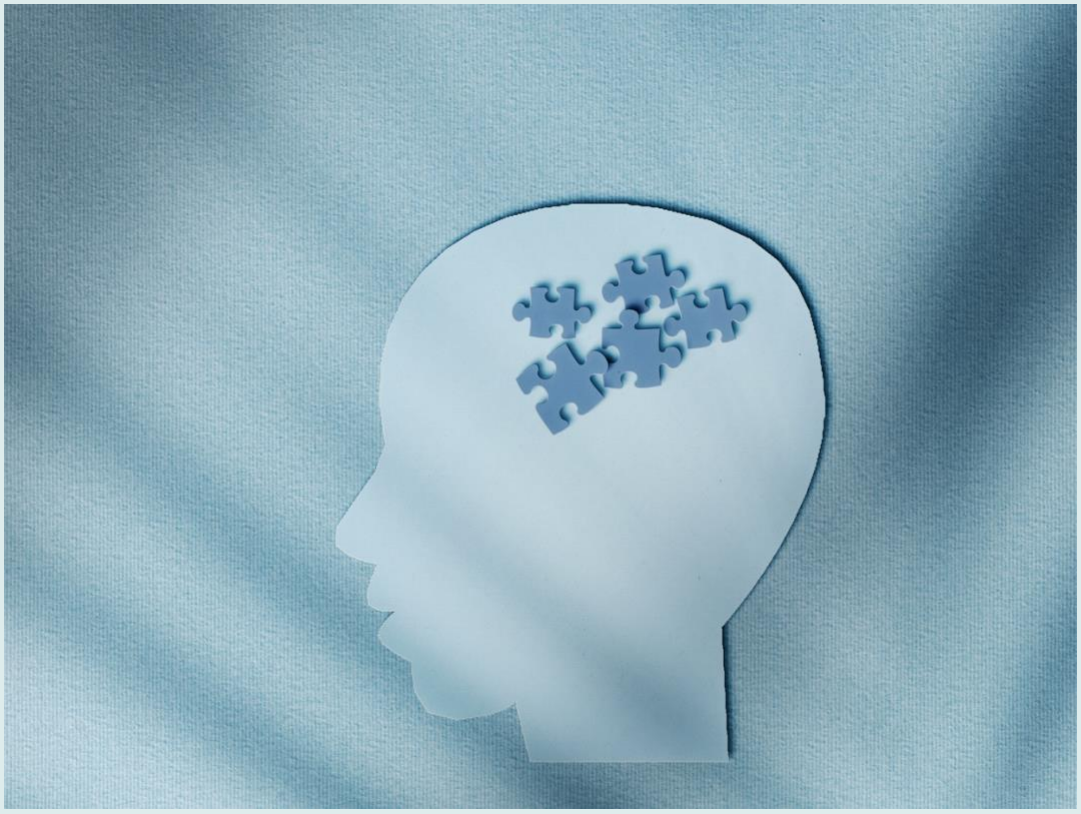
July 2, 2025

Ysleta del Sur Pueblo Behavioral Health Division



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Ysleta del Sur Pueblo Behavioral Health Division

Ysleta del Sur Pueblo are one of the three Native American tribes recognized by the federal government in Texas. They are located in Ysleta, Texas near the El Paso area. This has been home for the Tigua people for over 300 years.

*The behavioral Health Division of Ysleta del Sur Pueblo provides integrated services and programs to address the biopsychosocial needs of the Ysleta del Sur Pueblo tribal members and their respective families. They have three different divisions including social services, mental health, and alcohol and substance use. These programs are referred to as the Circle of Harmony, Circle of Hope, and the Circle of Healing, respectively (*Ysleta del Sur Pueblo, n.d.).

Purpose

Identify gaps in mental health and substance use services rendered by the Ysleta del Sur Pueblo Behavioral Health Division, with the ultimate goal of improving and providing culturally competent and ethical care for the tribal members of the Tiguas.

Objectives

- Assess satisfaction.
- Identify unmet needs.
- Collaborate with local voices.
- Ensure culturally competent, ethical, accessible and effective care.

How I would conduct the Needs Assessment

To identify the gaps of the rendered care and the desired services I would implement first a community-based participatory approach. Implemented this would reflect by forming a tribal advisory group that includes elders, younger tribe members, behavioral health specialists, and community leaders. They would aid in a collaborative manner in guiding the needs assessment process. Israel et al. (2013) emphasizes the importance of the role of community-based participatory approach as it increases the relevance and accuracy of the research findings but promotes community ownership. This reinforces the idea that by involving the community throughout the process there is significant improvements that could lead to sustainability. This article further emphasized the importance of community members being involved in the needs assessment process as it has shown to yield more effective services as their lived experiences can develop meaningful and culturally competent interventions.

