Episode 58 - Dolores BigFoot

[00:00:00] Rafael Otto: Hello everyone, this is the Early Link Podcast. I'm Rafael Otto. It's been a few months since we've recorded a new segment, so it's great to be back behind the mic and hitting record in the studio today. We really appreciate you tuning in.

You can catch us on 99.1FM in the Portland Metro on Sundays at 4:30 PM or tune in at your convenience wherever you find your podcasts, including Apple Podcasts, Spotify, and Amazon Music, and as always, on our website at childinst.org.

Today my guest is Dr. Dolores Subia BigFoot. She's an enrolled member of the Caddo Nation of Oklahoma with affiliation with the Northern Cheyenne Tribe where her children are enrolled. She's a Presidential Professor in the Department of Pediatrics, University of Oklahoma Health Sciences Center, and directs the Indian Country Child Trauma Center, where she is recognized for her efforts to bring traditional American Indian practices and beliefs into the formal teaching and instruction of professionals working with Native populations.

Dolores, welcome to the podcast. It's great to have you here.

[00:01:04] Dolores BigFoot: Thank you.

[00:01:05] Rafael Otto: I wanted to start, you've described yourself as a storyteller, and I wanted to ask you to share a story about your mother. She made a comment about all of your years going to school and training to be a psychologist, and then to teach what you live every day. Can you elaborate on that?

[00:01:22] Dolores BigFoot: When I first came on as faculty, some 30 plus years ago. I had finished my PhD and was hired at the University of Oklahoma Health Sciences Center to create a culturally based intervention for behavioral health programs to better serve American Indian, Alaskan Native children. So one of the things that we would do is to help behavioral health clinicians who are working in Indian country to understand the history. So the historical aspects of how our communities have got where they were at currently. Understand the disparities as well as understand particularly the strength. And so in order to share about what the strengths are for various communities, we provided opportunity to engage in some of the cultural experiences that I certainly grew up with.

And that included prayer, feeding people, ceremony, have an opportunity with storytelling to telling stories. And so because it was culturally based, certainly with my family, then my mother and others in my family would be present for these kind of activities. Some ceremonial, some cultural, some social, some all three.

As we were sitting there one evening. My mother who was, you know, very supportive of my efforts, was asking me, why did I go through a PhD program? She saw the, the hardship of that PhD program. I was a single mom with three kids going through a PhD program. And she said,

"Why did you go through all that hard time, hard struggle to teach not even teach but just engage and participate and share the way that we have always lived?" For me that was one of the greatest compliments my mother could give to me. So being able to help others experience or participate in things that have meaning in terms of cultural knowledge, in terms of cultural based understanding, cultural based application.

And I think that was what we want to do with the Honor... Honoring Children series is to allow individuals an understanding and how they can still apply the Indigenous knowledge that we have had for a long time to those things that have been harmful or have created dysfunction in our family and in our relationships.

[00:04:20] Rafael Otto: You touched on this a bit, because I know that your work is informed by the history of colonization, historical trauma, loss, grief, those kinds of elements. Talk about how those elements of history show up today and show up in your work.

[00:04:38] Dolores BigFoot: if the history of colonization, the history of historical trauma, the disparities that exist currently, if those things were not in place, we would not be having this conversation. And we have to, I think, give a lot of recognition and a lot of honor to Maria Yellow Horse Brave Heart, who allowed us to better understand what the impact and the terminology around historical trauma.

So if we think about, what functioning societies have been able to do is have that ability to be self-sustaining or, be able to take care of their own in meaningful ways. And an elder said, when we think about the colonization effort, they took one of the most self-reliant cultures around this planet and made them totally dependent. So all the way from what kind of name we had, where we lived, what kind of food, access to food, access to sacred places, the kind of words we used, taken away Native languages, dress, education, even thumbprint. So when we think about what all has been taken away, and there was another elder that said, each time our Native people fought back then something else was taken away.

