

# How historical trauma informs a community-based collaboration to prevent alcohol-exposed pregnancies in an urban American Indian/ Alaskan Native (AI/AN) community: Practice-based evidence for developing culturally-driven processes

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## BACKGROUND

Historically and today, public health planning and actions in AI/AN communities are often implemented without regard to the effect of historical trauma in these communities.

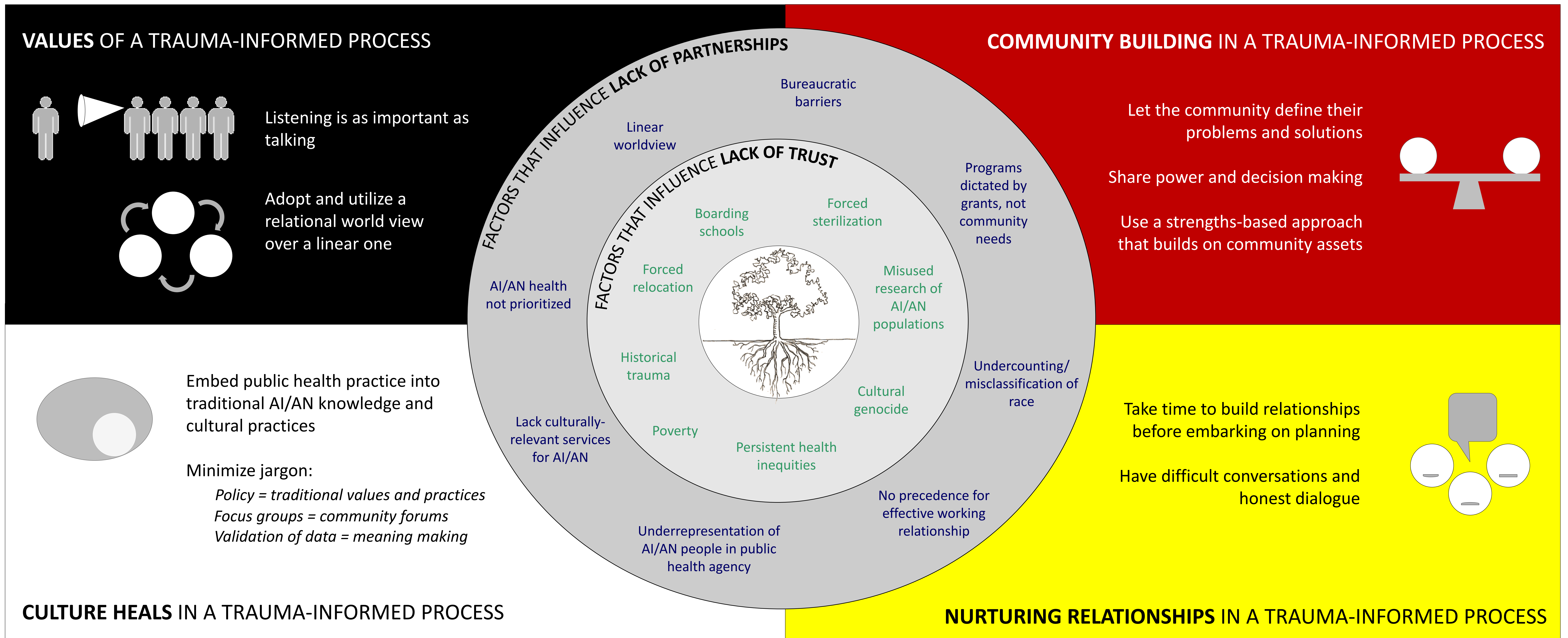
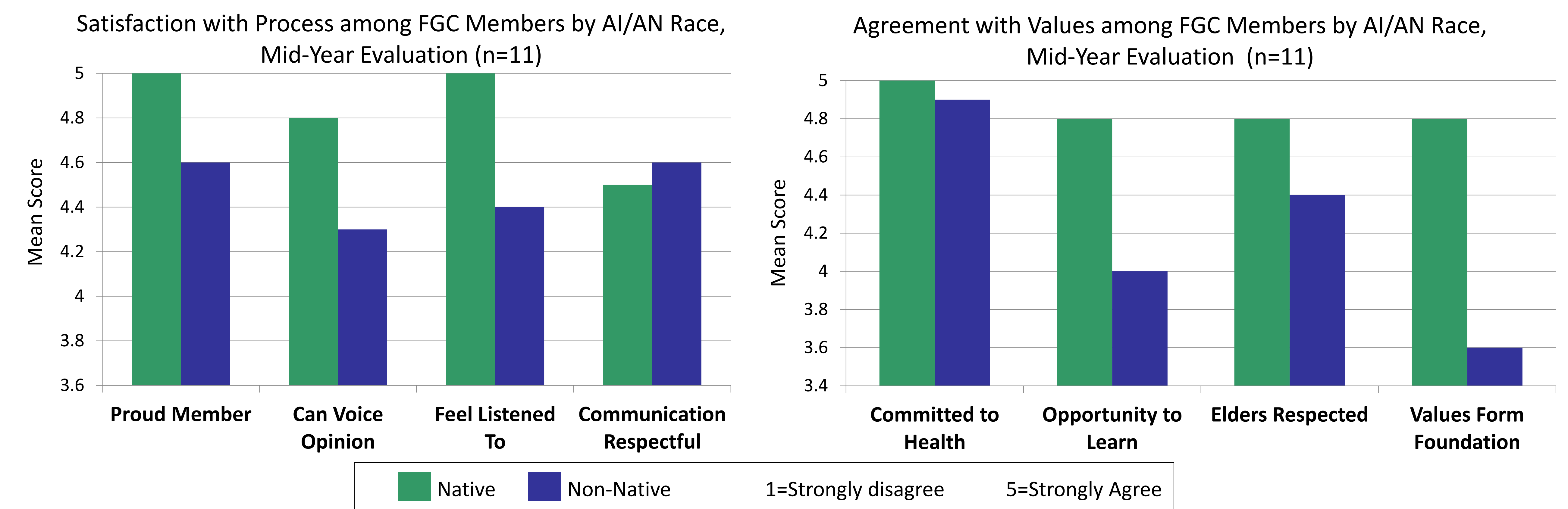
**Historical and intergenerational trauma** are emotional and psychological injuries that accumulate over time and across generations as a result of cultural genocides inflicted on AI/AN peoples. Historical trauma hinders effective partnerships between AI/AN communities and public health agencies, as well as decreases utilization of public health services and health inequities among AI/AN peoples.

