Geisel School of Medicine

Indian Health Service Spring Trip
Ojibwe Nations, Minneapolis, & Duluth, MN
March 12 – March 19, 2017

Bois Forte: James Durham, Lydia Gill, Cat Gordon, Meghan Bullock

Cass Lake: Devin Van Dyke, John Porter, Julie Ocampo, Priscella Chan

Fond Du Lac: Missy Cantave, Aravind Ponukumati, Kayla Hatchell, Julianna Lautenschleger, Abby Alexander

Red Lake: Shruthi Nammalwar, Forrest Rackard, Sarah Bennett

White Earth: TlalliAztlan Moya-Smith, Rohini Siva Srinivas, Dan Forsman, Mariah Servos

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Context

Introduction
This was the eighth year in a row that we were able to offer this exciting experiential cultural learning opportunity to the Dartmouth community. This year eighteen medical students and two masters of public health students participated in the trip.

We incorporated the trip into an elective including pre-trip curriculum along with structured mid-trip and post-trip reflection. Students were divided into five groups and each went to a different reservation. Each of these reservation groups took on a curriculum topic, researched it, and lead the group in a pre-trip session on the topic. Shawn O’Leary led the introductory discussion and in subsequent sessions the groups

This year the groups chose to research and present on History, Culture and Identity, the Indian Health Service, Traditional Medicine, and Health Disparities affecting Indians.

Trip Goals
- To build on the relationships with the Ojibwe communities initiated by past groups of Geisel medical students.
- To listen, observe, and begin to understand the healthcare and social issues facing Ojibwe communities through direct, personal interactions.
- To provide meaningful community service, developed in collaboration with community leaders.
- To share what we learned by raising awareness among our colleagues and peers at Geisel Medical School.

Background
The following background information is taken from the 2010 trip report, which did an excellent job concisely describing the historical and cultural background relevant to a better understanding of the relationship between healthcare providers, the US government, and Native Americans in Minnesota.

Ojibwe Indians are part of the Algonquian family of aboriginal North Americans. “Anishinabe”, or first man, is the Ojibwe term for “the people.” Oral history suggests that the Ojibwe first lived further east, on the Atlantic coast of the northern United States and Canada. Following approximately 200 years of migration, in the mid-1700s the Ojibwe resettled in central and northern Minnesota where they supported themselves primarily by the collection of wild rice native to the area’s lakes, supplemented with hunting and cultivating various plants.

In the 1880s, the United States government adopted a policy of assimilation in their actions regarding Native American peoples. Boarding schools, both private and government-run, were established and children were systematically taken from their homes in an effort to increase acculturation. At their height in 1902, there were twenty-five non-reservation boarding schools run by the Bureau of Indian Affairs. The schools taught primarily a vocational
Students were often renamed before being dressed in western clothing and forbidden from speaking their native languages. While most schools had closed by 1950, they have had an indelible mark on the psyche of the Native American people. The Indian Health Service was established in 1955 to replace the Bureau of Indian Affairs as the provider of health care to Native Americans, a responsibility of the US government established in 1978 with Article I, Section 8 of the US Constitution. The IHS is a division of the Department of Health and Human Services and today provides comprehensive health services to approximately 1.9 million Native Americans across the United States.

Reservation Communities

This year the entire group began on Sunday in Minneapolis where we began our trip at the home of Angie Erdrich, a pediatrician and Dartmouth Medical School alumna who has been a friend and supporter of the trip for several years. Our group of 20 students split up into five groups on Sunday afternoon and headed out to five different reservations to stay for the week. Groups visited Bois Forte, Red Lake, Leech Lake, White Earth, and Fond du Lac reservations.

Trip Activities

Sunday, March 12

After a long liminal morning the rugged sailors of the MNIHST arrived in Minneapolis at 10:30 local time. Our first stop was the home of Dr. Angie Erdrich, an Ojibwe tribe member and Dartmouth and Dartmouth Med alumna, who has worked as a pediatrician for the Indian Health Service with her husband Sandeep for almost 20 years. We relaxed and traded massages for awhile until Angie's friend Denise, a professor of education at North Dakota State University, spoke to the group about Ojibwe culture, history, and spirituality. We smudged sage and cleaned red willow to present to elders on the reservations as semaa or Indian Tobacco.

Next, Tommy Woon spoke to the group about somatic experiencing, or the focusing of attention on the body and its processes in order to promote self-care and healing. He led us through creative exercises and thought experiments to demonstrate his points. This was followed by the traditional kick-off dinner of Indian food, which was blessed by Richard, an elder from the community. After dinner we took a group photo and headed out to our reservation sites; there was a good deal of snow on the roads but eventually all five groups reached their sites safe and sound, ready to get some sleep and meet the next day.

