

TTI: Partnering with Tribal Nations in Louisiana

NASMHPD



988 READINESS AND CRISIS SERVICES

A phrase often used by people with lived experience in recovery is “nothing about us without us,” which underscores the significance of collaboration, empowerment, and inclusion of populations of focus when designing and implementing services.¹

As Louisiana continues to actively engage local Tribal Nations in planning for 9-8-8 rollout and implementation, it is key to build a collaborative, mutually respectful partnership.

State agencies vary in their level of readiness to relate to Tribal Nations and foster government-to-government relationships. Some guidance for state officials (such as behavioral health directors, 988 implementation team leads, policy and legislative officials, and others) is to expand on cultural humility. Possible ways to achieve this include meaningful training on implicit bias, understanding the political determinants of health for Tribal Nations, increasing self-awareness through education, and conducting routine organizational assessments as part of quality improvement of policies and practices impacting local Tribal Nations.



¹ p6 [Partnering with Tribal Governments to Meet the Mental Health Needs of American Indian/Alaska Native Consumers](#)



Many states with strong government-to-government alliances identified Tribal Liaisons as essential players in building these connections.² Some states have appointed state/Tribal liaisons, even multiple liaisons throughout various state divisions. Liaisons can often be found in the Department of Natural Resources, the Department of Children and Family Services, the Department of Behavioral Health, and American Indian Commissions (if they exist in your state).

As states nurture a mutually respectful relationship with local Tribal Nations where Tribal sovereignty is honored, groups on both sides can begin to break down barriers and work together to address the myriad health disparities that Tribal Nations face. When establishing government-to-government relationships with Tribal Nations, it is also important to collaborate with the non-profit Urban Indian organizations in your state, as they serve American Indian/Alaska Native (AI/AN) individuals living outside of Tribal Nations.

Considering the disparities present in healthcare services, funding, resources, and outcomes for Tribal Nations, the launch of 9-8-8 presents a unique opportunity to foster alliances between Tribal Nations, state governments, and stakeholders to ensure continuous, mutually beneficial quality improvement of behavioral health services in Louisiana³ that promote cultural practices as sources of strength, healing, and resilience.

UNDERSTANDING INTERGENERATIONAL TRAUMA

As a direct result of the legacy of European colonization, AI/AN communities faced profound trauma, uniquely characterized as multi-generational and historical,⁴ without the cultural safety nets of traditional healers and community support. When engaging Tribal Nations, this process of building collaboration includes particularly complex considerations due to the enduring history of violence and genocide perpetrated by the United States against Indigenous groups: repeated broken treaties and discriminatory legislation at the federal and state level, imposed

²p8 [Partnering with Tribal Governments to Meet the Mental Health Needs of American Indian/Alaska Native Consumers](#)

³https://www.nasmhpd.org/sites/default/files/988_Convening_Playbook_States_Territories_and_Tribal_Nations.pdf

⁴Linklater, Renee, and Lewis Mehl-Madrona. Decolonizing Trauma Work: Indigenous Stories and Strategies, 2014. Print.v

limitations of resources, forced displacement and assimilation, along with current policies and practices that disenfranchise Tribal Nations have all fostered an often-intense fear and distrust of the government (both federal and state) since the inception of the United States. Other barriers to providing services to Tribal Nations include “availability of transportation and childcare, treatment infrastructure, level of social support, perceived provider effectiveness, cultural responsiveness of services, treatment settings, geographic locations, and Tribal affiliations.”⁵ Because Indigenous communities carry incredibly deep-rooted historical and current trauma, States with working Tribal relationships have repeatedly emphasized the need to build mutual respect and trust before establishing a formal partnership.⁶

This work must be done through a trauma-informed approach of amplifying the voice and agency of Tribal Nations, rebuilding trust, and acknowledging one’s role in a system that disenfranchises Tribal Nations.

