



# "Past Policies, Present Outcomes: Historical Trauma and Maternal– Child Health Today"

Indian Country ECHO 2026  
Pregnancy Care and Access

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# A Word about Land Acknowledgement/Welcome

The University of Minnesota stands on  
Miní Sóta Makhóčhe, the homelands of  
the Dakhóta Oyáte.

## **The speaker should acknowledge:**

Acknowledge the land itself, then

Acknowledge the people

Or

Welcome if part of the host Nation(s)

## **Why?**

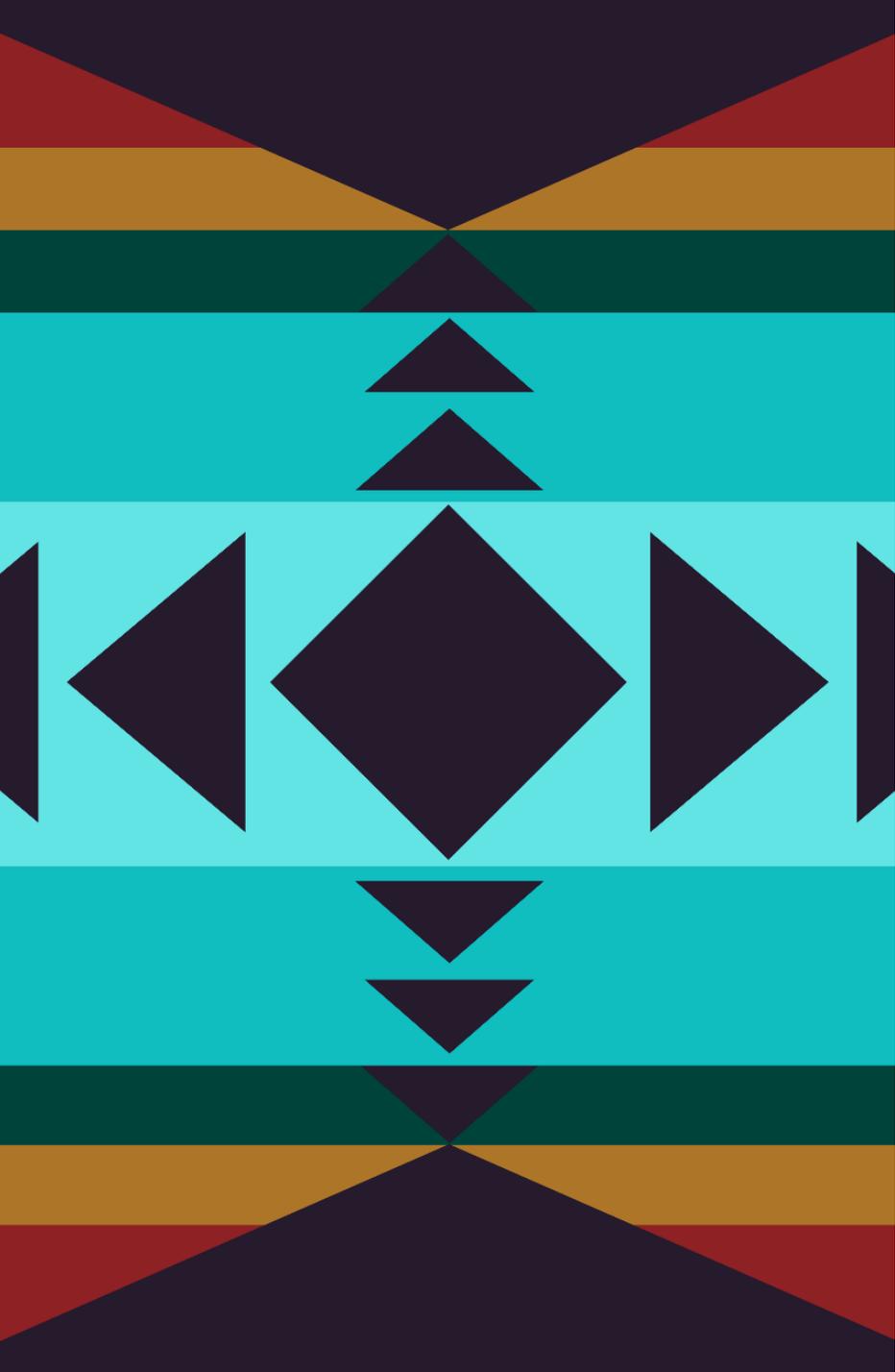
Truth before Reconciliation

# Learning Objectives

By the end of this session, participants will be able to:

- Describe how historical trauma and colonial policies contribute to present-day disparities in maternal and child health outcomes among Indigenous populations.
- Identify key structural barriers affecting pregnancy care access, including geographic, policy, and health system factors.
- Discuss strategies for improving equitable access to prenatal and pregnancy care through culturally safe and community-informed approaches.





# Its By Design ...

That non-Native Providers do not know about peoples Indigenous to North America's neither histories or current realities- including health and maternal health.

That nurses, students, health policy experts and other providers are unprepared to then give strategic, targeted, grounded and safe care to American Indian/Alaska Native (AI/AN) mothers and families.

Therefore-

'Indians 101' is greatly needed in health professions. Canada will be used as an example of one way to turn the knowledge level, comfort with, and understanding the relevance of this needed education.

# Colonization:

Federal legislation affecting the health and wellbeing of Indigenous communities.



