you need it, and the Stander will get it for you. Both the BPAO person and the family member are Standers.

What actions can BPAO staff members take that is appropriate in a situation like the one in the above paragraph? Try very hard to take services to the community instead of asking someone to come to an agency. Ask the person with disabilities or a family member (the Stander) what would be easiest for him/her (the place to meet, the time, etc.). Always take something to share; an apple, coffee in your thermos, a donut (or a joke. Indigenous people enjoy humor!). Respect the wishes of and try to abide by the suggestions of the person or the family.

Proper Dress: What to Wear? A word about proper dress while on the rez (reservation) or in any indigenous community. Proper dress may also apply to urban Indian Centers, but may not be as important there. Casual and modest is the key; low heels and comfortable clothes for women, jeans for men; subdued colors for both, and modest accessories. Try to avoid suit/ties, suit/high heels. Dress to fit in the community and you will (fit in).

Other Things to Consider: Time is relative. Appointments may or may not start and end on the planned hour. Appointments for two o’clock may be kept at four o’clock. Indigenous people often live with latitude of clock time because clocks were not in their society until non-Natives brought them. Clock time may include earlier or later time; try to be flexible, learn to relax, try not to pace the floor, fidget, or display your impatience in similar ways. Lateness may be a factor of culture, a lack of transportation, no baby sitter, but is seldom an expression of defiance or lack of respect toward others. A relaxed, pleasant atmosphere is important for your respect in the community, especially when you consider how frequently indigenous people from other cultures are treated with the opposite behaviors.
Although some indigenous people may look as white as non-Natives and may live in urban areas, do not assume that their cultural values are of the dominant society nor that their proficiency in English is the same as non-Natives. It would be safe to assume that most indigenous people have some high-level language interference from multiple language exposure in the home. For example, many languages originating on the North American Continent do not have “g,” “r,” “th,” “p,” “f,” “v” or “w” sounds. Generations of families who learned to speak English will most likely either omit those sounds or substitute other sounds for those that are not in their spoken tribal language. A sort of concurrent translation may have to occur in the brain between the linguistics of regular English and “Indian” English, despite the acculturation of the individual, before there is complete understanding. Some comprehension may be lost in the process.

Indigenous languages are constructed differently than English. Even if a person does not speak his/her tribal language but has grown up in a family in which there was an overlay of phonemes (sounds) and lexicon (how words are strung together in a sentence) from a traditional language into English, understanding may be slowed. Speaking a bit slower and clearer helps, but not louder, which is often an unconscious gesture of people attempting to communicate with others who do not understand English. Native/tribal languages use many word pictures; traditionally all historical and tribal records were recorded verbally, called the oral tradition. The more word pictures, descriptive narratives, and illustrative stories you can create, the better the understanding of what you are saying.

Meeting the needs of people from diverse cultures is a sore spot for many agency personnel. In attempting to establish a program for indigenous people for a specific project goal, the non-Indian organizer quickly realizes that the needs of the Indian community members far exceed the program’s parameters. That is when program staff needs to ask the people they are working with who might be able to help out. From that question a list of programs, agencies and personnel for collaboration usually evolves. The list of names provides a framework for a community outreach network to be formed.
STEP THREE — CROSS DISCIPLINE ISSUES OF INDIGENOUS PEOPLE WITH DISABILITIES

This STEP becomes rather intimidating when one realizes that there is no word in any indigenous/tribal language to translate into “disability.” Using the intertribal linguistic form of communication called American Indian Hand Sign, the word “disability” would be translated into parallel components. For example the sign for eye (point to eyes) and see (looking at) plus the negation sign (no, not) would signify visual disability. Pointing to the legs and signing (good) (not) would mean the legs did not function properly. (Function) (good) (not) could be used with every part of the body to describe a disability.

As difficult as it may seem to translate English terms into tribal/indigenous terms, there’s something quite unique about it. Linguistically speaking, when a culture has a word or words for something in its language then the culture has the concept and a use for the word. African languages have words for gorilla and elephant because the concept of the animals and the words themselves were meaningful. We’ve heard that Alaskan Natives have many different words for different types of snow because it is important in their culture. If, however, an indigenous group tended to incorporate persons of lesser and more abilities into a homogenized group the concept of the disability would have no use, therefore it would not be in the language.

