

Mino-Bimaadiziwin: Culturally Responsive Health Messaging in Ojibwe Communities

by

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DISSERTATION ABSTRACT

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Title: Mino-Bimaadiziwin: Culturally Responsive Health Messaging in Ojibwe Communities

In response to the opioid crisis disproportionately affecting Native American populations, this dissertation examines the communication preferences of the Ojibwe community in Northern Minnesota for addiction recovery program materials. It seeks to answer the question: What preferences do Ojibwe community members have for messaging within addiction recovery program materials, and in what ways can their preferences inform the creation of effective communication tools that encourage engagement with available recovery resources?

Employing grounded theory and Indigenous Standpoint Theory, the study unfolds in phases, each contributing to a comprehensive understanding of effective communication strategies within Ojibwe communities. Initial pretesting at Northern Minnesota Addiction Wellness Center informed the development of culturally sensitive research tools, laying the groundwork for future phases and ensuring the study's approach resonated with the cultural context and recovery practices of the Ojibwe community.

The first phase gathers insights through interviews with a diverse group of participants: healthcare professionals who treat opioid use disorder, community Elders, and Ojibwe individuals who have experienced addiction recovery. These interviews aim to identify the specific barriers and facilitators to effective communication, revealing the complexities of addressing substance use disorder within this cultural context.

The second phase shifts toward active community involvement through Collaborative Creation Circles. This approach engages Ojibwe members who are currently clients at Northern Minnesota Addiction Wellness Center in the process of designing culturally resonant recovery materials. This participatory co-design method ensures the materials reflect genuine recovery narratives and empower participants to share authentically.

The final result of this research was the creation of a comprehensive website named Mino-Bimaadiziwin, a digital resource platform inspired by the insights from the community. It features several key components: Personal Stories, offering narratives of recovery; a Decolonial Perspective, which challenges conventional narratives around addiction; Cultural Practices, highlighting traditional healing and recovery methods; Artistic Representations, showcasing community art; and an interactive map of Resources. Each element is crafted to address the distinct needs of the Ojibwe community, aiming to provide a holistic and accessible repository of recovery resources.

This dissertation contributes to the broader field of communication and public health by illustrating the importance of incorporating Indigenous knowledge and perspectives into health messaging. Through a detailed exploration of the Ojibwe community's communication preferences, the study highlights the potential for culturally tailored messaging to enhance engagement with recovery programs. Ultimately, it seeks to offer pathways for improving health outcomes and well-being in Ojibwe communities, advocating for a respectful integration of cultural values and practices in public health initiatives. This work not only addresses a critical health issue but also reinforces the value of culturally informed research methodologies in creating meaningful and effective health communication strategies.

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DEDICATION

This work is dedicated to the seven generations of relatives who came before me and those who will follow. (Especially my mother, Rosanna Sue Gordon). It is my hope that this work not only reflects our community and its values but also brings about real and positive changes in the lives of those who need it—both directly and indirectly. Without your guidance and the lessons of reciprocity you have imparted, this work would not exist. Without your influence, we would not understand the interconnectedness of life.

I could not be more grateful to have spent the last five years dedicated to understanding, listening, and being more present in our community. This project has been a journey of healing, both for myself and for others. It has been an opportunity to move away from mainstream narratives and to focus deeply on the culture and community that define us. To create a body of work that is a tribute to you and to my manidoog—this has been my honor and privilege.

In embracing this project, I have adopted the practice of living and learning as an act of gratitude. Each interaction and every story shared has deepened my appreciation of our cultural heritage and the enduring spirit of our people.

I express my heartfelt appreciation to the Elders and knowledge keepers who have shared their wisdom with me. Your guidance has shed light on the complexities of our traditions and the paths to healing. You have taught me the importance of listening intently, not only to the spoken words but also to the quiet moments in between, where much of our truth lies. Through your teachings, I have come to understand that healing involves not just recovery but the reclamation and revitalization of our connections to each other and to the land.

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INTRODUCTION

It is with great consideration that this dissertation begins with my positionality statement. I have written and rewritten this more times than I can remember. It is a window into myself, my work, my healing journey, and ultimately why this project exists. Its tone and style are independent of my research—this is intentional. I am an artist at heart. I am a writer of poetry and non-fiction work, even more. I share this with you as a way to frame the project and its entirety. I share this with you in hopes that you can place yourself in my shoes—even for a brief moment.

My positionality statement is not just my own. It is also my family's. My mother's.

In an effort to answer—Why this topic? Why my method? Why my perspective?

It starts with the phrase, “To exist is to resist.”

I am a two-spirit, Ojibwe, feminine-presenting person. In many aspects of my life, I was told and shown that I didn't belong. That my ideas didn't hold value. That my culture and my heritage were faults and not strengths. This is a statement of this truth. This section stands by itself and within this work.

Our voices persevere. Through the noise, through the resistance. I am not the only one with the experiences you will read—but I am one of the few who has the privilege to write and share these experiences.

I am lucky.

I am loved.

I am safe.

Now.

That wasn't always the case. Much of my experience has been
crawling out of an endless hole
intended to keep me buried
beneath dualities and injustice.

It is nothing short of a miracle you are reading this.

I shouldn't be here.

But I am

now.

People living with addiction deserve more.

People living with addiction deserve to be heard.

to be loved.

to be seen.

People living with addiction deserve your attention.

People living with addiction deserve to be healthy.

Recovery is not

Linear.

I didn't always believe this.

I didn't always have space.

I couldn't

I was also just trying to

survive.

Like everyone around me.

Like all of the stereotypes.

She was not *just* an addict.

She was a mother.

She was a healthcare worker.

She was a caregiver.

She loved more than anyone.

She lost even more.

She never held her head low.

She was proud.

She thrived in her community.

She made the best fry bread.

She changed peoples lives.

She was the reason why

I survived.

When my mother died - parts of me died too.

My resentment of lost time.

My guilt of never calling - enough.

My shame of telling this story.

I remember my mother as her whole.

The good, the rugged, the clumsy, the high, the stable, the sorrowful, the violent, the caring, the trying, the clarity, the relapse, the hiding, the open, all of her.

I hold a lot of blame for her shame.

Though, she always respected me.

Can you hold a space for broken pieces to mend?

She could.

We sat in circles talking about the ugly.

The things people couldn't hold - like she could.

When she died. I had a pouring of messages from people she helped.

“I know your mom had problems but she is the reason I am sober today.”

“You have no idea how your mom changed my life.”

“She had the biggest heart of anyone I've met.”

I am lucky.

I reconciled with my mom six years before she passed

I got to see the clarity, the life she wanted

I got the “good” years with her before she met the Creator.

Which makes it hard to move forward.

Because if she was in the thick of her addiction it would be “easy” to just write her off

Like everyone else did - who aren't in the community.

“She took a pill,” my grandma on my dads side.

“She dosen't look the same - my God what happened?” my grandma on my moms side.

“Smile!” my uncle - when I stood next to my mothers ashes at the celebration of her life.

There was no obituary.

There was a police report.

Fentanyl and a broken heart.

There was no follow-up.

No cards.

No sympathy.

I lost my friends - my family.

next after the next

people kept

falling..

my cousins

my aunts

my uncles

my Papa.

This isn't the end.

Of their life - or mine.

It has to be just the beginning.

So I recreated the talking circles with my mom.

To talk about the hard shit without sensor

the mud, the thick, the real

to be vulnerable in a safe space without repercussion.

Addicts helping addicts.

Or.. helpers helping heal.

There's something of surprise

opening up vulnerabilities - re-wounding

in a space for people with wounds

Heals.

What spaces like this exist?

With a new emergence of spirituality and reconciliation

There is more access - but do people know?

What do these messages look like?

Not the people I love.

This needs to be recreated.

For vulnerability, for truth.

I decided to go on my own healing journey

to walk the Red Road.

Not for data, not for research.

For myself.

For my community.

For my Mom.

So we sat in talking circles

We made art

We healed together.

In all of the messy ways.

I was vulnerable

I was disconnected

I was lost

too.

Who I talked to was intentional.

I wanted to talk to people in their healing
following that Red Road.

People who deserve it.

People who are often cast aside.

There is empowerment there.

Who do we talk to when finding “help?”

What do these messages look like?

National messaging is just that - national
not personal.

What works here?

Vulnerability.

So this is me-

I am white passing.

My skin a duality.

My heritage too.

My mother Ojibwe

My father - French and German

People made me believe

I didn't belong

in either world.

This journey was about reconnecting

To myself

To the Creator

and to my Manidoog.

I am loved.

By the spirits that never left me

just waiting for me to find myself again.

I wanted it to mean something more.

More than deadlines and a degree.

More than status and position.

So..

I listened, I wrote, I cried, I re-wounded, I screamed in the woods, I layed in the dirt, I went

inside myself - the deepest parts, and I showed it to others.

But some Elders didn't want to talk to me

because I sold my soul to the institution

because I do the “white-mans” work.

I still didn't belong.

I nearly didn't finish.

I nearly gave up.

I nearly left Mother Earth.

But the Creator has a funny way of showing you
purpose.

I sat alone

in my sorrow

in my grief

crying at a picnic table at the park

a small yippie dog came up to me

licked my legs

I didn't know how to respond but laugh

with tears down my face

the dog stayed

the owner followed
he was Paiute
and asked about my day
knowing I was in a bad place

the words overcame me
poured out like a broken dam
flooding the air

I was holding onto everything
by myself
I didn't truly let go

We sat there
I re-wounded
the dog licked me
he patched me up

He said
“it's always about the bigger picture, little sister”
to find community and share my bad medicine
because its too much for one person to hold

He said

I can lean on my people and my community

that Elders are there for people like me

But I was so distant

I didn't feel like I was allowed

to heal or to be healthy

He said

Creator gave you purpose

to heal with others in this pain

find those people on the Red Road

Often I have felt unseen

I can only imagine how my mother felt

In this moment my new brother saw *me*

saw my light and my purpose

I believe the Creator sends us messages

when we want to listen

we really hear them

This work was always meant to be

it's why I am here

I have finally accepted that

and whatever hills I have

along my way

I am safe, now.

This work is meant to be real

to have tangible meaning in my community

to be accessible

to be reciprocal

to help light the eight fire

I won't deny the amount of myself that exists in this work because it is me. I won't try and convince you this is the best route - because I am still learning. But I do think that there is value here.

Rich, cultural, and personal value.

There are parts of my mom, my participants-my community, and myself.

Through this work, I don't intend to change you.

I only hope you can hear us.

The opioid epidemic has had a profound impact on families and communities in the United States; nearly 645,000 people died from overdoses involving any opioid, including prescription and illicit opioids, from 1999-2021 (Centers for Disease Control and Prevention, 2022). Certain groups, notably those released from incarceration or experiencing homelessness, were identified as particularly vulnerable to this crisis (Humphreys et al., 2022). Additionally, the stigma associated with opioid use disorder (OUD) and substance use disorder (SUD) posed barriers for individuals affected by opioid use disorder, complicating their efforts to seek treatment and support (Kennedy-Hendricks et al., 2017).

Despite perceptions that opioid use disorder affects all demographics equally, Native American populations have been disproportionately burdened by the opioid epidemic (Kennedy-Hendricks et al., 2016; Humphreys et al., 2022). The standard treatment for opioid use disorder, which typically follows a secular, Western model, often conflicts with Indigenous healing practices that prioritize spirituality and holistic wellness. In Ojibwe communities for example, the medicine wheel and prayer circles are often incorporated in the healing process (Venner et al., 2018). In this research, I note the same reflection occurs in communication materials for these services. This mismatch highlighted the necessity for exploring effective communication modes that could convey information about opioid use disorder recovery resources and resonate to Ojibwe communities.

Rosanna Sue Gordon, a 44-year-old Ojibwe woman, achieved three years of sobriety before a tragic relapse and untimely death in 2020. Having battled opioid use disorder for a decade, Rosanna cycled through various treatment centers with no lasting success until she engaged with Four Winds Healing and Recovery Center in Brainerd, Minnesota. This center's holistic approach, which integrated input from Elders, personalized treatment plans, and

addressed physical, mental, spiritual, and cultural health, laid the groundwork for Rosanna's recovery. As research indicates, the path to recovery from this disorder is not linear, with high relapse rates persisting even after successful detoxification. Relapse rates range from 72 -88% within 12–36 months following opioid detoxification (Chalana, H. et al., 2015). This emphasizes the critical need for effective treatment options and continued research on culturally relevant and holistic support methods for Indigenous communities.

The Midwest Initiative emerged as a collaborative effort to tackle the opioid crisis in rural and tribal communities, including Indigenous groups (Pew Charitable Trusts, 2021). Partnering with various stakeholders, such as schools, tribal leadership, and public health agencies, the campaign developed localized, culturally tailored solutions for opioid use disorder treatment (Pew Charitable Trusts, 2021). By integrating traditional healing practices, advocating for harm reduction training, and organizing community forums to combat stigma, the Midwest Initiative showcased the potential of culturally sensitive communication strategies in effectively disseminating information on opioid use disorder recovery systems to Indigenous communities (Pew Charitable Trusts, 2021). This initiative's achievements show the importance of cultural relevance and collaboration in devising strategies to address the opioid epidemic in Indigenous settings.

This dissertation explores the question of what preferences Ojibwe community members in Northern Minnesota have for messaging within addiction recovery program materials, and how these preferences could guide the creation of effective communication tools to encourage engagement with available recovery resources. Utilizing a grounded theory approach (Charmaz, 2014; Chun Tie, Birks, & Francis, 2019; Ellingson & Borofka, 2014; Martin et al., 2018) in combination with Indigenous standpoint theory (Foley, 2007; Moreton-Robinson, 2013; Nakata,

2007), this research prioritizes Indigenous knowledge and perspectives in exploring communication strategies.

Phase one centers on community and tribal-based participatory resources for recovery, creating trust and collaborative opportunities to guarantee cultural relevance (Venner et al., 2018). By conducting 24 interviews with clinical staff who treat opioid use disorder, community Elders participating in program implementation, and Ojibwe community members who have personal experiences with opioid use disorder, this phase provides an in-depth understanding of the communication barriers, facilitators, and cultural nuances in substance use disorder treatment and recovery in Ojibwe communities.

Phase two introduced Collaborative Creation Circles, engaging 18 Ojibwe community members in in-patient treatment to partake in a creative process aimed at developing brochure or flyer materials. This activity promoted a supportive community atmosphere, inviting participants to create materials that resonated with them personally, reflecting meaningful aspects of their healing journey. The activity aimed to produce flyers or brochures that were not only eye-catching but also authentically represented the participants' experiences and insights during recovery.

Building on the insights gathered in earlier phases, the project entered its final phase: implementation of findings. This stage was about turning the information gathered from the community and the collaborative creations into practical solutions. The result was the creation of a comprehensive website named Mino-Bimaadiziwin. This website is structured around several key themes: Personal Stories, featuring real-life experiences; a Decolonial Perspective, offering educational insights on addiction; Cultural Practices, spotlighting traditional ceremonies and the Red Road; Artistic Representation, showcasing community-inspired art; and

Accessibility to Resources, which includes an interactive map and a list of health resources.

Together, these themes inform a platform designed to support the community's specific needs.

This study uses grounded theory and Indigenous standpoint theory to enhance our understanding of how to effectively communicate about recovery resources with Ojibwe communities. It focuses on developing outreach and messaging strategies that are specifically designed for the unique cultural and contextual needs of Ojibwe peoples. The goal is to empower Ojibwe individuals on their paths to recovery, aiming to improve their overall health and well-being.

LITERATURE REVIEW

This literature review critically examines the prevailing challenges and considerations in addressing opioid use disorder, with a specific focus on Indigenous communities. By exploring the nature of opioid use disorder, its societal impacts, and existing strategies for treatment and recovery, this review sets the groundwork for investigating how communication and messaging strategies can be specifically tailored to meet the unique needs and preferences of the Ojibwe community.

The review begins with a definition of opioid use disorder, emphasizing both the medical and societal frameworks that influence our understanding and responses to this condition. This foundational discussion is vital for anchoring our exploration in the realities of opioid use disorder and the broader context of addiction.

I shift the attention to demographic considerations, particularly the impact of opioid use disorder on Indigenous populations. Understanding the unique challenges and barriers faced in accessing recovery resources is crucial for developing culturally sensitive and effective communication tools.

Then, I examine the variety of treatment and recovery options that are currently available, looking into how effective and accessible they are. This part of the review pays special attention to the methods used at these services and how the community perceives these efforts. It aims to uncover the disconnect between the resources offered and the communication of these services to the Ojibwe community.

At the center of this review is the critical role of communication in enhancing engagement with addiction recovery programs. I look into the significance of culturally competent messaging, how community-specific preferences might impact the effectiveness of

recovery programs, and the existing shortcomings in the way these programs are communicated to the Ojibwe community.

This literature review aims to provide a thorough understanding of the complex factors that influence addiction recovery within Indigenous communities. It lays the essential foundation for my research question: What preferences do Ojibwe community members in Northern Minnesota have for messaging within addiction recovery program materials? In what ways can their preferences inform the creation of effective communication tools that encourage engagement with available recovery resources? Addressing this question seeks to bridge the existing gap between the needs of the Ojibwe community and the design of recovery program communication materials, aiming for a more inclusive and effective approach to addressing opioid use disorder.

Tracing Opioid Use Disorder from National Concern to Community Focus

This section traces the understanding of opioid use disorder, moving from its general impact across the United States to its specific repercussions within Indigenous communities. According to the American Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5, 2013), opioid use disorder encompasses a spectrum of symptoms, including an inability to control opioid usage, persistent use despite attempts to stop, social impairment, cravings, development of tolerance, and withdrawal symptoms. Societal interpretations often mislabel opioid use disorder as merely a matter of personal choice, ignoring the medical perspective that identifies it as a disease impacting the brain's decision-making capabilities (Bagley & Beckham, 2020; Bahorik et al., 2017).

Opioid use disorder represents a public health crisis in the United States, affecting individuals across all age groups. Data from 2021 reveal that about 2.0 percent of the population aged 12 or older, equating to roughly 5.6 million people, were diagnosed with opioid use disorder (SAMHSA, 2021). This prevalence varies across different age and racial groups, indicating the need for customized approaches to prevention and treatment. Notably, Asian communities exhibit a lower prevalence of opioid use disorder compared to other racial and ethnic groups, with disparities evident across demographics (SAMHSA, 2021). Prevalence rates of these disorders varied, with Native Hawaiian or Other Pacific Islander groups reporting a rate of 1.5 percent, and American Indian or Alaska Native populations experiencing a higher rate of 4.4 percent (SAMHSA, 2021).

Table 1

Disorder	12 or Older	12 to 17	18 to 25	26 or Older
Opioid Use Disorder (OUD)	2.0 percent (.10) or 5.6 million people	1.0 percent (.14) or 259,000 people	1.3 percent (.16) or 438,000 people	2.2 percent (.13) or 4.9 million people

Information from (SAMHSA, 2021).

*Estimates shown are percentages with standard errors included in parentheses.

NOTE: Additional estimates may be found in Results from the 2021 National Survey on Drug Use and Health: Detailed Tables [here](#). Measures and terms are defined in Appendix A of the 2021 Detailed Tables.

Table 2

Race	Opioid Use Disorder (OUD)
White	2.0 (0.13)
Black or African American	2.4 (0.32)
American Indian or Alaska Native	4.4 (1.51)
Native Hawaiian or Other Pacific Islander	1.5 (0.90)

Asian	0.7 (0.17)
Multicultural	2.6 (0.62)
Hispanic or Latino	1.9 (0.26)
Not Hispanic or Latino	2.0 (0.11)

*Estimates shown are percentages with standard errors included in parentheses.
Information from (SAMHSA, 2021).

The role of media in public education on opioid use disorder is crucial yet often limited. Investigations into "solutions journalism" reveal a tendency to mention treatment, harm reduction, and prevention, but there's a notable lack of coverage on evidence-based public health solutions like medication-assisted treatment and harm reduction strategies such as syringe services programs and safe consumption sites (McGinty et al., 2019). This gap suggests a potential shortfall in public knowledge regarding the risks and available treatments for opioid use disorder (Kilgo & Midberry, 2020).

From 1999 to 2009, the opioid crisis severely affected Indigenous communities in the United States, leading to the highest death rates from opioid pain relievers, especially in Minnesota, Washington, Alaska, and Oklahoma (Soto et al., 2019). Alarming, 47% of Indigenous young adults aged 18 to 25 have used opioids, exceeding the 5% national average (SAMHSA, 2022). Despite the severity, detailed data on specific tribes is lacking.

Table 3

State	Opioid-Related Deaths
Minnesota	26/100,000
Washington	21/100,000
Alaska and Oklahoma	13/100,000

Information from (Venner et al., 2018)

The path to recovery from substance use is uniquely personal, with its definition varying widely among individuals. Hser and colleagues' 2015 meta-analysis looks into the nuances of recovery, examining the opioid crisis's long-term effects, including key moments of change and supportive factors. Their findings cover a range of outcomes such as relapse, abstinence, mental health status, support networks, recovery statistics, mortality rates, and the exploration of new treatments. They stress the importance of accurately conveying these findings to the public to transform the narrative around substance use from one of personal failure to a call for compassionate support (Hser et al., 2015).

In treating substance use disorders, the prevailing methods often reflect a Western-centric approach, focusing primarily on medical and psychological interventions. This stands in contrast to Indigenous healing practices, which place a greater emphasis on spirituality and holistic wellness. Indigenous traditions, such as those practiced by communities in the Great Lakes area, integrate teachings like the medicine wheel and prayer circles into recovery, offering a comprehensive view of health that encompasses mental, physical, emotional, and spiritual well-being (Momper et al., 2017; Venner et al., 2018). This holistic perspective is often overlooked in mainstream treatment models, which typically prioritize biological factors.

The current healthcare and treatment infrastructure largely overlooks the specific needs of Indigenous populations. There's a knowledge gap concerning the effectiveness of substance use disorder treatment among Indigenous communities in the United States, partly due to the exclusion of these groups from broader research efforts (Rieckmann, 2016). This issue is compounded by systemic funding shortfalls and a critical shortage of mental health professionals in areas predominantly inhabited by Indigenous people (Rieckmann, 2016).

Historical mistrust toward healthcare providers, rooted in past exploitation and negative experiences, further complicates the provision of effective care in Indigenous communities (Rieckmann, 2016). Despite attempts to enhance the quality of both tribal and urban treatment services, a lack of data on what constitutes successful, culturally sensitive care remains a barrier. There's a pressing need for collaboration with Indigenous communities to develop and implement comprehensive, long-term treatment and prevention strategies that honor cultural practices (Rieckmann, 2016).

Addressing health disparities stemming from opioid use requires a united effort that merges Western and Indigenous approaches. Venner and colleagues emphasize the importance of a mutual relationship in the creation of interventions, advocating for a collaboration where researchers from academic and community backgrounds work together on an equal footing. This partnership aims to develop strategies that honor cultural significance while being rooted in scientific evidence (Venner et al., 2018). Such cooperation is crucial in enhancing care and assistance for individuals with opioid use disorder, ensuring that the approach is respectful and inclusive of diverse community values and practices. Central to this collaborative process is the goal of changing perceptions, moving away from labeling individuals with substance use as simply "addicts with a choice" and toward acknowledging them as "individuals in need of support" (Hser et al., 2015, p. 80).

This section explored how understanding of opioid use disorder has evolved from a national concern to its impact on Indigenous communities. It defines the disorder as complex, challenging the misconception that it's simply a matter of choice, and notes the high prevalence in the U.S., especially among Indigenous populations, where effects are disproportionately severe. The lack of media attention to effective treatments and detailed data on Indigenous

impacts is highlighted, alongside the contrast between Western and Indigenous recovery approaches. The healthcare system's shortcomings in addressing Indigenous needs are emphasized, pointing to a need for a unified approach that blends medical practices with traditional healing. Overall, advocating for partnerships that respect cultural practices and aim to change the narrative around substance use to one of support and inclusivity.

Stigma Reduction and Cultural Sensitivity in Recovery

Understanding the nuances of opioid use disorder means recognizing the roles stigma and cultural sensitivity play in recovery. This section looks at these themes, highlighting why compassionate, culturally-aware approaches support individuals toward healing.