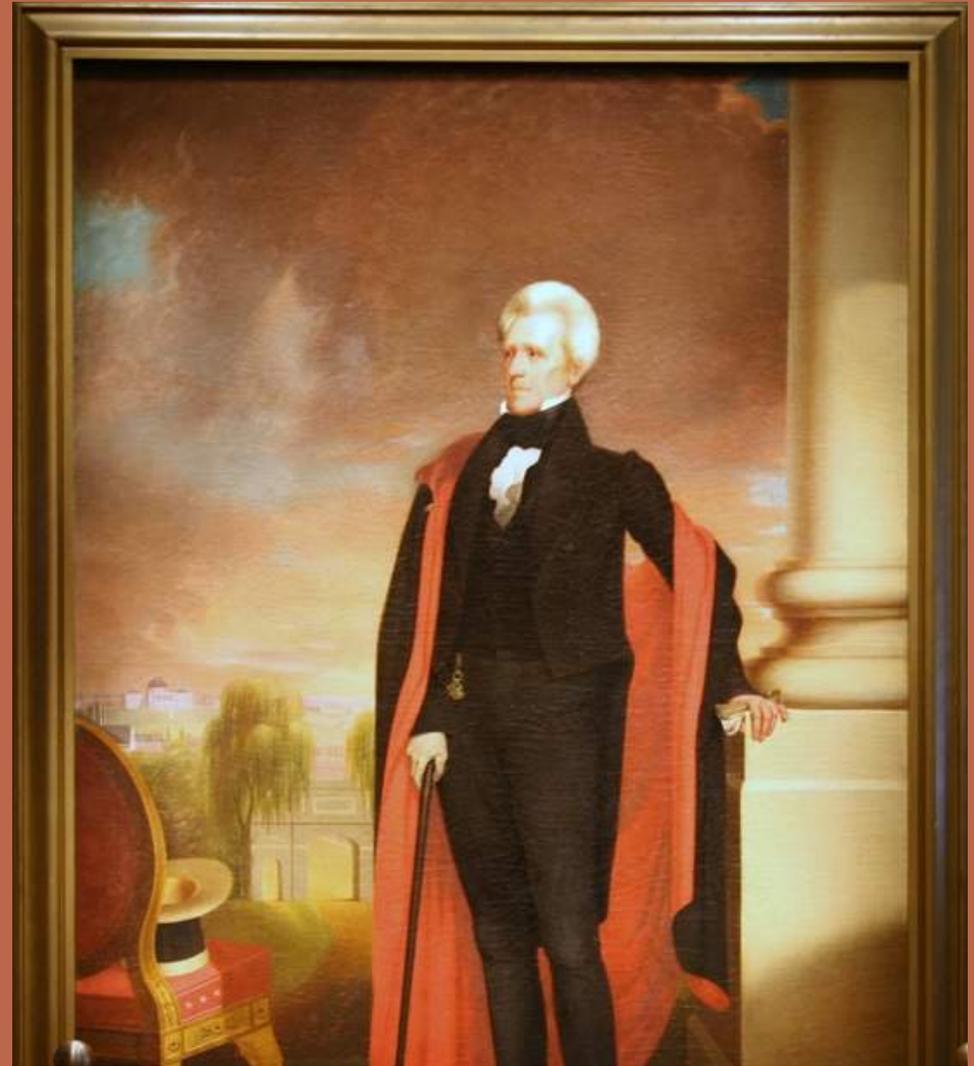
# Federal Policies on "The Indian Problem"

Supreme Court:

Federal Trust Responsibility (1823-1832)

Federal Indian Policy Periods:

- Removal era (1825-1850)
- Reservation (1850-1887)
- Allotment and Assimilation era (1887-1934)
- Indian reorganization era (1934-1940's)
- Termination era (1940's-1961)
- Indian Self Determination (1970s-current)



# Why Can't 'they' get Over it?

“Invasion is a Structure, Not an Event”

Patrick Wolfe

~~6 Grandfathers~~





# Indian Citizenship Act. On June 2, 1924

Voting not complete until the 1960s

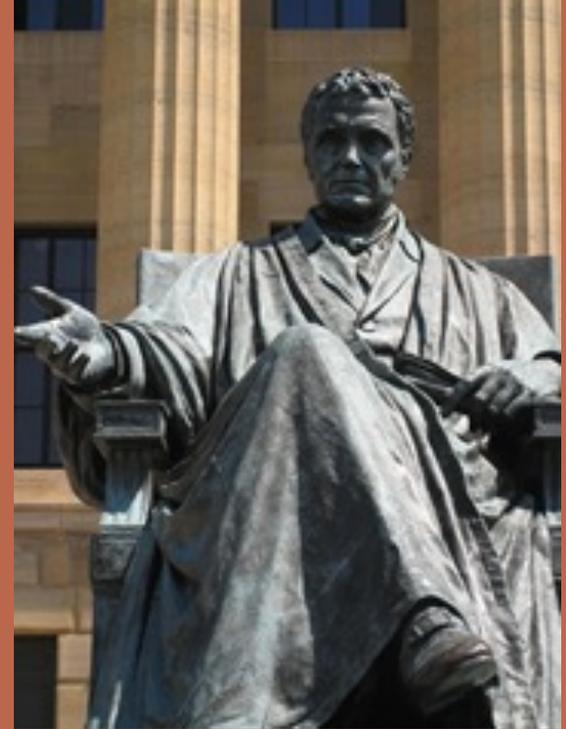


# Marshall Trilogy

Seen as the basis for all Indian Law in the US  
Johnson v. M'cIntosh (21 U.S. (8 Wheat.) 543 (1823)-tribe's sovereignty seen as partial after European conquest- Therefore no land can be purchased directly from Indians.

Cherokee Nation v. Georgia (30 U.S. (5 Pet.) 1 (1831), Seen as 'Domestic Dependent Nations'- Wards of US- do not rise to the level of States as in ability to sue in federal court under diversity jurisdiction.

Worcester v. Georgia (31 U.S. (6 Pet.) 515 (1832), States do not have the power to force tribes to adhere to their regulatory jurisdictions- the Federal Trust Responsibility was formed..



Chief Justice John  
Marshall  
decisions 1823-1832

# Removal Era (1825-1850)

Indian Removal Act signed into law by Andrew Jackson in 1830, yet Jefferson was the 'architect of Removal' (Miller 2006)

Almost 50,000 Indians removed by 1837 making 25 million acres available for mostly White settlers.

Dubbed Trail of Tears



# Reservation Period (1850-1887)

To separate Indians from US citizens/settlers  
and 'prevent conflict'