Next, in a collaborative setting design for data collection to assess the needs of the Tigua community in the Ysleta del Sur Pueblo would develop. This would include anonymous surveys, focus groups, and interviews. Throughout this process, there will be collaborative efforts with community leadership and mental health specialist to ensure ethical adherence, cultural relevance and respect, and accessibility.

Selecting a Measurement Tool

I would use the Client Satisfaction Questionnaire (CSQ-8) as a quantitative tool. It is a validated survey consisting of 8-items that uses the Likert scale to measure the satisfaction with the services provided. It is flexible to be culturally adapted to be distributed in different formats, languages, and accessibility. Another measurement tool as explored through Walters et al. (2002) article is the Indigenist Stress-Coping Model that sought to understand how historical and modern stressors have influenced the mental health of the indigenous population. This article also presented how indigenous traditions and the preservation of them could serve as protective factors in helping indigenous populations cope with those stressors. Walters et al. (2002) further emphasizes the need to implement this model as it can guide needs assessment and program evaluation to provide counseling or services tailored for tribal communities. Lastly, conducting focus groups and interviews with different groups within the Tiguas tribe will help outline priorities and unmet needs of the community. A diverse variety would be needed including ensuring young, elders, women, men, and leaders were part of the process. The focus groups and interviews would be professionally transcribed and analyzed through professional software. Examples of this software include NVivo and ATLAS.ti which allow researchers to identify themes in the participants responses (Lumivero, 2020).

Usefulness of the Tool and Research Findings

The CSQ-8 is a standardized, validated tool that will provide data that can help build the community towards actionable steps in response to the community's feedback. The CSQ-8 will provide data on the satisfaction of counselor/worker competence, accessibility of the programs and services, and cultural competence. This can be implemented in all the spheres of services they provide which include the Circle of Harmony, the Circle of Hope, and the Circle of Healing. To ensure accessibility an online and paper format would be developed with different language options including English, Spanish, and Southern Tiwa. Informed consent must be obtained, and anonymity must be protected to foster a sense of honesty in the responses.

A study conducted by West et al. (2022) showed that through the integration of standardized surveys and culturally grounded feedback, in this specific case, focus groups and interviews uncovered deeper community priorities within indigenous communities. These priorities included the young members integrating spirituality, traditional ceremonies, and cultural practices into treatment services. Additionally, there was an emphasis largely placed on holistic wellness and culturally responsive outreach and education that is delivered by trusted local individuals. Herron & Venner (2023) identified among American Indian and Alaska Native (AI/AN) communities an immense need for culturally relevant treatment that integrates traditional practices and customs with mental health theoretical framework to address health inequities including higher levels of Substance Use Disorders (SUD) and Post-Traumatic Stress Disorder (PTSD). They describe it as cultural tailoring of existing models that incorporate traditional healing and push for community level interventions to promote healing and wellness (Herron & Venner, 2023).

Intervention

The ***independent variable*** would be the type of counseling service assessed in the Ysleta del Sur Pueblo Behavioral Health Division. Their three programs of behavioral health services include the Circle of Harmony that provide social services, the Circle of Hope that serves mental health and lastly, the Circle of Healing that addresses alcohol and substance use.

The ***dependent variables*** would be the results from the CSQ-8, and the qualitative data collected from the focus groups and interviews. Other dependent variables can include level of cultural relevance and level of trust in the behavioral health division. It is important to note that there may be variability in satisfaction between different groups within the Tigua community. This could include differences between the young and the elders and the men from the women. Expectations will vary as different services will be assessed that different groups of people will prioritize different elements or dislike others. Additionally, the level of cultural integration into the services provide can largely influence how the participants will express their emotional safety and connection. Furthermore, this would grant the feedback to tailor and accommodate the services more effectively.

Validity & Reliability of the Assessment Tools

The CSQ-8 has demonstrated a high internal consistency which is measured by Cronbach's alpha which is greater than .9, signifying a strong content validity. It also lends itself the flexibility to be translated and adapted to use in different culturally diverse groups. It is described as a robust quantitative tool as it is reliably used in a variety of behavioral health settings. The CSQ-8 is a short, easy to present, and supported by psychometric evidence that its reliability ensures consistent results and a valid measure of assessing satisfaction.

The Indigenist Stress-Coping Model is a theoretical framework that shows empirical support, cultural relevance, and consistent implementations in different Indigenous communities. It acknowledges the role of historical trauma/experiences, cultural identity and spirituality. Walters et al. (2002) show that implementing protective cultural factors such as traditional customs and cultural identity development show an association with reduced depressive symptoms and substance use. It has been qualitatively assessed through interviews and feedback that confirm the cultural accuracy and depth it provides.

When implementing focus groups and interview to ensure valid and reliable assessment it is important to use standardized protocols, audio recording and transcribing, and documenting and recording data accurately.

References

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