“SAMHSA’s recommended principles on trauma informed care align with the recommendations for partnering with Tribal Nations. These include safety, collaboration, mutuality, transparency, trustworthiness, empowerment, and consideration of culture and historical issues (2015).”⁷

⁵ <https://www.ncbi.nlm.nih.gov/books/NBK539588/>

⁶ p9 [Partnering with Tribal Governments to Meet the Mental Health Needs of American Indian/Alaska Native Consumers](#)

⁷ p8 [Partnering with Tribal Governments to Meet the Mental Health Needs of American Indian/Alaska Native Consumers](#)



Louisiana Tribal Nation Information

TRIBE INFO

Tribal Nation Name: Chitimacha Tribe of Louisiana

Recognition Status: Federal

Phone: (337) 923-4973

Email: info@chitimacha.gov

Website: <http://www.chitimacha.gov>

Medical, Behavioral Health, COVID-19, and
988 Contact: Karen Matthews, Director of Health & Human Services

Medical Contact Info: (337) 923-9955

TRIBE INFO

Tribal Nation Name: Coushatta Tribe of Louisiana

Recognition Status: Federal

Phone: (337) 584-1401

Email: rrich@coushatta.org

Website: <https://www.coushattatribe.com/>

Medical Contact: Paula Manuel,
Department of Health Director

Medical Contact Info: (337) 584-1439

COVID-19 Response: Melany West, (337) 584-1439

988 Contact: Rayne Langley, (337) 584-1433

Behavioral Health Contact:
Rayne Langley, (337) 584-1433



TRIBE INFO

Tribal Nation Name: Jena Band of Choctaw Indians

Recognition Status: Federal

Phone: (318) 992-2717

Email: Chief@jenachoctaw.org

Website: <http://www.jenachoctaw.org>

Medical Contact: Kelly Thompson, Health Director

Medical Contact Info: 318-992-2763;

kthompson@jenachoctaw.org

COVID-19 Response: Main Health Department line: 318-992-2763

Behavioral Health Contact:

Lacy R. McGuffee; 318-992-0136

988 Contact: Lacy R. McGuffee; 318-992-0136

TRIBE INFO

Tribal Nation Name: Tunica-Biloxi Indian Tribe

Recognition Status: Federal

Phone: (318) 253-9767

Email: msampson@paragoncasinoresort.com

Website: <https://www.tunicabiloxi.org/>

Medical, Behavioral Health, COVID-19, and

988 Contact: Cameron Chase, Director of Health

Medical Contact Info: (318) 240-6437



TRIBE INFO

Tribal Nation Name: Addai Caddo Tribe

Recognition Status: State

Phone: (318) 472-1007

Email: adaiindiannation@aol.com

Website: <https://www.facebook.com/AdaiCaddoNDNZ/>

Medical, Behavioral Health, COVID-19, and
988 Contact: (318) 472-1007

TRIBE INFO

Tribal Nation Name: Biloxi-Chitimacha Confederation of Muskogee

Recognition Status: State

Email: chiefrandyverdun@biloxi-chitimacha.com

Website: http://www.biloxi-chitimacha.com/the_confederation.htm

Medical, Behavioral Health, COVID-19, and 988 Contact: Randy Verdun,
Confederation Chairman

TRIBE INFO

Tribal Nation Name: Choctaw-Apache Community of Ebarb

Recognition Status: State

Phone: (318) 645-2588

Email: achoctaw@yahoo.com

Website: <https://choctawapachetribebarb.org/>

Medical Contact: Main line: (318) 645-2588

Medical Contact Info: (318) 645-2588

COVID-19 Response: (318) 645-2588

Behavioral Health Contact: (318) 645-2588

988 Contact: (318) 645-2588

TRIBE INFO

Tribal Nation Name: Clifton Choctaw

Recognition Status: State

Phone: (318) 612-0124

Email: ccri1146@gmail.com

Website: <https://www.facebook.com/Clifton-Choctaw-Tribe-of-Louisiana-448935322550723/>