Important for nurses to know 78% of AIAN  
are off reservation

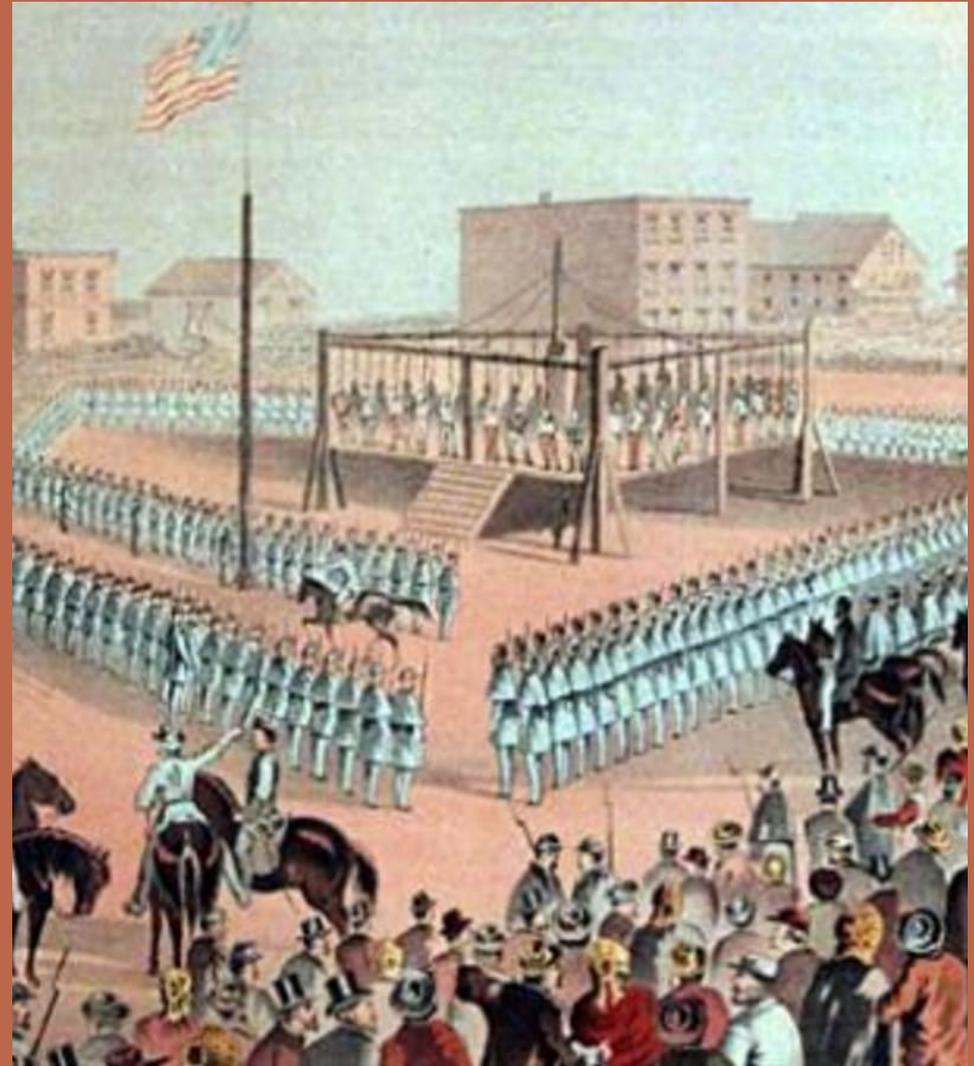
60% are urban based



Wounded Knee, SD

# Lincoln

- Dakota 38 + 2
- Largest Mass execution to date on US soil as ordered by the government
- Executed Indian men and boys
- 1862
- To get land for settlers in MN
- 6 days before Emancipation Proclamation



# Allotment and Assimilation era (1887-1934)

Goal- to break up Indian ownership of land/end tribal existence (Miller 2006).

Confiscated 'surplus' lands

Loss of 48 million acres/of the remaining land much was arid or semi-arid

Jefferson had promised they could occupy these lands 'forever'

**INDIAN LAND FOR SALE**

GET A HOME  
OF  
YOUR OWN  
\*  
EASY PAYMENTS



PERFECT TITLE  
\*  
POSSESSION  
WITHIN  
THIRTY DAYS

**FINE LANDS IN THE WEST**

The poster features a central image of a Native American man in traditional dress, looking directly at the camera. The background is a stylized American flag with stars and stripes. A thick red line, resembling blood, runs horizontally across the top of the poster, dripping down over the central image. The text is arranged in a grid-like fashion around the central image, with the title at the top and the bottom text at the bottom.

# Assimilation- Kill the Indian Save the Child

## Boarding Schools

**American Indian children were adopted out and fostered at alarming rates in the 40s, 50s and 60s to Non-Indian families.**





# Kill the Indian Save the Child

Adoption to non-Indian families is now largely now against federal law- Indian Child Welfare Act 1978.

# Indian Reorganization era (1934-1940's) or the Indian New Deal

Indian Reorganization Act (1934) -Tried to right some of the wrongs of the Allotment and Assimilation Period.

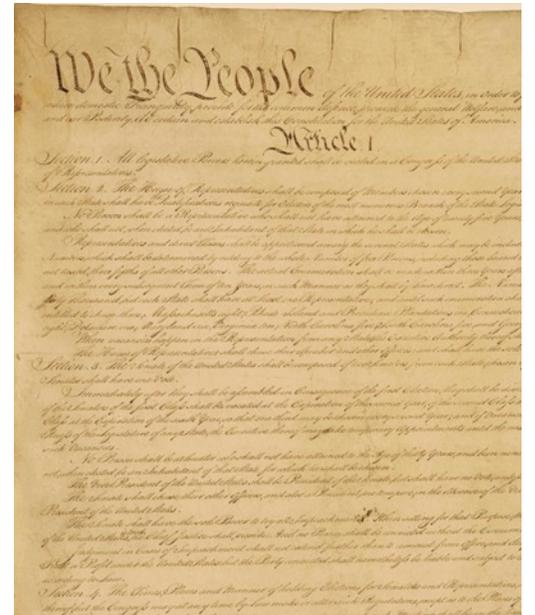
Important- John Collier- Commissioner of BIA

Return to communal holdings

Return of local self-government

Return to managing of assets

Constitutions



# Termination Era (1940s to 1961)

Tribes lost Federal government-to-government connection

Loss of Federal Recognition

Loss of Federal trust responsibility  
over 100 tribes terminated

And therefore- Loss of Healthcare...



# Self-Determination Era (1970s to Present)

Indian Education Act  
Indian Child Welfare Act  
PL 638  
Unfunded Mandates  
Chronic Underfunding