Opioid use disorder presents a complex challenge that affects individuals and communities across various dimensions, including health, social integration, and access to care. Stigma related to opioid use disorder can be categorized into public, self, and provider stigma, each stemming from and contributing to negative beliefs and attitudes. These stigmas often arise from stereotypes that paint individuals with opioid use disorder as immoral, irresponsible, or lacking willpower. The sources of such stigma are varied, including media portrayals, healthcare professionals' attitudes, and general public opinion, all of which can reinforce negative stereotypes and contribute to the challenges faced by those seeking recovery (Volkow, 2018; Kasmin, 2019; Taylor et al., 2021; Barry et al., 2014).

The choice of language when discussing opioid use disorder influences perceptions and attitudes toward the condition and those affected by it. Derogatory terms and labels can exacerbate stigma, while respectful, non-judgmental language can help reduce it. Adopting person-first language in a healthcare setting is crucial for stigma reduction, as labels like

"substance abuser" or "addict" can worsen stigma (McGinty & Barry, 2020). Likewise, using neutral terms such as "substance use disorder" instead of "addiction" helps diminish negative associations with opioid use disorder (Kelly et al., 2010). This approach not only alters perception but also encourages individuals to seek and adhere to treatment by creating a more supportive environment (McGinty & Barry, 2020; Kelly et al., 2010; Kelly, 2016).

Addressing opioid use disorder in Indigenous communities highlights the critical role of cultural sensitivity in recovery messaging. The research by Boyd et al. (2021) investigates the treatment of opioid use disorder within an American Indian community in Minnesota, emphasizing the importance of cultural sensitivity. It suggests that incorporating elements like the Ojibwe language into recovery programs could improve their effectiveness by making them more relatable and credible to the community members, thereby enhancing their engagement and overall understanding of the recovery process (Boyd et al., 2021). This principle aligns with broader initiatives, such as the HEALing Communities study and Native Center for Behavioral Health programs, which have demonstrated that culturally sensitive methods can reduce stigma and create the adoption of evidence-based practices for recovery, promoting more effective engagement and outcomes in Indigenous populations (Lefebvre et al., 2020; Skinstad, 2021).

The intersection of stigma reduction and cultural sensitivity reveals how addressing one can inform and strengthen the other. By recognizing the compounded barriers faced by Indigenous populations due to both stigma and cultural insensitivity, we can develop more inclusive and effective strategies. Integrating culturally relevant language and practices into stigma reduction efforts not only addresses the specific needs of diverse populations but also enriches the overall approach navigating the opioid epidemic.

It is essential to incorporate evidence-based practices that recognize the importance of both language and cultural sensitivity. Healthcare providers, media, and policymakers should adopt person-first and neutral language, while also integrating culturally relevant messaging in their communication strategies toward Indigenous populations. Tailoring communication efforts to each community is vital because the meanings and subtleties of language vary across different groups. Engaging directly with communities to discover what resonates with them ensures that messaging is relevant and impactful. Understanding a community's specific cultural and linguistic preferences is key to creating effective communication materials that genuinely connect and address community needs. Such practices contribute to a more supportive environment for Indigenous individuals with opioid use disorder, facilitating better engagement with treatment and recovery services.

This section explored how reducing stigma and being culturally sensitive are key in helping people recover from opioid use disorder. It talks about how negative views and stereotypes can make it harder for people to seek help and highlights the importance of using respectful language to change these perceptions. The text also points out the special role of culture in recovery, especially in Indigenous communities, suggesting that including cultural elements in treatment could make it more effective. By combining efforts to reduce stigma with a deep understanding of cultural values, the discussion suggests a more welcoming and effective approach to recovery. It encourages everyone involved—from healthcare providers to policymakers—to adopt language and practices that respect cultural differences, aiming to make recovery support more inclusive and helpful.

The Role of Social Support and Communal Kinship in Recovery

This section explores the critical role of social support and communal kinship in the recovery process from opioid use disorder. It looks into how interconnectedness, support networks, and the broad definition of family within communities, particularly among Indigenous populations like the Ojibwe, contribute to successful recovery outcomes.

“Most [people with opioid use disorder] acknowledged that it is extremely difficult to overcome opioid addiction alone. It is necessary for those dealing with addiction to seek out social support, and it is the responsibility of everybody else to offer social support to those we know are experiencing addiction” (Bagley & Beckham, 2020, p. 6). Studies highlight the crucial role of social connections in improving health and well-being, especially when dealing with stress, mental health problems, chronic diseases, and opioid addiction (Cohen, Underwood, & Gottlieb, 2000; Sarason & Sarason, 2009). Social support includes a range of assistance within relationships, from emotional encouragement to hands-on help, and is essential for recovery (House, 1981). This kind of support can come from professionals like doctors and counselors, or from unpaid individuals such as mentors, volunteers, and notably, family and friends (McCrary et al., 2012; McCamish-Svensson et al., 1999).

In the context of opioid use disorder, the concept of "family" or found-family plays is deeply influential. These support networks offer more than just encouragement; they affect decision-making and are key in understanding how recovery works in the context of substance use (McCrary et al., 2012). Although social support can lead to both good and bad outcomes—improving well-being or potentially encouraging unhealthy habits—the focus is on creating supportive, positive relationships (Antonucci, 1985; Wilcox & Vernberg, 1985).

Transitioning from a broader context to a more focused examination of recovery support, it becomes evident how deeply ingrained these communal values are in creating environments supporting to overcoming addiction. Elders in Indigenous communities, including Ojibwe, play a core role that extends the concept of family beyond biological ties, embracing a broader definition of kinship and connection. This perspective on family relationships highlights the idea that family encompasses not only those to whom we are related by blood but also those with whom we share deep communal ties, cultural values, traditions, and experiences.

Drawing on my personal experience as a member of the Ojibwe community, this view of family includes individuals who may not be blood relatives but are considered family members due to shared upbringing, cultural practices, and collective identity. For example, individuals raised in the same area, participating in the same tribal rituals, and taught the same values and beliefs are often regarded as cousins or even siblings, despite the absence of direct biological connections. This inclusive understanding of family reflects the communal ethos of Ojibwe culture, where relationships are built and valued based on shared experiences, mutual support, and collective well-being, rather than solely on genetic ties.

Elders are the keepers of traditional knowledge, values, and practices, often guiding health-related decisions and contributing to the development of community policies and programs (Bartlett et al., 2007; Strickland, 2006; LaVeaux & Christopher, 2009). Their deep understanding of the interconnectedness of physical, emotional, mental, and spiritual well-being offers a unique and invaluable form of support, highlighting the cultural dimension of recovery support networks.

Moving from the cultural foundations to the application of these values in recovery, it is essential to recognize the role of direct community involvement. Family and community

involvement stands as a cornerstone in overcoming opioid use disorder, offering indispensable encouragement and resources. This support extends to facilitating access to recovery services like Medication-Assisted Treatment (MAT) or residential treatment, which are crucial for recovery (Laudet et al., 2015). Such involvement is particularly impactful for youths with opioid use disorder, showing support, connectedness, and backing that's essential for successful recovery (Leshner, 2003; Ling et al., 2019; Nash et al., 2019).

Building upon the crucial role of community in recovery, we see firsthand accounts that vividly bring to life the impact of peer-to-peer relationships. One individual recounts "I had a couple overdoses and reached out for help. I've got 6 ½ months clean. The only reason is from help from other alcoholics and drug addicts" (Bagley & Beckham, 2020, p. 6).

In summary, social support and a sense of community are important for people recovering from opioid use disorder, especially in Indigenous communities. It highlights that recovery isn't something people can often do on their own—they need a strong support system. This includes help from professionals like doctors and counselors, as well as from friends, family, and even the wider community. The idea of "family" here goes beyond just blood relatives. It includes anyone who shares a close bond through culture, traditions, or shared experiences. Elders play a special role, offering wisdom and guidance that's crucial for recovery. The section also points out that being part of a community, where people understand and support each other, can make a big difference in overcoming addiction. This kind of support can come in many forms, like helping someone get into treatment programs or just being there for them.

Prevention, Treatment, and Recovery Options

This section discusses the comprehensive approach required in addressing substance use disorder, highlighting the integration of prevention, treatment, and recovery strategies. It emphasizes the importance of tackling root causes, offering personalized care, and ensuring sustained support for recovery.

Prevention is a cornerstone in the framework of recovery systems, placing a strong emphasis on confronting the foundational issues such as poverty, trauma, and mental health concerns. Initiatives centered on education, launching awareness campaigns, engaging with communities directly, and advocating for policy reforms are all crucial actions in this initial stage (Doyle & McGaffey, 2022). Beyond these efforts, it's equally critical to provide support that addresses the social and economic challenges people face, which might be a factor in a person's choice to engage with substances amid stress and pressure. This includes facilitating access to housing and offering assistance to secure employment (Ling et al., 2019).

Moreover, an important part of creating a supportive environment for those who have opioid use disorder is the active reduction of stigma. Through public education campaigns, strategic media storytelling, and advocating for changes in policies, it becomes possible to encourage individuals to seek the help they need while also working toward minimizing instances of discrimination and judgment they may face (Nash, Hennessy, & Collier, 2019). Prevention not only aims at directly addressing the immediate challenges but also at creating an understanding, supportive, and inclusive community for individuals navigating their journey to recovery.

Personalized treatment plans may include a blend of pharmacological interventions, psychotherapeutic approaches, and supportive services such as participation in peer support

groups, guidance from recovery coaches, and involvement in family therapy sessions (Pfefferle, Karon, & Wyant, 2019; Volkow, 2018). These treatment modalities can be augmented with evidence-based methodologies like medication-assisted treatment (MAT) and cognitive-behavioral therapy (CBT), proven to mitigate cravings and withdrawal symptoms while tackling underlying psychosocial issues such as trauma and mental health concerns (SAMHSA, 2022; Leshner & Dzau, 2019). The inclusion of supportive services and strategies to overcome social and economic challenges is critical for maintaining long-term recovery (Pfefferle, Karon, & Wyant, 2019; Volkow, 2018; Ling et al., 2019).

Harm reduction approaches acknowledge the reality that abstinence may not be feasible for everyone, offering interventions such as supervised consumption sites and naloxone to reduce the harm associated with drug use (Wakeman, 2019). Innovations like the Peer Alerting Lifeline application provide tailored health support and emergency responses via a text-based system, supplementing traditional emergency medical services while minimizing stigma and housing security threats. Exemplifying technology's potential to provide tailored health support and emergency responses (Tofighi et al., 2015).

Recovery support services offer a range of resources aimed at sustaining recovery, including support for housing and employment, alongside peer support networks. These services facilitate access to treatment and additional supports such as mental health care and substance use disorder therapies (Doyle & McGaffey, 2022). For people with opioid use disorder, alternative treatments might involve techniques like auricular acupuncture, mindfulness practices tailored to recovery, and the integration of spiritual elements into healing processes (Venner et al., 2018).

In summary, recovery systems for opioid use disorder encompass prevention strategies, personalized treatment, recovery support services, strategies addressing social and economic factors, and efforts to reduce opioid use disorder associated with stigma.

Recovery Campaigns

This section explores various campaigns aimed at addressing the opioid epidemic, highlighting efforts to increase awareness about treatment and prevention strategies for opioid use disorder. From community-focused initiatives to digital platforms supporting healthcare professionals, each campaign brings forward unique outreach and solutions.

A variety of communication campaigns have been launched to reduce harm of the opioid epidemic and spread awareness about treatments and preventive measures for opioid use disorder. The Opioid Response Network (ORN), backed by the Substance Abuse and Mental Health Services Administration (SAMHSA), stands out as a holistic effort providing training and technical support to communities healing from the opioid crisis. This initiative aims to equip communities with the educational tools and support needed to address opioid use disorder and prevent overdoses (Opioid Response Network, 2022).

The Truth About Opioids campaign, started by the Truth Initiative along with the Office of National Drug Control Policy (ONDCP) and the Ad Council, uses moving, emotional stories to teach young adults about the dangers of opioid misuse (Truth Initiative et al., 2018).

OpiSafe represents a digital solution offering a suite of tools and resources designed to assist healthcare professionals in the management of patients dealing with chronic pain and opioid use disorder. It serves up a compilation of educational content, guidelines, and best

practices aimed at enhancing the handling of opioid-related challenges within healthcare settings (OpiSafe, 2023).

The Rx Awareness campaign, introduced by the Centers for Disease Control and Prevention (CDC), focuses on elevating public understanding of the hazards tied to prescription opioid use. Featuring personal accounts from individuals impacted by opioid use disorder, this campaign delivers a wealth of educational materials and resources aimed at curtailing opioid abuse (CDC, 2021).

Highlighted within this effort is the campaign's outreach to Indigenous communities in the United States, the image presented



showcases the Rx Awareness Campaign's effort to connect with the community.

The image appeared on the homepage of their website (CDC, 2021). Clicking the image leads to a story featuring Stevi Rae, an Alaska Native who has been on the path to recovery for over two years. Her journey toward healing is closely tied to undergoing treatment among her Alaska Native peers. The onset of Stevi Rae's struggle with opioid use disorder followed a car accident, prompting her to pursue treatment in Dillingham, Alaska. Surrounded by a community of Alaska Natives, the act of sharing her experiences with trauma and childhood sexual abuse has been important to her recovery process. Currently, she is dedicated to developing recovery resources in her home community of Naknek.

While the described campaigns make strides in the opioid crisis, it's critical to recognize their limited focus on Indigenous populations and the lack of inclusion of tribal and community-based involvement. The broad messaging and approaches of these initiatives might not align well with the distinct cultural, historical, and social backgrounds of Indigenous communities across the United States, potentially affecting the relevance and effectiveness of these efforts. This situation highlights the necessity for more focused and culturally sensitive communication strategies. Tailoring information dissemination about substance use disorder recovery to Indigenous communities and ensuring active participation from the community the messages are for are crucial steps toward creating and executing messaging that is culturally resonant and impactful.

Exploring various campaigns aimed at the opioid epidemic reveals diverse efforts to raise awareness about treatment and prevention, from community initiatives to digital tools for healthcare providers. Among them, the Opioid Response Network, the Truth About Opioids, OpiSafe, and the CDC's Rx Awareness campaign stand out for their unique approaches to outreach and education. Despite their contributions, there's a noticeable gap in addressing the specific needs of Indigenous populations, with limited focus on tribal and community-based involvement. This lack of culturally sensitive communication strategies highlights the importance of tailoring recovery messaging to Indigenous communities, ensuring their active participation for truly impactful and resonant messaging. Developing strategies that align with the cultural, historical, and social contexts of Indigenous populations is crucial for enhancing the relevance and effectiveness of opioid epidemic efforts.

Tradition and Treatment: Tribal and Community-Based Participation

In the context of addressing substance use disorders within Indigenous communities, the role of tribal and community-based participation cannot be overstated. Such participatory approaches, including tribal and community-based participatory research (CBPR), are indispensable in providing recovery strategies that are culturally congruent and impactful for Indigenous populations. By creating a collaborative research environment that prioritizes the culture, values, and priorities of the community, these spaces provide a nuanced understanding of the specific needs and perspectives of Indigenous communities facing the substance use disorder. Here I explore how these foundational strategies translate into practical, community-tailored recovery services and initiatives, demonstrating their effectiveness in bridging traditional knowledge with contemporary healthcare practices.

Tribal and community-based participatory research (CBPR) is essential for creating communication strategies that are both culturally relevant and effective for Indigenous communities. This method emphasizes working closely with community members, organizations, and stakeholders throughout the research process, ensuring that initiatives are aligned with the community's culture, values, and priorities (Boyd et al., 2021; Skinstad, 2021). CBPR is particularly valuable in addressing the opioid crisis within Indigenous communities, offering a detailed insight into their specific needs and views (Soto et al., 2019). Various studies have successfully employed this approach to craft communication campaigns that not only reduce stigma but also advocate for proven treatment methods and support for opioid use disorder (Lefebvre et al., 2020). By actively involving Indigenous communities in the research process, tribal and CBPR methods pave the way for the creation of culturally attuned, relevant, and impactful strategies that enhance opioid use disorder recovery efforts.

Furthermore, tribal and CBPR methods present an opportunity to tackle the opioid crisis within Indigenous populations effectively. By creating a cooperative, community-led research environment, these methods help close the gap between Indigenous peoples and health professionals (Boyd et al., 2021). This collaborative approach allows Indigenous communities to directly contribute to developing communication strategies that mirror their unique cultural values, beliefs, and priorities, leading to interventions that are not only more culturally fitting but also more impactful. Additionally, such collaborative efforts foster trust and strong relationships between Indigenous communities and researchers, essential elements for successful engagement and outreach. In essence, leveraging tribal and CBPR methods can enhance health outcomes for Indigenous communities affected by opioid use disorder, creating communication strategies that accurately meet their distinct needs and perspectives.

As such approaches lay the groundwork for bridging cultural understandings and healthcare practices, let's examine how these methodologies manifest in tangible recovery services within Indigenous communities.

In rural areas that cater to Indigenous populations, Alcoholics Anonymous (AA) open meetings, Recovery Support Services, and Wellbriety stand out as primary recovery services (Roubideaux, 2011; New Spirit, 2016). While AA meetings are widespread, the range of treatment services such as individual and group therapy, along with psychiatric education, is notably less diverse than in urban settings (Roubideaux, 2011). Moreover, traditional practices like Talking Circles and cultural activities—beading, dancing, drumming, and hide-tanning—are available but limited (Rieckmann, 2016; Allen, 2018; Momper, 2017).

Garrett and Carroll (2000) highlight the importance of the Sacred Circle and Good Medicine, illustrating how cultural perspectives on wellness are crucial for Indigenous healing.

They argue that substance use disorder stems from generational trauma and sociodemographic factors. Recovery centers focusing on cultural, spiritual, and physical wellness have seen positive outcomes by incorporating tribal-specific spiritual practices and employing positive psychology to build gradual and sustained recovery (Lowery, 1998). The Wellbriety movement and White Bison, Inc., spearhead holistic wellness and sobriety in Indigenous communities, focusing on healing from alcohol and substance use disorder through culturally relevant programs (Coyhis & Simonelli, 2006). White Bison, established by Don Coyhis in 1988, combines traditional teachings with evidence-based practices to tackle the root causes of substance use disorders and facilitate healing (White Bison, 2023).

Other programs White Bison has developed, include Mending Broken Hearts, designed to help participants heal from grief, loss, and unresolved trauma experienced by Indigenous communities, and The Red Road to Wellbriety, a book that provides guidance on embracing the Wellbriety lifestyle, integrating Indigenous wisdom and teachings with recovery principles (Coyhis & Simonelli, 2006). The Wellbriety Training Institute offers training and certification for individuals aspiring to become facilitators of White Bison's programs within their communities (White Bison, 2023).

Different Indigenous tribes and bands are developing innovative strategies to support their youth. In Alaska, the Qungasvik (Toolbox) program targets 12 to 18-year-olds with interventions rooted in traditional teachings to strengthen community bonds and cultural identity (Allen, 2018). Similarly, in the Great Lakes region, Talking Circles led by Elders offer a space for cross-generational dialogue on substance use and recovery, highlighting the power of community support and traditional healing methods (Momper, 2017).

Another approach in Beltrami County offers medical-focused treatment plans supported by the Indian Health System (IHS) and the Indian Health Service National Tribal Advisory Committee on Behavior Health (NTAC), although culturally relevant behavioral health activities are rare (Roubideaux, 2011). The Bemidji Area Office, catering to federally recognized tribes, emphasizes balance and harmony in their healthcare approach, striving to rebalance patients' perspectives toward health and wellness (Roubideaux, 2011). The Bemidji Area Office provides funding and healthcare support for about 102,782 active substance users residing in Minnesota, Wisconsin, Michigan, Indiana, and Illinois. They serve 34 federally recognized tribes within the Great Lakes region and operate two short-stay medical hospitals, three ambulatory health centers, and five health stations. Their main values are balance and harmony, which they strive to achieve by rebalancing patients' thinking and improving their health and well-being (Roubideaux, 2011).

To address the scarcity of culturally sensitive behavioral health services in Beltrami County, Fond du Lac Behavioral Health has launched an innovative treatment initiative known as the Miikanaake Program. "Miikanaake," meaning "to create a new path" in the Ojibwe language, blends modern scientific methods with traditional holistic approaches to address a range of behavioral health challenges, including long-term abuse of methamphetamines, stimulants, prescription drugs, depression, and anxiety (Roubideaux, 2011, p. 36). The program employs "brainwave optimization sessions" that use advanced EEG technology to personalize treatment based on the patient's unique brain activity, complemented by traditional practices like meditation, prayer, and the use of natural sounds to encourage healing, balance, and harmony (Roubideaux, 2011, p. 36). Patients engage in visualizations during daily sessions for a week, with progress meticulously tracked, transitioning to weekly sessions thereafter (Roubideaux,

2011). In addition, the program integrates traditional counseling, focusing on positive psychology and trauma-informed care, to enhance understanding and adoption of healthy living practices. Creative activities such as beading, blanket making, sugaring, and ricing further enrich the healing experience. As part of their ongoing care, patients are invited to partake in community-centric activities, including longhouse and sweat lodge ceremonies, and Talking Circles with community Elders, creating a sense of belonging and support. Remarkably, about 50% of patients with long-term substance use disorders have shown improvement six months post-treatment, alongside notable progress in individuals dealing with depression, anxiety, and insomnia (Roubideaux, 2011).

Another example is The Oshki Manidoo, or "New Spirit" Center, located in Bemidji, Minnesota, offers a space for both Indigenous and non-Indigenous individuals seeking healing through traditional practices. It aims to inspire a transformation in people, their families, and broader communities by creating connections with heritage, community, and personal identity. Offering a variety of activities, including cultural crafts such as beading, basket weaving, and dream-catcher making, alongside community gatherings like powwows and talking circles, the center facilitates meaningful conversations about substance use and cultural reconnection for both young people and Elders. Staffed with therapists and psychiatrists specializing in trauma and family-based care, the center applies concepts from the four circles and the medicine wheel to promote overall wellness. With its community-oriented approach, Oshki Manidoo strives to address the overrepresentation of Indigenous youth and women in the legal system, aiming for a holistic path to recovery and empowerment (New Spirit, 2016).

By emphasizing collaboration, respect for traditional knowledge, and community-driven research, these approaches have laid the foundation for a range of recovery services and

programs that address the unique needs of Indigenous communities. From rural recovery services like AA meetings and Wellbriety to innovative treatment programs like the Miikanaake Program, these initiatives highlight the importance of blending scientific approaches with traditional practices. Moreover, they demonstrate the potential for improvements in health outcomes when Indigenous values, beliefs, and priorities are central to the design and implementation of recovery strategies.

Operational Dynamics and Communication within Recovery Centers

This section looks into the intricacies of operational dynamics and communication strategies within treatment and recovery centers for substance use disorders, highlighting their role in the effective delivery of care and the promotion of recovery paths for individuals with substance use.

The organizational structure and communication strategies within treatment and recovery centers for substance use disorders are essential to their operation and effectiveness (McLellan et al., 2003). These centers, which can vary in size, location, and whether they are publicly or privately operated, often adopt a hierarchical structure. At the top, executive directors or administrators oversee the entire operation, while clinical directors manage the treatment services. Direct care to patients is provided by a dedicated team of therapists, counselors, and support staff. Governance and strategic oversight might be the responsibility of a board of directors, emphasizing the importance of leadership at all levels in ensuring the delivery of comprehensive care (McLellan et al., 2003).

In terms of treatment services, these centers adhere to evidence-based practices across a continuum of care that includes prevention, intervention, treatment, and recovery support. The

array of services offered might include detoxification, inpatient and outpatient care, individual and group therapy, medication-assisted treatment, and peer support programs, all aimed at facilitating effective recovery paths for patients (Best & Laudet, 2010; White & Kelly, 2011).

When it comes to developing messaging and communication materials, a collaborative approach is favored, involving administrators, clinical staff, marketing experts, and sometimes patients or community members. The goal is to craft messages that effectively promote the center's services, combat stigma, and encourage individuals to seek help (Noar, 2006).