Language, children, land, water, shelter, food. And this deprivation where individuals do not have resources, do not have access to resources, do not have the ability to create a sustainable way of living. I think that this pandemic has really shown, the last three years has really shown, how dependent we are on one another, and that individuals with a lot of resources are very privileged. Individuals who can access the internet, have credit cards to pay for deliveries been able to isolate to protect their families. Resources equal privilege.

[00:06:58] Rafael Otto: Sure.

[00:06:59] Dolores BigFoot: And when we look at our American Indian populations, we have 674 federally recognized tribes plus several other state recognized tribes. Plus others that see themselves as treaty tribes and then others that are seeking for federal recognition. And then we have those like Native Hawaiians and people from Guam and other places, Puerto Rico, that are not sovereign nations. And all of these are Indigenous people and they have all been

impacted by colonization. When we think about how were they sustaining themselves beforehand and what access do they have to resources now to be able to be self-sustaining people?

[00:07:49] Rafael Otto: Say a little bit more about, because you, you've talked about Indigenous culture as being honor based culture and then there's the role of shame. And you've talked a little bit about shame replacing honor. Can you say more about what that means?

[00:08:05] Dolores BigFoot: You know, you asked me about my mother and growing up. We grew up and I was very fortunate to have not only me, but my siblings and cousins and others and our community. To have grandparents and great grandparents that lived in close proximity to us. So most of the time there was not just two generations, but three and four generations within each household.

And I can remember being with my great grandmother who was born in the 1870s. So she was a great grandmother. I always say that I touched history because I held her hand and helped her a lot. I was not the only one that helped her. You know, someone was always there to help elders.

So the thing that she was just intuitively taught us was not to shame her, that we didn't behave in ways that would shame her or make her ashamed of calling us her grandchildren, or great-grandchildren. So when we think about being an honor- based society, an honor- based society is one that upholds others. The way honor- based societies work. They have prayers and teachings when we have our Native events. So one of the things that we always have is an honor song and recognition of people in positions of honor. You know, being named or titled or there's some way of up... uplifting them. So honor is a big part of our way of life, that recognition.

And so if there's always opposition in all things, as we think about an honor- based society, then the option of that is shame. If honor isn't there, then shame fills that void. And I think what we have is this shame that has become a way of life for many people. Not necessarily because of their own making, but because they were not consistently or in a good way recognized for who they are, that gift that comes because of life, we call it that sacred bundle and that honoring. So as we think about the honor- based society, if we no longer give those titles like for grandmother or auntie or uncle or brother or sister, or, son, daughter, wife, husband.

If we don't honor those positions then what replaces that honor is shame and shame can be many different things. It can be loss of identity. It can be lack of trust. It can be lack of honesty. It can be inability to have control. It can be not in safe places. It can be lack of protection. I mean, there's a lot of things that come because of not having honor and that shame has created all these entanglements.

And we see evidence of that by people not feeling worthy, making poor decisions, not honoring the relationships that they have. And it could be that they might do something that may be

meaningful, but they don't have that consistency over time. And then it even makes them feel worse because they're not able to have that consistency.

So honor-based societies is something that I think our Indigenous knowledge has always been built on. And there's not this sense of possessiveness, this sense of ownership, this sense of taking advantage of someone else. Because if we think of it in terms of an honor-based society, then we recognize that people have the right to make decisions for themselves, that they have the right to be in control of their own destiny. That sense of a gift that they have the gift of life. It's... the creator gave this gift of life. So it's not up to us to shift that gift of life in some way.

For example, my daughter was born with the identifiable birth defect and my great grandmother who was in her nineties at the time that my um, my daughter was born, which would have been a great, great, granddaughter to her. And, my great grandmother said, "Don't do anything to this baby, because she came as a gift." Because we wanted to have surgery for her to correct her birth defect and it was gonna take a number of surgeries to correct it. And, she was very adamant about not making any changes to this gift that was given to us. We did go ahead and have surgery. In fact, she had many surgeries, but the first surgery was of course one of the more critical ones. And so when that surgery was over with and the repair was more obvious, my great-grandmother said, well, maybe those white doctors do know what they are doing after all.

