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Heidi Simon Minnesota State University Mankato

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Natural Connections: A Recommendation to Implement an Animal Assisted Therapy (AAT) Program within the Shakopee Mdewakanton Sioux Community Heidi Simon, LSW, MSW Student





Purpose

Currently the Shakopee Mdewakanton Sioux Community does not have an Animal Assisted Therapy (AAT) program. The purpose of this project was to research AAT programs that exist in First Nation Communities. The ultimate goal was to present evidence to support the implementation of a culturally-based AAT program into the current mental health model within the Shakopee Mdewakanton Sioux Community. The Animal Assisted Therapeutic Learning (ATTL) program would incorporate traditional beliefs with contemporary ways of life in regard to healing and mental health.

Background Information

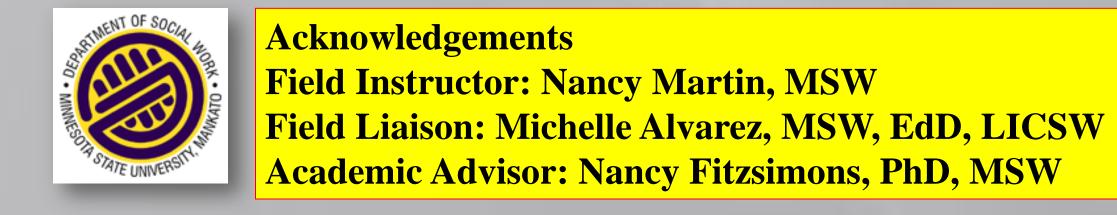
The Shakopee Mdewakanton Sioux Community (SMSC) is located within the boundaries of Scott County and is the only reservation located in this rural area. The community offers mental health services to it's members and to tribal members who are enrolled in a federally recognized tribe and are residing in Scott County. Within the larger community, there are a number of mental health providers. However, many First Nations residents do not utilize those rural services preferring to receive mental health services from tribal providers.

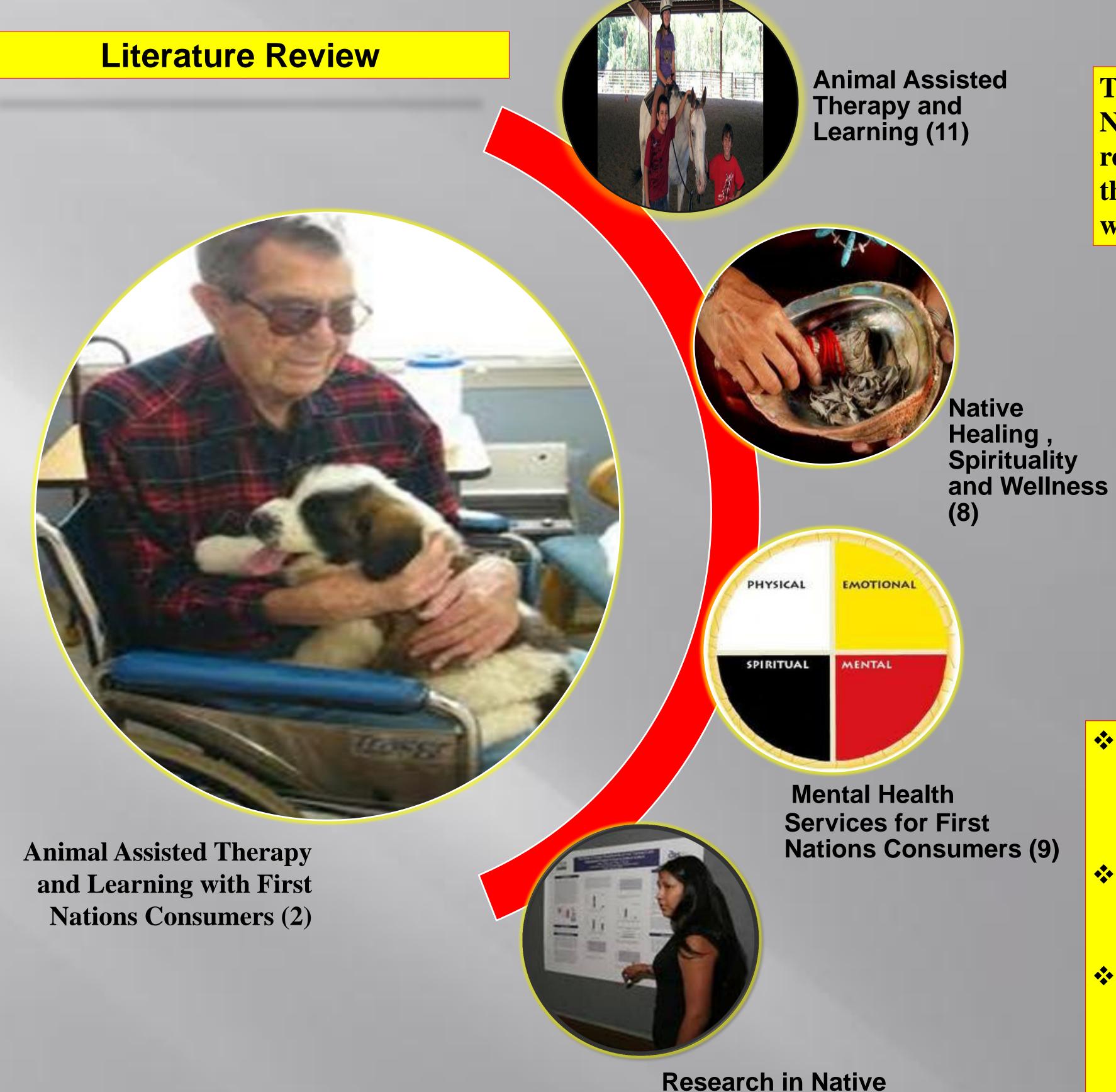
- * The mental health needs of First Nations consumers are disproportionately higher in comparison to other groups and go largely unmet (Hodge, Limb & Cross, 2009).
- * Indigenous people in North America suffered gravely during the process of colonization and have since experienced oppression, racism, and the loss of cultural values and practices (Gone, 2009).
- * As the modern-day descendants of a traumatic legacy, contemporary Native Americans have also experienced disproportionately higher degrees of psychological distress (Hodge et al., 2009). "Both researchers and professionals have consistently associated this distress with indigenous historical experiences of European colonization" (Gone, J., 2009, p. 751).
- **❖** In addition Native people experience an increase in violence, chemical dependency, increased suicide rates, and an extensive loss of Native language, culture, and cultural practices. These factors along with the implementation of boarding schools, which disrupted parenting has contributed to an ongoing cycle of chronic stress and disability for contemporary First Nation consumers (Gone, 2009).
- **❖** Research has shown that First Nations consumers may have access to mental health care but continue to avoid it. What the research indicates is that a lack of cultural awareness and sensitivity on the part of providers is a barrier. With that, the problem is not access or the ability to identify a need. According to research, Native consumers identify the problem as a lack of understanding by the dominant society.