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1 http://brownvboard.org/brownqurt/04-3/04-3a.htm
2 http://www.lib.utexas.edu/taro/ttusw/00081/tsw-00081.html
Bois Forte (James, Meghan, Lydia, Cat)

Monday, March 13th

We spent the day at the Nett Lake Health Clinic. Sue Larson, the clinic manager who helped organize most of our itinerary, gave us a tour of the clinic and introduced us to the staff. We met and spoke with the health insurance navigators, billing department, dentistry department, lab technicians, pharmacists, and medical providers. We learned which services are covered by IHS, how patients supplement with insurance plans, and how referrals from the clinic to non-IHS facilities are covered. The clinic is currently in the process of transitioning from paper charts and a relatively simple EMR to Epic. It was informative to witness how the clinic runs on a daily basis, how it interacts with the larger health system, and what is involved in the undertaking of building a robust EMR.

We then split into groups of two and spent the rest of the morning and afternoon shadowing two physicians, Drs. Shanna Vidor and Charles Helleloid. It was interesting to see two physicians at different ends of their careers serve the same population. Dr. Vidor grew up on the Bois Forte reservation and finished her family medicine residency recently. Her communication with the patients was exceptional. She was reassuring when empowerment was needed, but also specific and practical when her aim was to prompt change. Dr. Helleloid’s background is as the epitome of a do-it-all rural doctor in International Falls, on the border with Canada. As a family practice physician, his scope of practice stretched from general surgery to ob/gyn.

Tuesday, March 14th

Lydia and Meghan shadowed Crystal, NP and Dr. Vidor while Cat and James went on home visits with Terry DuBois, a community health nurse. Terry provides a real service to the community. Patients, many times elderly community members, who are struggling to manage their medications independently are referred to Terry and she organizes and delivers a pill box containing their medication to them weekly.
Spending time watching her work really emphasized to me how effort, organization and time it takes to comply with the instructions physician’s dole out, often in short 15 minute visits. Terry spent a lot of time on the phone coordinating prescription refills and transportation to and from doctor’s appointments, logistic necessities in a rural area like northern Minnesota. We then were able to accompany Terry on the home visits she had scheduled that day. She checked blood pressures and swapped out the boxes while catching up with her patients, it was immediately clear how well she knew these people. It was awesome to witness the closeness of the community in Bois Forte. I’m sure this is a challenge at times, but it was an honor to be welcomed into such a close-knit community.

We spent Tuesday afternoon meeting with three chemical dependency counselors at the reservation’s outpatient drug and alcohol rehab facility. As was typical of many of the meetings we had scheduled this week, we entered the building not knowing exactly what we would talk about, who we would meet, or how long we would be there. Learning to embrace this type of uncertainty was a valuable component of the trip and, as we didn’t leave the rehab facility for roughly 3 hours, this type of spontaneity can yield a space for meaningful connection. We found the counselors warm and willing to share from their personal and professional experience. Substance use disorders are a plague around our country, but perhaps especially so in communities like Bois Forte. The counselors we met with were generous to welcome us as future providers, and treated us like members of the same team. It was striking how they were able to keep Native cultural and spiritual identity central to their work, framing recovery as a struggle to regain individual balance, but also equilibrium spiritually and with native historical identity.

Around 7 pm, we were evacuated from Fortune Bay Casino for a major propane gas leak. We were told that the leak would take 4-5 hours to fix. Up to 1 mile radius around casino were also evacuated. On the advice of one of the clinic nurses, we drove to Ely, MN and had dinner at the Boathouse Brewhouse. We decided to stay in Ely for the night at the Adventure Inn.

**Wednesday, March 15th**

On Wednesday morning, we drove back from Ely to Fortune Bay Casino and enjoyed a free buffet breakfast after being evacuated the previous night. We then made our way to Nett Lake. Fourteen enthusiastic 5th and 6th graders at the Nett Lake School greeted us on Wednesday morning. The enthusiasm continued as we
did a group activity learning about the role of the heart. We then broke into four groups and students took their pulses supine, standing, and post exercise. They graphed their results and discussed why their pulse changed. We finished the session by teaching them how to use a stethoscope and gave them opportunity to use the stethoscope on each other. The experience was very rewarding as the students were very engaged throughout the activity.

In the afternoon, we met with Terri Morrison, a community health nurse whose husband is on tribal council. She has many years of experience in her role as a community health nurse and was able to give us insight into the challenges and rewards of working on the reservation. Her biggest advice to us was to “meet people where they are.” She also spoke about the multiple hats she wears in her role as community health nurse, including following up with patients in their home, coordinating community health representatives, managing WIC program for Nett Lake, organizing pill boxes, and her responsibility as director of emergency preparedness for the entire reservation.