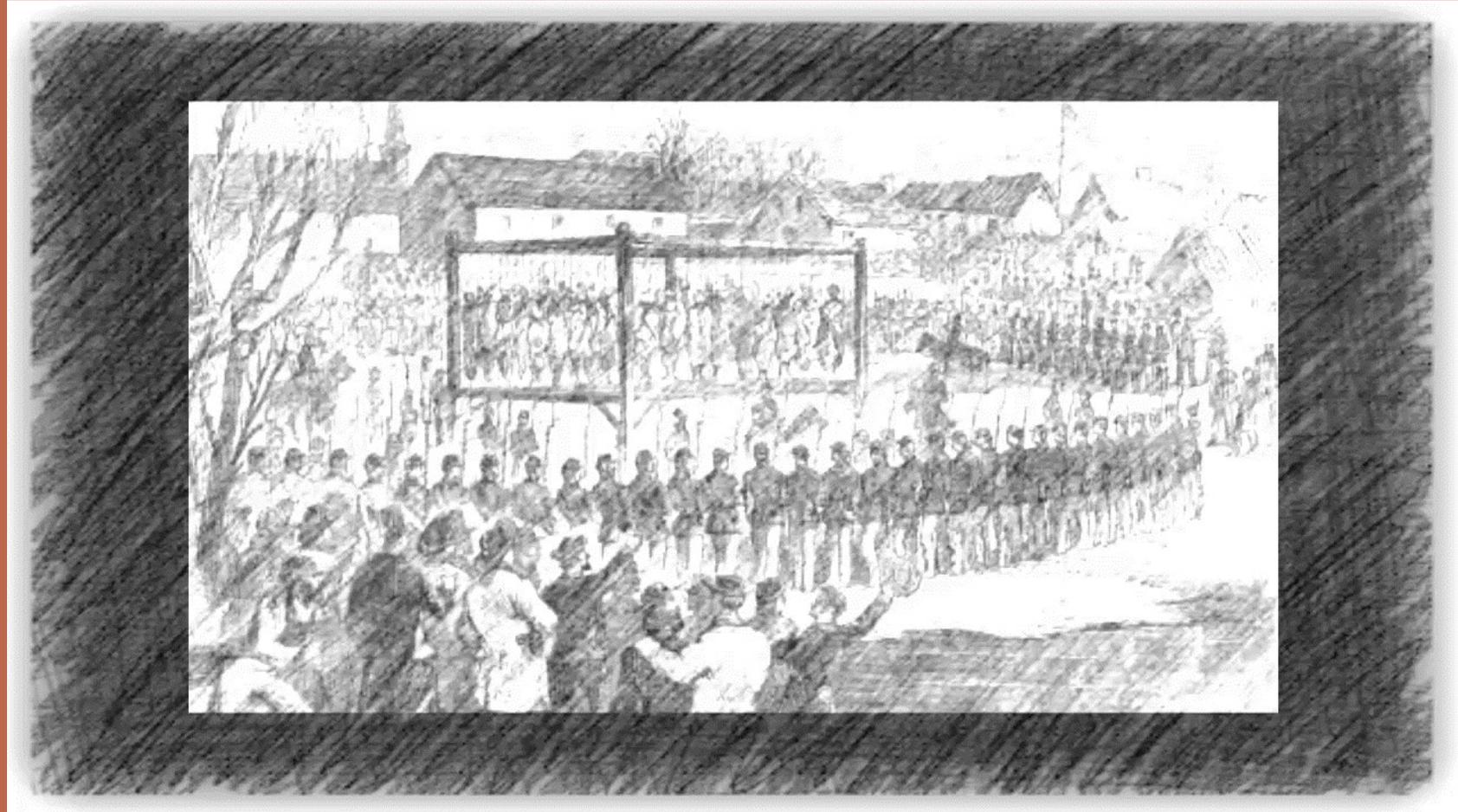


Source: <https://www.ainta.org/how-do-you-say-mother/>

# 7 Generations Later...

A replica of the Gallows was built in 2017 in the Twin Cities-MN

- No consultation with tribes
- No elders or knowledge keepers
- No understanding of re-traumatization



# Genocide Convention

## UN Definition 1948

The definition contained in Article II of the Convention describes genocide as a crime committed with the intent to destroy a national, ethnic, racial or religious group, in whole or in part.

### Elements of the Crime of Genocide

1. Genocide by Killing Members of a Group
2. Genocide by Causing Serious Bodily or Mental Harm
3. Genocide by Deliberately Inflicting Conditions of Life Calculated to Bring about Physical Destruction
4. **Genocide by Imposing Measures Intended to Prevent Births**
5. **Genocide by Forcibly Transferring Children**

# Data Distortion

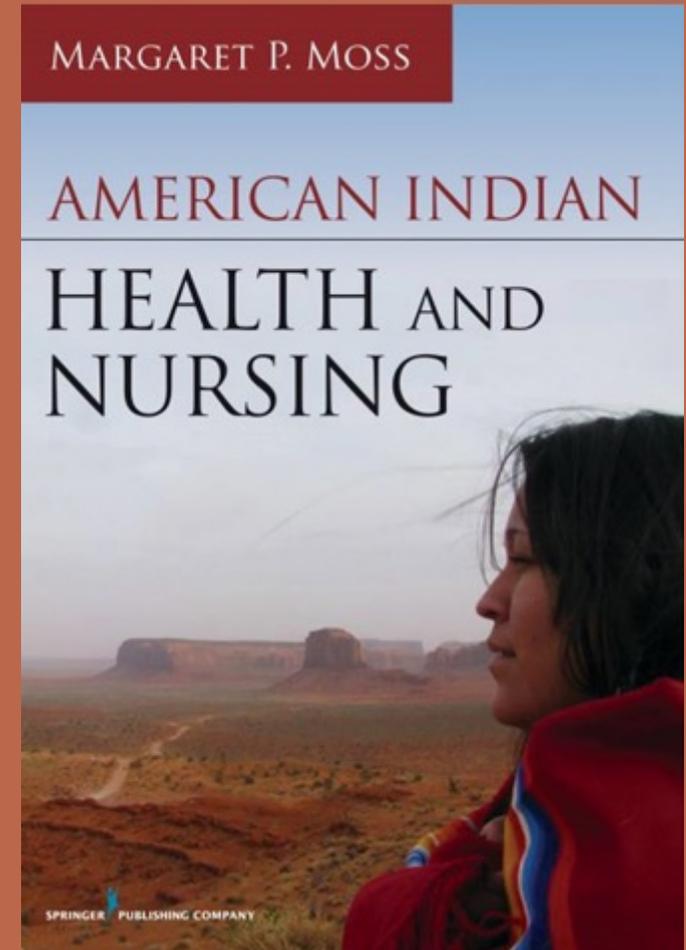
Counting is off and usually in directions that are most harmful to the AIAN populations

1. Undercounting- in terms of misidentification. AIAN have the highest erroneous id than any other group.
2. Other groups off by 4% AIAN can be off by 40%
3. Over 100-130 times in Trends in Indian Health it says numbers off d/t mostly state reporting
4. And yet 78 % of AIAN live off reservation so state reporting becomes crucial
5. And then over counting. When using the census- it is totally self report. This is when anyone can check the box and they do- based on -I think my grandmother was part xxx
6. So then global numbers look good at least IN the 70s for LE therefore nothing much needs to be done! Relieves any real action
7. But drilling down is very bad 40s, 50s numbers from 1900 for the US pop, Dakotas, Alaska

# Tales from the Field

## An Indian Hospital,,,

At times first time seen by western medicine would be at labor, distance and clashing cultures