The concept of a lessened ability is culturally determined. Uncle Charlie was a great storehouse of knowledge on planting and growing food crops. The fact that his eyes were dimmed since childhood didn’t make him less knowledgeable. We made pathways for his feet to feel his way to the garden, the woodpile, and the big tree by the stream. We always put his things in the same place so he would know where to find them. He was less abled in vision, but more abled in gardening. Disabled? No, Charlie just needed some things we didn’t need so he could do what he did better than us – growing food crops.

Being able to contribute to your community is key when the concept of lesser ability is discussed. Jish Bread belonged to the spirit beings of his tribe. He had small eyes like they had, he made odd noises like them, and he walked funny like them. There’s another name for someone like Jish, it is called Down’s Syndrome. But Jish was special to the spirit beings and so he was taught special things, old knowledge, such as how to scrape deerskins and how to collect the really good firewood. He contributed to his parent’s home by scraping skins and providing firewood. He contributed to his community by doing the same things. That was about all he could do, but he did those two things well. He, like Charlie, was less abled in some ways but not in other ways. He was not disabled within his own culture; he was blessed.
Charlie and Jish and concepts of more and less ability: Do we tag them with the term “disabled” when in their community they are not? Does SSA still determine that they are eligible for SSDI even if they are special to the spirit beings? Thought provoking questions. Both Charlie and Jish could benefit from SSDI. Both could use benefits planning. The benefits are there for them in one world. Their culture is part of another world. But today they both live in both worlds, they need the benefits of both worlds.

How do we provide services for the Charlies and Jishes of indigenous cultures without being disrespectful to them or their cultures? Indigenous cultures usually have a societal method of providing food/clothes/etc. for persons who cannot get those things for themselves. The BPAO worker may be viewed as part of that societal method, may function as a Stander within the community. The Stander should focus on what Charlie and Jish can do, not what they cannot do. Use words like “he/she is so good at (something), maybe we can find a way to provide someone to train him/her to learn more.” That is job training. Jish is so good to other people he helps them out a lot. Maybe we can get him a payment each month so he can go on helping other people and still have money for food and clothes.” Disability benefits planning might take on other titles and names and be viewed as something a bit different in indigenous cultures. BPAO Standers could put up safeguards for Jish, perhaps the local Stander to make sure no harm is done to him.

The Causes and Other Causes of Disability - The physical cause of a disability might be drunk driving. The spiritual cause might be to help someone learn a lesson. A heart attack may be the result of high blood pressure. It might also be to keep someone flat on their back, looking up, so they can remember their spiritual values. And there's no such thing as an accident. Every action, every happening has a reason. We just need to find out what the reason is and learn from it. Charlie's vision dimmed when he was a child. It was not a punishment; he did not do it to himself. So why did his eyes grow dim? Some might say that he chose that to happen so he could learn something, or teach something to others. Whatever the indigenous concept of why something happened a BPAO staff member needs to honor the concept.

Living in Two Worlds Today – Indigenous cultures present daily challenges to persons with disabilities. The dominant culture also presents challenges. For decades persons with special health or education needs were removed from their families and communities by the BIA and placed in off-reservation residential facilities. Of necessity the removed persons learned to live in both worlds. Returning the people to their families meant learning to function without adaptive aids that were efficient in the dominant culture. Example - Eddie learned to use a chair with wheels when he was hospitalized in the city following a back injury. But when he went home to his reservation he quickly discovered that wheelchairs get stuck in sand. He found he was much more mobile at home using crutches, but when he went into the community or city he
would take his wheelchair. Job training for employment on the reservation required accommodations for Eddie's use of crutches. Job training for off-reservation employment accommodated both his wheelchair and his crutches. Let's transfer the two-world alternatives to another scene. What would happen if Eddie was a Native Hawaiian living on a small island? What if Eddie lived in a remote village near Nome? Or what if he lived in Puerto Rico? Could alternative accommodations be found to meet his needs both at home and in community/urban areas so he could enjoy the benefits of two worlds? Yes!

Eddie’s story is encouraging. It shows what can happen when people think “outside the black box” of options. Accommodations could be provided alternatively for persons with other disabilities also. Besides mobility the next greatest problem is filling out lots of forms and papers in order to receive benefits from any source. Instead of stones, firewood, crutches and cultural teaching others might need help with reading/writing, understanding paperwork, perhaps large print or braille or a TTT hookup. Eddie, Charlie and Jish are good stories told to me by friends when I asked for input on what had happened when they needed assistance. Other stories were not so good, however. Those stories need to be repeated here to make sure the situations do not occur again.

