

Hope and Wellness: The Sacred Bundle Project

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“Manidookewigashkibjigan” Sacred Bundle: R.E.S.P.E.C.T.” Project

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Manidookewigashkibjigan-Sacred Bundle: R.E.S.P.E.C.T. Projects

➤ **First GLS SAMHSA Grant:**

- Awarded to American Indian Health and Family Services of Southeast Michigan, Inc. (AIHFS): 08/01/11 - 07/31/14.

➤ **Second GLS SAMHSA Grant:**

- Awarded to AIHFS to continue and expand the work to the 12 Tribes of Michigan: 09/30/14 - 09/29/19.



Sacred Bundle Project Team

- Program Director: Nickole Fox, MA, CPC
- Project Manager: Lauren Lockhart, LLMSW
- Training and Outreach Coordinator: Bob Davis, MBA
- Program Assistant: Darius Watkins, BBA
- Evaluator (U of MI): Sandra Momper, MSW, PhD
- Project Coordinator (U of MI): Jennifer Hopson, BA



Tribal/Organizations

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A = Little Traverse Bay Band of Odawa Indians

B = Blue Thunder Bird Women Counseling

C & D = Nottawaseppi Huron Band of the Potawatomi

E = Lac Vieux Desert Behavioral Health

F = Bay Mills (2)

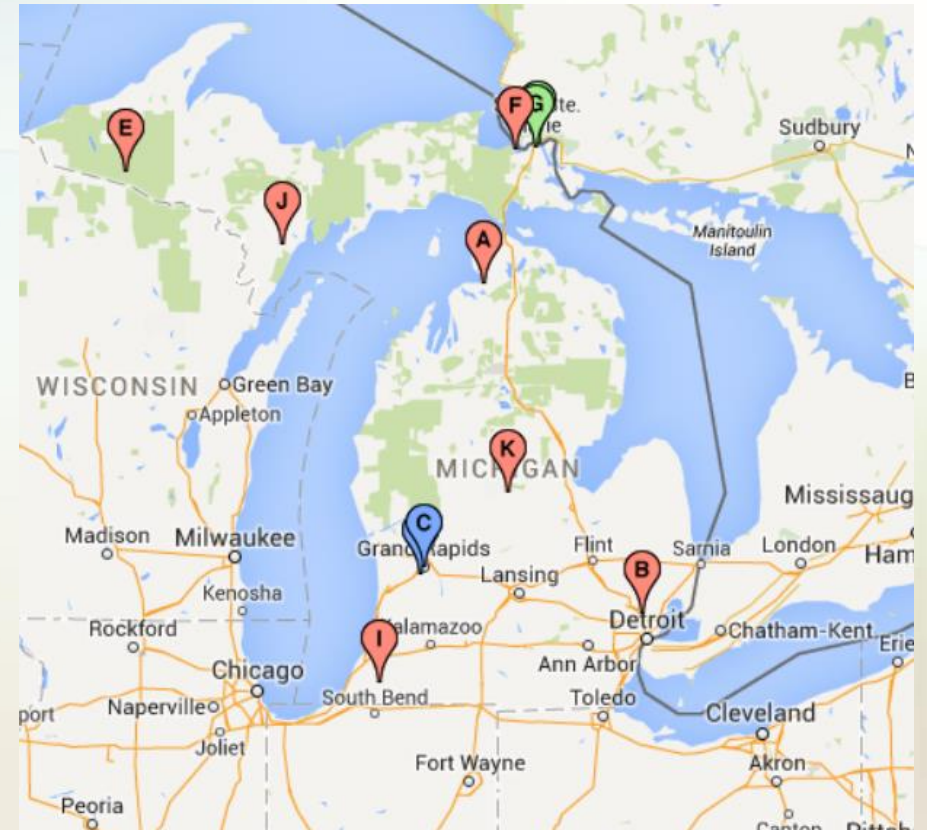
G & H = Sault Ste Marie Tribe of Chip Indians

I = Pokagon Band of Potawatomi Indians

J = Hannahville Indian Community

K = Saginaw Chippewa Tribe

Independent & Little River Band of Odawa Indians
(not mapped)



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Hope and Wellness Screenings

- ❖ Consents/Assents
- ❖ Demographics
- ❖ Hope and Wellness Screen Measures
 - ❖ Suicide Risk
 - ❖ Substance Abuse
 - ❖ Cultural Identity
 - ❖ Positive Wrap-up Qs-developed by youth

Hope and Wellness Screenings Staff

- Event Manager – plans and oversees activities.
- Flow Coordinator – assigns tents, keeps tracks of who is where.
- 2 Sign-in staff – welcomes, sign-ins, assigns screeners.
- 7-10 Screeners – conduct screenings (trained in safeTALK/ASIST).
- 1-2 Behavioral Health Providers – conduct interventions/referrals.
- 2 Sign-out staff – double-checks paperwork, gives youth resources (locally based) and incentives, secures materials.
- 1-2 additional “floating” staff/volunteers.