# Maternal Morbidity/Mortality Rates for AI/AN

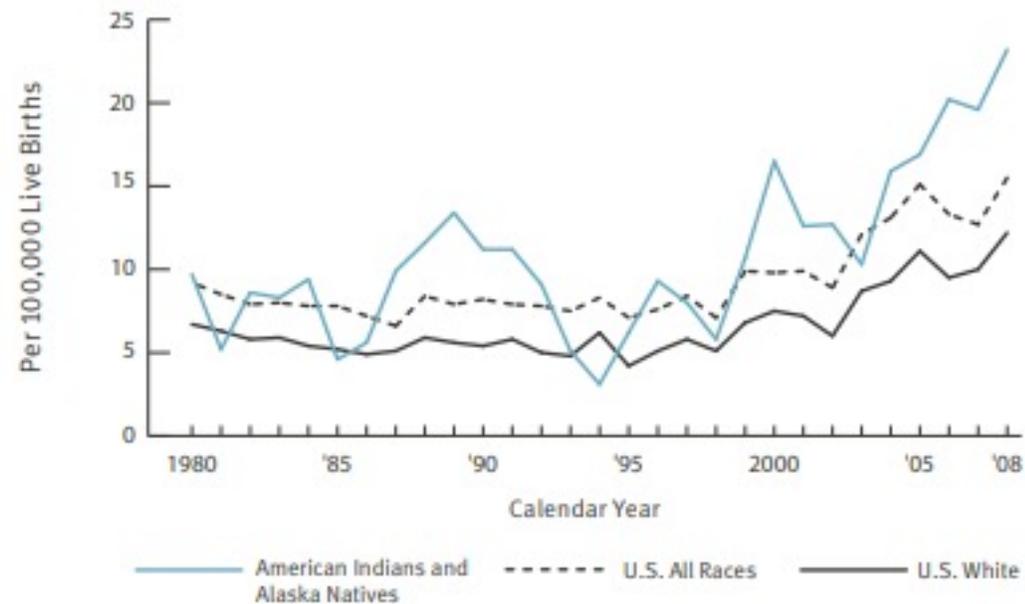
- Maternal mortality rate was 23.8 deaths per 100,000 live births in 2022
- 2.3 times more likely to die from pregnancy
- ~18% of AI/AN new mothers reported experiencing postpartum depressive symptoms (2017)
- 9.9% of pregnant AI/AN people experienced gestational diabetes

The maternal health of American Indian and Alaska Native people: a scoping review  
Ailish Burns 1,\* , Teresa DeAtley 2, Susan E Short 1



The maternal mortality rate for AI/AN dropped from 28.5 (rate per 100,000 live births) in 1972-1974 to 23.2 in 2007-2009, a decrease of 19 percent. The AI/AN 2007-2009 rate (23.2) is 90.2 percent higher than the U.S. white rate of 12.2 for 2008. These AI/AN rates have been adjusted to compensate for misreporting of AI/AN race on state death certificates.

Chart 3.7 Maternal Death Rates



The infant mortality rate for AI/AN dropped from 25.0 (rate per 1,000 live births) in 1972-1974 to 8.3 in 2007-2009, a decrease of 67 percent. The 2007-2009 rate is 26 percent higher than the U.S. all races rate of 6.6 for 2008. These AI/AN rates have been adjusted to compensate for misreporting of AI/AN race on state death certificates.

Chart 3.8 Infant Mortality Rates

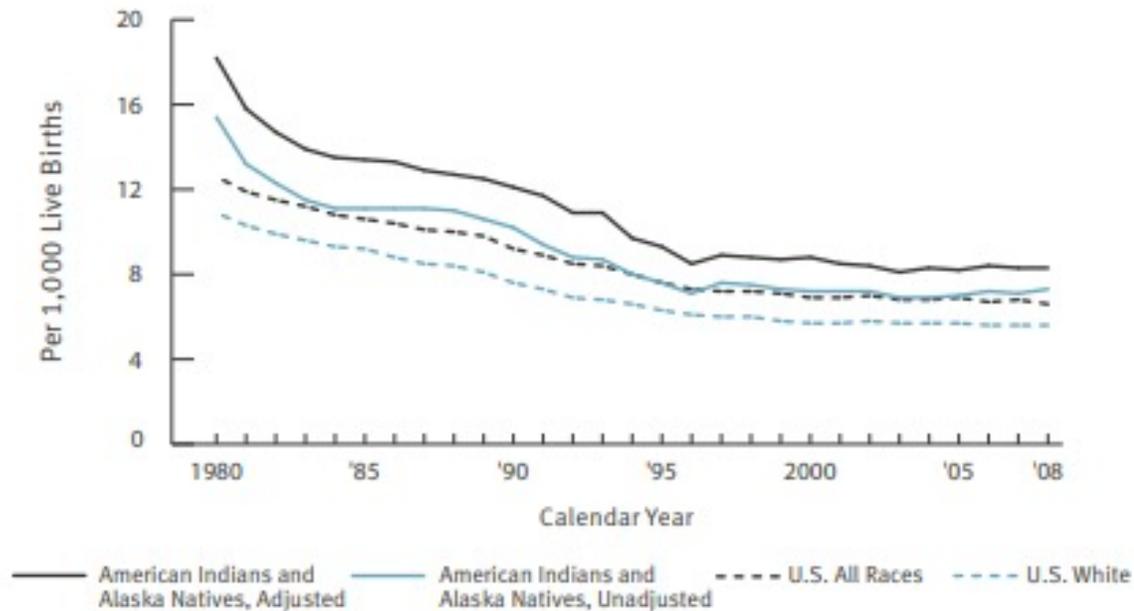


Table 4.3

## Ten Leading Causes of Death for Decedents 15 to 24 Years of Age

American Indians and Alaska Natives, IHS Service Area, 2007-2009, and U.S. All Races and White Populations, 2008  
(Rate per 100,000 Population)

Cause of Death	American Indian and Alaska Native				U.S. All Races Rate	U.S. White Rate	Ratio of American Indian and Alaska Native <sup>1</sup> to:	
	Number		Rate				U.S. All Races	U.S. White
	Unadjusted	Adjusted <sup>1</sup>	Unadjusted	Adjusted <sup>1</sup>				
<i>All Causes</i>	1,599	2,013	150.0	188.9	74.2	71.0	2.5	2.7
Unintentional injuries	802	1047	75.3	98.3	32.5	36.1	3.0	2.7
Motor vehicle	538	723	50.5	67.9	20.6	22.4	3.3	3.0
Other unintentional injuries	264	324	24.8	30.4	11.9	13.7	2.6	2.2
Suicide	350	423	32.8	39.7	9.9	10.6	4.0	3.7
Homicide	154	180	14.5	16.9	12.2	6.3	1.4	2.7
Malignant neoplasms	34	41	3.2	3.8	3.8	3.9	1.0	1.0
Diseases of the heart	33	41	3.1	3.8	2.5	1.9	1.5	2.0
Congenital anomalies	20	25	1.9	2.3	0.4	0.3	5.8	7.7
Pneumonia and influenza	11	16	1.0	1.5	0.5	0.5	3.0	3.0
Chronic liver disease and cirrhosis	8	10	0.8	0.9	0.1	0.1	9.0	9.0
Cerebrovascular	5	8	0.5	0.7	0.4	0.4	1.8	1.8
Pregnancy childbirth puerperium	6	6	0.6	0.6	0.4	0.3	1.5	2.0
<i>All other causes</i>	176	215						

<sup>1</sup> Adjusted – specifies a number, rate, or ratio of rates adjusted to compensate for misreporting of AI/AN race on state death certificates.