Some things that should not occur are:

a. A person being threatened with loss of their benefits. There should never be any threats; if there’s a problem the positive side should be taken. Instead of “if you do...” or “don’t do...” then (a consequence will occur), remake it to “we can work together to...” or “to not do...” to make sure (a consequence won’t occur). An urban indigenous person with disabilities was threatened with the loss of disability income. She traded her mobile home for another one. The one she sold brought in income she needed to report, someone told her. That income could jeopardize her benefits. In reality she had traded her larger mobile home for an older, smaller one because she could not afford the heating/cooling expenses of the larger one. She traded straight across no cash was involved. She was frightened and upset, spent anxious hours getting the paperwork together so she would not lose her benefits.

b. Confidentiality not being maintained. Have the person with a disability identify for you a family member or other person who sits in on an interview or for paperwork completion. If a BPAO worker assists someone with paperwork make sure it is in a private setting. Don’t assume that someone wants others to know everything that is going on, not even the Stander.
c. Inaccurate knowledge. A man in his mid-forty’s suffered cardiac damage from a heart attack. After cardiac surgery he was recovering well, up until the time he was ready for discharge. He became depressed; questioning revealed that he didn’t want to go home because it was cold, his house was cold, he couldn’t cut firewood for himself, and he couldn’t afford propane for the heater. He had some cardiac problems before and someone suggested he apply for disability income. Then he was told that “Indians” weren’t eligible for government programs because they live on reservations. The BPAO program will hopefully put such antiquated ideas in the trash can where they belong.

d. Lack of knowledge. A young woman born with a disability was actively discouraged from working because, she was told, her disability benefits would be stopped. When she first began to receive benefits she didn’t know if the payments were rightfully hers because the SSA programs were not adequately explained to her. Her island home was accessible only by boat; she had difficulty getting to SSA offices and healthcare facilities. She did not know what she was supposed to use the benefits for.

e. Provide accommodations - A young man requested that he be sent paperwork in an alternate format because he was visually impaired. His accommodation need was not met. So he went to a social security office and was assisted with the paperwork while sitting in a room crowded with other people. Lack of accommodation and lack of confidentiality were major issues for the young man.

f. Urban Indigenous People – We’ve stated before that most indigenous people, especially ones from reservation areas, migrate to urban areas for work, or they were part of the relocatee families of the 1950’s, or they were adopted/fostered in white homes in urban settings. A rule of thumb here is that the urban Native population will be assimilated to some degree. The latter two groups are most likely to have psychological disabilities related to their personal history. The psychological disabilities often become physical/mental/emotional/cognitive disabilities due to substance use. The BPAO staff needs to be aware of the psychological fragility of many urban dwellers that is related to losses in their lives or lives of their family. Accommodations for this population would include much positive feedback, personal friendliness, and assurances that everything than can be done to assist them will be done.
The above stories are true life events; there are others similar that point to misunderstandings between service providers and persons with disabilities. A few basic and respectful practices, such as confidentiality and accurate information, are needed. But accuracy is not be the only ingredient in information sharing, it also has to be understood by the person seeking assistance. What are some successful methods of successful sharing of information? Try things like these:

1. Say that SSA is like a big circle. (Draw a circle. Divide it up into sections), then explain what each section is for. Example, one section might be retirement benefits. Explain what it is, where it comes from, what someone can do to assure the continuation of benefits. If there are criteria for benefits (age, still working, other income) explain how each criteria impacts on that particular section. If medicare/medicaid are part of it explain that, too, plus survivors benefits and other important attachments to retirement income.

Do the same for SSDI, health benefits, work programs, and other programs. Draw pictures, use descriptive terms, don’t talk too fast and allow time for questions as you go along. If the person knows and understands all facets of disability programs there’s less chance of misunderstanding and mistakes. Explain the health insurance, work plan, family assistance, and other parts of the whole package. Leave it open-ended by saying that if there’s a question, please call you.

