

## Behavioral Health Administration

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**Title:** BHA 10.22 Native American Cultural Competency

**Approved By:** Brian Waiblinger (DSHS Chief Medical Officer), Kevin Bovenkamp (Special Assistant)

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**Authorizing Source:** [The American Indian Religious Freedom Act](#),  
[Public Law No. 95-341, 92 Stat. 469 \(Aug. 11, 1978\)](#)  
[DSHS Administrative Policy 7.22 Cultural Competency](#)

**Purpose:**  
To provide the unique service needs of Native American clients in BHA facilities.

**Scope:**  
This policy applies to all BHA programs and employees who work or serve clients who identify as American Indian (AI) or Alaska Native (AN).

**Definitions:**  
**American Indian:**  
Individuals the federal government recognizes in accordance with 25 USC Section 2902.

**Alaska Native:**  
Individuals the federal government recognizes in accordance with 43 USC Chapter 33 Section 1602.

**Creator:** A belief in a supreme being often referred to as the Creator or Great Spirit.

**Consultation:**  
Requires an enhanced form of communication that emphasizes trust and respect. It requires a shared responsibility that allows an open and free exchange of information and opinion among parties that leads to mutual understanding and comprehension.

**Culturally competency:**  
Involves the knowledge, skills and attributes and values necessary for effective intercultural transactions with diverse social, cultural and organizational contexts.

**Cultural Respect:** Involves the recognition, protection and continued advancement of the inherent rights, cultures and traditions of the Native Americans.

**Federally Recognized Tribes:**

Self-governing American Indian and Alaska Native government recognized under applicable federal and common law. Because of their unique sovereign status, federally recognized tribes have the inherent power to make and enforce laws on their lands and to create government entities.

**Government-to-Government:**

Describes the relationship and protocols among and between federally recognized tribes and the federal, state and other governments.

**Historical trauma:**

A cumulative emotional and psychological wounding across generations as a result of colonization and abuses (such as boarding school experience).

**Indian Shaker Church:** Is a combination of Christian and Coast Salish spiritual traditions that began in 1882 near Shelton, Washington.

**Native American cultural practices:**

The use of cultural plants, knowledge, and skills based on beliefs and experiences indigenous to the Native American culture.

**Native American Sacred Items:** May consist of a medicine bag, prayer pipe, feather, sacred herbs (sage, sweet-grass or cedar), flute, whistle, rattle, small stones, beaded jewelry, cedar hats or clothing (regalia) and drums as well as items that are used for storing these sacred items.

**Potlatch:** A ceremonial feast of Native Americans of the northwest coast marked by the host's lavish distribution of gifts or sometimes destruction of property to demonstrate wealth and generosity with the expectation of eventual reciprocation

**Two Spirit:** Spans across western categorizations of gender, sex and sexuality, holding diverse cultural and individuals. Male and female combined activities portrayed their unique traits and status as two-spirit people.

**Treatment Plan:**

In accordance with 42 CFR 481.61, BHA provides individual treatment plans. The plans are goal oriented, which focus on the person's strengths and addresses the person's needs. Treatment plans are generated with the person's input, interdisciplinary assessment and discharge planning.

**Walking in Two Worlds:** Describes the differences for Native Americans across two worlds: maintaining Native languages, oral culture/traditions and spirituality within a dominant society. These differences are vast encompassing differences in basic values, ways of being

with one another, belief systems, as well as languages and behavior.

**Policy Requirements:**

- A. BHA supports the Native American Culture and Native American clients we serve. This may include the following:
  - 1. Providing advocacy, support and outreach to Native American clients who may need assistance with prescribed medications that may conflict with their cultural beliefs.
  - 2. Authorizing the use of Native American cultural practices in conjunction with prescribed medication.
  - 3. Respect for Native American cultural practices or beliefs.
  - 4. Acknowledgement of the unique political status of Native Americans
  - 5. Understand the impact of Historical Trauma
  - 6. Protecting and respecting sacred items (in BHA facilities) of Native Americans.
  
- B. Native American client may request use of Native American cultural practices. This request will be discussed with the client and reviewed by the treatment team for determining the benefits to treatment. The treatment team evaluates such requests in a respectful manner that doesn't disrupt the cultural practice. Clients may use the facility grievance process for denied use of cultural practices.
  
- C. Respect for Native American cultural practices that may include ceremonies including prayer that may differ from other religious practices.
  
- D. The inherent rights and political relationship with the U.S. government does not derive from race or ethnicity. Tribal members are citizens of three sovereigns: their tribe, the United States and the state in which they reside.
  
- E. BHA provides Native American Cultural Competency training upon hiring and annual thereafter.