Medical Contact: (318) 612-0124

Medical Contact Info: (318) 612-0124

COVID-19 Response: (318) 612-0124

Behavioral Health Contact: (318) 612-0124

988: (318) 612-0124

TRIBE INFO

**Tribal Nation Name: Four Winds Tribe Louisiana
Cherokee Confederacy**

Recognition Status: State

Phone: (225) 288-4080

Website: <https://www.fourwindscherokee.com/>

Medical, Behavioral Health, COVID-19, and 988 Contact: Chief Barbara Sherman

TRIBE INFO

Tribal Nation Name: Grand Caillou/Dulac Band

Recognition Status: State

Phone: (985) 791-2222

Email: SHIRELL@GCDBCC.ORG

Website: <https://www.gcdbcc.org/>

Medical, Behavioral Health, COVID-19, and 988 Contact: Chief Shirell Parfait-Dardar

TRIBE INFO

Tribal Nation Name: Isle de Jean Charles Band

Recognition Status: State

Website: <http://www.isledejeancharles.com/tribal-leadership>

Medical, Behavioral Health, COVID-19, and
988 Contact: Chief Albert Naquin

Medical Contact Info:

<http://www.isledejeancharles.com/>

TRIBE INFO

Tribal Nation Name: Natchitoches Tribe of Louisiana

Recognition Status: State

Phone: (541) 619-4024

Email: fredsimon1@aol.com

Website: <http://natchitochestribe.org/index.html>

Medical, Behavioral Health, COVID-19, and
988 Contact: Fred Simon

TRIBE INFO

Tribal Nation Name: Pointe-Au-Chien Indian Tribe

Recognition Status: State

Website: <https://www.pactribe.com/>

Medical, Behavioral Health, COVID-19, and
988 Contact: Charles Verdin Sr., Chairperson

TRIBE INFO

Tribal Nation Name: United Houma Nation

Recognition Status: State

Phone: (985) 275-0820

Email: info@unitedhoumanation.org

Website: <https://unitedhoumanation.org/>

Medical, Behavioral Health, COVID-19, and
988 Contact: Principal Chief, Lora Ann Chaisson

STATE TRIBAL LIAISON

Louisiana Governor's Office of Indian Affairs

150 N. Third Street
Baton Rouge, LA 70804

(225) 219-8715

Mark Ford, Director

RESOURCES

[Transformation Transfer Initiative \(TTI\) 2022 Resource Guide](#)

SAMHSA RESOURCES

<https://www.samhsa.gov/behavioral-health-equity/ai-an>

<https://www.samhsa.gov/tribal-ttac>

<https://www.samhsa.gov/sites/default/files/sites/default/files/tttac-cy4-mental-health-fact-sheet-508-compliant.pdf>

https://store.samhsa.gov/sites/default/files/d7/priv/tip_61_aian_full_document_020419_0.pdf

<https://zerosuicide.edc.org/toolkit/toolkit-adaptations/indian-country>

NATIONAL AMERICAN INDIAN AND ALASKA NATIVE MENTAL HEALTH TECHNOLOGY TRANSFER CENTER NETWORK RESOURCES

<https://mhffcnetwork.org/centers/national-american-indian-and-alaska-native-mhffc/home>

NATIONAL INDIAN HEALTH BOARD

<https://www.nihb.org/index.php>

YOUTH MOVE NATIONAL

<https://youthmovenational.org/?s=Native+American+youth>

NATIONAL ALLIANCE ON MENTAL ILLNESS

<https://www.nami.org/Your-Journey/Identity-and-Cultural-Dimensions/Indigenous>

THE NATIONAL COUNCIL OF URBAN INDIAN HEALTH

<https://ncuih.org/>

MENTAL HEALTH AMERICA

<https://www.mhanational.org/issues/native-and-indigenous-communities-and-mental-health>

AMERICAN PSYCHIATRIC ASSOCIATION

<https://psychiatry.org/psychiatrists/diversity/education/best-practice-highlights/working-with-native-american-patients>

WORKFORCE GROWTH INITIATIVES:

<https://www.ihs.gov/dhps/dhpsgrants/americanindianpsychologyprogram/>