2. Look around your building and your offices. Are they fully accessible? Are there interpreters for the deaf on staff and are there TTY machines in place by telephones? Are government forms available in braille? Large print? Is staff available for persons who need phone interviews for filling out paperwork? What other accommodations might your office need to help persons with disabilities access the services they need?

3. Look at your brochures and other material; is all of it accessible for persons with disabilities? For persons from indigenous cultures whose first language might not be English? How do people learn of the materials? Where are they distributed? Are those places frequented by people of indigenous groups who have disabilities? If not, how might you make the materials more available for them?
Daniel was a fisherman that could not fish. He had been a fisherman from age 6 when he first went with his father and other tribal men to cast their nets for fish. His tribe lived off the Northwest Coast of the United States and the people’s staple food was seafood. Daniel went to school and also fished with his father, and when he graduated high school he found a job in a commercial fishery. But he began to have problems with his hands, wrists, elbows, shoulders, knees, ankles and feet. Diagnosis: early onset arthritis due to continual exposure to cold weather and working in cold water. Daniel was 36 when he could no longer fish. He didn’t have any health insurance from his former job, he had no income, he could not provide for his wife and two children. He wanted to be trained for another job but his first concern was for his family. He was told to apply for disability benefits; he was collecting medical information while he lost his house from non-payment. His family went to live with his wife’s parents. He was filling out papers for Social Security Disability when his vehicle was repossessed. Had he learned about SSDI sooner, and if he had had help in collecting papers and filling out forms he might not have lost his house and vehicle. When he did get SSDI he was able to receive training for another type work and was provided health care services. Then he was told that if he went to work he would lose his benefits and health care.

Betty couldn’t see. Betty began losing her vision after she was diagnosed with diabetes at an early age. She wanted to work, and she applied for SSDI. She was provided with job training and health care and soon found a position where she could work. She continued at her job until diabetes caused other health problems, then she had to quit work. From then on she would work when she could, then have to quit to deal with her physical health. Her attempts to access, then re-access benefits of any kind were a nightmare for her. She returned to her reservation, used the Indian Health Service for her medical needs, and found a tribal job that she could do. She also could take extended non-paid leave when she needed it, then could return to her position.

Dallas was a split feather – a tribal member who was adopted outside his family and tribe into a white home many miles from his reservation. As an adult Dallas was diagnosed with multiple psychological disabilities that significantly interfered with his employment. He applied for SSDI and had medical/psychiatric reports available. He had a quick mind; he was placed in training for
sales analysis. His psychological problems were not taken into consideration and he did not complete the training. He was retrained, this time for a clerk position in a large hotel. His inability to deal with people appropriately led to his firing shortly after he was hired.

John was part Seminole, part Creek. He stood over six feet tall, was muscular, and created an imposing figure everywhere he went. His job as a long-haul truck driver had caused severe back problems that eventually would need fusion surgery. First he went to the Vocational Rehabilitation offices to see if he might be retrained for another job. He was told that he would first have to cut his hair, then come back and talk to them. John’s hair hung in long braids down to his waist; his long hair was one of the few symbols he kept of his heritage. He told the VR person that he would not cut his hair, and then he walked out. He did not go back. He tried to work at odd jobs but the pain kept him at home much of the time. He was informed that he might be eligible for disability benefits. He did not apply. When approached a second time he commented that he would not apply because he would not cut his hair.

Andrew was old enough to go to school. There was but one place for deaf children, and that was in a residential school far away in a city. That’s where Andrew was sent. He was educated and taught ASL. But when he went to his island home he could not communicate with family members because they did not know ASL. His grandfather knew an old, indigenous type of hand signing and he taught it to Andrew. Andrew grew up, he wanted to go to work, but he needed assistance to get started in a career. He went to apply for SSDI and job training but there was no interpreter for him. He wrote his communication on paper, but getting assistance was laborious and long and Andrew became frustrated.

Sara was a full blood but had never set foot on Indian land. Her parents had been uprooted from their home on the reservation and relocated in Chicago. Sara grew up knowing she was different, that the family had a home and relatives elsewhere, but the job promised to her father was low-paying and couldn’t provide trips back “home.” She felt like she never really fit into Chicago, dropped out of high school, was homeless for a while, used lots of alcohol and other drugs, then became disabled in a car accident. She was in a shelter for women when she was taken to apply for disability benefits. She wanted to work but didn’t know any trade or craft. She needed emotional support but had no testing to determine her psychological status.

