

# SEMII



26641 Lawrence . Centerline, MI 48015

*Projects, Policies &  
People  
Working with  
Michigan's  
Native American  
Population*



- In our Creation story, Asema, or tobacco was the first plant on Mother Earth. We were taught that Asema was a very powerful medicine. We were also taught that using Asema selfishly could bring great harm and sickness.

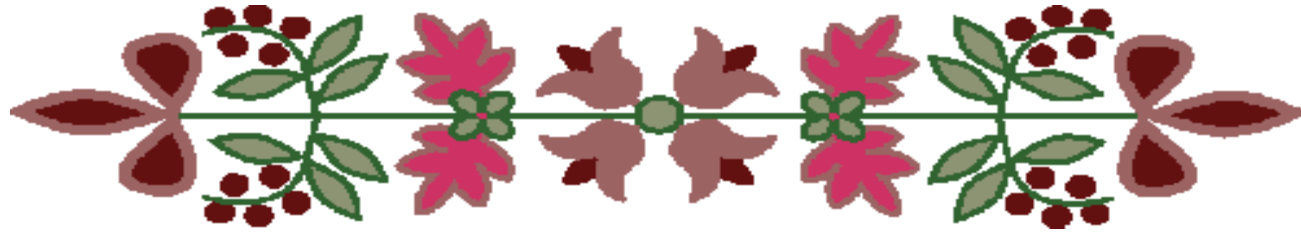
- It is common and culturally acceptable that when Native people meet with one another, Asema is passed from one person to another for ceremonial purposes. This is a cultural norm. We have been told of a story where Asema was passed to Columbus and he threw it to the ground after examining it, as he saw no value in it. From the beginning of contact between the Europeans and Indigenous people, there was a clash of culture and values





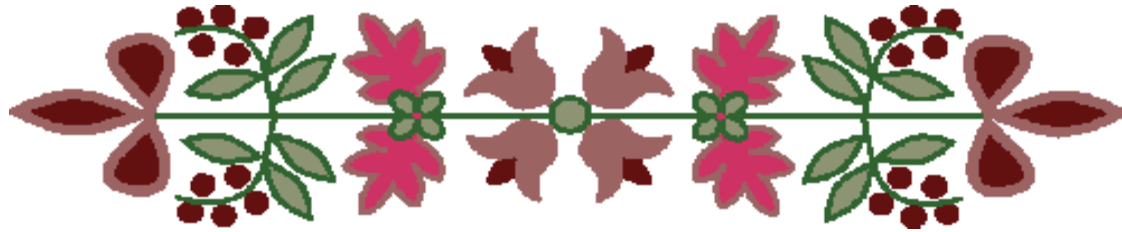
# **BARRIERS**

- Lack of Ethnic & Cultural Understanding
- Historical Distrust
- Poverty
- Misconceptions



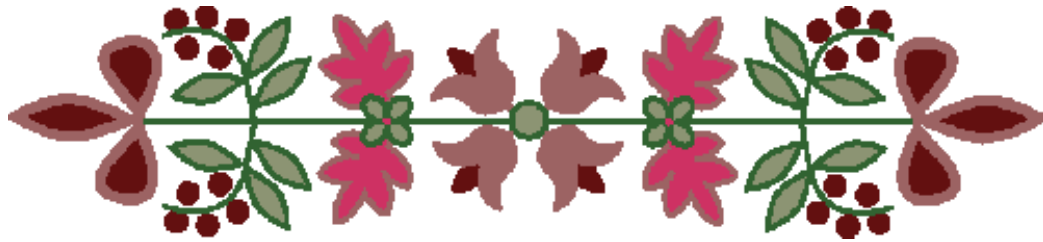
## **Lack of Ethnic & Cultural Understanding**

- Tobacco is sacred to American Indian people. Even those who are in the process of finding their way back culturally resent tobacco being described as an evil or bad thing
- Spiritual beliefs differ between ethnic groups and it is not acceptable or respectful to try to tell people what they believe is wrong or to try to change their image of what they believe to be correct. Worse yet, is to come across as condescending towards those belief systems



