

## Family Behavior of Urban American Indians

(from Social Casework, 1978; John G. Red Horse, Ron Lewis, Marvin Fein(?), and James Decker.)

Effective policy development of human service delivery to American Indians depends on an understanding of cultural characteristics and extended family networks.

Ecological formulas are becoming increasingly popular as protocols for human service models. This trend represents a certain irony in the context of service provision to minority families. The function of American Indian families, for example, has long been disabled by social service personnel who appear insensitive to unique Indian family cultural and structural needs. Removal of children from American Indian families following a variety of social diagnoses is approaching epidemic proportions. William Byler cites that 25 to 35 percent of American Indian children are raised outside their natural family network. If ecological standards are applied, American Indian families appear qualified for the endangered species status.

This article examines characteristics unique to American Indian families and attempts to relate those to developing human ecology models in casework. Attention is directed toward extended family networks which represent the interactive field in which caseworkers should conduct transactions.

Irving M. Levine's social conservation model serves as a theoretical orientation. This model assumes that individual mental health is linked to a sense of selfhood which is accomplished through adherence to an historical culture and is transmitted principally through family socialization. Family structure and process, therefore, represent the cornerstone for individual behavior, cultural acquisition, and mental health.

### FAMILY STRUCTURE AND CULTURAL BEHAVIOR

American Indian family networks assume a structure which is radically different from other extended family units in Western society. The accepted structural boundary of the European model, for example, is the household. Thus, an extended family is defined as three generations within a single household. American Indian family networks, however, are structurally open and assume a village-type characteristic. Their extension is inclusive of several households representing significant relatives along both vertical and horizontal lines.

Network structure influences individual behavior patterns because family transactions occur within a community milieu. This is important to understand so that mislabeling may be avoided. Normal behavioral transactions with the network relational field, for example, may appear bizarre to an outside observer.

#### CASE ILLUSTRATION

The following case illustration provides a typical example of this point:

A young probationer was under court supervision and had strict orders to remain with responsible adults. His counselor became concerned because the youth appeared to ignore this order. The client moved around frequently and, according to the counselor, stayed overnight with several different young women. The counselor presented this case at a formal staff meeting, and fellow professional stated their suspicion that the client was either a pusher or a pimp. The frustrating element to the counselor was that the young women knew each other and appeared to enjoy each other's company. Moreover, they were not ashamed to be seen together in public with the client. This behavior prompted the counselor to initiate violation proceedings.

A Minneapolis American Indian professional came upon the case quite by accident. He knew the boy's family well and requested a delay in court proceedings to allow time for a more thorough investigation. It was discovered that the young women were all first cousins to the client. He had not been frivolously "staying overnight with them"; he had been staying with different units of his family. Each female was as a sister. Moreover, each family unit had a responsible and obligated adult available to supervise and care for the client.

A revocation order in this case would have caused irreparable alienation between the family and human service professionals. The casework decision would inappropriately punished the youth as well as several members of his family for simply conducting normal family behavior. Moreover, its impact would affect people far beyond the presenting client and those members of his family who were directly responsible for his care. The young man had a characteristically large Indian family network consisting of over 200 people and spanning three generations.

Structural characteristics of American Indian family networks confront human service professionals with judgmental issues beyond that of labeling. Extended family often serves as a major instrument of accountability. Standards and expectations are established which maintain group solidarity through enforcement of values.

Single-parent and single-adult households do appear in American Indian communities. Professionals bound by nuclear family parameters point to this fact in planning service resources.

Consequently, they are reluctant either to use or legitimate aunts, uncles, cousins, and grandparents as alternate or supportive service care givers.

#### OTHER CASE ILLUSTRATIONS

Nancy, for example, was an eighteen year-old mother identified as mentally retarded and epileptic by the department of welfare officials. Although retardation was subsequently disproved, the department assumed custody and control of Nancy's infant child.

Nancy's parents insisted that the family network was available for assistance if necessary. The welfare staff considered this offer untenable. The grandparents were deemed senile and unable to care for an infant. They were in their early fifties.

The staff ignored the fact that the grandparents had just finished caring for three other young and active grandchildren with out dependence on institutional social intervention. Moreover, these children appeared to be well-adjusted. The officials simply insisted in this case that standard placement procedures be followed; a foster home was obtained for Nancy's child.

The placement orders were eventually overruled in Nancy's case, but not without heroic legal intervention. It is unfortunate that such adversary strategies are necessary to prove competencies of natural family networks. Often, as the following case illustrates, family competency and responsibility evolve as a normal process of network accountability.

