Voices of First Nations People: Human Services Considerations

Human Services Considerations

Edited by Hilary N. Weaver, DSW



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Voices of First Nations People: Human Services Considerations has been co-published simultaneously as Journal of Human Behavior in the Social Environment, Volume 2, Numbers 1/2 1999.

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The Haworth Press, Inc. New York • London

Voices of First Nations People: Human Services Considerations has been co-published simultaneously as Journal of Human Behavior in the Social Environment[™], Volume 2, Numbers 1/2 1999.

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Cover design by Thomas J. Mayshock Jr.

Library of Congress Cataloging-in-Publication Data

Voices of first nations people : human services considerations / Hilary N. Weaver, editor.

p. cm.

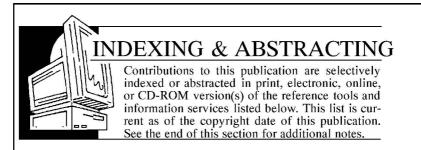
"Co-published simultaneously as Journal of human behavior in the social environment, volume 2, no. 1/2 1999."

Includes bibliographical references and index.

ISBN 0-7890-0535-2 (alk. paper)

Indians of North America–Services for. 2. Indians of North America–Social conditions.
Indians of North America–Health and hygiene. 4. Social work with Indians–North America.
Weaver, Hilary N. II. Journal of human behavior in the social environment.
E98.S46V65 1998

362.84'97-dc21



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- caredata CD: the social & community care database
- Child Development Abstracts & Bibliography
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ABOUT THE EDITOR

Hilary N. Weaver, DSW, is Assistant Professor in the School of Social Work at the State University of New York at Buffalo. Her academic interests focus around social work with Native American Indians. Dr. Weaver is President of the American Indian Social Work Educators' Association and she frequently gives presentations and workshops on indigenous issues and incorporating cultural factors into the helping process. Currently, she is continuing research on comparative indigenous issues, which she started as a Visiting Scholar at the University of Waikato in New Zealand.



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Introduction

Voices of First Nations People: Human Services Considerations is an edition of the Journal of Human Behavior in the Social Environment which brings issues of contemporary American Indian people to the attention of helping professionals who provide direct services, administer programs, develop policy, and conduct research. The articles included here explore a variety of social issues which affect American Indian people. The authors of these articles are at the forefront of social work and social work research with Native people. They seek to expand the knowledge base of the helping professions by providing contemporary, empirically based information.

The articles in this volume use a variety of terms to refer to indigenous people. No clear consensus exists on which terminology is preferable. Terms such as Native American, American Indian, and indigenous are commonly used, as are terms for specific tribes or nations. The term First Nations is a term which strongly connotes a sense of sovereignty and strength and therefore has been chosen for use in the title of this volume. The majority of authors in this volume are Native people themselves. The others have worked extensively with and are respected in Native communities. The editor firmly believes that it is a person's and an author's right to define his or her self, so no standardization of terms has been imposed in the editing process.

Two of the articles explore the often talked about but still controversial issue of American Indian drinking. Moran uses quantitative methods to explore preventive efforts with urban youth. Lowery

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[[]Haworth co-indexing entry note]: "Introduction." Weaver, Hilary N. Co-published simultaneously in *Journal of Human Behavior in the Social Environment* (The Haworth Press, Inc.) Vol. 2, No. 1/2, 1999, pp. 1-3; and: *Voices of First Nations People: Human Services Considerations* (ed: Hilary N. Weaver) The Haworth Press, Inc., 1999, pp. 1-3. Single or multiple copies of this article are available for a fee from The Haworth Document Delivery Service [1-800-342-9678, 9:00 a.m. - 5:00 p.m. (EST). E-mail address: getinfo@haworthpressinc.com].

uses qualitative methodology to examine the recovery process for women. While much has been written about substance abuse in American Indian populations, many earlier studies were poorly conducted, obscured variance across tribal groups, and often omitted women from studies all together. Both authors were conscious of intertribal differences and sampled in such a way as to minimize this variance thereby strengthening their studies. These two projects offer perspectives on prevention and recovery, two areas which are of substantial importance in and of themselves and which are needed to help round out our understanding of drinking behavior.