Decision-making around these materials takes into account the target audience, cultural sensitivities, and evidence-based communication tactics to ensure relevance and engagement. Acknowledging the concept of recovery capital is also crucial, as it involves understanding the resources individuals have access to during their recovery process (Best & Laudet, 2010). This understanding allows centers to tailor messaging strategies effectively (Noar, 2006; Snyder et al., 2004).

Exploring the creation of impactful communication and messaging strategies in treatment and recovery centers, it's essential to recognize their importance extends beyond just the individual level. These strategies are part of a broader effort to address the challenges faced by the national substance use disorder treatment infrastructure, which strives to meet the growing demand for high-quality care. This shift from individual messaging to systemic improvement highlights the importance of seamlessly integrating strategic communication with overall treatment efforts to enhance the support provided to individuals on their path to recovery.

Moreover, the national substance use disorder treatment infrastructure faces the challenge of meeting the public demand for high-quality care, necessitating efficient and effective communication methods. By integrating these comprehensive strategies, treatment, and recovery

centers can enhance their ability to support individuals on their journey to recovery, making an impact on public health outcomes (McLellan et al., 2003; Best & Laudet, 2010).

Understanding the organizational structures and communication strategies within substance use disorder treatment and recovery centers is crucial, as these elements play a key role in delivering effective care and promoting recovery paths. It's evident that successful recovery support goes beyond the clinical setting, requiring strategic messaging to combat stigma and motivate individuals to seek help. This prepares the ground for an examination of communication preferences within particular communities. The focus is on developing communication that culturally resonates with the community, with the goal of increasing participation in available recovery resources.

Communication Approaches in Recovery Messaging

This section looks into how we communicate about health, especially concerning opioid use disorder. It begins with a look at risk perception and emotions, showing why understanding both is crucial when trying to change health behaviors. From there, it moves to the Extended Parallel Process Model (EPPM), explaining how fear can motivate people to act differently but only if they feel capable of dealing with the threat. Next, the focus shifts to storytelling, highlighting its power to change attitudes and behaviors by making health issues more relatable. Finally, the section wraps up with the Lived-Experience Framework, emphasizing the importance of real-life stories in making health messages hit home.

To begin, risk perception is an important part of health behavior change theories like the Health Belief Model, Extended Parallel Process Model, and Protection Motivation Theory. These theories emphasize looking at how likely someone is to get sick or take risks, and then making

choices based on what might happen (Qin et al., 2020; Ferrer et al., 2016). When people make decisions about risks, they think about the facts but also how they feel. The idea that feelings play a big role in decision-making is supported by the affect-as-information theory (Clore et al., 1994). Peters and Slovic (2007) shows that paying attention to specific feelings can help predict outcomes well, with Peters et al. (2004) noting that seeing risk is often tied to feeling negative emotions.

Studies by Qin et al. (2020) demonstrate that detailed descriptions of the consequences of opioid use disorder, particularly through visual means, can enhance risk awareness and negative emotions, potentially reducing opioid use. This approach addresses the underestimation of personal risk, highlighting the efficacy of messages that evoke negative emotional responses in mitigating opioid usage.

Furthermore, through qualitative analysis of anonymous reports, Bagley and Beckham (2020) investigated the perceived threats and effectiveness of responses to the opioid crisis. Their findings indicate that the perceived dangers encompass issues like opioid use disorder, family conflicts, the risk of overdose and death, stigma, financial, and legal consequences. Perceived effective responses were identified as social support, proactive information seeking and sharing, access to intervention programs and resources, and focused care for children.

Research in communication indicates a widespread optimistic bias in risk perception, particularly regarding negative outcomes, leading to a "it won't happen to me" mentality (Bagley, 2019; Turner, Skubisz, & Rimal, 2011; Arnett, 2000). In the context of opioid use disorder, this bias may cause people to underestimate the risks to themselves or loved ones, reducing the perceived importance of taking preventive actions despite evidence to the contrary.

Following the exploration of risk perception and its influence on health behavior, particularly in the context of opioid use disorder, the discussion transitions to a more focused examination of how fear-based messages impact behavior through the lens of the Extended Parallel Process Model (EPPM). Introduced by Kim Witte in 1992 and expanded upon by Lewis, Watson, and White in 2013, EPPM is a theoretical framework designed to explain how individuals respond to messages that aim to incite fear in order to motivate behavior change. This model is grounded in the premise that for a fear-based message to be effective, the individual receiving the message must both perceive the threat as likely and believe they have the means to effectively counteract this threat. Witte & Allen (2000), outlined the EPPM's four foundational elements: perceived severity of the threat, the individual's susceptibility to the threat, their belief in their ability to take effective action (self-efficacy), and the belief that the proposed actions will effectively mitigate the threat (response efficacy).

For a fear appeal to lead to the desired behavior change, it's essential that the recipient of the message perceives the threat as both severe and relevant to them personally. This means they must see themselves as vulnerable to the consequences outlined in the message. Beyond recognizing the severity and relevance of the threat, the message must also convincingly communicate that taking the recommended action will reduce the risk or impact of the threat (response efficacy), and that they, the message recipient, are capable of performing these recommended actions (self-efficacy).

The concept of system efficacy, which highlights the trust in societal and communal support systems to manage the threat, complements these individual-level perceptions. This aspect underlines the importance of confidence in the broader social and institutional

mechanisms for effective threat mitigation (Venette, 2008; Anthony et al., 2018; Macpherson et al., 2014).

Witte and Allen (2000) identify three potential reactions to fear-inducing messages: no response, fear-control response, and danger-control response. The most favorable reaction, the danger-control response, occurs when the individual not only understands the risk but also feels motivated to adopt the suggested protective behaviors. Conversely, a message might fail to provoke any reaction if it does not successfully instill a sense of fear, rendering it ineffective. On the other hand, a message that successfully incites fear but fails to boost the individual's confidence in their ability to counter the threat can lead to a fear-control response. In this situation, the individual may downplay the severity of the threat, ignore the advice given, or doubt the effectiveness of the recommended preventive measures. Achieving a danger-control response requires a delicate balance: the message must simultaneously trigger a sense of fear and convince the audience of the efficacy of the suggested action. The interplay between perceived threat and the belief in one's ability to mitigate that threat is crucial for prompting individuals to take the recommended course of action.

Moving from the detailed look at how fear influences behavior with the Extended Parallel Process Model, the next topic is about the impact of storytelling in health messages. Narrative messaging can really grab people's attention and help them understand and act on health advice.

Using narrative messaging in public health materials can be a powerful way to change behaviors. Hinyard (2007) points out that storytelling can grab people's attention and make them more likely to understand and act on the message. Zoller and Dutta (2008) argue that stories can help build a sense of community and shared identity, influencing how individuals react to health information. Stories have also been shown to lessen negative attitudes toward mental health

issues (Pescosolido et al., 2010), addiction (Kelly, 2016; Kelly et al., 2010; Taylor et al., 2021), and boost support for policies like naloxone distribution (Bachhuber et al., 2015). They can change views on the need for treatment (Kasmin, 2019; Qin et al., 2020) and portray women who use opioids in a more understanding light (Kasmin, 2019). Essentially, storytelling in health messaging can effectively influence public attitudes and behaviors toward health issues.

After exploring the effectiveness of storytelling in health communication, the conversation turns to the Lived-Experience Framework. This approach emphasizes the power of real-life stories and experiences in enhancing the impact of health communication campaigns. It considers how personal experiences, cultural backgrounds, and the broader social and environmental context can shape people's responses to health messages.

Using real-life stories and experiences can deepen our understanding of how people react to health communication campaigns by looking at the influence of personal stories, cultural beliefs, and social and environmental contexts (Kim & Dearing, 2021). For example, Pescosolido et al. (2010) noted a shift in public attitudes toward conditions like schizophrenia, depression, and alcohol dependence over the years, likely due to changes in cultural norms and conversations. Similarly, Witte and Allen (2020) discovered that messages that evoke fear can work in health campaigns, but their success largely depends on the audience's own experiences. This highlights how crucial it is to use a real-life experience approach to create impactful health messages and to understand how they're received (Hornik, 2002; Hinyard, 2007; Jordan, 2009; Zoller & Dutta, 2008). This strategy also helps explore the role of media in shaping public opinions and health behaviors (Briggs & Hallin, 2016; DuPré, 2017; Friedman, 2004; McDonnell, 2016; Parker & Thorson, 2009) and shows the importance of using storytelling to encourage people to change their health behaviors (Hinyard, 2007; Miller-Day & Hecht, 2013).

Moreover, storytelling can challenge how the media portrays women who use opioids, offering more nuanced perspectives (Kasmin, 2019).

Concluding the section on communication approaches in recovery messaging highlights the importance of understanding risk perception, emotions, and their roles in health behavior change, especially concerning opioid use disorder. This exploration begins with how individuals assess risks and the emotions that influence their decisions. It is crucial for effective health communication to grasp both concepts. The discussion then moves to the Extended Parallel Process Model (EPPM), illustrating that fear can motivate action if individuals feel capable of addressing the threat. The narrative shifts to the impact of storytelling, demonstrating its ability to make health issues more relatable and change attitudes and behaviors. The section concludes with the Lived-Experience Framework, underlining the importance of incorporating real-life stories into health messages to enhance their resonance and impact.

This analysis sets the stage for addressing the research question, which seeks to understand the communication preferences of Ojibwe community members in Northern Minnesota concerning addiction recovery program materials. This inquiry stems from the premise that cultural sensitivity and relevance are crucial for creating messages that resonate with the community's values, experiences, and needs. Investigating the Ojibwe community's communication preferences aims to identify how these insights can guide the development of effective communication tools. These tools should not only align with cultural norms but also motivate engagement with recovery resources.

This work is grounded in the belief that understanding the unique cultural and communicational landscape of the Ojibwe community is crucial for the creation of health communication strategies that are both respectful and effective. It acknowledges the diversity

within Native American communities and the need for tailored approaches that honor each community's traditions, narratives, and visions of health.

THEORETICAL FRAMEWORK

In transitioning from the literature review to the theoretical underpinnings of this study, it's crucial to contextualize the choice of theoretical frameworks within the broader research objectives. The review of existing literature has revealed the complex nature of recovery from opioid use disorder, particularly highlighting the unique challenges faced by Indigenous communities. It shows the importance of approaches that are both culturally sensitive and grounded in solid research. With this context in mind, this dissertation employs Grounded Theory and Indigenous Standpoint Theory as its foundational theoretical frameworks. These choices are not arbitrary but are informed by the literature's emphasis on the complex interplay of cultural, social, and individual factors influencing recovery in Ojibwe communities.

Grounded Theory and Indigenous Standpoint Theory offer deep insights into communication strategies for opioid use disorder recovery, especially within Indigenous communities. Grounded Theory enables the development of theories that are directly informed by data, ensuring these theories are relevant and applicable to the context they're studied in. On the other hand, Indigenous Standpoint Theory emphasizes prioritizing the experiences and needs of Indigenous peoples in the research process, facilitating a collaborative creation of knowledge that reflects community perspectives and priorities. Using these two frameworks together can achieve a more thorough understanding of how to approach opioid use disorder recovery messaging in Indigenous contexts. This method ensures that messaging is culturally attentive and meets the specific needs of Indigenous communities. Additionally, grounding messaging in the experiences and values of Indigenous peoples can enhance engagement and the effectiveness of these communication strategies. In summary, combining Grounded Theory with Indigenous

Standpoint Theory provides a strong and comprehensive approach to studying opioid use disorder recovery messaging in Indigenous communities.

Grounded Theory

Grounded theory is a research approach that combines different methods to collect and analyze data systematically, aiming to build theories or models from the ground up. This method is particularly useful for exploring how to communicate about recovery from opioid use disorder, allowing for a process that adjusts based on what the data shows, reflecting real-life experiences and perspectives of people dealing with opioid use disorder (Chun Tie, Birks, & Francis, 2019). The main goal of grounded theory is to develop a theory or model based directly on collected data, avoiding the use of pre-set ideas or biases (Ellingson & Borofka, 2014).

Li (2022) demonstrated how grounded theory was used to develop a model looking at how digital communication affects the preservation of cultural heritage. Similarly, Martin et al. (2018) pointed out its value for beginners in research, especially in the area of communication studies. By applying grounded theory, a deeper understanding of the experiences, attitudes, and beliefs of individuals affected by opioid use disorder can be achieved. This understanding helps in designing communication strategies that truly connect with people affected by opioid use disorder (Chun Tie et al., 2019).

When it comes to creating messages for recovery from opioid use disorder, grounded theory helps identify which communication strategies work best, like the Extended Parallel Process Model, sympathetic storytelling, and sharing real-life experiences, and also helps understand why they are effective. Furthermore, grounded theory allows for the development of theories or models that are based on the actual experiences of individuals affected by opioid use

disorder. This can guide the creation of specific interventions to aid recovery (Ellingson & Borofka, 2014). In short, grounded theory is an essential tool for investigating communication strategies in opioid use disorder recovery messaging, offering a detailed and systematic way to gather and analyze data that's rooted in people's real experiences.

Indigenous Standpoint Theory

Indigenous Standpoint Theory explores how our social position, shaped by our social, political, economic, and cultural relationships, influences our identity and the structure of our lives (Foley, 2007). This theory looks into the dilemma Indigenous peoples face: the pressure to choose between their cultural identity and one imposed by colonial powers. It stresses the critical need to recognize and appreciate the differences between Indigenous and Western cultures as a foundation for mutual understanding and acceptance (Foley, 2007).

Central to this theory is the concept that research should primarily benefit the Indigenous communities it studies, rather than outsiders (Foley, 2007). This means that the knowledge produced is valued and owned by the community, giving Indigenous researchers the opportunity to contribute from their unique cultural perspectives, support the preservation of their culture, and share their distinct understandings to create a more inclusive and complex body of knowledge. Indigenous scholars argue that research in their communities must be conducted with the community's needs and interests at the forefront, empowering them and supporting their self-determination, thereby respecting their sovereign right to set their research agendas and demonstrating a commitment to social justice (Moreton-Robinson, 2013).

By emphasizing the significance of Indigenous peoples' experiences, acknowledging the distinct differences between Indigenous and Western cultures, and upholding the sovereignty of

Indigenous peoples in determining the focus of research, Indigenous Standpoint Theory advocates for a creation of knowledge that is inclusive and multifaceted. This approach benefits Indigenous peoples by centering their perspectives, addressing their specific needs, and honoring their cultural distinctiveness (Nakata, 2007). Through this lens, research becomes a collaborative effort that not only enriches academic discourse but also has practical implications for Indigenous communities, ensuring that the generated knowledge is meaningful and directly beneficial to them.

Wrapping up this section, the chosen theoretical approaches, Grounded Theory and Indigenous Standpoint Theory, set a strong base for exploring how to effectively communicate about opioid use disorder recovery in Indigenous communities, specifically focusing on the Ojibwe community in Northern Minnesota. Grounded Theory digs into the real stories and experiences of people dealing with opioid use disorder to build theories that make sense in their specific contexts (Chun Tie, Birks, & Francis, 2019). This approach ensures the findings are directly connected to what people are actually going through and what helps them in recovery.

At the same time, Indigenous Standpoint Theory puts the spotlight on the importance of understanding recovery from the viewpoint of Indigenous people themselves (Foley, 2007). It argues for research that benefits Indigenous communities, allowing them to guide the study based on what they need and what matters to them (Moreton-Robinson, 2013; Nakata, 2007). This ensures the research is respectful and reflects the unique cultural identity of the Ojibwe community.

Merging these frameworks, this study seeks to answer the research questions: What preferences do Ojibwe community members in Northern Minnesota have for messaging within addiction recovery program materials? In what ways can their preferences inform the creation of

effective communication tools that encourage engagement with available recovery resources? By integrating Grounded Theory and Indigenous Standpoint Theory, the goal is to uncover messaging strategies that resonate with the Ojibwe community's cultural values and experiences, ensuring the development of communication tools that effectively engage and support the community in their recovery journey. This dual-framework methodology offers a comprehensive approach to crafting messages that are not only evidence-based but also culturally attuned, aiming to enhance the efficacy and relevance of addiction recovery programs.

METHODS

In response to the escalating opioid crisis disproportionately impacting Native American populations, this dissertation focuses on developing effective communication strategies for substance use disorder recovery that align with the cultural and communicative preferences of the Ojibwe community in Northern Minnesota. This research is driven by the question: What preferences do Ojibwe community members in Northern Minnesota have for messaging within addiction recovery program materials. In what ways can their preferences inform the creation of effective communication tools that encourage engagement with available recovery resources?

Utilizing a qualitative research methodology, this study integrates grounded theory and Indigenous Standpoint Theory to foreground Indigenous knowledge systems and perspectives. Grounded theory facilitates the generation of theory from systematically gathered and analyzed data, while Indigenous Standpoint Theory prioritizes Indigenous experiences and worldviews, critically addressing the marginalization of these perspectives in mainstream discourse. This dual theoretical approach ensures the research is culturally attuned and aims to produce findings that are academically informed and practically applicable in crafting communication materials for addiction recovery programs targeting Indigenous communities.

Participants in this study were selected based on specific inclusion and exclusion criteria. Inclusion criteria encompassed Ojibwe individuals in inpatient treatment and Elders facilitating ceremonies at the Northern Minnesota Addiction Wellness Center, as well as healthcare workers and facility owners, regardless of race. Exclusion criteria applied to non-Ojibwe individuals in inpatient treatment. Additionally, to protect privacy in this small community, no further identifiers such as gender or age were shared.

The initial stage of the research involved direct involvement at the Northern Minnesota Addiction Wellness Center, where I engaged with the community both as an observer and participant. This immersion was important for the development of research tools and was informed by Ojibwe people's lived experiences and cultural practices, encompassing participation in meals, ceremonies, and daily community life to gain a comprehensive understanding of their healing practices and the challenges they face during recovery.

Following the pretesting phase, in the first phase of the study I conducted semi-structured interviews with a select group of participants, including clinical staff, community Elders, and individuals personally affected by substance use disorder. These interviews sought to capture the community's narratives surrounding addiction, recovery, and the role of informational materials in these processes, providing insights into both personal and collective experiences.

The second phase engaged community members in a co-design process to produce communication materials. Through Collaborative Creation Circles, participants leveraged their experiences to design brochures and flyers that mirror their personal and shared recovery journeys. This phase not only produced culturally resonant materials but also empowered participants by involving them directly in the creative process, ensuring the final products were meaningful and aligned with community values and preferences.

In concluding the study, I focused on the integration of insights from earlier phases into the development of a culturally specific website. This online platform was designed to support recovery by featuring personal stories, educational content grounded in Ojibwe teachings, and information on local resources. By adhering to co-design principles, the application of findings aimed to create a digital space that reflects the community's experiences, facilitates healing, and serves as a valuable resource for those on the path to recovery.

Pretesting at the Treatment Facility

In the early stages of my research at the Northern Minnesota Addiction Wellness Center, my role evolved beyond that of an observer, but as an active participant within the community. This approach was not chosen at random; it was a deliberate method to ensure that the development of my research instruments would be informed by the lived experiences and cultural practices of Ojibwe peoples, along with ensuring the facility I gathered data from integrated Indigenous healing methods. Through recommendations from my healthcare network, I was fortunate enough to gain access to this facility, known for its openness to research and collaboration, particularly with scholars from Bemidji State University.

Incorporating participant observation into my dissertation research provided an in-depth exploration into the community's space of healing and recovery. I was fortunate to gain access to this space, especially the cultural aspects, thanks to the established community at the facility. My own personal experiences, including my mother's overdose and her prolonged health struggles leading to her death, created a unique layer of trust. This connection conveyed a deep understanding, essentially saying, "You know who I am and some of what I'm going through." This shared experience opened doors to observe everyday life, customs, and interactions that are not immediately visible from the outside (Emerson, Fretz, & Shaw, 2011). This approach was important for building trust and understanding the community's dynamics from an insider's perspective (Bernard, 2011). By actively participating in daily routines and cultural practices, I ensured my research was grounded in real-world experiences, enhancing the validity and relevance of my findings (Fetterman, 2010). This hands-on approach offered a detailed depiction

of how cultural traditions, social interactions, and individual stories intertwine within the community's recovery landscape.

My immersion over two days involved engaging with the community in a variety of settings: sharing meals, playing lacrosse, participating in ceremonies such as smudging and talking circles, and attending classes about grief and healing. This participatory observation allowed me to gather an understanding of data through casual conversations, observations, and reflective notes, all of which painted a picture of the community's health information-seeking behaviors and their preferences for certain terminologies.

Interestingly, this engagement led to a series of revelations that would shape my research direction. Initially, I had assumed that traditional forms of advertising like flyers and billboards would be the most recognized sources of information for this community. Conversations revealed a strong preference for digital platforms, with many participants discovering the facility through case worker recommendation followed by a web search on their phones. This preference hierarchy extended to radio, word of mouth, printed materials, and finally, social media and online groups, reshaping my assumptions about effective communication channels within this community.

Additionally, my initial beliefs about the role of language and stigma were challenged. I had anticipated a resistance to the term “addict” due to its potential stigma; instead, I found a community reclaiming the term as a part of their identity and healing journey. This insight was particularly impactful, highlighting the importance of language and self-identification in the recovery process.

Reflecting on my own experiences of grief during this time, I recognized the parallels between my personal journey and those of the participants. This commonality in emotional

experiences not only contributed depth and empathy to the research but also revealed the universal aspects of grieving and the assorted avenues for healing.

This participatory approach not only informed the evolution of my research instruments but also deepened my understanding of the cultural and informational landscapes navigated by individuals in recovery. The insights from this experience were important in shaping the subsequent phases of my research, guiding the creation of materials that resonate with the cultural and communicative preferences of the Ojibwe community.

Phase One: Interviews

In the initial phase of my research at the Northern Minnesota Addiction Wellness Center, I initiated a series of interviews aimed at capturing the complex narratives surrounding the community's relationship with addiction and recovery information. Choosing a semi-structured interview format was a deliberate decision to create a setting where conversations could unfold organically, rather than a rigid clinical exchange. This format ensured that while the conversation remained open to exploration, it was also guided to cover the essential questions I needed to address. My approach was informed by Grant McCracken's methodology for generating ethnographic data, utilizing an open-ended questionnaire to look into the cultural categories and meanings shared across interviews (McCracken, 1988).

The selection of participants was a thoughtful process, facilitated by the relationships I had nurtured during the pretesting phase. This prior engagement made the interviews not only more meaningful but smoother, as a sense of familiarity and trust had already been established. I employed purposive sampling to choose 24 participants, consisting of four clinical staff experienced in substance use disorder treatment, two community Elders who facilitate ceremony

in recovery settings, and eighteen community members who had personal experiences with substance use disorder. This diverse group played a crucial role in depicting a full portrait of the community's experiences and resilience when dealing with substance use disorder.

Conducting the interviews required a return to the Wellness Center, where I held one-on-one sessions in settings ranging from private rooms for telehealth appointments with clients to the med room for medical staff. These interviews, recorded and later transcribed by me using Google Docs' voice typing feature, served as the cornerstone of my data gathering process. Followed by utilizing Dedoose for thematic analysis.

Analyzing the interview data was an extensive process that began with a thematic analysis. This method allowed me to identify patterns and themes within the data without being confined to a specific theoretical framework (Braun & Clarke, 2006). I started with a general overview of the transcripts to grasp the data's overall essence before moving on to initial coding and thematic categorization (Creswell, 1998; 2013). This method enabled the extraction of overarching themes from detailed observations, leading to a collection of broad insights that might be relevant to comparable groups (Yin, 2009).

Phase Two: Collaborative Creation Circles

In phase two, which I like to call Collaborative Creation Circles, the aim was to directly involve participants from the Northern Minnesota Addiction Wellness Center in creating communication materials. Drawing on the work of Lindquist et al. (2007), Apers et al. (2023), Grindell et al. (2022), and Goodyear-Smith et al. (2015), this phase was grounded in co-design. The participants, chosen from those engaged in the initial interview phase, worked individually

in a group setting to produce a brochure that reflected their individual and collective healing journeys.

The process involved a group session where basics of brochure and flyer design were discussed, and participants were encouraged to create something meaningful to their recovery. After creation, each participant explained their piece to me privately, focusing on their choices of art, words, and symbols. This activity aimed to generate materials that would resonate with the broader community, making the brochure's message more impactful.