And so she sort of gave that blessing in that way. But the idea being that when you know a gift is given to you, you accept it as it is and you don't make changes. You don't complain about what is not there.

[00:13:53] Rafael Otto: Right. That makes sense. I want to ask you about your work because your work is really focused on working with children. And, under your guidance, there's been a number of different evidence-based treatments that you've developed for working with traumatized children in Indian country. Can you talk about some of those and, sort of, the how and why behind your approach?

[00:14:20] Dolores BigFoot: Well, through the Indian Country Child Trauma Center, we developed or we enhance three evidence-based practices. So evidence-based practice is, for those that might not understand, are things that have shown to be effective with a certain population for a certain approach. And we use evidence-based practices all the time. Right now, with this podcast, we're using evidence-based practice with the microphone, with the internet, with...

[00:14:52] Rafael Otto: It's all been, it's all been proven.

[00:14:56] Dolores BigFoot: It's all been proven to work. And then-

[00:14:59] Rafael Otto: Despite the technical difficulties we had before we started.

[00:15:03] Dolores BigFoot: That's right. And medical procedures are based upon evidence-based practices, eye surgery, broken bone repair, heart. I mean, there's a lot of evidence-based practices. And so what we want are evidence-based practices for mental health concerns that we want to be effective and to be helpful. Our tribal communities have had so many things happen to them. We don't need to do something else that might be harmful. There's been a lot of different kinds of therapeutic interventions that have been harmful. Holding therapy, rebirthing therapy, I mean, there's a lot of things that have shown people perceive that it might be helpful, but in the long run it turned out to be harmful.

So we have these three practices. So trauma-focused cognitive behavior therapy. We culturally enhanced it to honoring children mending the circle. Parent-child interaction therapy, we culturally enhance it to honoring children, making relatives. The treatment of inappropriate or illegal sexual behavior in children and adolescents, we culturally enhance it to honoring children, respectful ways, and then looking at suicide prevention. So honoring children, honoring their future. And, what we wanted to do was take evidence- based practices and extend the core of that, so that we could show that... that we could bring Indigenous knowledge, that, that was really a complement to Indigenous knowledge by this Honoring Children series. So if we look at the theoretical models that drive the evidence- based practices is how we approached it.

So for example with trauma-focused cognitive behavioral therapy, and trauma-focused cognitive behavior therapy is... primarily is for treatment of childhood trauma. Parent/ child interaction therapy is a parenting approach that is for problematic behavioral issues. Helping children or helping parents be more responsive to children with certain kind of behavior... defiant, just not minding... those kind of things. And problematic sexual behavior, of course, is not necessarily the norm for the most kids. But they cause discomfort or could be sometimes self- abusive or could be even illegal in terms of adolescents.

And so, how do we enhance each of those aspects in order to bring in that cultural, honor-based understanding?

[00:18:05] Rafael Otto: Yeah, say more about that. What's it like to have to adapt these treatment models? Yeah. I imagine it must be very difficult. So how did you...? Give us some insight into how you did that.

[00:18:17] Dolores BigFoot: Well, there was a lot of work that went into it. And there was a series of advisory boards that we pulled together of cultural-based experts that helped us to work through the initial foundation. So looking at what were the things that drove the theories. And so what we can say is, so let's take trauma-focused cognitive behavior therapy. The thing that drives this theory is a cognitive behavioral approach, of course, attachment, humanistic neurobiology and empowerment. So if we look at a cognitive model, so that's about thinking, right? It's about the intellect. And as we look at Indigenous knowledge, we have always been observers. We've always been thinkers. We have intuitively come up with, and there'd probably be some experimentation too. Thoughts about the things around water, land, wind, fire, plants. I

mean, so coming up with ways of figuring out how those things work. So they have stood the test of time.

So corn for example, how did they know how to grow corn and how did they know that if they planted corn, and also beans and also squash, that those things complimented each other? So this was thinking and experimenting. So the cognitive part of it has always been part of our understanding. So there's cognitive- behavioral. So as we think about behavioral, we look back at our historical knowledge.