Rosemary was born with bilateral hip dysplasia. She used a wheelchair when she was a child, gradually became able to use crutches. She lived on the reservation in a remote area with her parents. She was the youngest child, the older siblings had married and left home. Rosemary helped her aging parents around the home, learned to sew, to make baskets and pottery. Then her father retired and shortly after that he died. Rosemary and her mother had their garden
and chickens, they had food, they both did sewing and tribal craft work for income. Family members assisted when there was need, but Rosemary continued her existence with her mother for many years. They had the barest of necessities, no luxuries, no modern conveniences. No one spoke to them about disability benefits because no one in the remote area knew about them.

Kee was a reservation child who had contacted Coyote poison when he was three years old. He survived but was cerebral palsied, blind, had a seizure disorder, and used a wheelchair. When Kee was seven his family moved to a city so he could take advantage of physical therapy. When he was fifteen, however, he was still in a child’s chair and needed a larger one to accommodate his teenage body and allow him to access occupational therapy and begin job training skills. The state in which he lived refused to provide the chair because he was Indian. The family was told to apply to the IHS for the wheelchair. The IHS said they don’t provide wheelchairs, to go to the BIA. The BIA said the family no longer lived on tribal lands so they could not assist Kee to get the larger wheelchair. They said to contact their tribe for the chair. The tribe said they would provide it if the family moved back on their reservation, which was in another state. The tribe said go to the state of their residence and ask, which was where they had started. Payor of last resort, all of them. The family threatened to go to the local TV station with the story and suddenly the state said the chair would be provided. But it took another eighteen months for the wheelchair to get to Kee, and it was delivered on a Wednesday. He had died on Tuesday.

Do you know stories like these? Would you be willing to share them with us?

A note about situations like those in the stories: There are circumstances where we need to understand how the social-political-cultural-community interworkings are carried out in the lives of humans. Although different titles and programs exist within agencies, and agencies have different titles within departments, the functions of the programs are essentially the same. One of the major issues in the “offices” of people who work toward the common good of people is the topic of reaching out to people – it is usually obvious by its nonexistence.

Departments of Human Services, by whatever name they are called, commonly do not do personal outreach into the communities. Contact with community members is usually limited to letters or phone calls or an occasional personal interview. The philosophical concept behind this practice is that if the need is great enough, the family will be motivated to seek assistance. The concept contains flawed thinking, however, because in reality it doesn’t work that way. The families most in need are almost always the families that need assistance in order to access services.
One of the critical issues of not accessing assistance is that a family may not have adequate English language skills and therefore the family member with a disability may cringe at the thought of an interview and page after page of forms to fill out. They may have been so intimidated by the system from previous experiences that they fear going to yet another agency. Family responsibilities may be a pressing issue. Money is always a problem in poor, minority communities. Food, clothing, and shelter for the family must be considered before a personal need for service. Families may not know the names of agencies that might assist them, may not know how to find help through a telephone directory, and may not have adequate language skills in English to make their needs known even if they were to talk with someone.

In the Indian community, there are two behaviors that bear heavily on the act of accessing services: self advocacy and pride. It would be rare to find an American Indian advocating for him/her, as this behavior is one of shame in most Indian cultures. Within the family, clan, and tribe, each member has a role and responsibilities. Sharing equally has kept the tribal communities alive through centuries of conflict, famine, and wars. No person is more important than the other, and to demand things for oneself is an appalling behavior. To maintain personal dignity and respect in the Indian community, an individual does not ask for anything nor demand anything from others. In doing so the asking person may cause someone else to go without, to be hungry or cold. The asking person may get what is critically needed, but at the cost of his personal integrity and pride. For most Indian people, that is far too high a price to pay. For this reason self advocacy is rarely seen in Indian communities.

Traditionally, another member of the extended family group would advocate for the person in need. For example, if a man was injured and could not provide for his family, his brother or uncle would send the word through Moccasin Telegraph that the man needed help. Gifts would arrive at the door, food would be provided, equipment repaired, and in general the extended family would take care of the man without him having to sacrifice his pride by asking. Loss of personal pride or “losing face” as it is often termed, is a terrible fate sometimes considered worse than death.