Two articles present research on cutting edge topics that are only beginning to receive attention: homelessness and youth gambling. Westerfelt and Yellow Bird provide an analysis of the indigenous homeless population. Their study examines differences between the indigenous and non-indigenous homeless population in one urban area. In the past ten years gambling has become a significant phenomenon on many reservations. Peacock, Day, and Peacock have made an important contribution in looking at the impact of this phenomenon on American Indian youth. This study is likely to help pave the way for others as we begin to examine the implications of current actions for future generations.

In the 1970s Indian communities and human service workers began to take steps to address the monumental issue of Indian children who were being alienated from their families through foster care and adoption into non-Indian families. This type of alienation came after almost a century of federal Indian policy which placed Indian children in boarding schools far from their homes. While much has been written about the number of Indian children raised away from their families, the implications of this phenomenon have yet to be fully explored. Robin, Rasmussen, and Gonzalez-Santin have taken an important step in examining the psychological implications of this separation for members of one particular First Nation.

Three articles examine some aspect of cultural identity. The contribution by Weaver and Brave Heart begins with an examination of theories related to cultural identity. Next the authors provide empirical explorations of two factors which may influence the cultural identity of First Nations people: exposure to other cultures and historical trauma. Two other articles explore the challenges of measuring the cultural identity of First Nations people. While the problems inherent in measuring cultural identity have been examined in relation to Latino populations, less has been written about First Nations people. It is important that researchers critically examine study instruments to determine their appropriateness for use with Indian people. Long and Nelson studied one measure that has been developed for use with First Nations people to determine its validity, reliability, and utility. Walters explores cultural identity issues for urban indigenous people while differentiating between the often confused concepts of acculturation and cultural identity.

Two articles look at how cultural strengths and traditions can be used to address social problems. Weaver explores health issues of indigenous youth. In particular, her work suggests that cultural strengths and culturally based interventions may be helpful in preventing health problems with this population. Brave Heart examines how historical trauma has had a detrimental effect on the parenting skills of Lakota parents. Her article discusses how cultural strengths can be called upon to rebuild these important skills.

The articles in this volume explore a variety of contemporary issues in Indian communities. This information is an important addition to the knowledge base for social work. Quality scholarship must continue to take place on Indian issues. In order for social workers and other professionals to be truly helpful in Indian communities they must first listen to the *Voices of First Nations People*. Some of these voices are contained in this volume. As the editor of this special edition, I would like to express my appreciation for the opportunity to work with the authors who have shared their important contributions to the field.

Hilary N. Weaver



Adolescent Gambling on a Great Lakes Indian Reservation

Robert B. Peacock Priscilla A. Day Thomas D. Peacock

SUMMARY. The gambling habits of adolescents and the relationship between gambling, other high-risk behaviors and self-esteem were investigated. One hundred eighty-five American Indian and non-Indian students in grades 7-12 in two schools (one tribal and one public) were surveyed on a Great Lakes Indian Reservation. The seventy-eight item survey replicated a previous study on another reservation. The instrument reported data by age, gender, school, ethnicity, socio-economic status, incidence of high-risk behaviors, self-esteem indicators, and incidence(s) of individual and family gambling. The results indicated statistically significant relationships between gambling habits, parental gambling, other high-risk behaviors, and self-esteem. These findings have implications for American Indian youth and their families, for tribal leaders making policy decisions, and for social workers who provide services to these communities. [Article copies available for a fee from The Haworth Document Delivery Service: 1-800-342-9678. E-mail address: getinfo@haworthpressinc.com]

Effective social work depends on knowledge about how to work with diverse populations. This knowledge must be based on accurate

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[Haworth co-indexing entry note]: "Adolescent Gambling on a Great Lakes Indian Reservation." Peacock, Robert B., Priscilla A. Day, and Thomas D. Peacock. Co-published simultaneously in *Journal of Human Behavior in the Social Environment* (The Haworth Press, Inc.) Vol. 2, No. 1/2, 1999, pp. 5-17; and: *Voices of First Nations People: Human Services Considerations* (ed: Hilary N. Weaver) The Haworth Press, Inc., 1999, pp. 5-17. Single or multiple copies of this article are available for a fee from The Haworth Document Delivery Service [1-800-342-9678, 9:00 a.m. - 5:00 p.m. (EST). E-mail address: getinfo@haworthpressinc.com].