The materials produced during these circles—be they drawings or written pieces—were collected and documented. This collection process was respectful of participants' ownership of their creations, with many choosing to photograph or scan their work as a personal keepsake. My analysis strategy was guided by the insights of Grindell et al. (2022) and facilitated by the use of Dedoose software. I aimed to see what was really going on beneath the surface of each work, from the choice of colors and symbols to the nuances of language and narrative styles.

In working with the Collaborative Creation Circles, I used thematic analysis to see what common themes popped up from our group's work, focusing on how we communicate, our cultural symbols, and what healing means to us. This approach is based on the work of Braun & Clarke (2006), who suggest looking for themes in what people create or say to understand them better. I started by taking a close look at each piece of artwork and discussion from the circles, identifying the main ideas that kept showing up. This careful look helped make sure I really got what each creation was about, following a method similar to what Strauss & Corbin (1998) recommend for breaking down and understanding data.

To keep track of everything, I made a detailed list (a codebook) of all the themes I found, explaining what each one means. This helped organize the information I collected, turning my

initial notes into clear, defined themes. Creswell (1998) talks about how important it is to get a good, overall understanding of your data, and that's what I tried to do.

To make sure my findings were solid, I worked with another researcher. We both used my list of themes to look at three of the creations together. This step was crucial for making sure we both saw the themes in the same way, ensuring the analysis was reliable, just like Braun & Clarke (2006) suggest.

After we agreed on the themes, I looked at the big picture to connect the dots between all the different themes I found. This was more about letting the main messages show themselves from the data, keeping in line with what people actually shared, similar to the approach Strauss & Corbin (1998) describe.

Finally, I kept a journal during the whole process, writing down my first impressions and feelings about what we discussed and created in the circles. This step, inspired by Lindlof & Taylor (2011), was about making sure I understood the reasons behind people's actions and creations. Looking back at these notes helped me stay true to what the participants really wanted to say, making the analysis grounded in real experiences.

Integration of Findings

In the integration of my project, the focus shifted toward the practical application of insights gathered from the Ojibwe community into developing a culturally tailored website to support recovery from substance use disorder. This step was informed by a deliberate methodological approach, emphasizing co-design principles highlighted by which advocate for the integration of users in the creation process to ensure that the final product is both relevant and meaningful to its intended audience (Lindquist et al., 2007; Apers et al., 2023).

Guided by the principle of Mino-Bimaadiziwin, or "living a good life," the core of the website was shaped, reflecting a core Ojibwe value guiding individuals toward spiritual healing and wellness. This decision was backed by thematic analysis allowing for the organic emergence of key themes such as personal stories, educational insights, cultural practices, and artistic expressions (Braun & Clarke, 2006). Each element aimed to enhance the relevance and accessibility of recovery resources.

The inclusion of personal narratives discovered through public interviews conducted by Minnesota Public Radio (MPR) was a choice designed to lend the site authenticity and a sense of belonging. This approach emphasizes ethnographic data's power to convey deep, culturally resonant stories, thereby emphasizing the concept of Mino-Bimaadiziwin in a relatable manner (McCracken, 1988).

Furthermore, the educational content on the website drew heavily from the Seven Grandfather Teachings, a decision informed by participant interviews and observations. This choice was rooted in co-design, ensuring that the content not only provided a decolonial perspective on addiction but also was grounded in traditional healing practices (Grindell et al., 2022).

For the representation of cultural practices, such as ceremonies and the Red Road to wellness and recovery, I leaned on insights from cultural experts and community members. This approach stresses the importance of including stakeholders in the design process to ensure that the traditional practices featured on the website are meaningful and representative of the community's path to healing (Goodyear-Smith et al., 2015).

Artistic representations on the website were inspired by community collaboration circles, reflecting a co-design approach where community input directly influenced the visual content.

This method, aimed to create art that serves as a cultural tie, connected users to the community's healing process through visual storytelling (Fetterman, 2010).

An interactive map and resource section were developed to enhance accessibility to local wellness and healing centers. This development was grounded in the methodology's focus on making recovery resources more accessible and user-friendly (Creswell, 1998).

Reflecting on this project, the integration of findings into a cohesive website was supported by a thoughtful blend of thematic analysis and co-design methods. These choices were made to ensure that the website not only resonated with the Ojibwe community's needs and values but also represented a step forward in combining traditional knowledge with modern communication techniques to address the complexities of recovery from substance use disorder. The process highlighted the importance of culturally sensitive communication, the power of visual storytelling, and the importance of engaging with and reflecting upon the community's voice in every step of the development process.

Ethical Considerations

In the data collection phases, each participant received an informed consent form detailing the study's aims, procedures, potential risks and benefits, and their rights, including the right to withdraw at any time without penalty. After reviewing the form and addressing any questions, participants gave their verbal consent. To accurately capture the data, interviews were audio recorded, providing a comprehensive record for analysis. Recognizing the importance of consent and autonomy, participants could choose not to be recorded, in which case detailed notes were taken, supplemented by reflective notes and observations post-interview. This method

respects privacy and comfort while maintaining ethical standards of informed consent and participant control.

When addressing the choice of verbal consent over written consent in research or interventions involving communities with a history of trauma associated with signing documents, it's crucial to consider the ethical implications and the historical context. The use of verbal consent over written consent in research, particularly with communities that have experienced historical trauma, it's essential to recognize the ethical implications and historical context. This approach acknowledges the potential mistrust and fears in communities with a history of exploitation or abuse documented through written agreements. The frameworks of OCAP (Ownership, Control, Access, and Possession) and IQ (Inuit Qaujimajatuqangit) provide valuable guidance. OCAP, specific to First Nations, and IQ, deriving from Inuit traditional knowledge, emphasize self-determination and respect for Indigenous communities' autonomy in research (Mashford-Pringle & Pavagadhi, 2020). They advocate for a research ethic that prioritizes collaborative relationships, ensuring that Indigenous communities can govern how research is conducted and how the resulting data and knowledge are shared. This approach acknowledges the mistrust and fears that may be present in communities that have experienced the removal of rights or other forms of exploitation and abuse documented through written agreements. The decision to use verbal consent respects the participants' comfort levels and aims to create a more inclusive and trusting environment (Mashford-Pringle & Pavagadhi, 2020).

The method of consent (written or verbal) can be tailored to the specific needs of the study population, particularly in situations where written agreements may evoke negative historical or cultural associations. The National Institutes of Health (NIH) endorses verbal consent as a viable option in certain scenarios, notably with populations that historically mistrust

written contracts due to previous exploitation (National Institutes of Health, 2020). Adopting such approaches allows for trust and honors the cultural and historical backgrounds of participants.

To maintain confidentiality, I anonymized interview transcripts by removing all personal identifiers. Protective measures for data security included the use of password-protected digital files and secure storage of physical documents. The Institutional Review Board (IRB) at the University of Oregon reviewed and approved the study, affirming its adherence to ethical standards.

FINDINGS

In this section of my dissertation, I explored how cultural values and communication preferences intersect within the Ojibwe community in Northern Minnesota, specifically focusing on messages about recovery from substance use disorder. This exploration was based on two primary sources: detailed interviews with Ojibwe community members, including Elders and clinical staff, and insights from Collaborative Creation Circles, which engaged community members in co-designing recovery program materials. This dual-method approach allowed for a nuanced understanding of what makes recovery messages meaningful to the community.

The purpose of this analysis was to uncover how Ojibwe community members' preferences shaped their engagement with recovery messaging. Through examining the patterns that emerged from both interviews and collaborative sessions, I aimed to identify key elements that resonated with the community. These research questions guided the study: What preferences do Ojibwe community members in Northern Minnesota have for messaging within addiction recovery program materials? In what ways can their preferences inform the creation of effective communication tools that encourage engagement with available recovery resources?

This section aimed to craft a communication strategy framework that not only reflected Ojibwe cultural identity but also effectively connected community members with recovery resources. This involved looking into the community's views on language, cultural symbols, and narratives, highlighting their importance in developing empowering and hopeful messages. By synthesizing insights from the research, I intended to show how cultural understanding could guide the development of communication tools for recovery, enhancing the connection between the Ojibwe community and available recovery resources, and supporting individuals on their recovery journey.

Insights from Interview Data

This section reviews how Ojibwe community members in Northern Minnesota feel about messages in addiction recovery materials. I aimed to find out what messages work best to encourage them to use available resources for recovery. By analyzing interviews from the Northern Minnesota Addiction Wellness Center, I looked for clear themes that show what the community prefers. My goal was to learn from these insights to make better communication tools that are easy to understand, respectful of cultural values, and motivating for people on their recovery journey.

Choosing the right participants was important, bringing together a group of 24 individuals that included four clinical staff members knowledgeable in substance use disorder treatment, including the facility's owners, two community Elders who lead recovery ceremonies, and eighteen Ojibwe community members who have personal experience with substance use disorder. This varied collection of perspectives offered a rich and detailed understanding of the challenges and responses associated with substance use disorder.

Semi-structured interviews were employed to collect data, offering a rich and varied dialogue. This method enabled participants to openly share their experiences, while still addressing the study's core subjects. Both flexible and focused, the interviews were designed to gather data relevant to the research question (McCracken, 1988).

A coding scheme was developed for thematic analysis, utilizing Dedoose to assist in identifying and categorizing themes across the data. Initial coding led to the identification of major themes, which were then analyzed in relation to the broader research questions (Braun & Clarke, 2006). Dedoose is a web-based application designed for organizing, analyzing, and

collaborating on research data, particularly for qualitative and mixed methods research. It provides tools for coding, retrieving, and sharing data efficiently, making it a popular choice for researchers across various disciplines. The analysis also considered the impact of data collected during the pretesting phase, allowing for an understanding of the community's relationship with substance use disorder and recovery before formulating the interview questions.

The process to sift through the interview data began with a review of the transcribed interviews, focusing on recurrent ideas, expressions, and instances that appeared across the conversations. Each interview was read multiple times, for a deep understanding of the content and the emergence of preliminary codes. These initial codes were applied uniformly across all transcripts, noting patterns that transcended individual experiences. As themes began to come together, they were further refined, ensuring they captured the key points of the participants' narratives. This iterative coding process, supported by Dedoose, facilitated the organization of data into coherent themes that reflected the shared experiences and concerns of the community members, clinical staff, and Elders (Braun & Clarke, 2006).

The analysis centered on how the identified themes related directly to the research questions, focusing on messaging preferences within the community and the implications for creating effective communication tools. Themes such as "Empowerment and Hope," "Stigma and Language," and "Cultural Relevance" highlighted the importance of positive, culturally sensitive messaging and the use of non-stigmatizing language. The interrelation of these themes pointed to a comprehensive framework for designing recovery program materials that resonate with Ojibwe community values and experiences. By examining the connections between messaging preferences and the broader context of addiction recovery, it became clear how important the

alignment of communication strategies with community expectations is for encouraging engagement with recovery resources.

The thematic analysis provided critical insights into the preferences of Ojibwe community members regarding messaging in addiction recovery program materials. It revealed a clear preference for messaging that is empowering, culturally tailored, and free from stigmatizing language. These preferences highlight the necessity of developing communication tools that not only provide accurate and helpful information but also reflect the community's cultural heritage, values, and language. The findings suggest that effective communication tools should incorporate elements that create hope, highlight success stories, and utilize culturally relevant symbols and narratives. Such tools are likely to facilitate a stronger connection with the intended audience, thereby enhancing engagement with available recovery resources. This analysis aligns with the research question by illustrating how understanding specific messaging preferences can lead to the development of more effective communication strategies in addiction recovery programs for the Ojibwe community in Northern Minnesota.

The research questions guiding this investigation seek to understand - What preferences do Ojibwe community members in Northern Minnesota have for messaging within addiction recovery program materials? In what ways can their preferences inform the creation of effective communication tools that encourage engagement with available recovery resources? The insights gained here are important in guiding the development of recovery program materials that are not only culturally sensitive but also aligned with the community's values and communication preferences.

A message of sincere hopefulness

The section explores a messaging approach to engaging with individuals seeking help for substance use disorders. This analysis draws upon firsthand accounts from the Northern Minnesota Addiction Wellness Center's community, highlighting a clear preference for messages that are positive, informative, and realistically framed. Through an examination of messaging preferences, communication channels, and visual and design preferences, this section aims to uncover the types of messaging and outreach that resonate most effectively with the community. The insights gathered here are important in guiding the development of communication tools that not only convey the necessary information about addiction recovery but also do so in a manner that is empowering and hopeful. By addressing the community's preferences for how recovery programs communicate their messages, this analysis contributes to a deeper understanding of how to create engagement and support Ojibwe individuals on their journey toward wellness.

Several participants expressed a clear preference for positive messaging and informational content over fear-based approaches. A healthcare worker highlighted the value of including mission statements and service offerings in program materials, suggesting a preference for clear and informative messaging, "It's good that they have their mission statement on there. And then the services they offer." This indicates a desire for transparency and straightforward communication about the services available to them, which can foster trust and clarity in the recovery process.

Conversely, negative framing, particularly fear-based messaging, was criticized for its ineffectiveness and potential harm. For instance, the owner of the facility criticized the D.A.R.E. program for being fear-based and misleading "D.A.R.E. is actually I think has ruined more children than it's ever helped. Yeah because it scares you and it doesn't teach you the truth." This

sentiment was echoed by another participant, who argued for the importance of providing accurate information to enable informed decisions rather than using fear tactics "Give them the right information you know so that they can make an educated informed decision for themselves. You know don't try and use fear tactics." These perspectives underline the community's preference for recovery messaging that is empowering and educative, steering clear of tactics that invoke fear.

The critique of simplistic messaging approaches, such as the "Just Say No" campaign, further illustrates the community's preference for nuanced and realistic messaging about recovery. The dismissal of such campaigns as unrealistic by participants suggests a desire for messaging that acknowledges the complexities of addiction and recovery "Recovery is possible...It's just a redo of the Nancy Reagan just say no... That's not realistic." This aligns with the broader theme within the interviews of seeking messaging that respects the intelligence and autonomy of the community members, providing them with the information and inspiration needed to pursue recovery.

Finally, participants also discussed the importance of changing the current messaging strategies to better reflect truths about addiction and recovery. This includes moving away from fear-based narratives to more positive, informative, and supportive messaging that can genuinely assist individuals in their recovery journey "Fear-based for sure... it scares you and it doesn't teach you the truth...How do we change that messaging as well?" This reflects a broader desire for a shift in how addiction recovery is communicated, emphasizing hope, support, and accurate information.

In conclusion, the analysis of Messaging Preferences within the Northern Minnesota Addiction Wellness Center's community highlights a clear preference for positive, informative,

and realistically framed messaging over negative, fear-based approaches. The community members express a desire for messaging that empowers and educates, offering hope and support while acknowledging the complexities of addiction and recovery. These preferences are important for developing effective addiction recovery programs that resonate with the Ojibwe community and support their journey toward wellness.

A health care worker shared insights on how the facility's information is spread through university hiring fairs, suggesting an active approach to outreach that goes beyond traditional advertising, "So [the owners] will go to [the university] and will have...a hiring fair. So [they] will set up a stand and just kind of like spread it that way." This strategy indicates a personalized and direct engagement with potential community members, showing the value of face-to-face interactions in raising awareness about recovery programs.

A health care worker mentioned using personal social media accounts for promotion, indicating a contemporary and reachable communication strategy. They said, "[The owner] has Facebook. It seems like it was her personal account originally, but now she uses it solely for this place." This method shows how combining personal and professional networks can be used effectively to promote programs. Additionally, it highlights how the outreach, being personal and led by someone in long-term recovery, enhances the connection and impact within communities. This approach shows the value of peer-led efforts in making recovery messaging more relatable and effective.

The program has a strong online presence and also utilizes radio, a more traditional communication method, to reach a wider audience. A health care worker's statement shows this approach, "[The owner of the facility] has done radio interviews too. I don't necessarily drive and hear ads for this place, but I know [she] has talked on the radio"

Bridging traditional and community-specific outreach, the facility owners mentioned distributing brochures in tribal locations as a customized strategy to connect with their audience. They said "our brochures are located in any tribal facilities like colleges or jails...I know there are, I just don't know where. They do have [them out]." This method demonstrates an understanding of the community's locales and the strategic placement of informational materials where they are most likely to be seen by those in need of services. This focused approach makes sure important information is easy to find in places where the community often goes, increasing the chances of reaching people who need these services. By doing this, it helps build a more connected and knowledgeable community.

The use of printed materials like brochures and business cards plays a role in their communication strategy. The owners of the facility highlight the use of these materials as a means to ensure constant engagement and accessibility, "I have brochures constantly. I'm going through business cards. Yeah. Here you go. Here you go. So I think I've ordered 4000 business cards since we started." This quote illustrates a proactive approach to distributing tangible resources that people can easily share and refer to. The physical distribution of brochures and business cards not only helps in spreading awareness about the recovery services but also facilitates personal connections between the community members and the recovery program. By investing in such a high volume of printed materials, the facility demonstrates its commitment to making sure that information about their services reaches as many individuals as possible, thereby enhancing the network of support within the community.

Word-of-mouth is highlighted as a powerful tool for information dissemination within the community, as one owner vividly describes, "The cool thing is now with word of mouth I think word of mouth even like I said the people who are getting kicked out are in jail and telling,

giving, people my phone number." This quote emphasizes the organic spread of information within tight-knit communities and the importance of personal recommendations in building trust and credibility. This focus on word-of-mouth illustrates how personal connections and trust are important for spreading information, showing that straightforward, people-focused communication is key to effectively connect with and support community members.

The journey to discovering addiction recovery programs can vary among individuals, as highlighted by a participant's experience, "Haha I didn't hear about this place. I was sent here. Court ordered. So, yeah. Then I Googled it." This statement shows the diverse ways people come into contact with recovery services, including through legal mandates. This also points to the role of the internet in providing additional information and context about these programs. Once court-ordered to attend, the participant turned to Google to learn more about the facility, illustrating how digital resources serve as a critical tool for individuals seeking to understand more about their path to recovery. This blend of initial external influence followed by personal research highlights the importance of maintaining a strong online presence for recovery centers. It ensures that individuals, regardless of how they are referred to a program, can access detailed and supportive information to help them engage with their recovery process more effectively.

Together these quotes illustrate the diverse strategies employed to communicate with the Ojibwe community about addiction recovery programs. From direct outreach at local universities to the strategic placement of brochures, the use of personal social media accounts, or websites, these methods highlight a comprehensive approach that seeks to maximize engagement through varied communication channels. Furthermore, the emphasis on word-of-mouth highlights the importance of personal connections and community trust in disseminating information

effectively. This multifaceted communication strategy is indicative of the program's awareness of and adaptability to the community's preferences and needs.

The visual and design preferences within addiction recovery programs for Ojibwe community members in Northern Minnesota are central to the effectiveness of their messaging. The detailed attention to visual aesthetics—ranging from the selection of imagery to the layout simplicity—plays a role in ensuring that the information is not only accessible but also resonates deeply with the community.

One of the facility owners discussed the collaborative effort in designing brochures, emphasizing a desire to reflect the natural and tranquil setting of the recovery environment:

“Me and the person from AOM&E Graphics...wanted to make sure people knew it's out in the woods...Really in the woods, nice and clean open spaces...this is a double rainbow picture that [a peer] got... And we just wanted to make it nice and easy [to read].”

This quote highlights the importance of using visuals that convey the serene and healing atmosphere of the facility, suggesting that such imagery can create a sense of hope and peace for individuals considering the recovery journey.

Participants' feedback further informs the visual and design strategies of the recovery programs. The desire for more art and stories reflective of the community's experiences—“There needs to be more art”; “I think more stories about people like us, you know?”—points to a need for materials that not only inform but also engage and represent the community's diversity and stories. This feedback shows the importance of culturally relevant and personalized content in creating materials that connect on a deeper level.

There's also a critical perspective on the approach to marketing within these materials, as one participant expresses discomfort with the marketing-like appearance of some materials: “I don't like it. It's like marketing.” This viewpoint highlights the delicate balance between creating

visually appealing materials and ensuring they authentically represent the recovery process without seeming overly commercialized.

Lastly, the curiosity about the people within the recovery program—"Tell me about the people. What are they like?"—indicates a desire for human connection and understanding, which can be facilitated through stories and testimonials within program materials. Incorporating narratives of recovery and support can demystify the recovery process and foster a sense of community and shared experience.

The Northern Minnesota Addiction Wellness Center places a strong emphasis on blending traditional cultural methods with its addiction recovery programs, making the care they offer closely aligned with cultural needs. By integrating cultural identity into the recovery process through established traditions and the leadership of community figures, the center ensures the care it provides is respectful and culturally aware. Ojibwe participants, in particular, benefit from peer recovery sessions led by Elders, which incorporate cultural teachings and healing practices tailored to their spiritual and cultural requirements. The center's dedication to honoring traditional ceremonies, like pipe and smudge ceremonies, shows its deep respect for these practices and helps participants in reconnecting with their cultural roots. Additionally, encouraging spiritual communication, with your manidoog, highlights the critical role of spiritual ties and acknowledgment in the recovery process. This approach underlines the center's belief in recovery as a shared journey, rooted in cultural and ancestral bonds.

One facility owner shared, "Yeah so we offer we have peer recovery that are specifically for this area Native American. And we have other peer recovery that we work with... So [one of the Elders].. he does more cultural stuff. So Wednesday night is two hours of cultural [healing]" . This quote highlights the importance of incorporating cultural practices, such as peer recovery

sessions led by community Elders, which are tailored to meet the cultural and spiritual needs of their participants. The focus on cultural healing highlights the facility's commitment to providing culturally sensitive and relevant care.

Emphasizing the importance of traditional practices in healing, an Elder shared plans for regular spiritual ceremonies, saying, "We're going to do a pipe ceremony every week. We're also going to do a smudge ceremony." This shows the ongoing commitment to time-honored ceremonies and the deep respect for these spiritual practices. Such activities are crucial for helping participants feel connected to their cultural and spiritual roots, which is a key part of their recovery.

Continuing on this theme of cultural connection, an Elder shared a story highlighting the support nature offers to humanity:

"In this version, when the creator made everything and before he lowered down the human being, Anishinaabe, he asked all the plants and the animals and medicines, you know, everyone that was here that he put down before Anishinaabe, if they would help Anishinaabe when he got here. And they said, yeah, I will do that. So anyways they lowered Anishinaabe to the earth and just like you know all the plants and animals they all took care of it was like their little brother took care of Anishinaabe, gave what he needed. But then after a while, everything was going good then after a while, there was a lot of accidents that started happening. There was a lot of sickness and a lot of things going on. And there was a lot of Anishinaabe that were dying. And so the creator asked them all he said, I thought I asked you if you would take care of them. And so they said that, they said, wow, you know, we've been trying to talk to them, we've been trying to tell them what they need to do to take care of themselves, but they're not listening... they're not understanding. There's like a miscommunication. And so the creator asked, he said, who is going to be the one that will step up and help them with that? And it was the tobacco plant, asemaa, that stepped up and said that I'll be the go-between, to communicate. You know, to communicate to the creator, to the plants, to the animals. And so that's why when you put out your tobacco you know why it's so important. Because the story goes all the way back. The animals remember that."

Connecting to your manidoog is introduced through an Elder's advice, "Spend 20 to 30 minutes each morning communicating with [your spirits] as you offer each of them your tobacco... The spirits, they're waiting for you to do that. And uh... [They] want to be

acknowledged, you know? They want to be acknowledged by you." This teaching emphasizes the importance of spiritual communication and recognition in the healing journey, illustrating how traditional beliefs and practices are integrated in recovery spaces.

The importance of connecting with one's ancestors for guidance and strength during recovery is captured in another Elder's words, "They took care of the family. And you know, as we begin that healing process, you know, for us men, you know, we start looking back to our ancestors for a little guidance." This quote highlights the impact of ancestral connection and the role of family and community in the healing process.