Anita was the elder within the family. She was a direct descendant of the most renowned chief of her band and enjoyed high status. She lived alone in a trailer. Shortly after her seventieth birthday, she became ill and unable to care either for herself or to perform routine household chores. A social worker arranged for Anita's admission to a rest home.

The family accepted this interventive plan without comment. Subsequently, however, the situation changed. Anita received regular visits, but these did not satisfy family needs. Anita became lonely for home and the family became lonely for her. A ritual feast was held which Anita attended. Family concerns regarding her absence were expressed and a decision was made that she should remain at home.

The family developed its own helping plan. Each member was given a scheduled time period to provide homemaker services for Anita. Through this shift system, the family network assumed service responsibility. In this case, the family in the immediate vicinity consisted of ten households. Service providers ranged from thirteen-year-old grandchildren to fifty-year-old children.

### FAMILY NETWORK HIERARCHY

American Indian family network behavior also contributes to a very conservative cultural pattern. A vigorous network is both retained and developed for transmission of cultural attributes. Continually reinforced and enduring relational roles serve to illustrate this behavior.

Grandparents retain official and symbolic leadership in family communities. Both are active processes sanctioned by the children and their parents. Official leadership is characterized by a close proximity of grandparents to family. It is witnessed through the behavior of children who actively seek daily contact with grandparents and by grandparents who monitor parental behavior. In this milieu, grandparents have an official voice in child-rearing methods, and parents seldom overrule corrective measures from their elders. Symbolic leadership is characterized by an incorporation of unrelated elders into the family. This prevails during the absence of a natural grandparent, but it is not necessarily limited to, or dependent, on such an absence. It is witnessed through the behavior of children and parents who select and virtually adopt a grandparent. In this milieu, younger people are seeking social acceptance from an older member of the community. Symbolic grandparents will not invoke strong child-rearing sanctions. Because their acceptance is sought, their norm-setting standards are seldom ignored.

### THREE DISTINCT FAMILY PATTERNS

Extended family networks represent a universal pattern among American Indian nations. Data from one American Indian family service program, however, point to significant variability among the networks. Specific family characteristics, therefore, serve as critical information in the development of methodological guidelines for casework practice.

Three distinct family lifestyle patterns serve for initial identification: 1) a traditional group which overtly adheres to culturally defined styles of living, 2) a non-traditional, bicultural group which appears to have adopted many aspects non-American Indian styles of living, and 3) a pan traditional group which overtly struggles to redefine and reconfirm previously lost cultural styles of living. Selected behavior variables for each pattern appear below:

Variable of behavior	Family lifestyle patterns		
Language	<p style="text-align: center;">Traditional</p> <p>Ojibwa is spoken language of parents &amp; grandparents. Children are bilingual; able to transact family affairs in Indian language.</p>	<p style="text-align: center;">Bicultural</p> <p>English is spoken language of parents, grandparents, and children. Grandparents are usually bilingual. Some Indian language is held through formal classes.</p>	<p style="text-align: center;">PanTraditional</p> <p>Either English or Ojibwa is spoken language of parents, grandparents, and children. Indian language is regained through formal classes.</p>
Religion	<p>Midewiwin remains as the belief system. It retains the characteristics of a very closed system, following family networks.</p>	<p>Anglo belief system prevails; is generally, but not exclusively, Catholic. Some all-Indian congregations exist with culturally adapted canons.</p>	<p>A modified Indian belief system mixing several traditional forms; i.e., Midewiwin, Native American Church, etc. Unlike closed structure of traditionalists, proselytizing strategies are employed.</p>
Family relational field	<p>Extended network</p>	<p>Extended network</p>	<p>Extended network</p>
Social engagement	<p>Some acceptance of dominant society's activities; i.e., bowling, etc. Cultural activities such as feasts, religion, and pow wows take precedence over all others.</p>	<p>Dominant society's activities prevail, i.e., bowling, baseball, golf. Relate to non-Indians well. Cultural activities remain of interest but not necessarily enacted through behavior; e.g., will sit and watch at pow wows and read about religion. Very active in Indian meetings and politics.</p>	<p>Openly eschew activities of dominant society. Cultural activities prevail. Those who are not expert try to recapture singing and dancing skills.</p>

Many observers of American Indian life tend to hold biases concerning which pattern is most legitimate or functional in contemporary American society. This judgmental behavior represents a luxury that caseworkers must avoid, because each pattern is legitimate within its own relational sense of selfhood.