We finished our final day at the Nett Lake Clinic shadowing Dr. Helleloid.

In the evening, we met Shawn, Grampie (Shawn’s father), Rita, Jose, and their daughter Laura (members of the community), Woody, and David (Shawn’s cousins) at the Crescent Grille for dinner. It was a gift to be able to spend time with valued members of the community and to learn more about their life on the reservation.

Thursday, March 16th

Thursday was a beautiful, sunny day in Bois Forte, making it hard to accept that our visit was coming to an end. Before leaving, we met with Cori Strong, the assistant to the Tribal Council. He shared a brief history of Bois Forte, discussed the extensive work of the tribal council, and answered our questions. The meeting was a great opportunity to learn more about governing aspects of the reservation, current projects, and a vision for the future.

After our meeting we drove to Duluth to meet the rest of the group. Before joining the team, we set out to view the artwork of Leah Yellowbird. Several of her pieces were at the American Indian Community Housing Organization (AICHO) in downtown Duluth. AICHO provides housing to homeless native people, and the
organization also seconds as an art gallery. When we arrived we were told Leah was leading an art class there that night, and we had the amazing opportunity to participate. Leah was an amazing teacher, and a fun person to spend time with, so we were all very grateful for the opportunity to learn from her.

After a long day, we met up with the larger group, enjoyed pizza at a local spot, and headed to Grampy’s cabin for the night.

**Leech Lake (Devin, Julie, Priscella, John)**

**Monday:**

We began our day with a visit to Leech Lake Tribal College where we were fortunate to be shown around by Elaine, one of the tribe elders who was very involved with establishing the college. Leech Lake Tribal College is an accredited two-year college on the reservation that delivers a liberal arts curriculum with a backbone of coursework centered around Ojibwe culture and language. One of the first things Elaine told us was that her people are not well—culturally, emotionally, physically—but they are undergoing an exciting process of self-healing. We were interested to see how reviving and teaching the Ojibwe language is central to the healing process at Leech Lake. We even got to join one of the language classes and learn a few words. *Madonikiigiizhigad nungo* (it’s Monday).

After joining a drum ceremony and sharing lunch at the College we travelled to Cass Lake to visit an organization that supports elders in the community with dementia. There we met several tribe elders and leaders who generously welcomed us and spent several hours with us sharing stories about their culture and their home.

**Tuesday and Wednesday:**

On Tuesday and Wednesday we in twosomes went to Leech Lake Tribal Health Clinic for home visits and shadowed clinicians at the Cass Lake Indian Health Services Hospital. The home visits were an amazing opportunity and one of the most special of our whole trip. To be invited into homes
is a meaningful and rare thing and not to be taken lightly. We were also allowed to participate in some of the care provided by the visiting nurses—for example, giving shots, cleaning wounds, and counseling about medications and how to care for family members.

At the hospital, we shadowed Dr. Mark Becker, a family practitioner who we met previously at Monday’s community dinner. In addition to showing us how to perform joint injections and teaching us the risks associated with the procedure, he gave us a tour of the hospital and shared his insights on his experiences treating patients with different belief systems. We were also able to meet Dr. Alan Rudnick, a podiatrist who shared some advice on foot care and prevention against wound infections.

His advice turned out to be extremely valuable for our afternoon activity on Wednesday, in which we volunteered to perform health screenings at the homeless shelter of People’s Church in downtown Bemidji. While working with the homeless, we performed basic foot care, such as washing feet and trimming their nails, and advised them to check their feet for new sores or blisters on a daily basis. We also checked everyone’s blood pressure and glucose levels, and counseled them on the importance of managing those conditions and the health risks of hypertension and diabetes. Volunteering at the clinic was an extremely rewarding way to engage with an underserved population who do not have regular health maintenance visits with providers. Our day concluded with a dinner with the Red Lake team, where we shared our day’s adventures over some delicious tacos and enchiladas. We are excited for our next and final day on the reservation!

Thursday:

On our last day in Leech Lake, we took the opportunity to visit a couple schools on the reservation. First, we headed out to Bug-O-Nay-Ge-Shig School (Bug School for short). We were greeted by Jay Malchow, a school counselor, who showed us around the campus. The school serves mostly native students in grades K-12 and emphasizes cultural education, including Ojibwe language and the seven Anishinaabe values: Love, Respect, Wisdom, Humility, Bravery, Honesty, and Truth.