The Northern Minnesota Addiction Wellness Center's incorporation of traditional cultural practices into its recovery programs demonstrates a strong dedication to culturally relevant care. By blending recovery methods with traditional practices led by community Elders, the center provides culturally sensitive care. Peer recovery sessions, led by Elders and focused on cultural teachings, meet the spiritual and cultural needs of participants. Regular traditional ceremonies like pipe and smudge ceremonies show the center's respect for spirituality, helping participants in connecting with their cultural and spiritual roots—an aspect to their recovery. The emphasis on spiritual communication through manidoog highlights the importance of acknowledging spiritual beliefs in the healing process. This approach reflects the belief that recovery extends beyond the individual, forming a collective journey rooted in cultural and ancestral connections, laying the groundwork for a recovery that honors cultural heritage.

In exploring the theme of Cultural Restoration Identity, the focus is on efforts to rejuvenate Indigenous identity through traditional practices, ceremonies, and language learning. This thematic analysis unfolds through an investigation into how these cultural elements contribute to a sense of belonging and identity, which are fundamental to recovery.

The importance of traditional practices in reinforcing Indigenous identity is highlighted through various narratives. An Elder comments on the historical attempts to diminish Indigenous cultures, stating, "Remember it was a plot by this country to have us abandon our teachings and ways in the name of civilizing us as Anishinaabe. So many of our people have fallen for that." This statement brings to light the systemic challenges faced by Indigenous communities in preserving their cultural practices, emphasizing the resilience and resistance in maintaining these traditions as a core aspect of identity and recovery.

The incorporation of crafts and traditional activities within recovery programs is further illustrated by a healthcare worker,

"I think a lot of it is like the craft side. Where they can bead. And smudging. Yeah, they smudge... They sage often. I think [the owner] has sweet grass too. And then they have the bags of tobacco that they have... Beading, dream catchers... They listen to powwow music in the evenings too, when they get free time."

This quote demonstrates the holistic approach to cultural restoration, integrating physical, spiritual, and communal practices that collectively support the journey to recovery. Participants choose to spend their free time connecting with their culture and community.

One respondent, an Elder, emphasizes the holistic approach to well-being, stating,

"You know, we hear about it, you know, like we're supposed to take care of our body. You know, we only got one of them... There ain't no do-overs... That's why they encourage you to eat well, to sleep, you know, to exercise, you know, what we're creating for movement."

This quote illustrates the Elder's belief in the importance of physical health as part of a broader wellness approach in addiction recovery. It suggests that messages within recovery programs should stress the value of physical care as integral to overall health and recovery success.

In another reflection on the nature of physical existence and the enduring nature of the spirit, an Elder articulates, "Our goal in life is to bring peace within us and our Anishinaabe spirit that is within. We only occupy this physical body temporarily." This insight highlights the importance of nurturing inner peace and spiritual well-being alongside physical health. The quote suggests that recovery messages should acknowledge the spiritual aspects of healing, encouraging individuals to cultivate peace within themselves as part of the recovery process.

The value of cultural narratives and teachings is expressed through an Elder's recounting of the Anishinaabe creation story:

"So, like, in our creation story, the creator said that he gave us everything that we need in life to do what is asked of the creator. And so, what he's talking about there is that in our creation story, how we were created is that we came from the spirit world..."

This narrative emphasizes the belief in inherent strength and resources for healing, bestowed by the creator. It indicates that recovery messaging should include cultural stories and teachings to resonate with Indigenous individuals, reinforcing their capacity for recovery and growth.

The significance of cultural identity in the journey to recovery is further discussed by an Elder who speaks on the importance of receiving an Indian name,

"I think that's why it's important to get our Indian names so the creator and the spirits can recognize who we are as Anishinaabe... When you get your Indian name, it's like stepping into your Anishinaabe identity, you know? And it's like, you know, it helps us to be who we really are."

This perspective shows the connection between cultural identity and the healing process, indicating that accepting one's Ojibwe identity, symbolized by the act of receiving an Indian name, is a meaningful step toward self-discovery and advancing in recovery.

In the community Elders often tell people who are not connected with their language the role language and ceremonies hold,

"Learn our language and ceremonies. In our future, there will be a need to have people who can do our ceremonies. If you want to keep busy, this is a line of work to pursue. Think of the people that you can help and the satisfaction that comes from that."

This statement not only highlights the role of preserving language and ceremonial practices but also positions them as essential for the community's future health and continuity.

The role of cultural identity in personal transformation is shown through the encouragement of an Elder to fully embrace one's identity, "Embrace your Anishinaabe identity. Our teaching ceremonies and language." This directive emphasizes the intrinsic link between cultural identity and the recovery process, suggesting that a connection to one's roots is fundamental to healing and growth.

These quotes collectively highlight how cultural restoration and identity play an indispensable role in recovery. By engaging in traditional practices, learning the language, and participating in ceremonies, individuals not only reclaim their identity but also pave a path toward healing. This analysis reveals the impact of cultural restoration on recovery, emphasizing the need to integrate these practices into recovery programs to create a sense of belonging, identity, and well-being among Ojibwe peoples.

Exploring the community and social dimensions of recovery, this analysis looks into the role of communal relationships and social networks in aiding recovery from addiction. At the heart of this discussion is the acknowledgment that recovery-oriented communities, built on peer support and mentorship by Elders and former clients, provide essential structures that enhance the recovery journey. These communities emphasize the value of shared experiences and communal resilience, highlighting the critical nature of community in the recovery process.

The insights from participants show that the effectiveness of addiction recovery materials relies heavily on their design and visual appeal. These insights suggest that materials should not

only be accessible but also deeply resonate with the community by reflecting the tranquil environment of recovery settings and including art and stories that are culturally relevant. Participants express a strong desire for content that mirrors their own experiences and values, indicating the necessity for materials to be engaging and representative. Criticism toward materials that appear overly commercialized shows the need for genuine representation in how information is presented. The incorporation of visual elements that evoke a sense of hope and peace, along with stories that create human connection, emerges as a crucial strategy for enhancing the impact of these materials on individuals contemplating or undergoing the recovery process.

Our language that tells our empowering stories

In this section, the roles of cultural relevance, community narratives, empowerment, hope, and the impacts of stigma and language in the addiction recovery process are explored, with a particular focus on the Ojibwe community in Northern Minnesota. Cultural elements, including traditions, practices, and languages, can enhance the effectiveness of recovery programs and messaging. Feedback highlights a collective wish for the inclusion of these cultural aspects, which not only honor the community's heritage but also render the recovery journey more engaging and meaningful. The importance of community stories and personal experiences is important, creating connections and understanding essential for recovery, helping to diminish stigma and generate hope. Stories of empowerment and hope reflect the resilience and transformative journey individuals undergo during recovery, emphasizing the critical role of supportive communication and belief in the possibility of change. Additionally, discussions about the impact of stigma and language reveal the influence societal attitudes and word choice

have on individuals with substance use disorder, pointing to the need for a more compassionate and understanding recovery approach. By examining these elements, the section aims to offer insights into the complex interplay between cultural and community factors in shaping recovery messaging, advocating for approaches that respect cultural identities and are grounded in community support and straightforward communication.

The importance of cultural relevance in the messaging of addiction recovery programs for the Ojibwe community in Northern Minnesota is illuminated through direct feedback and suggestions from both healthcare workers and participants. This feedback shows a collective desire for the incorporation of cultural elements that reflect and honor Ojibwe traditions, languages, and symbols.

A healthcare worker emphasizes the importance of activities that are not only therapeutically beneficial but also culturally resonant, stating, "Maybe more like cultural -- how any activities they do here are more culturally relevant. Like how they have beading and dream catcher [making], that kind of stuff." This reflects an understanding of the need to intertwine recovery processes with cultural practices that are meaningful to the community.

Another healthcare worker suggests enhancing the visual appeal of materials with culturally specific designs: "If they wanted to focus more on like the Ojibwe, I think they should incorporate more of like, you know, like the floral pattern on the borders or something." Similarly, participants express a desire for more culturally indicative visuals, "I think some flowers would be nice...on the sides," indicating a preference for designs that visually echo their cultural heritage.

Language plays a role in cultural relevance, with a participant noting, "Some of our language, you know, to show its got the talk." This highlights the community's desire for the

inclusion of the Ojibwe language in recovery messaging, underscoring the importance of language as a carrier of culture and identity.

Another participant's suggestion is to depict traditional ceremonies through artwork, "Maybe show the ceremonies we do, like, through drawings," alongside the inclusion of cultural references such as, "Say something about the seven fires prophecy or the grandfather teachings," points to a deeper layer of cultural integration. These elements not only serve to inform but also to spiritually and culturally engage individuals in their recovery journey, connecting them with their roots and providing a source of strength and inspiration.

Incorporating these cultural elements into recovery messaging acknowledges the profound connection between cultural identity and healing. By weaving traditional practices, languages, and symbols into the fabric of their communications, the recovery programs demonstrate a deep respect for and understanding of the cultural heritage of the Ojibwe community. This approach not only enriches the recovery experience but also reinforces the community's connection to their cultural roots, enhancing the overall effectiveness of the programs.

In addition recovery, the importance of community stories and personal experiences is central to crafting messages that resonate with individuals and the broader community. These narratives serve an important function, enabling a sense of connection and understanding important for recovery. The discussion on the importance of sharing in the recovery process highlights how openness about one's journey can dismantle stigma and inspire others.

The impact of shared experiences is significant. For instance, the observation from a facility staff member who has successfully navigated their own recovery journey speaks volumes:

"We're here... And having people work here that went through this program is the most powerful thing because they can say, 'I went here. I can do this, so can you.'" This approach highlights the strength found in shared experiences and the belief in recovery out loud to combat silent suffering, "we recover loudly so others don't have to die quietly."

The question of why the sharing of these stories isn't more common is raised. "But beyond that, we encourage people to tell their stories. A lot of people and places don't. I don't understand that," a facility owner comments. This emphasizes the importance of sharing personal narratives to reduce feelings of isolation.

The evolution of recovery methods is also examined. A reflective comment on traditional programs highlights a shift in perspective: "AA is wonderful but it was started in the 30s before this was classified as a disease. And so the anonymity was important then, but it hurts us now sometimes..." This observation indicates a movement toward more open discussions in today's recovery context, moving away from the stigma once associated with addiction.

Personal stories shed light on the intricate challenges linked with addiction. One person shares, "My friends died in front of me. I just couldn't let that shit go. So, I got high." This highlights how trauma and grief can lead someone to seek escape through substance use. It shows the need for recovery programs to understand and address these challenges, tailoring support to meet individuals where they are. This also involves recognizing personal limits and finding supportive communities beyond the recovery center. A participant shares their perspective on setting boundaries, "I just can't be around them anymore, because it makes me wanna [use] too, and like, I'm trying to be healthy." This account sheds light on the impact trauma can have on addiction and the critical need for recovery programs to be customized to fit the specific needs of individuals, honoring their distinct paths and hurdles.

Recovery isn't a one-size-fits-all process. Personal stories add depth to this narrative. An Elder shares a touching story of forgiveness following a family tragedy, highlighting the emotional complexities families face,

"So I had a little brother. He died when he was 17. He was killed by a drunk driver... But my dad, on the other hand, when we were going through court, because he absconded, and they didn't find him for a few years... My dad didn't want that person that did that to even get any jail time. I couldn't understand that at the time. But he processed things a little differently than I did. You know, he already forgave that man."

This story not only emphasizes the personal and non-linear nature of forgiveness but also the diverse emotional landscapes that families navigate in the aftermath of addiction-related incidents.

The motivation for recovery can stem from a desire to be there for family. "I gotta get sober for my kids," shares a participant. This concise yet profound statement mirrors a common sentiment among many seeking recovery, emphasizing the role of family in the healing journey.

The importance of community in healing is clear from what one facility owner shares: "And connection and community is what helps heal all of us, and almost all physical and social ills." This view supports the idea that a supportive community can help overcome not just addiction but also other challenges. Being active in community events and being visible in the recovery process helps fight stigma and proves that getting better is possible. The owner adds, "You're truly building a community and that's what keeps support, and allows for the openness, too, for the conversations that need to be had." This highlights the benefit of a community where sharing openly and supporting each other creates a space for healing, showing that working together and sharing experiences are key to healing as a group.

These narratives show how community support and knowledge sharing are essential. Combining personal stories with community involvement enhances recovery messaging and

builds identity and resilience. Community Narratives are important in explaining the complex path of addiction recovery, showing how individual and shared experiences provide hope and drive change in a community-focused healing approach. This approach not only values shared experiences and challenges but also shows the community's strength and commitment to support each other's recovery journeys.

In the context of recovery, personal stories bring to life the themes of Empowerment and Hope, showing us the real challenges and victories individuals face. Their experiences show the importance of clear and meaningful communication in supporting one's journey to healing.

An owner of the recovery facility shares a powerful message, "Your life is worth it. It is. It's not worth it to live in hell. No, absolutely not. And there's a way out. It's just, here, follow me," highlighting the value of each person's life and the possibility for change. This statement directly addresses individuals in struggle, offering a guiding hand toward a path out of their current predicaments, emphasizing recovery is within reach.

A participant reflects on their inner strength saying, "I know things don't change out there, so you gotta get strong in here and show them, out there, it's possible." This quote reveals the inner work necessary for recovery, suggesting that resilience and a positive outlook are key to overcoming external challenges. It suggests recovery involves personal growth that influences and inspires others.

A broader perspective, an Elder who conducts ceremonies related to recovery in the region shares, "our belief is that everyone is placed on this earth with a purpose. We all have a mission to fulfill during our time here." This adds a layer of meaning to the recovery journey, suggesting that everyone has a unique purpose and contribution to make, which recovery can help facilitate.

Following this, another Elder highlights the significance of our engagement with the world, stating, "The energy we emit through our actions and the way we treat others and our surroundings circles back to us." This shows the influence of our behavior and mindset on both our personal well-being and the broader community, promoting a life led with care and positive intent.

The stories shared by people on their journey to recovery emphasize the importance of feeling empowered and hopeful. These accounts point out how important it is to have clear and understanding communication to support recovery. Together, they reveal that recovery is more than just stopping substance use—it's about finding one's self-worth, growing stronger within, finding one's purpose, and making a positive difference in the world. These personal stories provide a wider and more inspiring view on recovery, showing it as a path of healing.

The narrative surrounding recovery messaging stresses the importance of hope and empowerment. It underlines the role of clear, supportive communication in assisting those on their journey. Central to this discourse is the belief in the intrinsic value of every person and their potential for change. The narratives highlight the importance of resilience and the power one has to inspire change in others. Contributions from those with deep experience reinforce the message, pointing out the greater purpose of our lives and the impact our actions and attitudes have on not just our own path to recovery but also on the broader community. This collection of stories paints a picture where recovery messaging is about more than abstinence; it's about acknowledging personal value, nurturing inner strength, finding one's purpose, and making a positive difference. These insights collectively offer a more complete and optimistic view of recovery messaging as a journey of self-discovery and renewal, emphasizing its capacity to transform not only individuals but also communities at large.

The intersection of stigma, language, and recovery is a complex and nuanced topic, as revealed through the perspectives of various participants. Their experiences and views shed light on how societal attitudes and the words we use can affect individuals with substance use disorder.

One facility owner highlights the deliberate choice of language in the context of recovery, stating, "We do choose to use verbiage now... I'm in recovery." This statement shows the importance of self-identification and the positive impact of language on personal recovery journeys. The choice of words like "recovery" over labels like "addict" reflects an understanding of the power of language to shape identity and influence public perception.

Further emphasizing the complexity of language in medical contexts, another facility owner criticizes medical jargon for its alienating effect, suggesting it's used "to make you feel stupid so you don't ask questions." This perspective is important, as it points to the barriers created by technical language, which can obstruct people's comprehension of their health challenges and, consequently, the variety of routes available for healing and recovery.

The discussion around the term "addiction" versus "substance use disorder" reveals a deep divide. While some advocate for clinical terminology to destigmatize the condition, others believe it dilutes the severity and struggle inherent in the recovery process. One participant's statement, "Substance use disorder.. addiction is the disease...We own up to it, you know...My drug of choice is, but now I choose recovery," illustrates the embrace of clinical terms while also acknowledging personal responsibility and the path to recovery.

An Elder's reflection on societal stigma extends the conversation beyond substance use, "there are a lot of negative messages out there about us as Anishinaabe. In this country, anyone who is different is considered inferior" highlighting broader issues of discrimination and

self-perception among Ojibwe peoples. This illustrates how stigma can permeate various aspects of identity, influencing not just individuals with substance use disorders but also entire communities.

Finally, the disparity in how society reacts to various health challenges, highlighted by a facility owner's observation of the different responses to cancer compared to addiction, vividly demonstrates stigma's effects. The statement, "when I had cancer, everybody showed up with a casserole. And when I told everybody I was dealing with addiction, half the people I knew lost my phone number," conveys the loneliness and exclusion faced by people with addiction due to societal attitudes.

The exploration of stigma, language, and recovery through the voices of participants reveals a deeply intertwined relationship affecting individuals with substance use disorder and broader communities. The narratives presented illustrate the transformative power of language in recovery, the challenges posed by medical jargon, and the societal shift required to embrace more inclusive and compassionate approaches. As we navigate the complexities of these issues, it becomes clear that a collective effort is needed to dismantle stigma and create an environment where recovery is supported through understanding, acceptance, and empowering dialogue.

Access to information and recovery tools

The Northern Minnesota Addiction Wellness Center actively addressed the challenges of addiction recovery education, particularly the impact of misinformation and the importance of accurate, evidence-based communication. Misinformation presented substantial obstacles, making it crucial to provide clear, accessible, and medically accurate information to support individuals on their recovery journey. Facility owners emphasized the importance of presenting

information clearly to prevent misunderstandings about the physiological effects of addiction. Healthcare workers and participants pointed out the shortcomings in existing drug education and recovery messages, highlighting the need for messages that were not only hopeful but also actionable and rooted in scientific evidence. Through these conversations, the essential role of trustworthy, evidence-based messaging in enhancing community engagement, building trust, and supporting informed decisions about recovery became evident. This comprehensive view underlined the collective call for improved recovery program messaging, focusing on clarity, scientific validity, and actionability to effectively address the needs of those seeking recovery.

The exploration of Recovery Support and Future Directions examined the Northern Minnesota Addiction Wellness Center's distinctive strategy of incorporating traditional cultural practices within its addiction recovery programs. This section also highlighted the criticality of tailoring care to meet the cultural needs of its participants, showing the center's commitment to a recovery path that respects and responds to the diverse backgrounds of those it serves. The center incorporated cultural identity through traditions and the leadership of community figures, ensuring the care provided was both respectful and culturally aware. Special attention was given to Ojibwe participants who benefited from peer recovery sessions led by Elders, incorporating cultural teachings and healing practices tailored to their spiritual and cultural requirements. The discussion extended to the center's future directions and expansion plans, highlighting a proactive stance toward enhancing recovery services and filling existing gaps in care. This strategic outlook included the development of a detox center and transitional housing, reflecting the center's holistic approach to offering comprehensive support for those on their recovery journey. By emphasizing the importance of an inclusive, comprehensive framework that aligns with the complexities of addiction, the center aimed to facilitate more effective and empathetic

recovery outcomes, reinforcing the necessity of a compassionate, community-oriented framework for recovery that honors each individual's journey within a collective path to wellness.

In the analysis of accurate and clear information's role in addiction recovery education, interviewees brought to light the adverse effects of misinformation and the essential need for evidence-based messaging. Facility owners emphasized the critical need for medical accuracy, stating, "So then we have medical misinterpretation... This is how we medically have to do this. This is what actually happens physiologically. And so we need to make sure in our communication that it's clear..." This quote highlighted the necessity of clarity and accuracy in presenting medical information, suggesting a foundational requirement for recovery education. They further stressed the importance of accessible information, noting, "And so we need to make sure in our communication that it's clear and that if people have questions, there's a clear line of this is where you get more information," indicating that clear channels for further information could empower individuals in their recovery journey.

A healthcare worker criticized the lack of comprehensive messaging in recovery resources and stated, "No resources, no help, no messaging about how to get help, no additional, nothing. Literally says recovery is possible. And I know this because I've seen them and paid attention to it." This reflected a shortfall in providing actionable information, highlighting the need for messages that extended beyond hopeful statements in recovery materials. Participants also shared their experiences with drug education programs, with one remarking, "I remember D.A.R.E. what a shit show," and another sharing, "This is the only place I really cared about learning about drugs. Unless it was from my friends." These comments suggested dissatisfaction

with traditional drug education efforts and a preference for environments that offered accurate, relatable information.

These quotes collectively highlight the critical demand for accurate, clear, and evidence-based information within addiction recovery education. They uncover a widespread concern over misinformation and showcased how clear, accurate communication could support individuals in making informed decisions about their recovery. Addressing these concerns enhanced community engagement and trust, contributing to more effective addiction recovery education.

The conversation on misinformation versus accurate information within addiction recovery education highlighted a critical demand for transparency, accuracy, and reliance on evidence-based messaging. Insights from facility owners, healthcare workers, and program participants spotlighted the negative impact of misinformation on individuals seeking recovery, advocating for a shift toward communication that was clear, scientifically verified, and actionable. Critiques of traditional drug education programs, such as D.A.R.E., by participants, showed a mismatch between these programs' objectives and the actual needs of their intended audience. These narratives collectively expressed a desire for recovery education that empowered individuals with knowledge, promoted informed decision-making, and enhanced trust through credibility and relevance. The conclusion drawn from this discussion suggested a pathway forward that involved a dedicated effort to improve the quality of recovery program messaging by focusing on accuracy and evidence, which was essential for supporting individuals on their journey toward informed recovery and sustained well-being.

Education and Awareness within addiction recovery initiatives at Northern Minnesota Addiction Wellness Center focus on various outreach and engagement strategies to provide access to services and deepen the understanding of substance use. By employing diverse methods, such as explaining moderation practices to delineate safe alcohol consumption, engaging with young people through school programs, and offering personalized recovery materials, recovery centers can strive to inform and empower individuals on their path to healing. Moreover, the value of direct community interaction and personal stories is highlighted, with efforts to stay informed on evolving substance use trends and harnessing the power of recommendations. These comprehensive approaches collectively aim to create a supportive and well-informed community that motivates individuals toward recovery, showcasing the intricate nature of educational and awareness efforts in these programs.

One facility owner emphasized the educational aspect of their outreach, stating, "Teaching moderation, talking about, hey, this is a normal amount of alcohol to have in a week." This quote highlighted the facility's commitment to providing practical, health-oriented information as a cornerstone of its outreach efforts, aiming to inform individuals about safe alcohol consumption limits. Another strategy involved direct engagement with schools, "we went to the high schools, the middle school, both of the charter schools," demonstrating the center's proactive approach in connecting with younger demographics to spread awareness about substance use and recovery options.

Another aspect of outreach was illustrated by the facility's interaction with the community, "It's because they had, I could see what the new synthetics were on the street because it's a head shot... The clear glass, that's for, I don't know. And so there was a lot, I wanted to know what was new on the street while I went there". This quote reflected the center's

efforts to stay informed about current substance use trends, demonstrating their proactive stance in adapting their awareness strategies to address emerging challenges. Such engagement not only helped the center in tailoring their educational content but also established their credibility and trustworthiness among the target audience.

The role of personal recommendations and familial influence in raising awareness was further highlighted by a participant's reflection, "My baby mama went here. She OD'd. So I had to get right for our kids." This quote illustrates the powerful impact of personal experiences and word-of-mouth in motivating individuals to seek help, highlighting the social dimension of awareness and the importance of community in the recovery journey.

Personal stories from participants also offer valuable insights into the outreach efforts' effectiveness. For instance, one participant mentioned, "My grandma told me about this place, she said it's good healing there," showcasing word-of-mouth and family referrals as crucial channels for raising awareness about recovery services. Additionally, a participant noted, "I heard a ad on the radio. With a native voice said we deserve to heal too. It's not just a white man's space," pointing to the importance of culturally sensitive messaging and the role of media in reaching broader and more diverse audiences.

A health care worker reflected, "So when they come in, they're actually given a three-ring binder, sketchbook, journals, and they can create their own how-to-recover manual", emphasizing the center's approach to education. This method not only provides information but also engages participants actively in their recovery process, offering a personalized tool for reflection and growth. Such strategies highlight the center's commitment to empowering individuals through education, catering to diverse learning preferences and enhancing the personal relevance of recovery information.

