



## CULTURAL AMPLIFIERS

A cultural amplifier is a cultural factor that magnifies the difficulties faced by Native Americans living with or at risk for HIV.

### CIRCULAR MIGRATION

Depending on distance, many Native Americans may migrate daily, weekly or several times a year from reservation/rural areas to urban areas. Migrations occur for many reasons, including family visits, tribal ceremonies, job and educational opportunities, substance abuse, and illness. An individual may travel a long distance to an urban area to work or to obtain an education since the opportunities are more limited in reservation/rural communities. A substance user may travel to an urban area to access alcohol or drugs. Some reservations are “dry” meaning that alcohol is prohibited from being sold or used on the reservation. A substance abuser may be required to leave a reservation/rural area to enter a drug or alcohol treatment program that is located in an urban area. An ill individual living in an urban area may return home to receive care from family or community members, and simultaneously, have access to more traditional healing methods. Conversely, an individual may travel or relocate from a reservation/rural area to an urban area to receive more comprehensive health care services. The circular migration of Native American people also means that disease can be easily carried from urban areas to reservations, with a tremendous potential to achieve epidemic proportions on reservations.

### HOLISTIC APPROACH TO HEALTH

Many Native Americans believe in a holistic approach to health. Health is synonymous to the harmony of mind, body and spirit

with nature. Illness implies an imbalance within the individual and between the individual and his or her universe. Many Native Americans also believe that an imbalance can occur through “bad medicine” or a spell from someone who may want to cause harm. Because of this, the whole individual must be treated and not merely one physical segment of the body. Better results can be obtained for a Native patient if his/her physical, emotional, mental, and spiritual needs are addressed in the care and treatment plan.

### TRADITIONAL HEALING

Each Native American tribe has distinct ceremonies and medicines, although overlaps exist in certain regions. Native American patients who access traditional medicine and ceremonies report physical relief as well as an overall increase in his/her sense of well-being. For many Native Americans the practice of traditional methods of healing can contribute to a sense of empowerment. An individual living on a reservation would have better access to traditional medicines and ceremonies than an individual living off the reservation. Due to this distinction, an individual living in an urban area may return home for traditional medicine and ceremonies. In some settings, access to traditional healing services can be obtained in urban contexts.

### DISTRUST OF AUTHORITY

Native Americans have a long history of mistrust of the government as a result of broken treaties, lost land, reservations, boarding schools, and the urban relocation program, as well as ongoing experiences with racial and ethnic discrimination. This mistrust extends to public health officials, as a result of specific tribal histories of poor health care and deliberate infection. Most Native Americans are familiar with the government’s “gift” of blankets to many tribes, which were infected with small pox. This history is well recognized



throughout the Native community, and often translates into a level of mistrust of health care providers in contemporary settings.

### **FEAR OF BREACH OF CONFIDENTIALITY**

Breaches of confidentiality have been a serious issue in many Native American clinics. This transgression often occurs in reservation/rural communities where rumors can spread quickly, although comparable breaches also occur in urban clinics. In Native American communities, it is not uncommon for a patient to have relatives, friends, or acquaintances who are employed at the Native American clinic. These individuals, therefore, may have access to confidential information about a patient. Any breach of confidentiality by a clinic employee, or anyone else, can lead to shame and isolation from the community especially when the information is about a socially stigmatized problem such as HIV. In 1991, a study by the National Commission on AIDS found that Native Americans were concerned "over the inability of the Indian Health Service to protect the confidentiality rights of patients, evidence of breaches of confidentiality, and the lack of anonymous test sites."

### **COMMUNICATION STYLE**

Some Native Americans exhibit a style of communication that is reserved and may be interpreted as unfriendly. When addressed, a Native American may look away or down to defer to another person's authority. In some tribes direct eye contact is considered disrespectful. Many Native Americans speak in a slow and deliberate manner which is often interpreted as the individual being uneducated or ignorant. For some of these individuals, English is their second language and/or their way of speaking was learned within their families and communities. Many Native American people also exercise caution in personal communication with others. Information or problems about oneself and one's family is not voluntarily shared. Contributing fac-

tors to the nondisclosure of information are the inherent distrust of authority and the fear of breach of confidentiality. Native Americans are usually careful listeners and perceptive observers of nonverbal communication, such as facial expressions, gestures, or verbal tones. A Native American patient not volunteering information should not be interpreted as an indication that there is nothing wrong. A patient is more likely to share information if trust is developed between the provider and the patient.