Following our tour, we had lunch then headed to a classroom where students from grades 7-12 were assembled. The four of us each told our stories of how we came to medicine and then we split off into smaller groups for a more interactive session. After some question-and-answer time, we broke out the stethoscopes and allowed the students to listen to each other’s heart beats. After that it was time for the students to get back to class and for our group to head over to Cass Lake to check out Leech Lake Head Start.
Head Start is a pre-K program that serves children as young as six weeks. We were fortunate enough to have a friend we met at Leech Lake Tribal College show us around. Brandon Bowstring, our friend, is not only the Student Senate president for LLTC; he is also a former instructor at Head Start. He took us to several classrooms with students of different ages. One highlight was the infant room. Upon our arrival, two of the infants began staring at us intently. After a brief standoff, Priscella and Julie attempted to approach the children. Immediately the babies began crying. After a few more minutes, Devin and I sat down near one of the babies and, alas, no tears were shed. Our parenting instincts shone through and we gained the baby’s trust. We eventually had to head out, though, and say goodbye to the baby, Head Start, and Leech Lake.

We made the drive to Duluth and met up with our classmates and Dr. Arne Vainio for a discussion of his career and to eat a lot of pizza. At the end of the night we caught up with our friends and heard their stories from the week before falling asleep on Grampy’s floor.

**Fond du Lac (Abby, Missy, Aravind, Julianna, Kayla)**

**Monday: Welcome to Fond du Lac**

Our first day at Fond du Lac was spent mostly on the reservation and getting a feel for the various services offered through the Human Services Department. To begin the day, we traveled about 11 miles to Fond du Lac Reservation, which is bordered by the small town of Cloquet. That morning, we met with the Human Resources Department to do drug testing and get our background checks completed before heading off to the Min No Aya Win Clinic.

At the clinic, we met up with Holly Karjala, who was kind enough to organize our visit there. She gave us a quick tour of their facilities. In the Min No Aya Win Clinic, there are dental, ophthalmology, behavioral health, and medical services as well as a pharmacy.

Later in the morning, we met with Bunnie Jaakola, who has worked at the Min No Aya Win Clinic in the behavioral health services department for about 30 years. She gave us a history of the clinic and provided us with a wealth of in depth information about the many services offered there.

It was really interesting to see how the community had decorated the clinic with photographs of members of the tribe in past years.
and many paintings and photographs by local artists, including a display of pictures taken by Bunnie’s daughter during an ice storm. In the afternoon, we quickly toured the Fond du Lac Assisted Living Center. Built in 2011, the center houses up to 10 residents who are members of a federally recognized tribe, including FDL. At the Center we met with one of the staff nurses as well as a site coordinator. Both of them shared with us the day-to-day activities at the Center as well as the types of medical conditions the center can support.

After the visit to the Assisted living center, we had time to drive around bits of the reservation, including stopping at the FDL Tribal and Community College. We happened to arrive at the tail end of a college fair being held at the Community College Campus for local FDL youth.

To end our day, we toured the FDL Cultural Center and Museum located at the Tribal Headquarters. Jeff Savage, Museum Director, told us about the importance of treaty rights for American Indians and outlined all the injustices suffered by the tribes in the region. It was really eye-opening to see how the repercussions of those treaties are still affecting these tribes today. We were also able to view a video that told a major Ojibwe creation story and described the value of hunting, fishing, and cultural activities to modern-day tribal youth.

**Tuesday: Shadowing**

Day three began with a trip to the Center for American Indian Resources (CAIR), which is a Fond du Lac clinic, located in downtown Duluth. It provides healthcare services of all sorts, from behavioral health, to family medicine, to chiropractic care, to pharmacy care and beyond. The brand new, state-of-the-art clinic is open to members of any tribe at no cost to the patient. Students shadowed physicians and PAs, and were even able to practice their physical exam and interviewing skills! While half the group was shadowing, the other half were surveying the downtown Duluth attractions, including the public library and aquarium.

The group reconvened in Wisconsin, to see the early history of the Lake Superior region depicted in murals on the walls of the Superior Public Library.

Afterwards, the group visited the Fond du Luth Casino, which provides a considerable amount of
funding for the tribe and its programs. As they were just a short walk away, the group decided to visit the Superior Lake boardwalk as well.

To end the day, the group joined Shawn, his wonderful family, and Rick Smith (Director of the American Indian Learning Resource Center, a member of the Red Cliff reservation in Northern Wisconsin, and a leader with strong family ties to Fond du Lac) for a delicious dinner. The group discussed many things, from the University of Minnesota's programs for tribal leaders to the overarching belief and value systems of the Ojibwe people. We even heard a wonderful story about the lengths to which one will go for their love of hockey in Minnesota! Overall, the day was a great success.