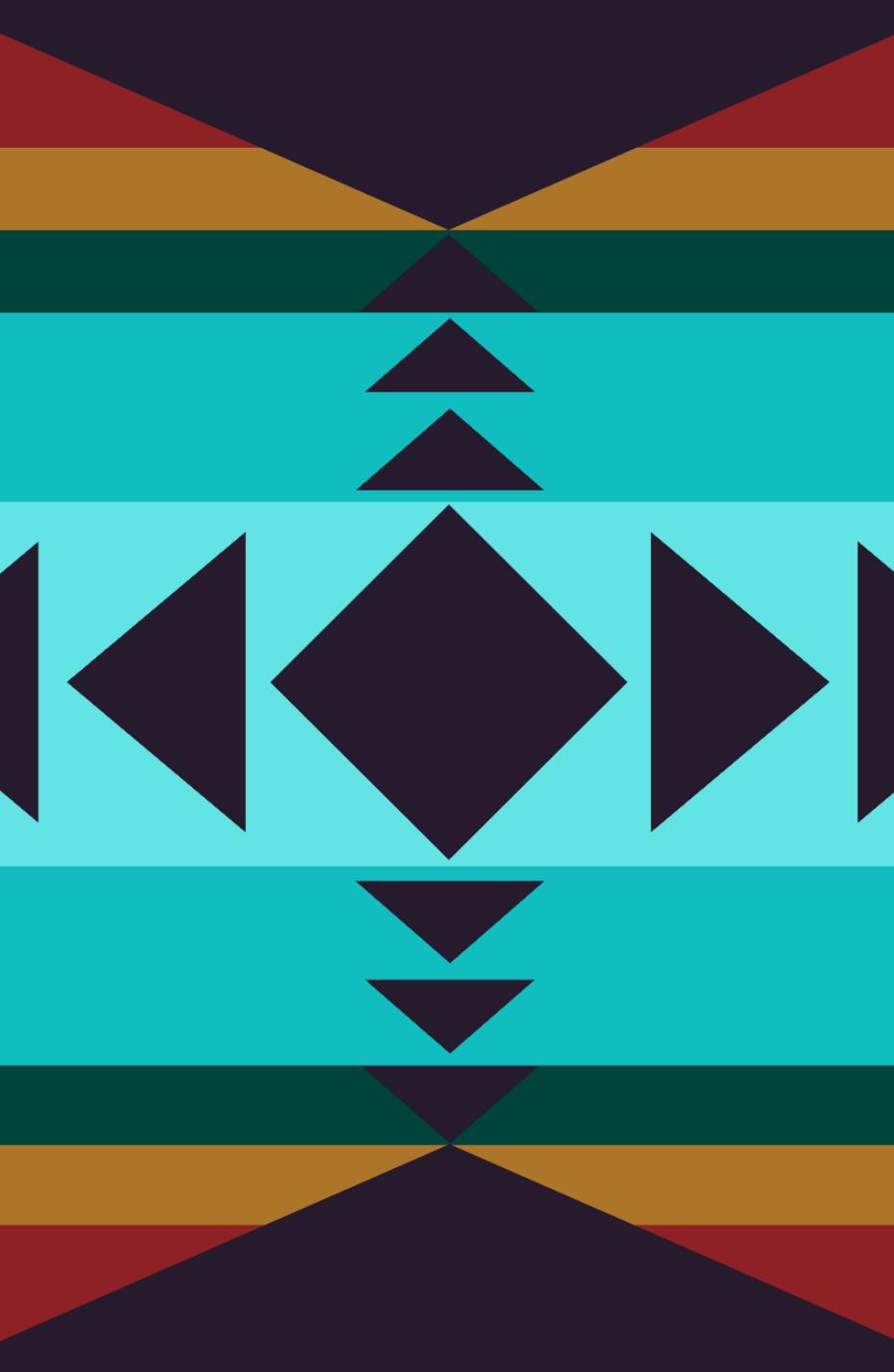
NOTE: Causes of death listed are based on the order of adjusted number of deaths.

SOURCE: Rates for U.S. All Races and U.S. White: Centers for Disease Control and Prevention. CDC Wonder. <http://wonder.cdc.gov/>

# Luján Convenes Experts to Create Roadmap for Native Maternal Health Solutions

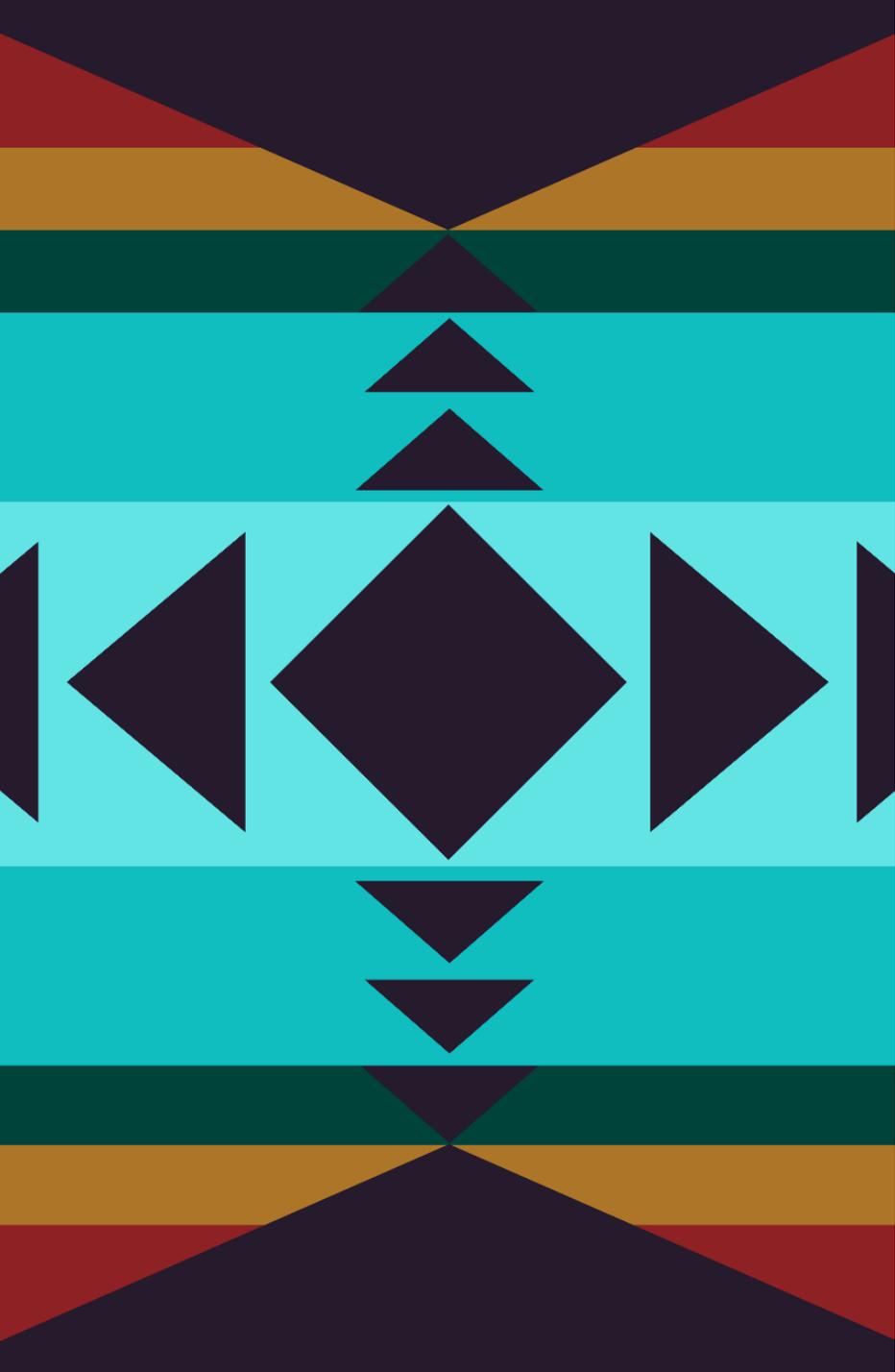
- [From Barriers to Bridges](#): Implementing Access Solutions to Improve American Indian, Alaska Native and Native Hawaiian Maternal Health
- [Strengthening Maternal Health Data](#) to Improve Health and Wellbeing in American Indian and Alaska Native Communities
- [Preventing Maternal Mortality](#) and Morbidity among American Indian, Alaska Native and Native Hawaiian People
- [Building Systems of Care](#): Investment in Native Maternal Health Infrastructure
- [Workforce Equity in Maternal Health](#): Tribal and Native Community-Led Solutions