### **MODESTY**

Most Native Americans are modest about their bodies and find it uncomfortable to discuss their bodies or perform self-examinations. Consequently, an individual may not notice or wish to discuss personal bodily changes. This same modesty, in fact, may extend to discussing sex and sexual behaviors, especially homosexuality, and may even present great discomfort. Health care providers should learn how to discuss the body, sex and sexuality in a non-offensive manner. For example, in encouraging your patient to conduct physical self-examinations suggest that your patient examine his/her body in the shower. Since a shower involves touching one's body, a patient may feel more comfortable with this suggestion.

### **LANGUAGE AND CULTURE**

Many cultural elements are contained within the context of a Native American language. Many words and concepts are not easily translated into English, and some cannot be translated. The language of each tribe describes and identifies its speakers. Every Native language contains the key to that tribe's view of the universe. Even if a non-Native learned the language, some of the cultural elements would be lost in the translation. When the BIA attacked Native languages in its boarding schools, the BIA attacked the culture of all tribes. Native Americans



strive to preserve and restore their respective tribal languages and culture. Because of their history, Native Americans may not share their culture, including traditional methods of healing, with people outside of their tribe.

### **FAMILY AND COMMUNITY ROLE**

The importance of the extended family is crucial in understanding the relationship of an individual to family and community. Aunts are often considered mothers, uncles are often considered fathers, and cousins are often considered brothers and sisters. Members of the same clan, or even related clans, may be considered relatives. In this social structure, some Native children are raised by an extended family without a formal adoption process. The community, urban and reservation, is a valuable resource for a Native person in need. An individual may turn to the community for financial, emotional, or spiritual support. That individual is committed in the same way to others in the community.

### **ORIENTATION TO THE PRESENT**

Many Native Americans are more oriented to living in the present than the future which is often emphasized in Western culture. Since the future is vague and ambiguous, it is not unusual for the focus to be on immediate gratification. Many Native American tribes emphasize living each day as it comes. This perspective could influence how Native patients adhere to pharmacotherapies, for example, when they are feeling well or poorly on any given day. Health care providers need to explain and emphasize how HIV progresses in the body, and how antiretroviral therapies work over time.

### **MORTALITY**

High rates of mortality are a part of most family and community experiences for Native Americans. According to the Indian Health Service's annual report on mor-

talities, Native Americans consistently have higher than national average death rates due to automobile accidents, liver disease, homicide, suicide, and diabetes. It is not unusual for an individual to have someone in his or her family commit suicide, be a victim of a homicide, or lose a relative in a fatal automobile accident. Not infrequently, a community may experience several deaths over a short period of time. This experience may impact an HIV-infected Native American, possibly altering his or her own desire to extend life by means of antiretroviral therapies.

### **SEXUAL ORIENTATION**

Many tribes have a pre-Columbian history of acceptance of alternative gender roles and sexualities. However, European arrival brought Christianity which influenced these social systems and indigenous beliefs that alternative gender roles and sexualities were not an anomaly. In some tribes there is no historical record that these alternative gender roles and sexualities ever existed, which again, may have been destroyed with European arrival. While some Native Americans may know of alternative gender roles and sexualities within their tribes, they may not embrace these roles as acceptable. Native American people and communities are just as likely to exhibit the same type of homophobia prevalent in mainstream society. Some gay, lesbian, bisexual and transgendered Native Americans identify as "two spirit." The term "two spirit" is a fairly new term that originated from the organizing efforts of gay, lesbian, bisexual and transgendered Native Americans to distinguish themselves from mainstream gay and lesbian culture. The "term two spirit" attempts to reclaim and honor the historical roles and traditions of individuals within many tribes that were at one time inclusive of alternative gender roles and sexualities.

