



Monthly Gathering

On November 3rd, 2016, the Gathering of Good Minds project held our second meeting and talking circle. Building on Mr. Anthony Pico's conversation about childhood and historical trauma, our group decided that our next meeting should focus on mental health.

This was our first meeting at the UCR location. Once everyone found the parking structure at the Glen Mor student dorms, the room for our gathering was easy to find. Our meeting began with time to visit and check-in and learn how to take our own blood pressures. Our small notebooks have been a fun way to keep track of our blood pressure and what we eat from meeting to meeting. Mr. Allen Saul provided a blessing and we shared a meal.



Brief Review of Mental Health Research

Luella Vann Thornton began our talking circle by sharing thoughts on what it means to talk about mental health in Native American communities. When you hear the word mental health it can mean anything from being stressed out, depressed, to talk

about the "crazy neighbor," or someone who needs more support from health professionals. Because it can mean so many things, she said, it is important that we have this conversation to hear what is important and to have direction as to what we could be doing for our communities.

A brief review of some of the research showed the following:

- The World Health Organization reports that depression affects 350 million people worldwide and is predicted to be the second leading cause of disease burden by the year 2020 (World Health Organization, 2012). Yet, there is no national prevalence data on depression for Native Americans
- A survey of 101 young adult Native Americans found that 73% did not seek mental health treatment due to issues related to embarrassment, they didn't think anything was wrong, or they believed that nobody could help (Freedenthal and Stiffman 2007).
- For Native Americans 65 and over reported concerns about unmet needs with regards to depression and dementia (Garrett 2015)
- There is little trust with clinicians. Clinicians either misdiagnose or don't hear patient concerns
- 30% of elderly patients at an urban IHS clinic reports significant depressive symptoms
- 70% of rural patients have inadequate medication for depressive symptoms
- Native Americans have one of the highest suicide rates in the United States
- Research and measures for mental health (i.e., PTSD, depression, substance abuse) rarely acknowledge historical trauma and ongoing oppression. Research by Brave Heart Yellow Horse and Whitbeck has been addressing this issue
- Researchers agree that Native American knowledge and practices are a strength in addressing mental health.
- We need more community engaged research where community are authors and gatherers of what we know

Talking Circle

Our talking circle was engaging sharing both broad and personal concerns about mental health. Concerns and resources that we

shared ranged from historical trauma to having people around you to listen to you and help you reflect.

Having someone there to listen was among the biggest concerns. People shared how they were able to change their path because someone was there who was truly listening to them.

Other people shared how they were in situations where they were the ones listening, and how great the need is for people to listen. This concern is particularly important for our youth. Our youth don't tell you, but sometimes they are just hanging on by a thread. Their suffering is, at times, expressed as anger. What is needed is someone to listen and to mentor.

There are 24 hour crisis lines, but they also need to have a mentor. Someone to show them how to be and know about their place in the community.

Of importance to our group was still the issue of historical trauma. Equally important was to acknowledge that trauma and oppression was still occurring. Traumas of history are constant and live on today. When we think of the North Dakota Pipeline, this is still oppression and trauma. Seeing community come together at Standing Rock helps to think about how to change things and how to heal.

Much of our conversation thought about how everyone has a story. Time is short in the clinic so our physicians don't have time to listen, and we don't have enough time to share. We need to always remember that there is so much more going on in people's lives.

Words of Wisdom

"What you learn, you share. That's good medicine"

"Share when you need help"

"Healing can take place through talking circles"

"Mental health is a daily thing. We need to check in regularly with ourselves."

Upcoming Meetings

Our monthly gatherings meet at the University of California Riverside from 5-7:30pm.

Glen Mor, room K106
University of California Riverside
400 W. Big Springs Rd.
Riverside, CA 92507



For directions see -

<https://osf.io/ey4p7/>

Upcoming meetings will be held on December 1st, January 5th, February 2nd, and March 2nd.

The topic for our December 1st meeting will be Food and Wellness

If you'd like to know more about the Gathering of Good Minds Project, please contact Juliet McMullin - julietm@ucr.edu or 951-827-7853. Or visit our website http://healthycommunities.ucr.edu/projects/good_minds.html

Special events

We are planning a trip to Old Woman Mountain Preserve in Jan 2017. The preserve is owned by the Native American Land Conservancy and located in the Mojave Desert about 40 miles w. of the Colorado River. The trip will be led by Prof Clifford Trafzer.