# What to Learn More About

- **Decolonization**
- **Indigenization**
- **Reconciliation**



# What Nursing Can Do

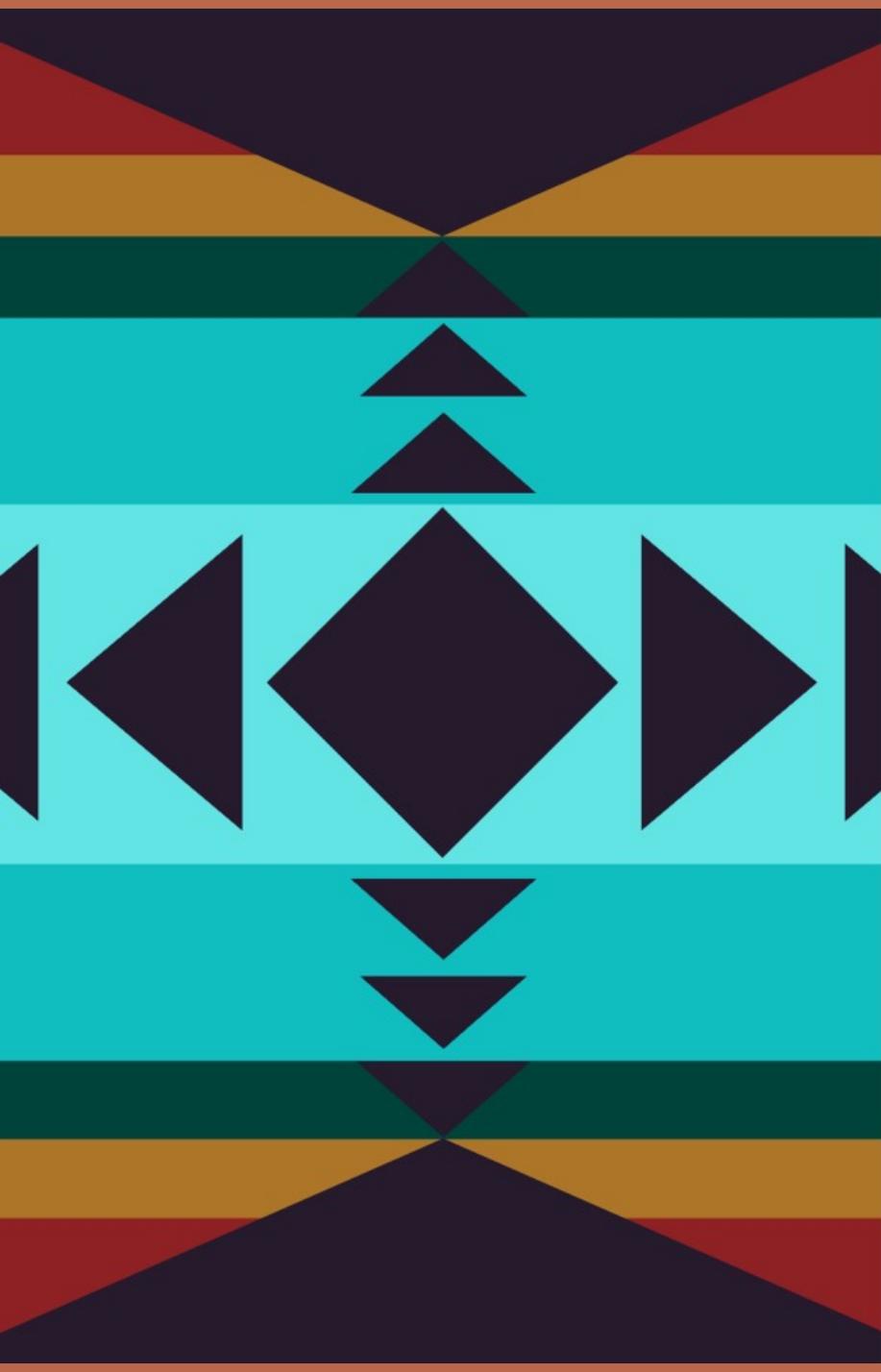
Grow an understanding of Indigenous Experiences  
They are not all the same

Understand that to decolonize in an educational and or health system is to make room for all that has been strategically, purposefully cloaked or excluded (for a variety of reasons)

Note changes that should be made

Making room may start with evaluating the environment in your areas

Learn something 'new'