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information regarding the issues these diverse groups are confronted with from the perspective of members of these populations. This study provides a glimpse into the issue of adolescent gambling on one Indian reservation from the perspective of Indian and non-Indian secondary students. The findings indicate that Indian adolescents possess a significantly greater number of both problematic and pathological gambling behaviors when compared to their non-Indian peers in the same community. For purposes of this study, problematic gambling behavior is when a person suffers some loss of control over his or her gambling behavior leading to negative consequences (Lesieur & Blume, 1987). Pathological gambling is a "chronic and progressive psychological disorder characterized by emotional dependence, loss of control and accompanying negative consequences in a gambler's school, social or family life" (DSM-III, 1987).

This study utilized a survey developed and used by Zitzow (1992) on another reservation. It uses the same survey instruments and the same definition of terms. The reservation studied has operated two Indian-owned gambling establishments within its borders since 1991. Although gambling was historically a part of many American Indian tribes' ways of life, it was incorporated into a complex society with balance and sanctions on gaming behavior. In these traditional Indian communities, social norms did not allow individuals to win enough goods or services to the detriment of others, or lose enough to be a detriment to their families or the community. Some forms of this traditional gambling (particularly moccasin games) are still played in some communities today. The advent of large-scale American Indian gaming institutions has brought with it economic, social, and cultural changes with the infusion of many jobs and income, two ingredients heretofore missing in communities long suffering from high unemployment and poverty. Little is known about the impact on the family, such as the differences of adolescent gambling behavior between Indians and non-Indians.

LITERATURE REVIEW

In 1980, the American Psychiatric Association classified compulsive gambling as a mental illness (O'Brien, 1993). Since then, the amount of money legally wagered in the United States has grown by 3000% (De Pledge, 1996). Today, many different kinds of gambling are legal in 48 out of 50 states, and over 80% of the adult population participates in some form of gambling (Zitzow, 1992).

Studies conducted in the United States and Canada indicate that between 9.9% and 14.2% of the adolescent population are experiencing some symptoms of problem gambling and between 4.4% and 7.4% meet the criteria for pathological gambling (Shaffer & Hall, 1994). Increases in gambling activity have been accompanied by a corresponding raise in problematic and pathological gambling behavior (Jacobs, 1989). Today, gambling is the fastest growing addiction among teens (Buffett, 1996).

A survey of adolescent gambling in Minnesota found that almost 90% of the adolescents surveyed had gambled at least once in their lifetime (Winters, Stinchfield & Fulkerson, 1990). This same study indicated that 6.3% of the adolescents met the criteria for problem gamblers, and 19.9% were identified as "at risk" gamblers. Results also indicated that the problem gamblers tended to be male, urban and had first experienced gambling before or during the sixth grade (Winters et al., 1990).

Other studies indicated that problem and pathological gamblers generally come from dysfunctional families and have experienced, or believe that they have experienced, abuse, neglect or emotional abandonment (Broderick, 1996). Problem gamblers experience many other problems, with alcohol playing a major contributing role (Jacobs, 1991). Jacobs (1991) noted the similarities between alcohol and gambling addiction and expressed concern that a predisposition for one may also indicate a predisposition for the other.

A recent study found that gambling behavior begins at about the same time as other acting out behavior in adolescents, such as drug, alcohol and tobacco use (Stinchfield, Cassuto, Winters & Latimer, 1996). Stinchfield et al. (1996) also noted a number of deficiencies in many of the earlier adolescent studies such as small sample size, limited response rate and lack of longitudinal studies or follow-up surveys. They suggest that future researchers should administer a questionnaire to the entire population, "or most of it" in a controlled setting, and that the questionnaire should be administered on a regularly scheduled time interval. Another shortcoming in many studies is that certain populations are being overlooked, especially communities of color and American Indians. These populations, because of the high rates of unemployment, delinquency, crime, and drug and alcohol use would seem to be the most vulnerable to problem gambling behaviors.

A study by Zitzow (1996) addressed both of these limitations. He reviewed and compared the gambling behaviors between American Indian and non-Indian adolescents living either on or near an Indian reservation. Zitzow found a higher incidence for both problematic and pathological gambling among the American Indian youth in comparison with their non-Indian peers (1996). The results from a questionnaire administered to all secondary students agreed with earlier studies in identifying the length of time one is exposed to gambling, parents' gambling behavior, lower socioeconomic status, magical thinking, belief in luck or fate, and perceived prejudice (i.e., the lack of control over personal destiny) as factors associated with potential problem gambling behavior.