These quotes collectively indicate that education and awareness initiatives are fundamental to enhancing access to recovery services. Through direct education on substance use, engagement with educational institutions, personal recommendations, and culturally inclusive media outreach, the treatment center effectively engages with a wide audience. These strategies inform potential participants about available services and play a role in destigmatizing recovery, thereby making it more accessible to various communities. The variety of outreach methods discussed in these narratives show the necessity for a comprehensive approach to education and awareness in addiction recovery programs.

Moving from the general concept of community support to the specific approach of the facility, as highlighted by its owners, the importance of lived experience and peer support in recovery was brought to light. The owners shared, "Both [of our Elders are] enrolled in Red Lake. And they both spent prison time, and they both have long-term recovery" and "90% of us are in recovery... We've been there." These statements reveal the facility's commitment to employing staff who can empathize with the recovery journey, creating an environment of understanding and mutual respect. Including Elders who share cultural heritage and recovery experiences offers a layer of support that is both unique and enriching for those in the recovery program.

Further exploring the role of culture in recovery, the analysis highlighted how integrating cultural practices into the recovery process was crucial. Statements from healthcare workers such as "We offered peer recovery that was specifically for this area Native American. And we had other peer recovery that we worked with" and "It was like, we were able to provide a lot of that peer recovery specifically for Native Americans... We did have, like, a cultural night," illustrated the facility's commitment to cultural relevance. This approach acknowledged the healing power

of connecting with one's cultural roots and traditions, showing an understanding that recovery involved reconnecting with one's identity as much as overcoming addiction.

Building on the theme of cultural integration in a community, the concept of a recovery-oriented community was further explored. Efforts to create a specific and inclusive recovery community were mentioned in "It was a community thing but only people who graduated from here could come not just anybody. Right, so it was very specific to the community they were building." This strategic approach not only created a sense of belonging but also strengthened the support network among individuals who shared similar recovery journeys, reinforcing the foundational idea that recovery thrives in a community setting.

An observation by a health care worker shows the importance of this community building, "They learn more from their peers than they do from us," reinforces the idea that peer relationships are instrumental in recovery. Peer support provides a unique avenue for shared learning and growth, rooted in the common experiences of those involved. This mutual exchange not only empowers individuals on their recovery path but also strengthens a sense of community solidarity.

Compared, the facility owner critiqued conventional therapy approaches, stating, "Most therapists are the 'oh yes that's so good.' And you can't do that in addiction medicine... And I think that's probably why so many of us that have been in it first person or our family members because they can't bullshit us." This highlighted the value of lived experience in fostering genuine connections. This insight underscored the notion that individuals who had personally navigated the recovery journey, or had closely observed a loved one's journey, brought an irreplaceable level of empathy and comprehension to the recovery process.

Emphasizing the transformative impact of engaging in meaningful work and activities, the owners of the facility shared, "And it's given him a new sense of purpose, too, because he gets to help kids, and he gets to show people he loves wood in the outdoors, and making things." This quote illustrated how recovery involved discovering joy and purpose in life's activities and passions, which, in turn, could inspire others within the recovery community.

Echoing the importance of personal connection and understanding, another facility owner mentioned, "Meeting people where they were at and listening to them. Just making them feel heard was most of my job." This approach recognized the individual nature of the recovery journey, emphasizing the need to customize support to each person's specific situation and needs. By actively listening and affirming the experiences of those in recovery, a supportive atmosphere was cultivated, creating a sense of belonging and acceptance.

In conclusion, the exploration of community and social dimensions in recovery emphasizes the integral role of communal relationships, cultural integration, and peer support as foundational elements that facilitate the recovery journey. Through the lens of a facility deeply committed to embodying these principles, we see a model where lived experiences, mutual respect, and cultural relevance converge to create a supportive and understanding environment. This approach not only acknowledges the healing power of belonging and shared experiences but also celebrates the transformative impact of engaging in meaningful activities and personal connections. By prioritizing a recovery process that is as much about rebuilding lives and identities as it is about overcoming addiction, this analysis reaffirms the necessity of a compassionate, community-oriented framework for recovery that honors the unique journey of each individual within a collective path to wellness.

Exploring the challenges and barriers to recovery, this section illuminates the diverse and multifaceted obstacles individuals face on their journey toward healing from addiction.

Recognizing the external and internal hurdles—including personal challenges, systematic barriers, and the diversity of recovery experiences—is crucial for developing supportive and effective recovery pathways. This understanding is essential for addressing the complexities of the recovery journey and facilitating more effective outcomes.

Personal struggles presented barriers to recovery, confronting individuals with the reality that their journey toward healing might be one of the most challenging experiences of their lives. As one participant candidly shared, recovery was "the hardest thing you've ever done in your life, but you're worth it." This sentiment was echoed in the raw expression of another participant who detailed their physical and emotional hardship, saying, "I couldn't get any sleep, I was always shaking, I couldn't eat anything. Everything was hard." These personal accounts highlighted the intense and often painful struggles faced by individuals in recovery, showing the necessity for supportive, understanding, and patient-centered approaches to help navigate recovery challenges.

These internal battles were compounded by legal challenges, such as the criminalization of paraphernalia, which could deter individuals from seeking help due to fear of legal repercussions. The recent change in the law regarding paraphernalia was a step toward reducing such barriers, "It was now legal to have paraphernalia...Thank fucking God...Everybody got nailed on fifth-degree possession charges which was usually for paraphernalia... If you got caught with a syringe and you were not a diabetic, you could be prosecuted. Until two weeks ago," but the stigma and challenges persisted.

Systemic barriers, as recounted by the facility owners, included entrenched policies and societal structures that had historically hindered access to care and support. For instance, "We're

talking about drug policies that were enacted in the 1980s, which had set us up to be where we're at today... It had to happen, or we were never going to be able to get this problem under control," highlighted how outdated and punitive drug policies continued to affect individuals seeking recovery.

Moreover, the limited availability of resources, exacerbated by the pandemic's impact on treatment centers, underscored the critical need for increased support and flexibility in recovery services. One of the facility owners articulated this concern, stating, "The pandemic closed 50% of treatment resources that won't be opening back up again. Alcohol sales were up 39% since the pandemic started and haven't come down." This observation illustrated the gap between the need for recovery services and their availability, highlighting the urgency of addressing this disparity to support individuals in their recovery journey effectively.

Systemic barriers included entrenched policies and societal structures that had historically hindered access to care and support. For example, one owner described a local challenge, "And then it was like, okay, I filled up every other place in town. And they were going to close their office up here, and I'm like, no no... welcome to the good old boys club up here." This statement not only highlighted the difficulty in securing space for recovery services due to local politics and exclusions but also emphasized the broader issue of limited recovery resources in certain areas. Additionally, a healthcare worker shed light on professional silos that further complicated the delivery of care: "Because LADCs wouldn't share their tools and resources with each other...But yeah, so you had to be an LADC to provide services." This insight revealed another layer of complexity, where professional gatekeeping and the requirement of specific licensure limited the availability and diversity of recovery support services.

Cultural and family dynamics also played a role in the recovery journey. An Elder reflected, "And so it was our job to come back to that path that the creator gave us," speaking to the need for culturally sensitive recovery paths that honored individual and community heritage.

The landscape is revealed as being filled with obstacles ranging from systemic and professional to personal and cultural complexities. Through the insights shared by facility owners, healthcare workers, and participants, a clear image of the multifaceted hurdles on the path to recovery emerges. A poignant statement from a participant, "There are only a few places that really care about you, you know?" highlights the essence of these challenges, underscoring the critical need for compassionate, accessible, and adaptable recovery services. This remark not only points to the scarcity of supportive environments but also emphasizes the importance of creating more spaces where the well-being and recovery of individuals are genuinely prioritized. Addressing these barriers with empathy and action is essential for forging effective and caring pathways toward recovery, ensuring individuals on this journey find the understanding, support, and opportunities for healing they deserve.

The journey of addiction recovery is a multifaceted process that necessitates a comprehensive understanding of the individual's biopsychosocial needs. The Northern Minnesota Addiction Wellness Center adopts a holistic approach to recovery, emphasizing the importance of respecting and integrating the biological, psychological, and social dimensions of healing. This approach is predicated on the understanding that each individual's path into addiction is unique; hence, their pathway out requires a tailored strategy that respects their distinct experiences and challenges. Central to this recovery process is the empowerment of individuals, enabling them to take charge of their journey with the support of a guiding and encouraging environment. The act of forgiveness, coupled with the cultural teachings of the

Anishinaabe, further enriches this discourse, highlighting the importance of forgiveness and cultural sensitivity in the healing journey. This section looks into the essence of such a recovery model, exploring its implications for individuals navigating the complexities of addiction and recovery.

The facility's approach, as described by its owners, emphasizes a comprehensive model that respects the biopsychosocial aspects of recovery, celebrating the integration of various treatment modes to meet individual needs. This method acknowledges that "all of us get into our addiction through different paths. All pathways in and all pathways out... Many of us have different ways of how we got into addiction. And so we need different ways of how we get out of it," recognizing the importance of a tailored recovery journey that accommodates the diversity of experiences and challenges faced by those in recovery.

Central to this process was the empowerment of individuals in their recovery journey. As one owner put it, "I told my own clients, this is not about me driving the bus, you're driving the bus. I'm hanging out in the passenger's side with a road map and some tools and a cheerleading section." This perspective placed the individual at the helm of their recovery, supported by guidance, resources, and encouragement, personal agency and self-determination in healing.

Within the journey of healing and personal transformation, the act of forgiveness emerged as a spectrum of experiences, encompassing a range of emotions and milestones that contributed to recovery. Participants articulated the complexity of forgiveness, from the liberating decision to forgive for one's own peace and well-being, as one shared, "Forgiving him just so that I could not be miserable anymore because it has no effect whatsoever on my abuser. But just so that I could live a more better life," to the ongoing struggle and realization that forgiveness is a "daily process." Another participant recounted a moment she found forgiveness, "I couldn't forgive my

teacher for abusing me and my children...It's a daily process. But...I was very miserable and I used to drink and probably like five years ago I was blacked out and all that anger that I was carrying had come out of a blackout." These narratives showed the deeply personal and sometimes arduous journey toward forgiveness, highlighting its role not just in healing from past wounds, but in fundamentally reshaping one's life and future.

The cultural teachings of the Anishinaabe further enriched this discussion, providing a perspective on forgiveness. An Elder's guidance, "We were taught as Anishinaabe to forgive even those who may have killed our closest relatives or friends," introduced a spiritual dimension to forgiveness, highlighting its importance in healing and community cohesion. This wisdom, coupled with personal accounts of participants who spoke of forgiveness as a turning point in their recovery, illustrated the broad spectrum of forgiveness experiences. From achieving a sense of peace and a better life to grappling with forgiveness as an ongoing process, these stories reflected the transformative potential of forgiveness in the recovery journey. Each narrative, whether it was about coming to terms with past abuse, finding joy in cultural reconnection, or the desire to contribute positively to others' lives, echoed the profound impact of forgiveness on personal identity, purpose, and the broader process of healing.

Moreover, the healing journey was marked by moments of realization and growth, such as an Elder's reflection, "We were only here a short time...We may be young right now, but I'm telling you, from 28 to 54, it went by quickly," which emphasized the preciousness of life and the urgency of embracing recovery and transformation. The development of new neural pathways through prayer and meditation, as another Elder noted,

"It was like creating these new neural pathways inside the brain, you know, for healing, you know, for resilience, for feeling good, you know, all these good things that happen when you pray, when you meditate, you know, good things happen,"

signified the profound changes that occurred within the brain and spirit in the recovery process, creating resilience, well-being, and a renewed sense of hope.

The comprehensive model adopted by the facility, as detailed by its owners and reflected in the narratives of its clients, shows the importance of a personalized and culturally sensitive approach to addiction recovery. By honoring the individuality of each person's journey into and out of addiction, and emphasizing empowerment, forgiveness, and cultural relevance, the facility creates an environment where recovery is not just possible but is supported by an understanding of the biopsychosocial aspects of healing. This model highlights the importance of community, cultural identity, and the empowerment of individuals in crafting recovery paths that are as diverse and varied as the individuals themselves. Moving forward, the insights from this approach can inform the development of more effective and compassionate recovery programs, ultimately contributing to a broader understanding of addiction recovery and the diverse pathways to healing.

The Northern Minnesota Addiction Wellness Center is actively pursuing new pathways and growth opportunities aimed at enhancing the scope of support for those on their recovery journey from addiction. This strategic outlook is shaped by insights gathered from detailed interviews with both the facility's owners and healthcare professionals working within the center. Central to their expansion plans is the development of a detox center and the formulation of transitional housing options. These efforts underscore the center's commitment to a holistic approach in providing addiction recovery services.

The facility owners highlight the Community Resource Connections (CRC), representing collaborative efforts among non-profit and service organizations to support individuals in recovery.

"There's something here called Community Resource Connections. It's wonderful. The executive director has organized community resource connections. It is like all the non-profit and service organizations. And we can also, there's a once a month meeting we can go to. I try to at least hit the yearly meetings, so that we can all go around and tell each other what we do."

Further detailing the center's expansion plans, a healthcare worker and the owners discuss the goal to establish a detox center soon, demonstrating a concrete commitment to expanding service offerings to meet the immediate needs of those seeking freedom from substance dependence. A health care worker reflected,

"[They are] wanting to build a detox center... eventually they want to do like a halfway house. The halfway house will be quite a ways down the road, but hopefully the detox will be within the next year or two, at tops. That's what their plan is."

The owner's vision encompasses a complete care continuum, from detoxification to sober living environments, with a focus on family-centered recovery. This vision acknowledges addiction as affecting not only the individual but also their family, emphasizing a healing process that considers the entire family system.

"My goal before I die is to have detox all the way through sober living. With different types of family living. Because this is a family disease. And if we take kids away and keep snapping them back and forth, they don't learn anything but that the system is still broken. And so if we can really start to look at the whole family, helping the family heal, you know, what the kids' roles are, helping them understand that."

These insights reflect a proactive stance toward enhancing recovery services, revealing a commitment to addressing the needs of those in recovery. The described initiatives not only showcase the center's dedication to filling existing gaps but also highlight a strategic approach to building resilient support systems that align with the diverse and changing needs of individuals pursuing recovery. This strategy emphasizes the importance of an inclusive, comprehensive, and flexible framework that aligns with the complexities of addiction, facilitating more effective and empathetic recovery outcomes.

Interview Conclusion

This phase of work emphasizes culturally informed and community-focused methods in developing effective messaging for addiction recovery resources targeted at the Ojibwe community. By closely aligning these messages with the unique identity and values of the Ojibwe people, there is a pronounced opportunity to enhance the resonance and impact of such initiatives. This strategy goes beyond simply acknowledging the distinct identity and resilience of the community; it lays the groundwork for crafting messages that support more engaging and enduring recovery journeys, establishing a standard for holistic and culturally sensitive communication.

This analysis shows a clear preference for messages within addiction recovery materials that are empowering, tailored to cultural values, and respectful. The community's favor for positive over fear-based messaging, the effectiveness of a variety of communication channels, and the importance of cultural integration into recovery materials shows the need for resources that resonate with the community's traditions and language.

Recommendations for refining recovery messaging include careful selection of language, tone, artwork, and content that embody inclusivity, hope, and positivity, while thoughtfully incorporating aspects of Ojibwe culture and values. Utilizing a variety of communication channels to disseminate these messages ensures that they reach the intended audience effectively and engagingly.

The forthcoming expansions at the Northern Minnesota Addiction Wellness Center, such as the introduction of a detox center and transitional housing, provide a practical context for applying and assessing the effectiveness of culturally tailored messaging. This initiative could act

as a template for similar efforts, highlighting the crucial role of cultural sensitivity and community engagement in the wider field of addiction recovery.

In conclusion, this phase advocates for a strategic approach to crafting recovery messages, grounded in cultural awareness and community involvement. Such an approach not only aligns with the Ojibwe community's values and identity but also promises to improve the overall impact of recovery resources. By promoting messages that uplift and integrate the cultural identity of the community, there's potential to support more meaningful and sustainable recovery journeys.

Insights from Collaborative Creation Circles

The Collaborative Creation Circles served a role in engaging community members from the Northern Minnesota Addiction Wellness Center in the co-design process of communication materials (Lindquist et al., 2007; Apers et al., 2023; Grindell et al., 2022; Goodyear-Smith et al., 2015). This initiative was rooted in the principle that incorporating the perspectives and insights of those directly impacted by substance use disorder into the creation of recovery materials would yield culturally resonant and impactful messages. The subsequent analysis of these sessions aims to uncover key insights into effective, culturally aligned recovery strategies, with a focus on how community involvement in the design process can enhance the relevance and acceptance of recovery support materials.

In analyzing the artifacts and discussions from the Collaborative Creation Circles, thematic analysis was used (Braun & Clarke, 2006). This approach facilitated the identification of common themes that reflect the community's experiences, values, and aspirations regarding recovery. Additionally, grounded theory was important in understanding these emergent themes,

providing a structured framework for developing theories based on the data collected during participatory activities (Strauss & Corbin, 1998). This analysis method made sure that the insights gained from the creative activities were closely connected to the community's real-life experiences and cultural background.

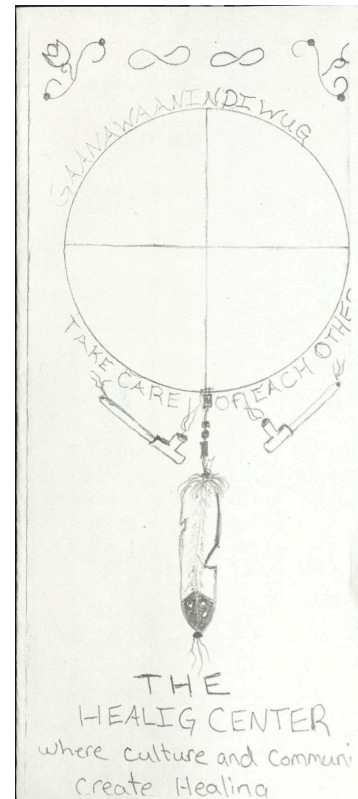
The integration of insights from the Collaborative Creation Circles with interview data, as described in the dissertation's method section, was important in achieving a comprehensive understanding of culturally resonant recovery strategies. This process involved a careful examination of how the findings from the circles complemented or contrasted with those from the interviews, thereby enriching the analysis and deepening the understanding of the community's needs and preferences. By juxtaposing the creative expressions from the Collaborative Creation Circles with the narrative data from interviews, a multi-dimensional picture of the community's approach to recovery was constructed. This integrative technique shows the value of leveraging diverse data sources to paint a fuller picture of the community's perspectives on recovery, thereby facilitating the development of communication materials that are not only culturally sensitive but also meaningful to the community members they are intended to support. My goal is to articulate how such expressions inform future communication strategies for similar audiences, emphasizing effective practices that engage and support individuals in recovery.

Figure 1

Effective communication tools are essential for connecting individuals with the support and resources they need. The creation of these tools, especially when involving co-design and artwork, presents a unique opportunity to integrate cultural sensitivity, personal relevance, and

community engagement into recovery programs. This analysis examines the collaborative creation of a brochure by participants at the Northern Minnesota Addiction Wellness Center. It focuses on how co-designed artwork, incorporating symbols such as the medicine wheel, the phrase "Gaanawaanindiwig" meaning "Take Care of Each Other," and a feather, highlights key concepts of healing, community support, and cultural awareness.

The brochure artwork for figure 1a, which includes a medicine wheel, the phrase "Gaanawaanindiwig" meaning "Take Care of Each Other," and a feather, highlights important ideas of healing, support from the community, and being mindful of cultural backgrounds. The medicine wheel, a symbol showing



how life is a cycle and everything is connected, connects well with the ideas of integrating cultural sensitivity and relevance. Bringing cultural symbols into the recovery process is important because it respects cultural traditions and makes the journey to healing more meaningful by linking it to familiar contexts.

The phrase "Take Care of Each Other" and the presence of a feather add more layers to the story this artwork tells, resonating with themes like the Community and Social Dimensions of Recovery and Healing and Personal Transformation. These elements highlight the importance of supporting each other and the spiritual side of healing, showing how a community plays a key role in building strength and empowerment during recovery. Furthermore, the message below the medicine wheel brings together the ideas of cultural significance and community support in healing, representing the themes of Cultural Relevance and Community Social Recovery. This

shows a comprehensive approach to recovery, where cultural traditions and community support are crucial. It shows how the artwork can convey complex ideas of cultural identity, community support, and personal change. It demonstrates the ability of co-designed communication tools to connect strongly with communities, creating a sense of belonging, understanding, and hope in the recovery journey,

The two pipes placed below the medicine wheel add another layer to how traditional practices merge with the journey of recovery, showing the strong link between cultural heritage and healing within the Ojibwe community. These pipes, usually seen in ceremonies and prayers in Indigenous cultures, stand for talking to the spiritual world, bringing guidance, strength, and support for those working toward recovery. This part of the artwork connects well with the themes of Cultural Sensitivity Integration and Cultural Relevance, as well as Community and Social Dimensions of Recovery. It shines a light on the importance of both community and spiritual support in healing, taking a group-based approach to recovering from addiction. The inclusion of the pipes emphasizes the need for spiritual conversations and keeping in touch with cultural foundations as key parts of the recovery journey, adding to the story that recovery is a shared path to wellness, uplifted by cultural traditions and unity within the community. This visual element acts as a strong reminder of the power that lies in knowing one's cultural identity and the strength of community ties, supporting the center's dedication to a recovery path that is both full of culture and covers all aspects of healing.

The upper corners of the brochure showcase traditional Ojibwe Woodlands art flowers and patterns, closely linked to the cultural and spiritual practices of Ojibwe peoples. These designs, inspired by nature, serve as expressions of the Ojibwe's connection to the natural environment, representing themes of growth, renewal, and the continuous cycle of life, all

reflective of the recovery path. The floral motifs, particularly common in Ojibwe beadwork, highlight the critical role of plants, offering simplified yet striking depictions of the natural world. These motifs distill the essence of flora important to Ojibwe traditions, drawing directly from nature to produce stylized versions that carry both cultural stories and individual narratives.

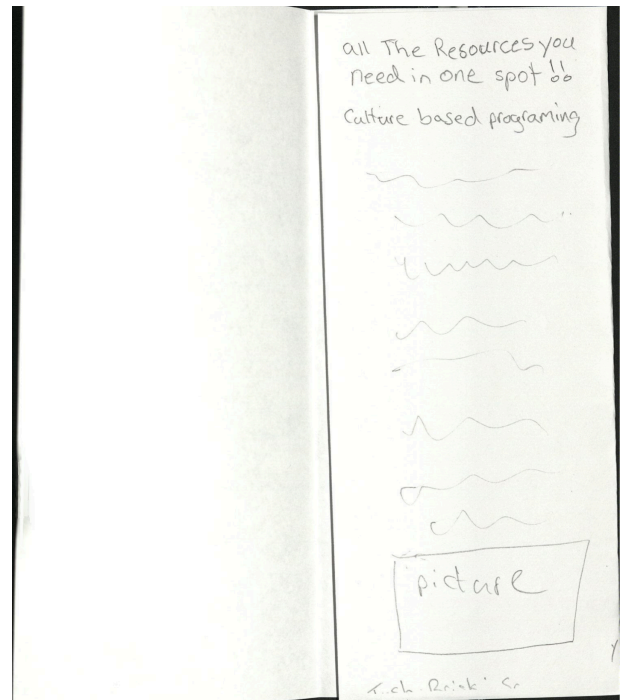
Incorporating these motifs into the brochure respects Ojibwe aesthetic traditions while also adding cultural and spiritual depth to the materials. This natural inspiration and the method of simplification allow the designs to convey a visual story about healing, growth, and renewal, crucial aspects of the recovery journey. This method aligns with the key ideas of Cultural Relevance and Cultural Foundations in Recovery, highlighting the essential role of cultural identity in recovery efforts and the impact of art in establishing a sense of belonging.