Hope and Wellness Screenings Set-Up

- Staff/volunteers arrive 3 hours before screenings to set up.
- Large tent and 4-5 tables with chairs for sign-in, sign-out, and consent process.
- 4-5 small tents with a small table, chairs, and lighting for conducting private screenings.
- Station for Behavioral Health Provider to conduct interventions.
- DIY Smokeless Smudge Bundle Table for youth/parents waiting.



Screening Process

- Administered by trained gatekeepers or mental health clinicians to youth aged 10-24.
- Occur in AIHFS' BH Department and at Pow-wows and social events.
- Youth debriefed by a screener and/or Behavioral Health Provider.
- Youth & family provided information about the project, a list of MH resources, and a \$20 gift card.
- If referral needed, Behavioral Health Provider available to intervene.
- Follow-up on positive screens or crisis intervention conducted by AIHFS BH staff.



Screenings: Consents/Assents/IRB

- Youth completes a consent/assent form.
- Youth under 18 get parent/caregiver consent.
- Consent forms have standard IRB components:
 - Purpose/description.
 - Benefits/risks.
 - Voluntary nature/compensation.
 - Confidentiality.
 - Contact information.

- **NOTE: IRB was required for first grant only.**



Hope and Wellness Screening Documents

- PH-Q 9
- CRAFFT (10-17 year olds)
- DAST & AUDIT (18-24 year olds)
- Demographic Survey
- Wrap-Up Questions



Behavioral Health Provider Role

- Youth who are determined to be at risk are immediately referred to an on-site Behavioral Health Provider.
 - BH Provider may conduct an intervention, develop a safety plan, and/or make referrals for the youth to get mental health or other services (youth program, traditional healing, for example).
- **Crisis Line**
 - We contract with a local crisis line (Common Ground) that has agreed (through an MOU) to make follow-up calls to at-risk youth within 24-48 hours–if youth and parent/caregiver consent.



Wrap up Questions-Youth Designed

- Who is the person that brings you the most joy or happiness in your life?
- What are the two things you are most grateful for?
- What is your favorite time of year and why?
- What was the greatest experience in your life?
- Who is the person you can trust or go to talk to when you are feeling down?







EIRF/Healing Helper

- After screening the screener fills out a Healing Helper survey with Early Identification Referral and Follow-up (EIRF) SAMHSA required information:
 - Individual identified as being at risk,
 - Person who identified them as being at risk
 - Circumstances of identification.
- In our efforts to ensure that at-risk youth receive the help they need we document dates when follow-up calls are made and number of attempted calls.



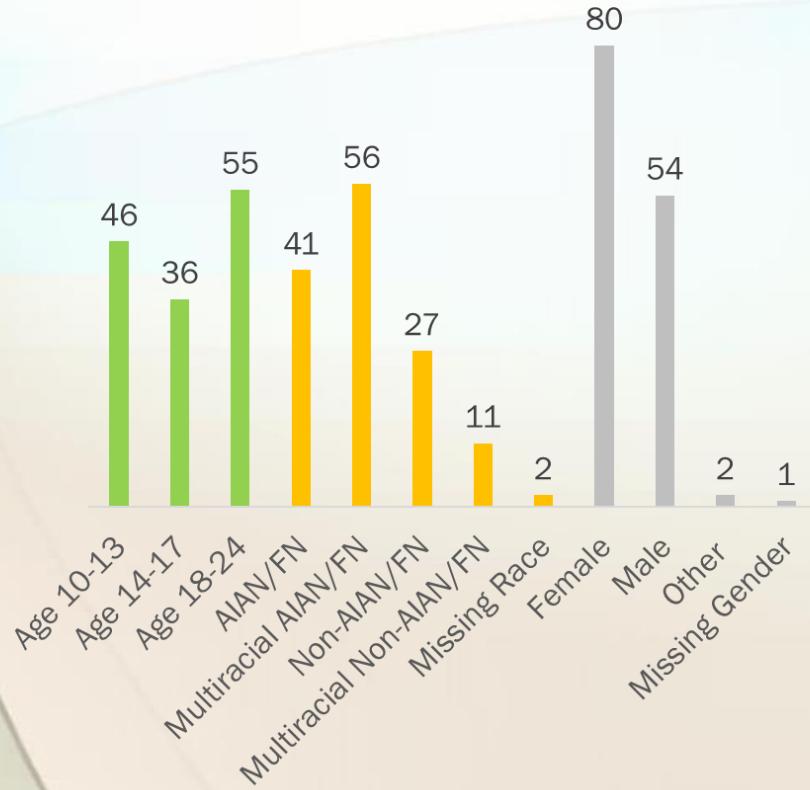
Sustainability: Hope and Wellness Screening Toolkit

