

Honoring Children, Making Relatives (HC-MR)

Treatment Description	 Acronym (abbreviation) for intervention: HC-MR Average length/number of sessions: 12-16 Aspects of culture or group experiences that are addressed (e.g., faith/spiritual component, or addresses transportation barriers): Traditional aspects of parenting with American Indians and Alaskan Native from their world view Trauma type (primary): physical abuse Trauma type (secondary): domestic violence Additional descriptors (not included above): Limited parenting skills due to boarding school experience
Target Population	 Age range: (lower limit) 3 to (upper limit) 7 Gender: ☐ Males ☐ Females ☒ Both Ethnic/Racial Group (include acculturation level/ immigration/refugee history-e.g., multinational sample of Latinos, recent immigrant Cambodians, multigenerational African Americans): American Indian and Alaska Native chidlren Other cultural characteristics (e.g., SES, religion): Reservation, rural, tribal land Language(s): Tribal language can be used to describe the various components of the intervention or familiar words such as "Honoring Children" can be used to describe part of the intervention. Region (.e.g., rural, urban): Rural, reservation, tribal Other characteristics (not included above):
Essential Components	Theoretical basis: American Indian and Alaskan Native World View of parenting and interaction between adult and child.
Clinical & Anecdotal Evidence	 Key components: Emotions, Physical, Thinking, Spiritual Are you aware of any suggestion/evidence that this treatment may be harmful? Yes No Uncertain Extent to which cultural issues have been described in writings about this intervention (scale of 1-5 where 1=not at all to 5=all the time). 1 This intervention is being used on the basis of anecdotes and personal communications only (no writings) that suggest its value with this group. Yes No Are there any anecdotes describing satisfaction with treatment, drop-out rates (e.g., quarterly/annual reports)? Yes No If YES, please include citation: Weekly phone consultation and video tape sessions Has this intervention been presented at scientific meetings? Yes No If YES, please include citation: Are there any general writings which describe the components of the

 Other clinical and/or anecdotal evidence (not included above):
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Research			Number of Participants	Sample Breakdown	Citation
	Published	□Yes	N =		
Evidence	Case Studies		14 -	By gender:	
	Case Studies	⊠No		By ethnicity:	
				By other cultural	
				factors:	
	Pilot Trials/	Yes	N =	By gender:	
	Feasibility	\boxtimes No		By ethnicity:	
	Trials (w/o				
	control			By other cultural	
	groups)			factors:	
	Clinical Trials	Yes	N =	By gender:	
	(w/ control	⊠No		By ethnicity:	
	groups)				
				By other cultural	
				factors:	
	Randomized	☐Yes	N =	By gender:	
	Control Trials	⊠No		By ethnicity:	
				By other cultural	
				factors:	
	Studies	Yes	N =	By gender:	
	describing	⊠No	14 -	By ethnicity:	
	modifications			by ethnicity.	
	modifications			By other cultural	
				factors:	
	Other	Yes	N =	By gender:	
	research	⊠No		By ethnicity:	
	evidence	<u> </u>		, , , , , , , , , , , , , , , , , , , ,	
				By other cultural	
				factors:	
	What asses	sments (or measures ar	e used as part of the	intervention or for
Outcomes	research pu			s assa as part of the	
0 4 0 0 11100				lucted, what were the	outcomes?
				·	
Training	List citations for manuals or protocol descriptions and/or where manuals or protocol descriptions can be obtained. www.icctc.org How/where is training obtained? Training in Honoring Children, Making			r where manuals or	
Training				ildran Making	
Materials &	 How/where is training obtained? Training in Honoring Children, Making Relatives is scheduled forApril, 2007 				
Requirements			raining? \$3000		
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	 Are intervention materials (handouts) available in other languages?	
Pros & Cons/ Qualitative Impressions	 What are the pros of this intervention over others for this specific group (e.g., addresses stigma re. treatment, addresses transportation barriers)? Incorporates language, beliefs, practices, and values of the culture What are the cons of this intervention over others for this specific group (e.g., length of treatment, difficult to get reimbursement)?: New, no evaluation, length of training, need background in PCIT or CBT Other qualitative impressions: 	
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