**Wednesday: Traditional Medicine**

The group began the morning by dropping Kayla off to attend a conference for Ojibwe teens, with Ojibwe leaders and elders speaking about the ways in which young members can keep themselves healthy and happy. The importance of respect in relationships, teen safety, and traditional tobacco were among the topics discussed. A group of young Native teens from Minneapolis/St. Paul performed a play about teenage pregnancy that emphasized respect and responsibility. Meanwhile, the rest of the group visited Herb Sam in the DaVita clinic (which houses a food pantry, family practice and dental facilities). Herb Sam is an Ojibwe elder and traditional healer. He explained how his traditional practice works, and the ways in which western and traditional medicine work together (or rather, often don’t). Herb was very knowledgeable and his description of his practice was fascinating and enlightening.

After meeting with Herb Sam, the group joined Jim Mallery, Skip Sandman, Barb Sandman, Nurse Sam, and Dr. Hunter for a tour of the Mash-Ka-Wisen Treatment Center. The facility was quite unique in that those in treatment were also able to participate in and use traditional Indian culture to heal and work towards sobriety. The Ojibwe group has been affected by the opioid epidemic, but methamphetamine use is more often the drug of choice of users, although multiple drug use is common. Overall, the facility incorporated a holistic view of mental health and addiction combined with traditional cultural practices to aid in healing.
The group finished the day with a dinner at a local grill, then headed home to reflect on the events of the day. After some very serious and heavy discussions about society and our recent experiences, this evening to decompress was much needed.

**Thursday: FDL High School and RICH**

Our fifth day began with a trip out to the reservation to visit with students at the FDL High School. We met with a class of 10th graders and spent the morning chatting with them, telling them about our paths to medicine, and hearing about their goals. The students were pretty shy at first, but by the end they were very chatty and joking around with us. We were also able to see part of a ‘Quiz Bowl’ competition in which students from FDL as well as native students from some of the other high schools in the area were competing in an Anishinabee language test. Teams from each of the schools competed against each other, ringing in buzzers when they knew the correct answer. It was a very exciting event to be able to witness!

In the afternoon, we traveled down to Duluth to meet with Derek Jennings and Julie Davis at the Research for Indigenous Community Health (RICH) Center. The Center is housed in the American Indian Community Housing building, which serves as a community center, provides permanent housing, and is an art gallery for American Indians in the Duluth area. We took a tour of the building and were able to see some amazing artwork on display, as well as a rooftop garden that serves a source of food as well as an education opportunity for children living in the building, who design, plant and care for the garden in the Spring and Summer.

After the tour we had a long talk with Derek and Julie about the many research projects currently going on at RICH. Derek’s wife, Michelle, is also a researcher and director of the RICH Center, but unfortunately for us she was not able to attend the meeting as she is currently on maternity leave. The wide variety and inspiring nature of the projects being undertaken at the RICH Center are truly amazing and it was a profoundly fascinating meeting and incredible way to end our time at Fond Du Lac and in Duluth.

**White Earth (Tlalli, Rohini, Mariah, and Dan)**

**Sunday:**

Our trip had a bit of a rough start. After leaving Angie and Sandeep’s home, we proceeded on our drive to the Shooting Star Casino, where we would set up camp during our time on the White Earth Reservation. Unfortunately, there happened to be two Shooting Star Casinos on the reservation, and we had accidentally driven to the wrong one. But six-hours later, we finally arrived at the correct location. We then found out that the hotel room had been booked for the wrong nights. Fortunately, the kind staff at the casino was able to sort out our stay and get us into bed without too much of a hassle.

**Monday:**
We had a rather late start to our day as we met Cyndy, our contact at White Earth’s Tribal Health, for lunch at the casino. During our meal, we were treated to a performance by a drum circle comprised of a group of boys from the Circle of Life Academy, a school on the reservation. They proceeded to play several songs for us, and although the songs were energizing and lively, the most striking thing about the performance was how happy and excited the boys were. Their faces were covered with big, toothy smiles and they laughed as they played. You could tell that they truly enjoyed being there and playing their drums for us. The boys joined us for lunch, but much to their chagrin, they were quickly rushed back to school. After they had left, an elder of the tribe, Merlin, sat down and burned sweet grass. He then began to recount the history of the Ojibwe people and provided us with lessons that, oddly enough, were rather pertinent to issues our group had discussed in the long car ride the day before. He closed his story by inviting the four of us to participate in a sweat the next day.