- For GLS 2, we developed a Toolkit to help other communities plan and implement screenings—presently piloting with Michigan Tribes.
- The toolkit for community screening provides information on:
 - Community Readiness Assessment.
 - Training gatekeepers.
 - Documents (surveys, consents, etc.).
 - Planning and staffing community screenings.
 - Partnerships and follow-up.
 - Data use for grant applications and programming, for example.

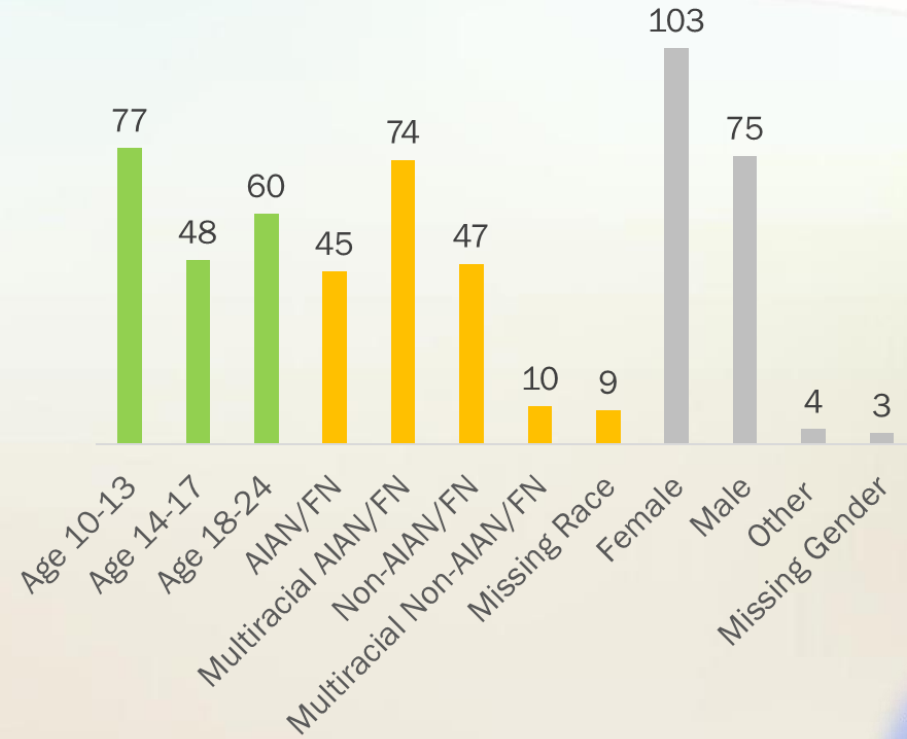


Demographics-Youth 10-24

GLS-1
Demographics of Youth Screened
April 2013 - July 2014



GLS-2
Demographics of Youth Screened
April 2015 - April 2017



Regional Suicide Prevention Partnership: Indian Health Services- Bemidji Area Office

➤ Tribes in Minnesota (GLS Grantee State), Wisconsin and Illinois

1. ASIST Training for Trainers, November 2016

2. Support for new trainers:

- Opportunity to co-train with Master Trainers
- Provision of materials
- Monthly conference calls (support, consultation, and planning)

3. SafeTALK Training for Trainers, September 2017

4. Cross-Marketing & Regional Suicide Safety Net



Acknowledgements

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Questions?

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