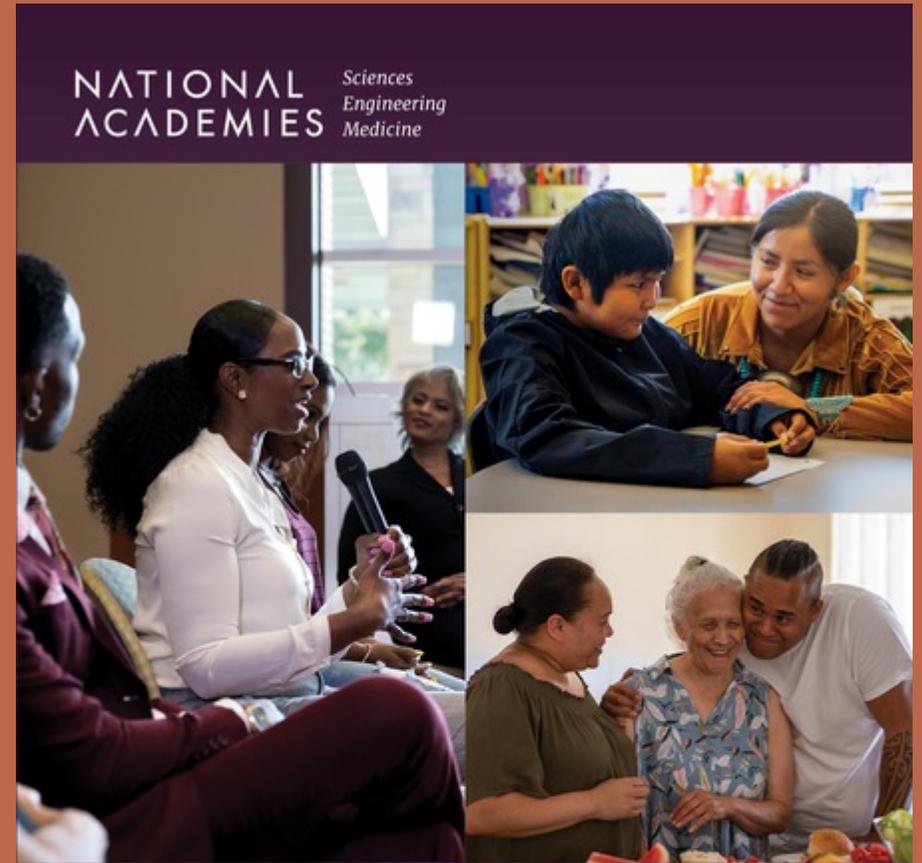
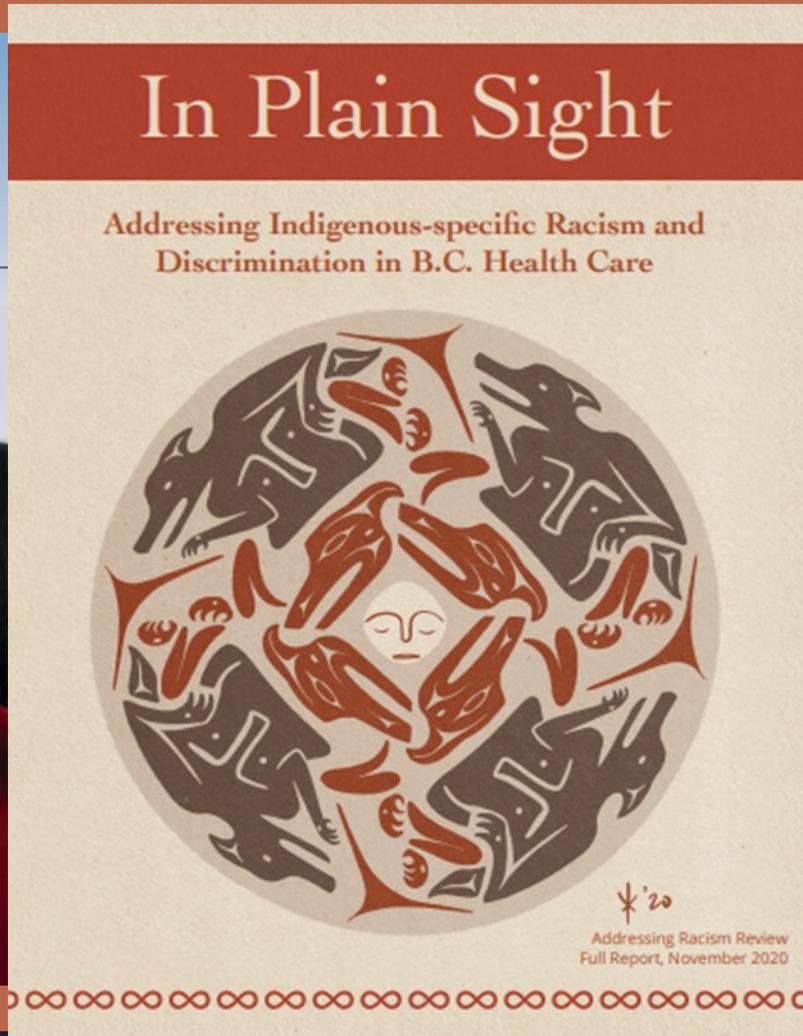
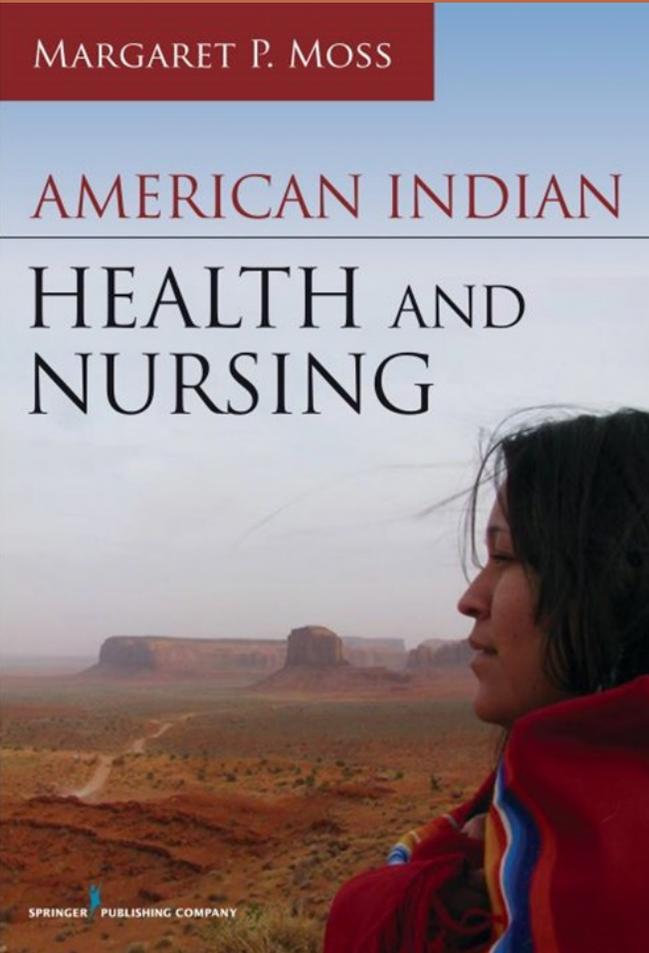
Reconciliation Pole



University of British Columbia



# Resources



Federal Policy to  
Advance Racial, Ethnic,  
and Tribal Health Equity

Consensus Study Report

**Thank You!**