Moreover, the brochure gives attention to the medicinal and spiritual qualities of specific plants featured in Ojibwe beadwork, like wild violets, selected not only for their visual appeal but also for their therapeutic and spiritual properties. Wild violets, marking the onset of spring, are used in remedies ranging from skin treatments to restorative teas, illustrating the link between cultural practices, art, and the natural world.

The layout is straightforward yet carries deeply meaningful elements, aligning with Visual Design Preferences which emphasize the influence of visual design on message effectiveness. With the directive "Take care of each other" prominently displayed at the top in Ojibwe, it serves as a powerful call to action, encouraging care, support, and solidarity among community members. The translation of this phrase into English at the bottom ensures inclusivity, making the message accessible to others who may not be familiar with the language, creating a sense of belonging and understanding.

The inclusion of cultural symbols and the use of the Ojibwe language, coupled with the emphasis on community, indicate the artist's dedication to a recovery methodology that is rooted in culture and communal values. This approach aligns with the Cultural Restoration Identity theme, focusing on the revival and strengthening of Indigenous identity through traditional practices and symbols, deemed crucial for the healing process. This design strategy showcases a commitment to a recovery path that respects and honors Ojibwe heritage and community bonds, highlighting the importance of cultural and communal support in the journey toward healing and recovery.

In figure 1b, the brochure's inside message is clear and direct: "Everything you need is right here! Programs rooted in our culture." This message highlights the theme of Education and Awareness by stressing how important it is to have easy access to resources that are specifically designed for cultural



needs. It suggests that you can find everything you need for addiction recovery in one place, which is especially designed with cultural traditions in mind.

Talking about "Programs rooted in our culture" connects directly to the Cultural Relevance theme. It shows how including cultural elements—like traditional practices, languages, and symbols that mean a lot to the Ojibwe community—is crucial in making recovery messages and programs work better. These cultural touches are key in making the communication tools more effective and engaging for those looking for recovery resources.

The mention of a square marked "picture" seems to hint at a space for adding images later or might suggest including real, tangible examples of the resources or cultural programs mentioned. This fits with the Visual and Design Preferences theme, showing how important visual aspects are in making the message stronger, thus improving the way the communication is received.

Overall, these parts of the brochure—straightforward messaging, the inclusion of culture, and visual design considerations—show a thoughtful approach to what the community prefers when it comes to messaging for recovery programs. They highlight a strategy that values clear communication, cultural connections, and engaging design in creating tools that effectively support addiction recovery.

The co-design process in developing communication tools for addiction recovery, reveals the impact of incorporating cultural and community elements into recovery materials. Through the integration of symbols like the medicine wheel, traditional phrases, and feathers, the brochure communicates complex ideas of cultural identity, community solidarity, and personal transformation. These elements not only make the recovery journey more meaningful for individuals by connecting it to familiar cultural practices but also enhance the overall effectiveness of the communication tools. By focusing on the preferences for messaging within addiction recovery program materials, this collaborative effort illustrates how artwork can be a powerful medium for conveying hope, support, and a sense of belonging.

Figure 2

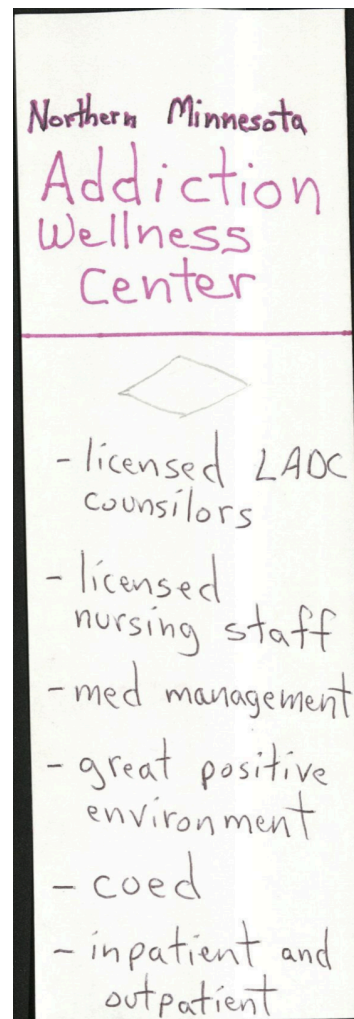
This brochure showcases a strategic blend of communication techniques tailored for addiction recovery, from highlighting a positive environment to integrating culturally significant

practices like smudging, the brochure exemplifies a thoughtful strategy in creating a supportive, informative, and inclusive setting for individuals in recovery.

The front of the brochure, figure 2a, references to a "great positive environment" exemplifies the importance of positive framing in recovery program materials, resonating with the Empowerment and Hope category. This approach aligns with the desire for messages that inspire hope, motivation, and empowerment in the recovery journey, emphasizing the creation of an uplifting and supportive space for community members seeking recovery. Such messaging is crucial in creating an environment conducive to healing and motivating individuals to engage with recovery resources.

Likewise, the brochure's role in increasing awareness about the center's services—by highlighting licensed counselors, nursing staff, and the availability of both inpatient and outpatient services—addresses the Access Awareness category. This direct method of informing potential clients is key to the outreach efforts, ensuring that individuals are well-informed of the center's capabilities and services. By listing these features, the brochure plays a role in enhancing accessibility and awareness, thereby facilitating an essential step in the recovery journey by making these services known to those in need.

These elements reflect a co-design approach where the preferences and insights of the recovery community are central to the creation of communication materials. Including such preferences not only makes the messaging more effective but also ensures that the materials are

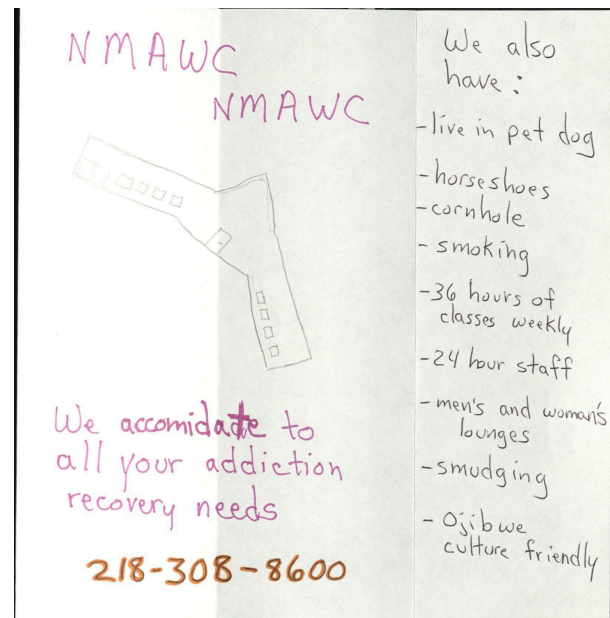


culturally and contextually relevant to the audience they aim to reach. This dual focus on positive, empowering messaging and clear, accessible information about recovery services demonstrates a nuanced understanding of what makes communication tools effective in the context of addiction recovery programs.

The brochure acts as a helpful guide, gently teaching the reader about the professional support the center offers. This matches the Education and Awareness theme by focusing on the team's qualifications, contributing to better knowledge about the center's quality of support. By highlighting the staff's expertise, the brochure informs potential clients about the excellent care they can expect, aligning with the goal of making people aware and confident about the center's services. This method is key in not just sharing information about what services are available but also in building trust in the level of care provided.

Discussing licensed professionals and a positive setting can also help tackle the issue of stigma. When the brochure emphasizes a professional and uplifting atmosphere, it indirectly fights against stigma by using language that supports respect and understanding, and promotes a message of support and care.

When looking at the theme, Cultural Relevance, the front of the brochure doesn't specifically talk about cultural aspects, the focus on professionalism and types of services might hint that these offerings don't specifically address cultural needs or customs. It would be clearer if there were direct mentions of cultural inclusion. Inside the



brochure, figure 2b, mentions "smudging" and states it is "Ojibwe culture friendly" clearly connected with cultural relevance. Smudging is an important practice for many Ojibwe peoples, often used for cleansing and spiritual purposes. By including such culturally significant practices, the brochure shows a meaningful effort to respect and incorporate Indigenous cultural beliefs into recovery messaging.

Inside the brochure, figure 2b, shows the theme of Community and Social Dimensions of Recovery through the inclusion of communal activities such as horseshoes, cornhole, and a live-in pet dog within the center's offerings. These amenities play a crucial role in fostering a sense of community and peer support, serving as informal settings for social interaction and mutual support. Such environments are essential for facilitating a sense of belonging and shared experience, which are foundational to the social recovery process. These activities not only provide a means for leisure and relaxation but also act as important avenues for building relationships and support networks that are crucial for individuals on their journey to recovery.

The brochure clearly states, "We accommodate to all your addiction recovery needs," and provides a contact number, demonstrating a strong commitment to being accessible and prepared to meet a wide variety of needs. This message aligns perfectly with the Access and Awareness theme, which emphasizes the importance of making sure clients know about the services available and how they can access them. This approach makes it easier for individuals seeking help to understand what support the center offers and how they can benefit from it.

In terms of Empowerment and Hope, the inclusion of activities such as smudging and the acknowledgment of cultural practices play a role in empowering clients. These actions show respect for clients' cultural identities and provide hope by incorporating familiar and meaningful traditions into the recovery process. This approach is in line with the Empowerment and Hope

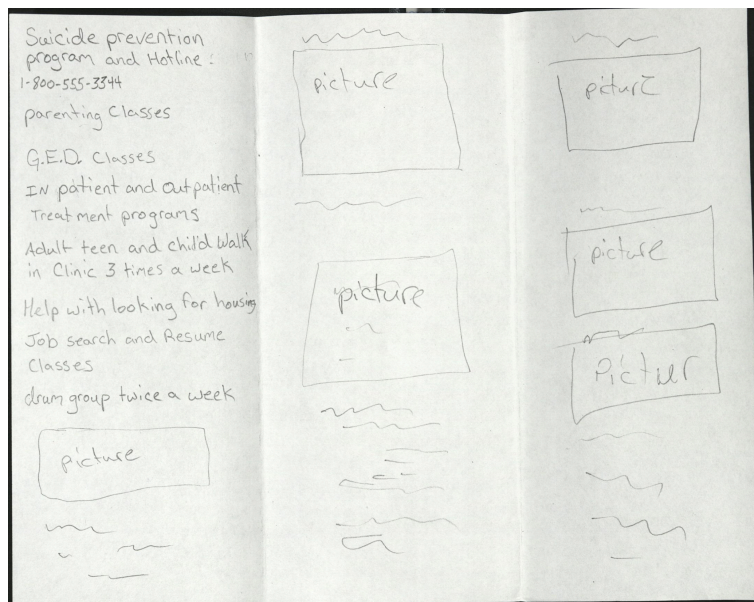
theme, which focuses on the power of messaging to inspire hope, empowerment, and motivation throughout the journey to recovery.

Mentioning "36 hours of classes weekly" in the brochure communicates the center's dedication to education, which is essential for creating an understanding of recovery processes. This information satisfies the criteria for the Education and Awareness theme by offering a clear picture of the educational services provided. Highlighting these opportunities shows the center's commitment to not just recovery but to ensuring clients have the knowledge and resources necessary for their journey.

The brochure's mention of gender-specific lounges and round-the-clock staff support creates an environment that supports personal healing. These lounges offer secure areas for individuals to share and grow, while the availability of staff at all hours provides crucial support whenever it's needed, fostering an atmosphere conducive to healing and personal transformation.

The brochure's approach to talking about addiction recovery services shows a strong understanding of what people really need when they start their journey to get better. It mixes messages of hope with detailed

information about the help available, respects different cultures, and suggests ways to build a supportive community. By addressing the negative views about recovery, sharing knowledge on the help out there, and celebrating everyone's unique cultural backgrounds in a way that brings



people together, the brochure demonstrates how well thought-out design can truly make a difference. These steps not only make the process of recovery seem more approachable but also create a base of trust and respect that is crucial for effective support. This analysis points out the importance of using a broad and welcoming approach when creating tools for communication in addiction recovery programs. It ensures that these tools really speak to, inspire, and create a feeling of belonging among those they are meant to help.

Figure 3

This brochure presents a smart mix of ways to talk about and support addiction recovery. From sharing important resources like suicide prevention to including community practices such as drum circles, it creates a welcoming, helpful, and respectful space. This approach supports recovery, builds community connections, and encourages personal development for those working toward a healthier future.

Access and Awareness are identified as important elements, highlighting the need to inform potential clients about the services available to them. By listing resources like suicide prevention, treatment programs, and clinics, the materials directly increase awareness, ensuring individuals know the help they can get. This aligns with the broader goal of educational outreach, a crucial part of recovery programs. Including services like G.E.D. classes and parenting classes underlines the empowerment through knowledge, fitting into the broader theme of Education and Awareness. These services not only support recovery but also equip clients with essential skills, enhancing their journey toward healing.

The theme of Community and Social Dimensions of Recovery is vividly represented through the mention of drum groups, which embody the support structure provided by the

community. Cultural activities like music and drum circles create a sense of belonging and solidarity, crucial for social recovery. Similarly, Healing and Personal Transformation are reflected in the offerings of counseling and walk-in clinics, integral to the holistic healing journey. These services support personal transformation and resonate with the theme's focus on overcoming substance use disorder through transformative processes.

Visual and Design Preferences highlight the importance of aesthetic elements in the brochures. The strategic use of 'picture' placeholders indicates an intention to include visual elements, enhancing engagement and comprehension of the provided information. This choice not only meets the visual inclusion criteria but also shows how aesthetics can impact the effectiveness of communication tools in addiction recovery programs.

Exploring the co-created artwork within the Northern Minnesota Addiction Wellness Center's Collaborative Creation Circles reveals a collection of insights into how communication tools for addiction recovery could look. Access and Awareness, highlighted by the detailed listing of resources, shows the need for potential clients to know about the services they can access. The Community and Social Dimensions of Recovery, shown through cultural activities like drum groups, illustrate the invaluable support and sense of belonging provided by community networks. Healing and Personal Transformation, reflected in personalized services, emphasize the comprehensive journey toward well-being. Lastly, Visual and Design Preferences in the brochures highlight the importance of visual elements such as images which can make messages more clear and engaging.

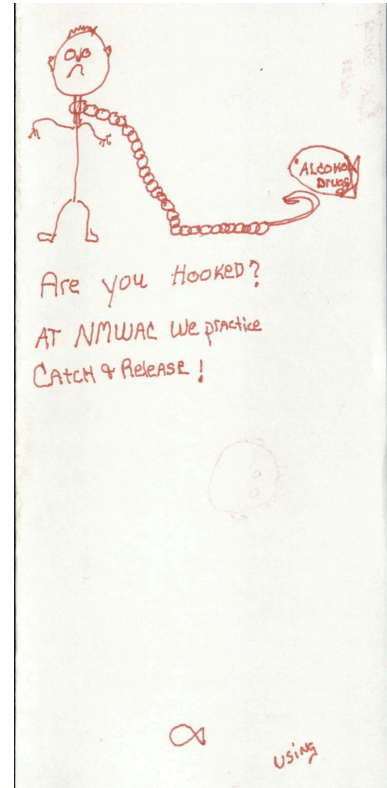
Figure 4

Figure 4 presents an engaging and thought-provoking approach to discussing addiction through the use of bold imagery and language. The phrase "Are you hooked?" not only draws attention with its play on words but also encourages readers to reflect on their own experiences with addiction. This direct and impactful messaging strategy aims to resonate with community members, inviting them to consider their relationship with substances.

The use of the phrase "Are you hooked?" serves as a direct, compelling call to action. This method aligns with the Messaging Preferences theme, demonstrating a preference for straightforward and engaging messaging that sparks reflection

and encourages a personal connection with the material. This approach is designed to resonate with community members by speaking to their experiences in a language that is both accessible and impactful.

The image of someone looking upset and tied up with chains powerfully shows the Challenges and Barriers to Recovery theme. It really puts the spotlight on how hard and complex the fight against addiction can be. This image tells us a lot about the roadblocks that make it tough for people to find their way out of addiction. It's a clear call to recovery programs to really tackle these issues head-on, offering the right kind of help and guidance to break free from these chains. This part is super important for the discussion because it reminds us that messages of hope and strength are great, but we also need to be real about the tough stuff people face. By acknowledging these challenges, the brochure fits well with the study's look into how we can



talk about recovery in a way that really gets through to people, showing them that while the journey might be hard, support and understanding are there to help them through.

The illustration of an individual metaphorically 'hooked' to substances introduces a complex dialogue about the Stigma and Language theme. While aiming to visualize the struggle of addiction vividly, there is a risk it could inadvertently support negative stereotypes or stigmas around addiction. The depiction of a person in distress, bound by their addiction, could be perceived as reinforcing harmful perceptions, despite the intent to highlight the gravity of addiction issues. This underscores the importance of careful consideration in the choice of language and imagery, advocating for a balance between compelling communication and the promotion of a supportive, stigma-free environment.

The slogan "At NMAWC we practice Catch & Release!" introduces a metaphor that could intersect with the Empowerment and Hope theme, suggesting a journey of overcoming addiction with support and compassion. This metaphor implies a treatment philosophy centered on understanding, support, and the ultimate release from the challenges of addiction, reflecting a message of hope and positive transformation. Without clear context, this message risks being misunderstood, highlighting the Misinformation and Accurate Information theme's concern for ensuring clarity and accuracy in recovery messaging. Effective communication should aim to eliminate confusion, providing clear guidance on the recovery process.

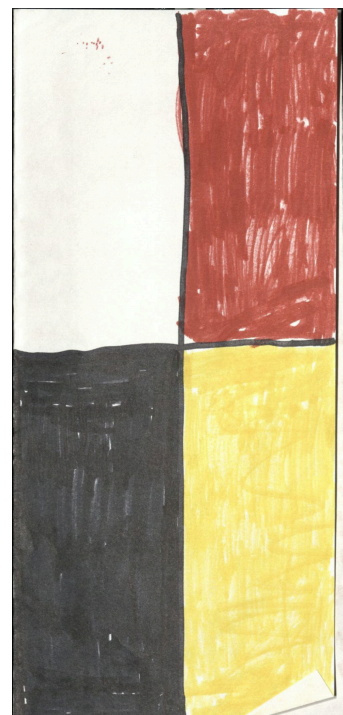
This visual metaphor also engages with the Communication Channels theme, utilizing an innovative approach to catch the viewer's attention and initiate conversations about addiction and recovery. It demonstrates a method of engagement that is both provocative and inviting, seeking to open doors to dialogue and reflection on personal experiences with addiction.

In summary, figure 4 navigates the delicate balance between crafting messages that are both compelling and respectful, aiming to inspire hope and empowerment while conscientiously addressing the challenges and barriers individuals face in their journey toward recovery. The use of straightforward yet sensitive language, coupled with visually striking imagery, serves to communicate a message of hope and support, emphasizing the potential for transformation and healing within the context of addiction recovery. Though, this messaging could be misinterpreted and there is a risk it could inadvertently support negative stereotypes or stigmas around addiction.

Figure 5

This figure details the deliberate use of cultural symbols and thoughtful design in the creation of communication tools for addiction recovery in figure 5, a brochure. Specifically, it highlights the integration of the Medicine Wheel in Ojibwe communities and the Serenity Prayer as core elements of the co-design process.

In the process of developing communication tools for addiction recovery, integrating cultural symbols and design choices reflects a thoughtful consideration of community needs and values. A key example of this is the use of the Medicine Wheel on the front of figure 5a. Its inclusion in recovery communication materials shows respect for the spiritual, medicinal, and educational components that the communities hold dear. It aligns with the broader goal of providing care that is relevant to the culture.



The visual presentation of the Medicine Wheel acts as a strong channel for messages, embodying the community's preference for designs that are both meaningful and familiar. This strategic decision improves the impact of communication by ensuring the imagery resonates with community members. This approach demonstrates an insightful understanding of how visuals and symbolism can bridge information sharing and meaningful interaction.

Moreover, the Medicine Wheel symbolizes more than just cultural relevance; it represents balance, hope, and empowerment. The Wheel's quadrants, which stand for the physical, emotional, mental, and spiritual aspects of life, provide a comprehensive framework for understanding the recovery process. This not only empowers individuals on their healing path but also instills a sense of hope for a balanced and healthy life. Furthermore, the inclusion of the Medicine Wheel strengthens the community and social aspects of recovery. It highlights the interconnectedness of life and the support structures essential for healing. This symbol reminds individuals of the collective wisdom and support within the community, showcasing the shared experiences and resilience necessary for recovery.

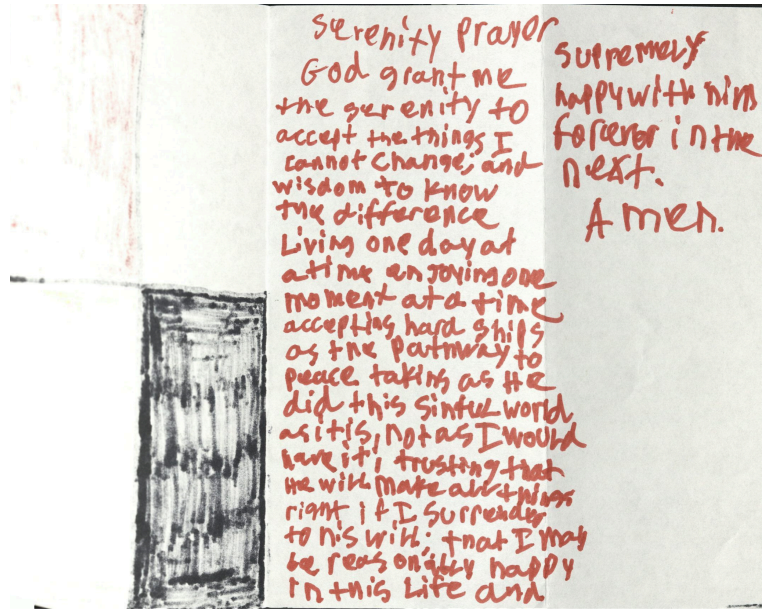
Accurately integrating cultural symbols is not without its challenges. Misinterpretations of the Medicine Wheel's meanings can lead to misinformation, undermining its importance and potentially affecting the effectiveness of the recovery messaging. Similarly, written inside of the brochure is the serenity prayer, shown in figure 5b, often used in recovery programs. This also needs careful presentation to fully convey its implications for personal growth and recovery. Correct representation and understanding of these elements are important for maintaining the messaging's integrity and ensuring it genuinely supports the community.

The theme of Empowerment and Hope is clearly represented by the Serenity Prayer in the brochure. This prayer is a source of motivation and positivity. It encourages people to accept the

things they cannot change and find the courage to change what they can. This idea is crucial for recovery, offering hope and motivation to face the challenges of addiction and look forward to the future.

Healing and Personal

Transformation is another important



theme, highlighted by the Serenity Prayer. The prayer's call for wisdom to know the difference between what can and cannot be changed speaks to the journey of personal growth and spiritual development that is central to recovery. It shows that recovery involves not just external changes, but also internal growth and understanding.

The Cultural Sensitivity and Integration theme is subtly present in the universal appeal of the Serenity Prayer. This indicates the importance of recovery messages being inclusive and respectful of spiritual beliefs and practices.

Messaging Preferences are seen in the prayer's straightforward and reflective language, which aligns with what the community finds impactful. The prayer's popularity in recovery settings demonstrates its effectiveness, suggesting that inspiring and thoughtful messages can potentially motivate individuals to engage with recovery resources.

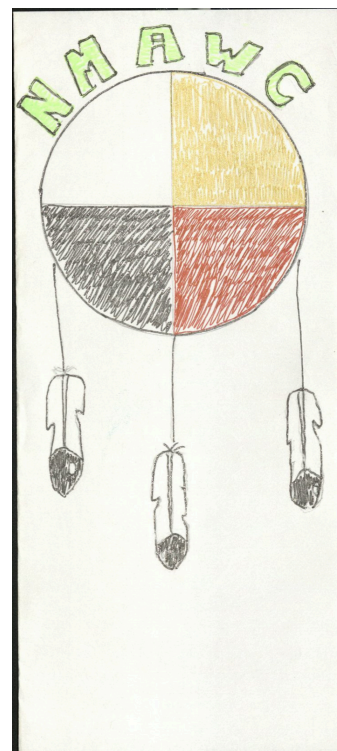
The thoughtful inclusion of the Medicine Wheel and the Serenity Prayer in addiction recovery communication materials is a clear example of how co-designed artwork can enhance engagement and support within recovery programs. By closely aligning with themes of Cultural

Relevance, Empowerment and Hope, and Healing and Personal Transformation, these design choices effectively address the community's needs and preferences. This strategy not only respects and honors the cultural heritage of the community but also serves as a powerful tool for facilitating personal growth and communal connection. The analysis demonstrates that such culturally informed and emotionally resonant elements are crucial for the success of communication tools in addiction recovery settings. Ultimately, this approach underlines the importance of integrating meaningful symbols and messages into recovery materials.