Following our talk with Merlin, we met up with Kim, another member of Tribal Health, to take a tour of the reservation. She drove us throughout the area, showed us their resources, and provided us a glimpse of the problems that the tribe currently struggles with. Although many of the tribal buildings and tribe-owned properties were new, brightly painted, and cheery-looking, the surrounding neighborhoods were littered with stray dogs, garbage, and boarded-up homes.

After our tour concluded, we went to the Circle of Life Academy to provide the boys and girls there with a brief lesson in hygiene. Although the kids were too excited to focus, Tlalli’s energetic presentation made it an enjoyable experience.

Tuesday:

Early in the morning, our group split up to accompany White Earth’s Tribal Health nurses on their home health visits. The number of patients we saw, the miles we covered, and the areas of the reservation we visited differed for each member of the group, but we all appreciated our time there. It was a unique experience that afforded us a better look into the lives of people living on the reservation and the individual struggles they face trying to navigate the Indian Health Service (IHS) and Tribal Health medical systems.

Our home health visits were followed by a quick lunch and a tour of the Indian Health Services hospital. The tour included a photographic history of the White Earth Tribe, descriptions of the services provided by the federal government, and a discussion of Tribal Health’s current attempts to take over IHS’s roles and responsibilities. Patrice, our guide, spoke highly of the services offered, but also commented on the hospital’s struggles to retain qualified physicians and the negative impact that it has on patient care.
We took a quick tour of the White Earth Tribal Center and were then briefed about White Earth’s Harm Reduction Clinic. We received a brief history of the program’s efforts and were impressed by the steps that Clinton and Kim, the two individuals running the program, have taken to address the opioid epidemic. They’ve had to overcome a lot of obstacles, including resistance from people within the tribe who believed that money should not be “wasted” on those struggling from drug addictions.

The highlight of the day came next. We went to Native Stand, a program that helps to reeducate and assist at risk teens. While Rohini spent the rest of her evening working with the teens, Mariah, Tlalli, and I were fortunate enough to participate in a sweat that Merlin put together. I lack the words that are needed to do the experience justice, but I am truly grateful for the guidance Merlin gave each of us. I shall leave it at that, so I don’t do the experience a disservice.

Our time concluded, by discussing the current state of Tribal Health with Amy, another leader among the tribe. She painted a much different picture of IHS’s role on the reservation and described how they cannot appropriately respond to the tribe’s needs. This established an interesting juxtaposition between the picture painted by individuals working for Tribal Health and those who work for the federal government.

Wednesday:

As the day began, we split up to visit different programs throughout the reservation. Tlalli and I began our day at the Harm Reduction Clinic, while Mariah set out to work with Dr. Ung, a podiatrist, and Rohini made visits with the home nurses.

The Harm Reduction clinic functions to provide clean needles and education to individuals in the community who are struggling with opioid addiction. Frank and Sarah, two nurses who function as counselors, stressed the importance of establishing trust with the community and discussed the difficulties they’ve had making inroads into certain areas. The two had to ask everyone who came about their use of drugs, their HIV status, and many of their habits. I was struck by how Frank and Sarah avoided including any judgment in their questions and how they did not conduct any motivational interviews when people did not want to change their dangerous habits. Frank noted that although it would be ideal if they could get everyone to change their behaviors, the most important thing was to ensure that those who came to the clinic could use safely. He wanted them to feel comfortable and be safe. What was most striking about this, was that he had a close connection with many of the individuals who came into the clinic. Frank worked with former classmates and relatives, and I was amazed by how he could maintain his composure and structure even when helping those he had a personal relationship with.

Dr. Ung works out of a mobile clinic that he brings to different areas around the reservation. Although he and his family live in Iowa, he continuously travels to different reservations around the country to provide foot care. His visits had a certain flow and ease to them, and most of the appointments revolved around providing nail trimmings to the elderly and diabetics who could no longer take care of their own feet. It was clear how much Dr. Ung’s patients valued his opinion by the way they asked for advice on many other aspects of their health and their lives.
And it was perfectly clear how much he cared about his patients. He spoke about how they used to only run the clinic out of IHS, but he changed to a mobile clinic, so he could bring care to the elderly and children. There are people who had the greatest need for care, but also the lowest access to transportation. The extra miles he goes for his patients pulls him away from his home and prolongs his hours, but I could see it was worthwhile to him. It was warming to see that even physicians who are inundated with paperwork, travel, and patients will still go out of their way to ensure that people have the care that they need.

Thursday:

The day had a similar flow to the past few days, as we began by splitting up and each following a nurse through their home visits. Rohini worked with a nurse who was evaluating the development of young children. Meanwhile, Mariah and I continued with standard home visits and Tlalli worked with Dr. Ung at the foot care clinic.