Many observers assume that different family lifestyle patterns point to an ongoing erosion of cultural values. Studies suggest, however, that American Indian core values are retained and remain as a constant, regardless of family lifestyle patterns. Pattern variables, therefore, do not represent valid criteria for measuring "Indianness."

The importance of family lifestyle patterns to human service professionals is that each pattern represents a different interactive field, that is, a different environmental context for social casework. As would be expected, family responses to intervention vary. Traditional families, for example, cannot relate to professionals and prefer to ignore mainstream social methodologies. Generally, these families are very courteous to strangers. They will politely listen to professionals, but seldom respond to any social prescriptions which depart from customary practice.

Conversely, bicultural families are able to relate to professional caregivers. They are able to accept and cope with contemporary social prescriptions. Pantraditional families denounce professionals and mainstream social methodologies. They are engaged in attempting to recapture and redefine cultural methodologies.

#### FAMILY NETWORK DYNAMICS

Diverse family network interlockings have emerged over time as a result of geographic movements and intertribal marriages, and these complexities warrant scholarly investigation. Of critical significance to this discussion, however, is the fact that American Indian relational values have remained intact through the years. Extended family networks remain as a constant regardless of family lifestyle patterns.

Network behavior patterns clearly point to the emergence of a distinct, closed American Indian community. Outsiders, including representatives of agencies providing mandated services, do not gain entrance easily. This attitude has influenced the development of health and welfare services. Ninety percent of the American Indians in Minneapolis responding to questions relating to health needs behavior, for example, indicated a preference for receiving services from American Indian workers. This preference is clearly demonstrated by American Indian clients in the St. Paul-Minneapolis Twin Cities metropolitan area of Minnesota who rely on American Indian service agencies. This contrasts with non-Indian health programs located in the same community, which are continuously involved in strategies to recruit American Indian clients and are unable to serve a representative number.

Outside observers often cite this network behavior as fraught with dangers, because many American Indian service providers are not professionally trained. American Indians, however, have a commendable history in medicine and in community mental health. American Indian families, for example, traditionally organize supportive networks for children through a naming ceremony. This ceremony actually reconfirms the responsibilities of a natural network, that is,

aunts, uncles, and cousins. The family emerges as a protective social fabric to provide for the health and welfare of the children. Namesakes provide what professionals define as “substitute services” if parents become incapacitated. Unlike similar religions and cultural rituals, namesakes become the same as parents in the network structure.

American Indian programs in the “Twin Cities” metropolitan area formally incorporate aspects of ethnoscience, such as naming ceremonies, into care giving strategies. Traditional feasts represent a common activity. Ritual feasts are held according to customary standards, for example, at the seasons’ changes or at naming ceremonies. Preventative feasts are conducted to bring a family together whenever danger is imminent. Celebrative feasts are held during special occasions, such as Mother’s Day, observances. American Indian people, of course feel comfortable in these surroundings. Moreover, they are secure in developing relationships with American Indian service providers who attend the feasts.

Ronald Lewis developed an interesting schematic through a tracking of Indian health behavior in Milwaukee, Wisconsin. The following table identifies various resource levels and a sequence of behavior that emerged from his investigation. It confirms network behavior. Its prevailing characteristic is that the mainstream health care system is used only after network resources are exhausted.

1. Self
2. Family Network
3. Social Network
4. Religious Leader
5. Tribal Community
6. Mainstream Health Care System

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1. The Individual.
  2. Goes to immediate family first.
  3. Goes to extended family (cousins, aunts, uncles)--the social network.
  4. Goes to religious leader.
  5. Goes to tribal council.
  6. Finally goes to formalized health care system.

#### CONCLUSION

The objective of this article has been to identify important attributes of American Indian family network structure and cultural behavior and to inform professionals about the importance of culture as a variable in human services, especially as it affects understanding within an interactive field.

Because any health care is dependent upon client utilization, an understanding of American Indian network behavior appears critical to policy development and service planning efforts.

Using Levine's social conservation model, two critical imperatives emerge: (1) to identify traditional, long-standing cultural attributes, which have contributed to family cohesiveness and individual mental health, and (2) to develop human service systems which reaffirm a sense of family purpose.

An exigency specific to American Indians is that the cultural and structural integrity of extended family networks be revitalized and be supported. The authors believe that the adoption of a social conservation model by the human services would greatly improve service efficiency and, at the same time, vigorously enrich the quality of life of a currently alienated and underserved client population.