Methodology

A systematic literature review was conducted in four areas:

- > AAT as evidence based practice.
- > AAT as evidence based practice with First nations consumers.
- ➤ View of mental illness, healing and wellness in First Nations communities.
- > Research efficacy in First Nations communities.





Communities (5)

Key Findings

- ▲ Practitioners use AAT to address issues such as depression, trauma reactions, anxiety, learning disability, emotional and behavioral disorders, autism, ADHD, abuse, domestic violence, social isolation, grief and attachment (Van Fleet, 2010).
- ▲ The Medicine Wheel is a universal symbol representing the circular, holistic model of understanding human matters. The Western model is linear and focused on illness (Rybak et al., 2004).
- ▲ Despite the enactment of Public Law 94-437, Indian Health Care Improvement Act, less than 7% of funding is designated to mental health (Gone, 2004).
- ▲ First Nations communities are beginning to take interest in Animal Assisted Therapy and Learning services (NICWA Pathways, 2010).
- ▲ First Nations consumers are willing to participate in research that meaningfully involves the community, is facilitated appropriately, maintains confidentiality, is conducted by trusted entities, and is pertinent to salient health needs (Buchwaldet al., 2006).

Discussion

The Medicine Wheel represents the belief of First Nations Communities that health and wellness is a result of balance and harmony within oneself and with the environment. It is grounded in the belief that wellness is predicated in *Body*, *Spirit*, *Heart*, *and Mind*.



- **❖** ATT is a strengths and resiliency-based approach that empowers First Nations communities to implement a mental health model that is congruent with cultural beliefs and practices in terms of health and wellness.
- ❖ The data gathered from such an endeavor could be used to further the development of an evidenced-based model of AAT for First Nations consumers.
- **❖** In considering AAT as a potential approach, there are rural implications and limitations that need to be addressed.
- ➤ First, the majority of mental health providers available in Scott County are non-Native. Moreover, there are a limited number of First Nations Mental Health providers within the boundaries of the reservation.
- > Currently, there are not any certified AAT professionals in the area.
- **❖** Hopefully with the acceptance to pilot this program, First Nations providers will acquire training and certification in AAT. In turn, it is possible that non-Native providers would be open to collaborating with Native providers to gain cultural competence.

Recommendations

Based on key findings, it is recommended that the SMSC Mental Health Department develop and pilot a culturally-based AAT program. In an effort to accomplish this, it is imperative that tribal practitioners consult with community guides in determining the focus of the program and implementation of a model. In response to the limited culturally sound research it is also imperative that input and outcome data be gathered.