While the day brought nothing new to the table, it continued to reinforce how welcoming and kind the community is. Even when I worked in impoverished areas of the reservation, the people I met were so grateful for our presence that they gave us gifts. Unfortunately, however, this day also stressed how ravaged the community is by drugs and poverty. Both had touched all my patients in some way and, in the worst cases, had drastically and irrevocably altered their lives.

After saying our goodbyes to our new friends at Tribal Health, we set out to regroup with the rest of the Geisel students at Grampy’s house. As we left, I reflected on everything we’ve seen and done on this brief trip. I am grateful and humbled by all the steps this community went through to make us feel welcome and to give us a glimpse into their lives and struggles.

Red Lake (Forrest, Sarah, Shruthi)

Monday:

Monday started off with us arriving at Red Lake Hospital at 8 AM. We were thrilled to find a “Welcome Dartmouth Medical Students” banner hanging in the hospital entrance. We met with Mary Ann Cook, the director of nursing at the hospital, and she took us to a room with coffee and pastries. After indulging in the refreshments, Ms. Cook began a wonderful slideshow regarding the history of Red Lake. She discussed the tribal council, the interplay between IHS and tribal health, the system of hereditary chiefs within the tribe, and the 7 different clans that make up the tribe.
Next, around 10AM, we met with Oren Beaulieu. Oren was an awesome guy who had done so much in establishing the hospital and recruiting providers to Red Lake. We also met Linda Bedeau, the deputy chief of the hospital, who took us under her wing and gave us an awesome tour of both the hospital and the reservation. She brought us around and showed us the tribal college, the Pow Wow grounds, Red Lake High School, and also gave us a tour of the detention center. It was interesting to see how the people in the detention center lived in group settings, and was saddening to see a number of young people that were serving time.

Linda was a wealth of information about the tribe and culture, having grown up on the reservation herself. The topic of mental health within the community came up in our conversations, and her view of suicide in particular stuck with us. She expressed that many people within the Native community view suicide as an “unforgivable sin”, and people who commit suicide are often shunned. We thought this was interesting and discussed our feelings about her viewpoints later as a group.

In the afternoon, we shadowed various providers from 2-4 PM. That night, around 6PM, we met up with the White Earth crew for the dinner at Green Mill Restaurant. We enjoyed pizza while sharing stories about our day. We were also pleased that our pediatrician Dr. Theresa Hamel and her husband attended the dinner.

**Tuesday:**

On day 2, I (Forrest) started off in the inpatient ward with Dr. Anderson, an extremely bright and affable internal medicine physician. We began rounds by holding a meeting to discuss each of the five patients at about 830 AM. One patient had recently had his second foot amputated due to diabetic neuropathy. Another woman had recently contracted C. difficile and had also undergone a skin graft auto-transplant for her heel.

From about 10-12PM I shadowed Dr. Felix, an emergency medicine physician. A woman came in holding a towel to her head, and explained through tears that her boyfriend had hit her in the head with a board. This case was extremely sad as the woman explained that she and her boyfriend had been fighting all morning when finally the police came and were able to intervene. At one point the woman became nauseous and began vomiting into a bag that Dr. Felix was holding. A nurse gave the woman an IV and allowed her to sober up, as her BAC was at 0.194. Dr. Felix explained that the woman needed to be transported to Sanford Health in Bemidji for a CT scan of the head, which is protocol for any head trauma to rule out brain hemorrhage.

In the afternoon I shadowed Dr. Hamel in the outpatient pediatric unit. We saw a few children for their checkups, saw one case of oral thrush in a 3 month old, and talked with one child who was having some problems with depression and thoughts of suicide. This was especially sad given the child’s age of only 10. He was a foster child that has been bounced around between families more than 8 times within the past few years, and it made me wish that the child had some degree of stability within his life. The child was referred to behavioral
health after a short chat with Dr. Hamel. Later in the day, Dr. Hamel taught me about the APGAR scores for newborns and talked about how much she enjoyed playing a part in the newborn’s life.

**Wednesday:**

We started Wednesday expecting it to go much like the previous two days, and some of it did. We spent the morning split between inpatient, outpatient, and ER shadowing. As with previous days, we were involved with many conversations about diabetes, hypertension, hyperlipidemia, obesity, and pregnancy. With a slightly greater familiarity with the patient population and a deeper understanding of physician-patient interaction we were able to engage better with the patients. Having shadowed the physicians the past two days there was a growing sense of understanding of what their role really was in the community. Many of the physicians had been at the RLH for >5-10 years and had seen many of these patients since they were children/teens, The longitudinal relationship between patient and physician was so wonderful and showed how significant these longitudinal relationships are in creating trust and comfort in a relationship.