One of the things we recognize is that early on, they used birds of prey. There's several tribes, in fact, still in Siberia, there's several tribes that use birds of prey to catch rodents. How did they catch a bird of prey? How did they train that bird of prey to land on the forearm, fly away, grab a rabbit or whatever else, and bring it back and not eat that, which is a natural thing for any bird of prey to do? So that's the behavioral part. They thought about it, they came up with the behavioral part. So, they not only did birds of prey, but they did dogs, trained dogs, they trained horses.

And so that meant that obviously they also trained their children. That was probably the first one that they collectively, children were trained. And, there's a lot of journals, diaries from those that were Jesuit priests and others that came in the 1600s, 1700s, and they would talk about how in the different tribes, children weren't punished. They were listened to, they were respected. They had a presence in the community. So there's evidence that they treated children in a respectful way. So as we think about cognitively, there's this thinking about it. Behaviorally, they intuitively came up with how to shape behavior.

Humanistic, we're all related. That's the concept that we have had for generations upon generations, thousands and thousands of generations. Neurobiology, the heart, mind, spirit, body connection has always been there. We're finding out that we've always been told that we can experience the spirits of our ancestors. Well now we know with DNA that we do experience the effects of our ancestors. That was something that has always been within our storytelling. And then empowerment, we have teachings about noninterference, non-judgmental.

So when we take the theories that drive an evidence-based practice in Indigenous knowledge that we have had for generations, how does one complement the other? And so that's why it's an enhancement. And then with all of those evidence-based practices, we add the spiritual component. And that spiritual component is very much a part of all of our Indigenous knowledge. So the belief that we're all spiritual beings, that we came from some place that we're here, that we're going to some place. And so, when we talk about hope, when we talk about enthusiasm, when we talk about belief systems, that all of those things can come into place when we think about spiritual pathways.

[00:23:03] Rafael Otto: Do you think about Indigenous knowledge as the same as practice-based evidence? So you've got practice-based evidence and evidence-based practice. Do I have that right or...?

[00:23:15] Dolores BigFoot: Well, I think what we can say is that practice-based evidence, there's those things that we have seen for generations and Indigenous knowledge can be used interchangeably. So we have a practice-based evidence like drumming. Practice-based evidence like how did a canoe come about? And how old is a canoe? And how many different ways have canoes been built? For the most part the form and function of them has remained the same. Even though the material and the way they're made has changed, but the form and function has remained the same.

Or again, corn has maintained a very strong staple of the whole world now. Weaving, the law of the pipe for some of our tribes, the sweat lodge. I mean, all of those things are practice- based evidence that I think what we need to think about is that we still can apply that knowledge today. So the practice- based evidence allows us to have application of Indigenous knowledge today.

[00:24:23] Rafael Otto: Thank you for that. Thank you for that. It's fascinating and I want to close with just the possibility of you doing some work here in Oregon on parent-child interaction, and potentially working with the tribes in Oregon. Can you talk about what that would look like?

[00:24:39] Dolores BigFoot: Well, the State of Oregon has a parent-child interaction therapy training program. And it would be wonderful if any of the tribes are interested in being trained in parent-child interaction therapy for children between the ages of three to seven with problematic behaviors. You know, defiant behavior or just not minding or for parents who have difficulty in their interaction with their children.

So being able to be appropriate in giving commands, appropriate in praising and appropriate in giving attention toward children in a way that is reinforcing with... if parents are needing to be more predictable, more consistent, more able to enrich their relationship with their child. So what we may have the opportunity to do is work with the Parent Child Interactive Therapy training program to recruit tribal behavior health clinicians who are interested in learning parent-child interaction therapy, or have already been trained in parent-child interaction therapy and interested in the cultural enhancement of honoring children, making relatives.

And if they are interested, please contact me or contact, uh, the PCIT Training Center and we would be more than willing to work in conjunction with the State of Oregon, because they have approached us already to train clinicians in honoring children, making relatives.

[00:26:22] Rafael Otto: Wonderful. Thank you so much, Dolores. It's been wonderful to have you on the podcast. I really appreciate your time.

[00:26:29] Dolores BigFoot: Thank you.