## OUR STORY: THE FUTURE GENERATIONS COLLABORATIVE (FGC)

In 2011 the Multnomah County Health Department convened AI/AN community members, community-based organizations and public health agencies to form a collaborative to promote healthy pregnancies in AI/AN women in Multnomah County, Oregon. To successfully build the FGC, we adopted a trauma-informed community-based participatory process that acknowledges the role of government in contributing to the health and social inequities experienced by AI/AN peoples. Our adopted values and actions taken to build trust and heal relationships are summarized in the figure below.

## PRACTICE-BASED EVIDENCE

A mid-year evaluation asked FGC members to rate satisfaction with collaborative process. Data shown below indicate AI/AN members are highly satisfied with process. Additional evidence includes sustained participation of AI/AN-serving organizations and AI/AN community members for >1 year and increased funding (from \$0 to \$45K in Y1).



## LESSONS LEARNED

- Public health agencies need to acknowledge historical and intergenerational trauma in order to build effective partnerships.
- Repairing relationships is an iterative process and should be prioritized: take more time than you think you need to rebuild trust.
- Public health agencies need to be flexible and adaptive when working with community groups.

<sup>†</sup> FGC members include:

Toni Matt and Rose Hill of the Native American Rehabilitation Association; Tawna Sanchez, Donita Sue Fry, and Matthew Morton of the Native American Youth Family Center; Roberta Eagle Horse of Planned Parenthood of Columbia Willamette; Sarah Tran, Charmaine Kinney, Ashley Borin, Nancy Martin, and James A. Gaudino of Multnomah County; Lesa Dixon-Gray of Oregon Health Authority; Dean Azule of the Native American Student Services at Portland State University; Harmony Paul; Hana Bernadette-Williams; Lori Warren-King; and Suzie Kuerschner.