Wednesday took a turn when we began talking to a mental health/behavioral health nurse. We had not planned for this conversation nor did we know much of what this department did, but it turned out to be one of the highlights of our experience at Red Lake. We talked with the nurse about the challenges of mental health maintenance and care, longitudinal care at a hospital (versus patients who should be at a nursing home), and the challenges of stigma in the Red Lake community. Many of the topics we touched during this conversation carried over to our conversation the next day with another behavioral health nurse. The continuity of the conversations and the multiple perspectives were so enlightening and engaging and definitely the highlight of my time at Red Lake.

As we continued our conversation with this nurse he suggested that we join him during a patient visit. We were hesitant at first, three of us in a room with a patient on a psych visit seemed to be intrusive and overwhelming for the patient; however, he insisted and suggested that he would ask us to step out if things were not going well. In sitting in on this patient with a patient experiencing acute psychosis we witnessed and learned so much. The patient was a 21 year old male who was found by the police having a psychotic breakdown in a parking lot and was brought into the ED. The nurse did an incredible job of giving the floor to the patient, but also carefully and artfully directing the conversation. Tell me about your life recently? How did you become homeless? What are you interested in doing? Do you plan to pursue that? Why do you feel like you did what you did? How are your relationships? With family? Your kids? Do you feel like your behavior is negatively affecting your relationships? What is triggering you to behave this way? Tell me, are you hearing voices pushing you to do these things?

There were moments when the patient tried to change the subject or veer the conversation away from what made him uncomfortable but the nurse did such a skillful job of redirecting the conversation without scaring the patient away. It was a fascinating process of
interviewing and uncovering the patient’s psychosis -- something we had never seen before. We spent the evening digesting and discussing the incredible day we had.

Thursday:

We awoke Thursday and had the sad realization that it would be our last one at Red Lake. At the beginning of the day, we talked again with a trip mentor Linda Bideau. She gave us all generous gifts of Red Lake health t-shirts and the famous wild rice grown on the reservation. We were grateful to speak with her again and left feeling like we had another dose of wisdom from the inspiring people at the hospital.

Next, the group of us got to spend some time working with the Behavioral Health professionals at the hospital. It was a nearly 3 hour conversation that covered everything from mental health, social determinants of health, and culture. It was a type of conversation that is so engaging that it was hard to believe so much time had passed. The behavioral health professionals are on the front lines of meeting the mental health needs that are a scarcity in many underserved populations. Our group definitely benefitted from the knowledge they had to share. Like so many people we encountered on the trip, their generosity with their time was a huge educational experience and a gift to us as students.

The Red Lake team then piled back into the Fusion (blue stallion) and headed to Shawn’s father’s cabin in Duluth. We met the other teams and had a little time to swap stories about the incredible patients, people, and experiences we had over the past few days. Everyone had different things to contribute to the conversation. The whole group convened for pizza and the chance to speak with Dr. Arnie, a Native American physician who has worked in Northern Minnesota and even produced documentaries in order to bridge the gap between the physicians’ offices and the people of the reservation. It was a great conversation and good end to our time in northern Minnesota.

All Together Again: Second Weekend

We caravanned down from Duluth to Minneapolis early on Friday morning, meeting at Little Earth. We met with Nouka Yang who spoke about ongoing projects at Little Earth and outlined possibilities for further collaboration. A handful of Geisel medical students have spent the summer between their first and second years as interns there, and the projects they completed continue to have impact. One student developed a survey to parse out what aspects related to healthcare are important to the community. It was exciting to hear that data from
this project is now being used by Little Earth as they create a strategic plan to improve health in the community. Another Geisel student completed a photovoice project over the summer, photographing and sharing the stories of other Little Earth residents. Our meeting was followed by a tour of Little Earth, where we were lucky enough to stop by a taco fundraiser and enjoy Indian Tacos - ground beef and other taco staples heaped atop fry bread - a real treat.

Afterwards we walked over the Indian Health Board for a lunch meeting and tour of that facility as well (lunch #2 for some!). We were able to mingle and hear from several providers working for the Indian Health Board, including a nurse practitioner and midwife. Hearing the midwife speak about her work with chemical dependency during pregnancy was especially influential.

Saturday, we were lucky enough to travel first to the Gandhi Mahal restaurant for more food and service opportunities. After lunch half of us stayed at the restaurant where we worked cleaning out some fish tanks which will be put into service in the aquaponics project the restaurant has underway. The rest of the group drove over to First Nation’s Kitchen to help with a spring cleaning project. Finally, we spent the last night of our trip at a dinner organized by the Alumni Relations office. This was a great way to meet alumni over food and drink and unwind after a fun and busy week.