While the fierceness of personal pride has continued through the centuries, the fundamental social structure of extended family societies has almost been destroyed through decades of genocide attempts by the U.S. government. Removal of indigenous peoples from their homelands, the events of boarding schools, relocation of Indian families into cities, removal of Indian children from families and tribes for transcultural placements, and termination of tribal status for some indigenous nations has shattered tribal societies and left them in chaos. While the pride is still there and the advocacy system may have survived, the ability of the extended family, clan or tribe to take care of incapacitated individuals is extremely tenuous.
Social welfare or human service agencies are taking over the role of the extended family, yet programs from these agencies do not incorporate the assistance of the family advocacy system. Instead, family members and friends are frequently asked to wait outside an intake room while only the person viewed as “needing a service” is interviewed. After the interview, agency workers may not share the concerns of the individual person with family members and friends of the individual because of the fear of violating the Privacy Act. The extended family advocate system is barred from participating in the program where it would be most effective, a fact that stagnates community tradition and can be frustrating and costly for the agency. It would be appropriate to ask the person interviewed who he/she depends on for help, and then ask if it would be all right to include that person in the program plan. For example, a disabled person may depend on a brother or sister, who would then be included in the disabled person’s rehabilitation plan. A family may have a diabetic mother, alcoholic father, a family history of domestic violence and abuse, and their home just burned down. Certainly they will need someone to assist with program planning to meet their multiple needs and can usually identify the person most likely to assume that role. It is not only appropriate to identify the tribal helper but often a necessity if appropriate tribal protocol is to be followed.

Another aspect of life in indigenous cultures is that of the availability of employment. When the communities are small and isolated, when roads are rough, waterways between islands rough, when seasonal climate conditions prohibit year-round access to employers, the work aspect of a disability is a tremendous hurdle. Annie, for example, could have a job, but it was twenty-one miles from her home. She had no vehicle, she would have to depend on relatives or friends for a ride to and from work, and she would have to pay for the gas to get her to and from work. But there was another issue – if she went to work her benefits would stop. From Annie’s eyes she could see that no matter how small her benefits were, at least that much money was hers to support herself and to assist her aging parents in providing for her.

Annie was faced with another very real choice: her brother’s welfare. Her parents were also housing her younger brother until he could find a place of his own. The job Annie could get was also available to her brother. Either of them could take it. But Annie’s benefits were not available to her brother, only she could get them. Was it wise for Annie, looking at the serious need for food, clothing and transportation, to take the job and deny her brother the wages he would get? If she didn’t take the job she would still get benefits, and that could be added to the wages her brother would earn. Of course Annie let her brother take the job, but the Ticket to Work people could not understand her reason for declining employment.

There are reasons and other reasons why people do or don’t do things. Be wise enough to find out what the other reasons are before making any judgments.
STEP FIVE — WRITING YOUR OWN STEPS

These are your papers for you to write your own steps. Make additions, notes, and reminders; use them for yourself and your personal and professional growth.

The questions at the bottom of each page are for fun – find the answers and then stump your friends by asking them the question.

Which of these does not fit into the grouping? Why? (Ask your contact person.)

Wolf  Bear  Rabbit  Eagle  Buffalo
These are your papers for you to write your own steps. Make additions, notes, and reminders; use them for yourself and your personal and professional growth.

The questions at the bottom of each page are for fun – find the answers and then stump your friends by asking them the question.

What is the name of the political prisoner who is still incarcerated because he fought against the BIA in 1974?
These are your papers for you to write your own steps. Make additions, notes, and reminders; use them for yourself and your personal and professional growth.

The question at the bottom of the page is for fun – find the answers and then stump your friends by asking them the question.

What is the title given to traditional spiritual leaders in Hawaii?
This is your paper to write your own steps. Make additions, notes, and reminders; use them for yourself and your personal and professional growth.

The question at the bottom of the page is for fun – find the answers and then stump your friends by asking them the question.

What is the definition of “bore tide?”
This is your paper to write your own steps. Make additions, notes, and reminders; use them for yourself and your personal and professional growth.

The question at the bottom of the page is for fun – find the answers and then stump your friends by asking them the question.

Do you know the colors used by tribes in your area to represent the four directions?
This is your paper to write your own steps. Make additions, notes, and reminders; use them for yourself and your personal and professional growth.

The question at the bottom of the page is for fun – find the answers and then stump your friends by asking them the question.

What U.S. Senator is a tribal member? Of what tribe?