## Historical Distrust

As we discuss this right now, there is a political situation going on in Michigan which reinforces the belief that YOU cannot be trusted. Once again an agreement has been broken, which has a significant negative impact on the future of Native people living in Michigan. When a culture of people has experienced this over and over throughout history, it is a barrier that will be difficult, if not impossible to overcome. American Indian people trust other American Indian people who work in places that have demonstrated over time to act in the best interests of their population



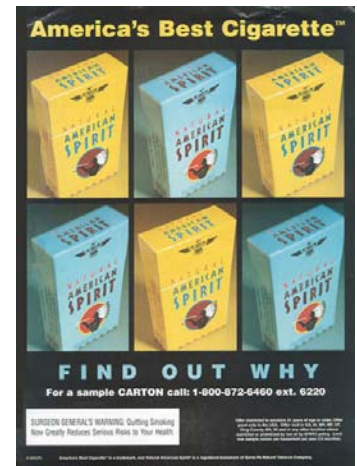
# POVERTY

Many American Indian people living in urban communities experience poverty, sometimes for multiple generations. They do not have health care insurance, do not seek medical care in public health and often times do not see a physician until their condition has become chronic and/or life threatening. When they do seek medical attention, clinics are often not friendly or culturally sensitive and engage in shaming and scolding behavior. As a result, an opportunity where American Indians could obtain valuable health education information is lost.



# MISCONCEPTIONS

- Many American Indian people using tobacco commercially believe by using American Spirit or similar brands of cigarettes they are safe from all the carcinogens and other harmful additives to cigarettes







# **SOLUTIONS**

- **Role Modeling**
- **Education**
- **Prevention and Cessation Activities**
- **Awareness Brings Change**



# ROLE MODELING

- It is important that leadership in American Indian communities be free of commercial tobacco use
- It is important that groups and individuals to whom youth look up to, be free of commercial tobacco use

# EDUCATION



- Trained tobacco program staff to talk face to face, one on one, describing the ancestral and spiritual relationships with ceremonial use of tobacco, NOT the commercial use
- The link between smoking, exposure to second hand smoke and the early onset of Type II Diabetes AND the progression of Diabetes with smoking and second hand smoke exposure
- Cardiac and vascular health complications from commercial tobacco use and exposure to second hand smoke
- Advising American Spirit tobacco users that big tobacco companies target American Indians through these brands and there is no safe use of tobacco commercially

- To deliver this information to American Indians you must be where they are, in the urban Indian centers, powwows, etc.
- It is important this information be delivered by people considered trustworthy in the American Indian community
- For example, when walking into SEMII, an entire wall is full of displays with information on prevention, cessation and messaging on the ceremonial, not commercial use of tobacco. All our printed materials for pre-natal, children, elders, second hand smoke exposure, smoking and diabetes and high blood pressure are culturally appropriate
- Continued partnerships where mutual respect for ethnic and cultural differences are respected and cultivated



# PREVENTION & CESSATION ACTIVITIES

- Quit Kit information is good, and we give out many folders. Most people report they read and use the tools but do not use the Quit Line. They are distrustful of giving personal information over the phone to people they do not know
- We provide free of charge CD's on smoking cessation and pre-natal cessation that are produced by a local physician
- Talking Circles
- Stickers for homes stating, "This is a Smoke Free Home"
- Culturally appropriate Smoke Free Home Pledges and Smoke Free Car Pledges. The Smoke Free Car Pledge has a place for a photo
- Having materials available at a table, staffed by SEMII Tobacco Program personnel at all events sponsored by SEMII and other American Indian events
- We do not see long term cessation from using NRT's or prescription drugs. Permanent or long term cessation is most often successful when people "re-connect" spiritually to cultural information

# AWARENESS BRINGS CHANGE



- The Saginaw Chippewa Tribe hosts the annual Indian Day Olympics in Mt Pleasant, MI. This year, they displayed a sign stating, “NO DRUGS, NO ALCOHOL, NO SMOKING.”
- SEMII hosted its first outdoor Smoke Free Powwow in Stockbridge, MI in July 2010
- We hosted our 2<sup>nd</sup> outdoor Smoke Free Powwow in Warren, MI in August 2010
- These two events prompted the South Eastern Michigan Indians, Inc. Board of Directors to adopt a policy stating all outdoor events sponsored by SEMII will be Commercial Tobacco Free (smoke free!)



***Miigwech! (Thank you!)***