**Procedures:**

- A. Staff provide assistance when a Native American client has a conflict between cultural beliefs and medication use. Staff will:
  - 1. Provide support by offering communication with a client advocate, spiritual advisor, tribal elder, family friend or relative or a trusted person(s) with whom the client requests to communicate to resolve this conflict.
  - 2. Meet as needed with client, doctor or mental health counselor and designated person who advocates on behalf of the client. This individual is selected at the client's request.

3. As needed, the BHA Tribal Affairs Administrator ([NATRAMF@dshs.wa.gov](mailto:NATRAMF@dshs.wa.gov)) can be used as a resource.
- B. The Native American client and treatment team may determine the use of Native American cultural practice in conjunction with prescribed medication is a beneficial part of treatment. When this is indicated, it will be:
1. Reviewed by the physician that the use of Native American cultural practices complies with client's safety and health; that the cultural practice is not a controlled substance or any other substance that could harm the client.
  2. Included in the treatment plan and outline the use of both the cultural practice and prescribed medication.
  3. If the physician has any concern regarding the safety of the Native American cultural practices, they will discuss the concern with the client and document the discussion in the medical record.
  4. The physician will consult with pharmacy to determine any possible contraindications or medication interactions from cultural practices.
- C. Below are some of the cultural practices or beliefs of the Native American culture. As a client is in treatment, BHA may be unable to support all cultural practices if there is a safety risk. BHA respects the cultural practices and reviews individually situations to assist the client while maintaining safety. Native American cultural practices or beliefs include:
1. A Native American identifying as Two-Spirit or Lesbian, Gay, Bi-Sexual, Transgendered or Queer (LGBT).
  2. A client request for a visit from medicine man/woman/cultural advisor for prayer, healing or counsel.
  3. Respect of Native American ceremonies by not recording (audio or video), if you are present to witness a ceremony, consistent with hospital policy.
  4. The Potlatch was/is an integral part of the cultural and spiritual tradition of Native Americans on the Northwest Coast and functions to redistribute wealth (i.e. gift-giving).
  5. Inclusion of elders, extended family members and community as a part of the client's wellness plan.
  6. Respect of Native elders by remaining silent when they speak and until they finish speaking.
  7. Prayer (using terms other than "God" such as Creator) before and after medical meetings or counseling.
  8. Burning of sage, sweet-grass or cedar with the use of an eagle feather purifying or healing. Due to safety issues this is prohibited inside of BHA facilities. A client can meet with their treatment team and discussion safe options for this to occur.
  9. Use of a drum or rattle for song or prayer.
  10. Spiritual gathering: pow-wows, sweat-lodges, Indian Shaker Church and other sacred religious practices of Native Americans.

11. Possessing eagle feathers and regalia, including wearing regalia and the storing and protection of these items.
12. Understanding that it may be conflicting for Native Americans spiritual or cultural beliefs walking in two-worlds (modern society and maintaining their traditions) and may impact their perspective on the use of prescribed medications.
13. Mourning the death of a relative/loved one, a Native American may request staff assistance with cutting his/her hair and request it be send home or buried outside the institution.
14. Native American women are viewed as life-givers and are considered powerful during menstruation, and therefore do not participate in Native American ceremonies or handle sacred items during this time. BHA respects the client right to choose what to participate or not to participate in.

D. Working with Tribal governments includes:

1. Native Americans have a unique political status that differs from any population in the United States, and is not a racial status.
2. Understanding that the tribal governments have their own set of laws, policies and regulations for tribal members, separate from state or federal governments.
3. The Tribe may be limited in their resources, therefore may not always respond to communications from outside entities. It may take several attempts before contact is made with a tribe to collaborate.
4. Enrollment is confidential, therefore collaboration with tribes or tribal affairs administrator may be necessary to work with a Native American client for enrollment purposes.

E. Understand the historical trauma:

1. To better serve the Native American clients.
2. Realize that this may be a factor in working with Native American patients who may not openly share or be aware that they have experienced historical trauma.

F. Staff respect Native American sacred items in BHA facilities by:

1. Providing protection and safety of items of sacred value to Native Americans that may be on their person when they enter a BHA facility. (Small cardboard box to hold items).
2. Ensuring Native American sacred items are treated in a respectful manner, when clients or visitors are subjected to search of their personal items.
3. Requesting a client advocate, spiritual advisor or a designated individual that can work with the client to ensure proper handling of Native American sacred items.
4. Authorizing the storing and use of sacred items of Native Americans in BHA facilities (such as drums, regalia, eagle feather(s), sage, cedar and sweet-grass).
5. Following BHA policies and procedures, on how to search through personal items of Native Americans in a respectful manner.

**Information Contact:** Tribal Affairs Administrator

**Exception:**

No exceptions to this policy may be granted without the prior written approval of the Assistant Secretary of the Behavioral Health Administration.

**Supersedes:**

None