Zitzow (1996) reported that in a survey done in Minnesota of adult gambling behavior, about 1% were found to be pathological gamblers; 6% were found to be potential pathological gamblers; 7% were found to be problem gamblers; 37% were considered non-bettors; and the rest were considered non-problematic gamblers. In the same study, Zitzow reports that teenagers report gambling at least once in their lifetime (90%).

A study by Winters, Stinchfield and Fulkerson (1990) found that 6.3% of adolescents were identified as problem gamblers and 72% reported regular drug use, 83% acknowledged engaging in illegal activities while 75% stated that at least one of their parents gambled. In the same study, 19.9% were identified as at-risk gamblers, while 73.9% were identified as having no problems with gambling. This study did not address gambling behavior in rural Minnesota or with American Indian people.

A recent Nechi Institute study of a Canadian Indian Reserve found that 60% of the problem gamblers are former alcohol and drug users (Hodgson, 1994). Zitzow (1996) reports that studies dating back to 1961 have consistently indicated a high level of correlation between alcoholism and the potential for gambling addiction. When depression, poverty, unemployment, the high rate of school drop outs, increasing drug use, the high suicide rate, and the myriad other problems that plague isolated Indian reservations are added to the equation, one would expect to find a higher rate of problem and pathological gambling behaviors among the adolescent Indian population than among non-Indian adolescents.

METHODOLOGY

The hypothesis for this study was that American Indian adolescents (ages 14-19) within the study area possess a significantly greater number of respondents qualifying for both problematic and pathological gambling status when compared to a control group of non-Indian peers within the same community.

For the purpose of this study, the following conceptual and operational definitions were used:

- 1. *Non-gamblers:* Persons who never gamble for money, goods or services.
- 2. *Non-problematic gamblers:* Someone who gambles but does not appear to possess a persistent problem, dependency, or compulsion with gambling (Zitzow, 1992).
- 3. *Problem gambler:* A person who suffers some loss of control over his/her gambling behavior leading to negative consequences (Lesieur & Blume, 1987).
- 4. *Pathological/Compulsive gambler:* A chronic and progressive psychological disorder characterized by emotional dependence, loss of control and accompanying negative consequences in a gambler's school, social or family life (DSM III, 1987).

The student survey instrument is a 78-item anonymous, self-administered, paper-and-pencil questionnaire developed by Dr. Darryl Zitzow (1992). Content domain includes items or questions from the South Oaks Gambling Screen (SOGS); the Diagnostic and Statistical Manual (DSM-III-R); and (DSM-IV) sections on pathological gambling; a section on feelings; a section on types of gambling activities participated in; and descriptive information. Fifteen of the 20 questions from Gamblers Anonymous were also included.

The reservation participating in this study covers over 2 counties with a resident Indian population of 5,800 out of a total population

of approximately 56,000 people. Within the reservation there are three separate and distinct villages with primarily American Indian residents. Two major population centers with populations over 10,000 are located on the Northwest and Southeast reservation boundaries outside the reservation. The reservation has one major interstate highway bisecting it and a nearby major airport which can handle commercial jet traffic. Both the small cities and the reservation are considered to be rural in nature and somewhat isolated from the rest of the state. Most of the Indian reservation is owned by the United States and is controlled by the U.S. Department of Forestry. The remaining lands are held in trust by the United States for the tribe or are privately owned.

Permission to survey students was obtained from two secondary schools, one tribal and one public, which enroll students from four separate communities, including the three villages previously mentioned. The tribal school is an all-Indian secondary school. Students enrolled in this school must be enrolled in a federally recognized Indian tribe prior to admission into the school. Students in this school were administered the questionnaire on a Friday. On the following Friday, the students in the public secondary school were given the survey. A stipend of 3 dollars was given upon completion of the questionnaire. One hundred eighty-five students were surveyed, 96 from the public school and 89 from the tribal school. Some of the public school students chose not to participate in the survey. All completed questionnaires are included in this study. All responses were confidential.

RESULTS

A slight majority of respondents (53%) were female. The respondents ranged in age from 14 to 19. More adolescent participants were enrolled in public school (96) than were enrolled in the tribal school (89). Ethnicity was reported as follows: American Indian 130; non-Indian 54; non-response 1.

The findings in Table 1 are consistent with early findings by Zitzow (1996) and Stinchfield (1996). Winters, Stinchfield, and Fulkerson (1990) found an even higher level (90%) of gambling by adolescents, although this was in the general population.