



## Wounded Spirits, Ailing Hearts 4 Traditional Medicine Written Video Transcript

There is another source of care that is of enormous benefit to these veterans. As you're aware, American Indian and Alaskan Native communities have a rich history of traditional forms of healing. Prayer and ceremony tap the strength in Indian families, community and Creator. The Native American veteran often draws on these [00:00.20.00] to come to terms with the root causes of his or her illness. More than 40% of veterans in the American Indian Vietnam Veterans Project told us they frequently visit traditional healers for help with physical health problems. They visited traditional healers slightly less frequently for alcohol, drug and mental health [00:00.40.00] problems. For a long time mainstream American medicine has assumed that conventional medical care and traditional healing compete with each other and use of one discourages use of the other. We've learned that this is not true. Native veterans seek care based on local availability [00:01.00.00] and on preference among those sources of care. Veterans are reluctant to seek help from mental health specialists. This is particularly true in Indian and Native communities. Great strides have been made in reducing the stigma of getting help for alcoholism but sadly the same cannot be said for mental illness. [00:01.20.00]

No, (Spiro), considerable stigma still surrounds the treatment of mental disorders, especially PTSD mostly because of the bizarre behavior associated with flashbacks. A lot of veterans say, "I don't want people to think I'm crazy." And in their minds going to a counselor, psychologist or psychiatrist just confirms [00:01.40.00] that they're crazy. Ironically, the tight knit nature of Native communities undermines the veteran's belief that their problems will be held in confidence by the neighbors, friends, even relatives who staff local mental health programs. Because of the stigma, they feel safer in medical settings and believe [00:02.00.00] that they are less likely to be shamed for having PTSD. Note, for example, how many more Native veterans in your study, (Spiro), sought care for physically ailments than alcohol, drug or mental health disorders despite the high frequency of both. American Indian and Alaskan Native veterans also are less likely [00:02.20.00] to distinguish between somatic or psychic aspects of illness. In fact, this view is common among many non-Western cultures.

Peter, perhaps a brief story told to me by a (lorbrule) traditional healer will serve here. In contrasting Western and Native concepts of human nature [00:02.40.00] this healer held up one of his braids which was woven from three strands of hair. In doing so he indicated that one strand symbolized the mind, another represented the body and a third stood for the spirit. Characterizing the Western approach to healing he slowly unraveled one strand from the others, held it out [00:03.00.00] and said, "This, the spirit, you give to your priests and ministers." Separating the second stand he next indicated, "This is the mind. You give it to your psychiatrists and psychologists." Holding out the third strand



he said, "This is the body. It's taken by your doctors." With all three stands dangling the healer observed, [00:03.20.00] "But what then has become of human nature and who in the Western world cares for it?" Dropping the remnants of his braid he grasped the other and still intact said, "Native people see spirit, mind and body as inseparable, as interdependent. Our hurt, our suffering involves [00:03.40.00] all three, so too do our ways of healing."

That's a powerful illustration of my point. Since Indian veterans are less likely to perceive their suffering in distinctly physical or psychological terms many don't see the need to seek specialized care. We recommend openly acknowledging [00:04.00.00] these differences in a nonjudgmental way. Besides, it's an opportunity to educate the patient about the treatment perspectives of non-Native mental health providers who work at the VA or at IHS. At the same time it helps to be aware that cultural variations in symptoms emphasis and presentation [00:04.20.00] might be quite relevant to your own work as a clinician. Our experiences at the VA suggest that many combat veterans seen in medical clinics suffer from undetected PTSD. And (Spiro), that's consistent with the findings from the American Indian Vietnam Veterans Project. [00:04.40.00] Primary care providers are not well prepared to recognize symptoms of PTSD. Mental health specialists can be enormously effective by equipping them with the necessary tools to do so. Brief simple screeners are available. In fact, if primary care providers are aware [00:05.00.00] of symptoms like flashbacks they can catch 90% of the cases that pass through their practice. And if physicians, nurses and other health professionals also understand the shame surrounding mental health and mental health care they can help their patients deal with this stigma as they refer [00:05.20.00] them to you.

The excellent educational materials listed in the guide accompanying this part of the series are a good place to start.

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