Figure 6

Figure 6 illustrates a piece incorporating a medicine wheel and feathers, symbolizing the role of cultural symbols in recovery messaging, reflecting themes of empowerment, hope, healing, and the value of community in the journey toward recovery.

In examining the co-designed artwork presented in Figure 6, which features a medicine wheel with feathers and the acronym "NMAWC," standing for Northern Minnesota Addiction Wellness Center, shows how important cultural symbols are in the healing journey alongside short and clear message indicators. The medicine wheel, as mentioned above, represents completeness and the ongoing cycle of life and healing. Feathers, often linked to prayers and spiritual connections, enhance this imagery, forming visual metaphor for protection and healing. This combination of cultural symbols aligns with the community's preferences for visual design and also connects with beliefs and traditions, making the messages more impactful. The



inclusion of the acronym "NMAWC" in the artwork suggests a preference for concise yet meaningful communication, hinting at an effective strategy to engage the audience's interest in recovery materials without explicitly mentioning addiction or recovery. This choice shows the power of subtle cues to spark curiosity and encourage deeper exploration of the content.

The brochures' artwork themes of Empowerment and Hope, and Healing and Personal Transformation, are important along an individual's path to recovery. By including symbols that suggest protection and the encouragement of healing, the artwork sends a message of optimism and spiritual well-being. It emphasizes the potential for personal growth and the holistic nature of the healing journey, in line with the community's values and creating a supportive environment for recovery.

Additionally, the portrayal of the Community and Social Dimensions of Recovery in the artwork highlights the concept that healing is a communal journey with the broader community and the natural world. This perspective is particularly meaningful in Ojibwe culture, which sees recovery as a collective effort.

Figure 6 shows that such artworks not only communicate the importance of cultural and social dimensions in recovery but also align with preferred messaging themes like empowerment, hope, and the significance of community and cultural identity. These are important in developing effective communication tools for addiction recovery, highlighting the connection between individual and collective healing processes and the cultural foundations supporting them.

Figure 7

In the brochure, figure 7, the participant incorporates individuals from diverse backgrounds through the inclusion of multiple languages. The directive "GET HELP," paired with the calming imagery of nature, invites individuals to take the first step toward healing, invoking a sense of possibility and a peaceful life ahead.

In focusing on recovery messaging figure 7a shows cultural sensitivity is a key factor. By greeting members in their own languages, like using "Aaniin" from the Ojibwe language, the participant shows a strong respect for everyone's cultural background, linking closely to the themes of Cultural Relevance and Cultural Foundations in Recovery. Placing this on the front of the brochure, this method shows recognition and celebrates the varied backgrounds of community members, making the recovery environment more inclusive and welcoming.

Motivation and empowerment are also central themes.

Presenting the word "Sobriety" alongside greetings in different languages acts as a powerful motivation, reflecting the themes of Empowerment and Hope, and Healing and Personal Transformation. It sends a strong message that recovery is achievable, backed by a community that values and understands everyone's unique stories.

Effective communication plays a crucial role in connecting the program with its audience, highlighting the importance of the Communication Channels theme. By using multiple languages, the program greatly increases accessibility, ensuring that messages about recovery are understood by everyone, regardless of their cultural background. This strategy might work for spreading recovery messages effectively, reaching people wherever they are on their journey.



The use of visual design, featuring bright colors and welcome messages in multiple languages, aligns with the Visual and Design Preferences theme. This approach aims to create a space that feels open and inviting to all, making a positive and inclusive first impression of the recovery program.

Lastly for figure 7a, the importance of community and social support in recovery is clearly shown in the materials, reflecting the Community and Social Dimensions of Recovery theme. It affirms the idea that recovery is a community effort, supported by connections with others who have faced similar experiences and challenges. This part of the recovery program emphasizes the importance of having a supportive and understanding community to help through the healing process.

The inside of the brochure, figure 7b, shows the directive "GET HELP" alongside serene natural visuals, extending an invitation for individuals to begin their journey of healing, offering a vision of hope and tranquility. This method demonstrates an understanding of the community's messaging



preferences, which favor clear, compelling calls to action that simultaneously recognize the challenges of the recovery journey.

Images of a tranquil river and a solitary tree appeal to a universal desire for calm, mirroring the community's liking for visuals that comfort and motivate. These choices align with broader healing and personal transformation themes, suggesting a move from hardship toward a

serene and balanced state. The phrase "Calm your destructive nature" adds depth to this narrative, encouraging self-reflection and the potential for a more peaceful life.

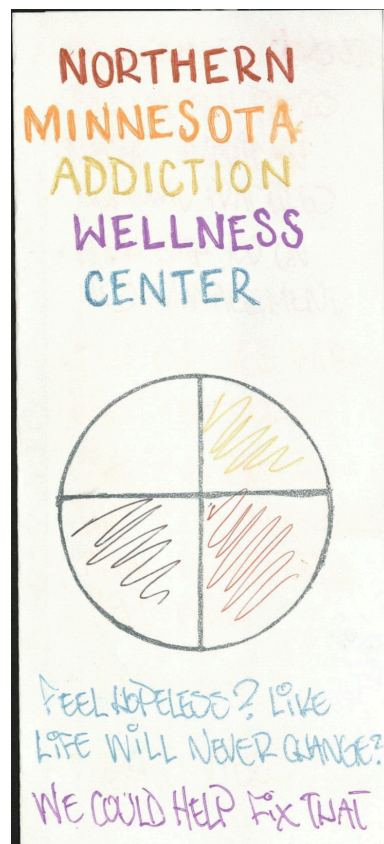
The use of phrases such as "destructive nature" shifts attention to the theme of stigma and language, presenting a critical area for consideration in the messaging process. It brings to light the importance of language in shaping perceptions and emphasizes the need for careful language use to avoid perpetuating negative stereotypes or stigma associated with addiction. This aspect of the brochure indicates the ongoing effort required to craft messages that are straightforward yet mindful of the intricacies of individual experiences, highlighting an awareness of the importance of sensitive communication within the recovery conversation.

In conclusion, the brochure stands as a comprehensive effort to communicate recovery messages, skillfully integrating elements of cultural sensitivity, empowerment, effective communication, visual appeal, and community support. Through the inclusion of multiple languages and recognition of diverse cultural backgrounds, it not only respects but also celebrates the variety of identities within the community, directly engaging with the themes of Cultural Relevance and Cultural Foundations in Recovery. The design of the brochure, with its inviting colors and greetings in multiple languages, aims to create a welcoming atmosphere for all, making a positive initial impression that aligns with Visual and Design Preferences. Moreover, the emphasis on community and social support, as depicted through the materials, underlines recovery as a collective journey, reinforcing the Community and Social Dimensions of Recovery theme. The interior of the brochure, with its serene natural imagery and thought-provoking messaging, though effective in inspiring peace and possibility, brings to attention the careful consideration needed in language use to prevent reinforcing negative

stereotypes associated with addiction, indicating an ongoing effort to craft messages that are clear yet considerate of individual experiences.

Figure 8

The brochure's front, figure 8a, integrates visual design and messaging, aiming to connect with its intended audience. This piece creates a conversation between despair and hope, addressing the intense feelings of hopelessness often accompanying addiction. By asking "Feel hopeless? Like life will never change?" it confronts the viewer with their current lifestyle, offering a message of hope and empowerment through the statement "We could help fix that." This shift from recognition to offering a solution embodies a key theme in recovery messaging — the belief in the possibility of change and empowering individuals to seek support and engage with recovery resources.

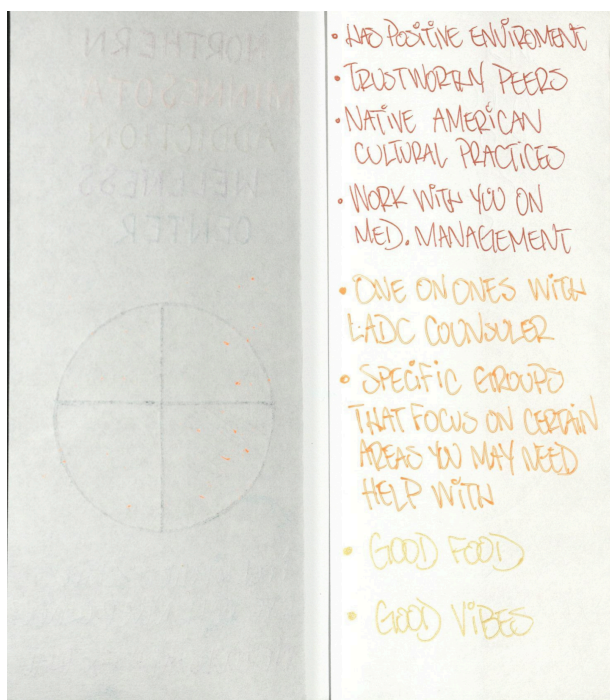


The choices made in design and messaging reflect a deliberate awareness of the target audience's preferences, using direct and empathetic communication. This approach recognizes the struggles faced by those dealing with addiction and immediately presents an opportunity of hope. It aligns with the identified themes of effective recovery program messaging, which stress positive framing and the potential for a brighter, more positive future.

The inclusion of the Medicine Wheel adds a layer of meaning to the brochure's visual and thematic composition. It highlights the cultural relevance of the content and acts as a visual

affirmation of the center's dedication to incorporating cultural and spiritual elements into their recovery approach. This decision reflects a broader preference for imagery that conveys cultural themes and values, highlighting the importance of cultural elements in making the message resonate more effectively with the Ojibwe community. The use of the Medicine Wheel, beyond its cultural significance, subtly introduces the theme of community and social recovery. It implies that the path to wellness includes community support and holistic well-being. This aspect of the design hints at the participants perspective on healing, acknowledging the crucial role of community and the social dimensions of recovery.

Analyzing the interior content of Figure 8b, empowerment and hope are conveyed through the promotion of a positive environment and the support of trustworthy peers. This approach empowers individuals, providing a solid foundation of encouragement that nurtures the belief in a feasible path to recovery. The brochure communicates this by detailing the supportive atmosphere and peer relationships available at the center, which create a sense of belonging and motivation among participants.



Cultural relevance is addressed by highlighting Native American cultural practices, affirming the center's dedication to integrating these essential cultural elements into its recovery programming. This emphasis honors the significance of cultural identity in the healing process

and aligns with a broader understanding of how cultural practices can support recovery, particularly within Ojibwe communities. By mentioning these practices, the brochure signals the center's respect for and commitment to culturally informed care.

Though the inside of the brochure lacks visual elements, the textual mention of "good vibes" suggests an atmosphere that is emotionally supportive and visually appealing, aligning with preferences for aesthetics and atmosphere in effective messaging. This subtle nod to a positive environment speaks to the broader impact of a welcoming and supportive setting on an individual's recovery journey.

Although the inside of the brochure lacks visual elements, the text mentioning "good vibes" suggests an environment that is emotionally supportive and visually appealing, aligning with preferences for an inviting and supportive atmosphere. This indirect reference to a positive setting reflects the impact of a welcoming environment on an individual's journey to recovery.

Education and awareness are expanded upon through details of services such as one-on-one counseling and focus groups. This educates potential clients about support options and shows the center's comprehensive approach to recovery, highlighting personalized and group learning opportunities tailored to meet diverse needs.

The brochure places emphasis on community and social recovery through mentions of group sessions and the role of trustworthy peers. This approach highlights the importance of social support networks and community in the healing process, suggesting a comprehensive strategy that recognizes the therapeutic element of collective support and shared experiences.

Finally, the brochure touches on the theme of healing and personal transformation through listings of services like medication management and one-on-one counseling. These

services indicate a customized approach to recovery, focusing on the individual needs of clients and supporting them through their unique journeys of healing and transformation.

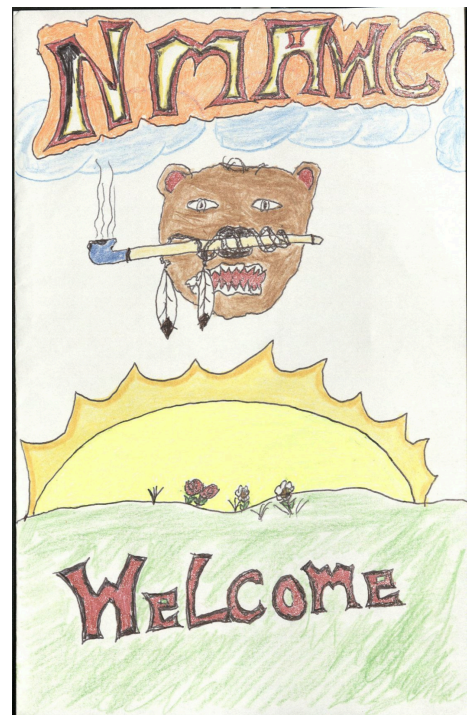
In summary, the brochure from Figure 8 is a carefully designed communication piece that embodies the core principles of healing and personal transformation at the heart of the recovery process. It directly speaks to those navigating recovery, offering messages of hope and the promise of a transformative journey. Through its strategic use of language, cultural symbols, and visual design, it demonstrates an understanding of the audience's needs and the power of thoughtfully crafted messaging to motivate action and inspire hope

Figure 9

The brochure artwork in figure 9 shows a bear and a peace pipe against a background of warm colors, carries cultural and spiritual meaning for Ojibwe peoples. The participants' work embodies themes of healing, empowerment, and cultural identity.

The bear symbolizes strength, courage, and leadership, while the peace pipe is used in spiritual ceremonies, indicating a sacred connection. These symbols reflect the community's cultural values and the integration of traditional practices in recovery, aligning with themes of Cultural Relevance and Cultural Sensitivity Integration.

Their presence in the artwork indicates the participants perspective on the center's commitment



to a culturally respectful recovery environment, essential for individuals' healing and transformation.

The design's visual and aesthetic choices—using familiar imagery, vibrant colors, and natural scenes—appeal directly to community preferences. This approach enhances the message's impact, creating a sense of belonging and identity. The inclusion of a "Welcome" sign conveys a positive, inclusive atmosphere, resonating with themes of Messaging Preferences and advocating for inclusive and empowering messages in the recovery process.

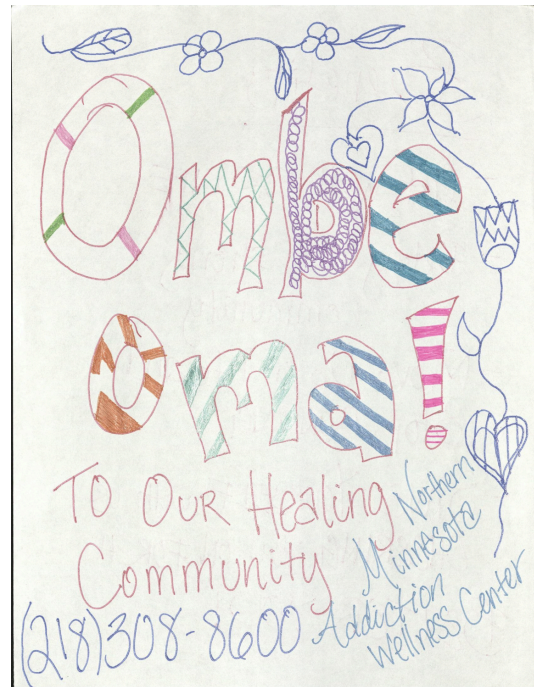
Furthermore, the peace pipe symbolizes hope and the potential for healing, representing the theme of Empowerment and Hope. This element, signifying peace and renewal, communicates the center's supportive approach to individuals' recovery journeys. Used as a visual in communication materials, it brings warmth, invitation, and the importance of community support as highlighted in the Community and Social Recovery theme.

This piece's narrative, with its cultural and community-centric themes, outlines a comprehensive approach to recovery messaging, acknowledging the complexity of addiction recovery where cultural identity, empowerment, and community support play crucial roles. The co-designed material delivers a strong message of hope, unity, and strength, important to members' healing and personal growth.

Figure 10

This flyer demonstrates the impact of visual and verbal storytelling in tackling essential themes in recovery, such as addressing stigma through language, promoting healing, and encouraging personal change.

The front of the flyer, figure 10a, shows individually styled letters of "Ombe Oma" which means "we rise here" symbolize both the diversity within the recovery community and the shared journey toward wellness. The use of simple, nature-inspired symbols like flowers and hearts ties back to healing, suggesting a universal language of love and connection to the environment, making the messages relatable and emotionally resonant for others on similar paths.



Integrating Woodlands art, with its traditional floral patterns, speaks to the importance of cultural identity in healing and personal growth. This choice honors the Ojibwe community's heritage, pointing to the role of cultural connections and spirituality in recovery. By including these symbols, the participant asserts their identities and shows the importance of the support provided by cultural ties during the recovery process.

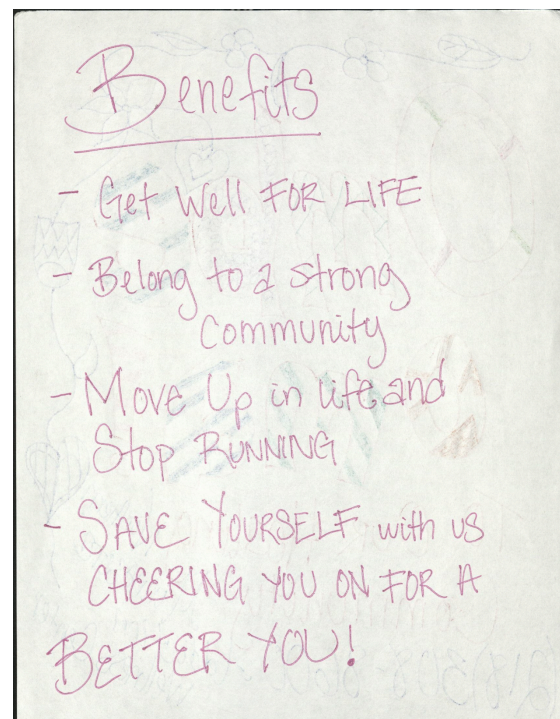
The phrase "To Our Healing Community" directly addresses the stigma surrounding addiction, highlighting the role of supportive language and collective experiences in the healing process. Together with the contact details, it positions recovery as a group effort, nurtured by empathy and community connections. This focus on community shows the importance of social support in recovery, illustrating how outreach and the development of supportive networks are important to the healing process.

Moving to the back of the flyer, figure 10b, emphasizes messaging that is both empowering and supportive. The language chosen resonates with an uplifting and forward-looking perspective, focusing on long-lasting wellness with phrases like "Get Well FOR LIFE" and advocating for personal progress with "Move Up in life and Stop Running." This alignment with a positive and motivating communication style speaks directly to preferences for messages that inspire and uplift.

The phrases "Move Up in life and Stop Running" and "CHEERING YOU ON FOR A BETTER YOU!" embody the theme of Empowerment and Hope, offering encouragement and highlighting the potential for positive transformation. Such statements are designed to motivate, stressing the belief in each individual's capacity for change and growth.

In addressing the theme of Community Narratives, the phrase "Belong to a strong Community" shows the critical role of communal bonds in the healing journey. This message reinforces the idea that being part of a supportive group is not only beneficial but essential for recovery, emphasizing the strength and support derived from shared experiences.

The emphasis on Community and Social Dimensions of Recovery is further enhanced by the benefit of belonging to a supportive community. This underscores the importance of social



networks and communal involvement in the recovery process, suggesting that healing is deeply interconnected with being part of a collective that offers support and understanding.

The challenge of moving beyond past behaviors and confronting personal issues is captured in the phrase "Move Up in life and Stop Running." This reflects the Challenges and Barriers to Recovery theme focused on overcoming the obstacles that hinder recovery, acknowledging the need to face and address these challenges directly as part of the healing process.

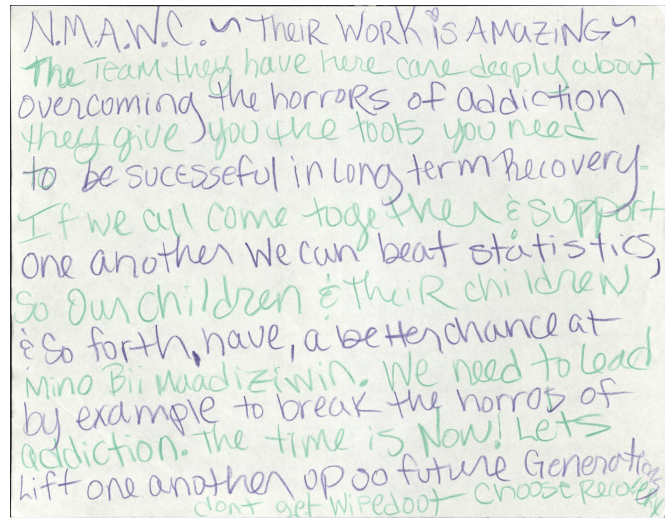
Lastly, the call to "Save Yourself with us CHEERING YOU ON FOR A BETTER YOU!" speaks to Healing and Personal Transformation, inviting participants to engage actively in their recovery. Supported by a community that cheers them on, this message highlights the journey of personal growth and the transformative power of taking responsibility for one's healing. It affirms the belief in the possibility of a better future, facilitated by both personal commitment and communal support.

By integrating themes of stigma, healing, empowerment, community support, and personal change, these materials show the importance of specialized visual and narrative communication on individuals in recovery. This analysis highlights the need for positive and supportive messaging to aid healing and growth and shows the creative expression's transformative messaging of hope and resilience.

Figure 11

This flyer, figure 11, is a reflection of personal and communal paths toward healing, and is a lens through which to examine broader themes of recovery communication, including stigma, language, healing, and personal change.

The language within the flyer, utilizing motivational phrases like "beat statistics" and "lead by example," directly communicates a sense of resilience and determination. This linguistic choice aligns with a strategic preference for uplifting messages, emphasizing the achievability of recovery and the importance of setting positive examples.



The theme of community emerges, with references to collective hopes for "our children" and "future generations." This shows the importance of shared experiences and the communal aspect of healing, suggesting that recovery is deeply connected with community life and our shared hopes for the future.

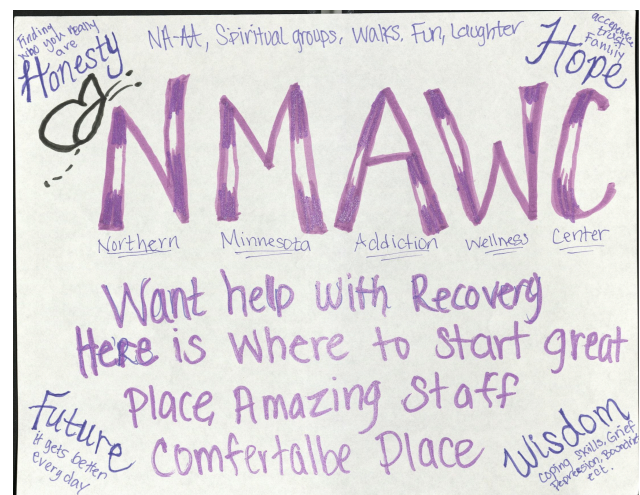
The use of the Ojibwe term "Mino Bimaadiziwin," which means "the good life," aligns with the theme of cultural relevance, and how important cultural values are. It connects the idea of getting better to respecting cultural traditions and identity. The flyer is about giving people hope and the belief that they can make positive changes together. It says, "The time is NOW!" to encourage action and support from everyone.

Moreover, the flyer acknowledges how hard the fight against addiction can be through the use of the phrase, "the horrors of addiction" but emphasizes that recovery is achievable, especially with the support of the community "Let's lift one another up so future generations don't get wiped out - choose recovery." This balance shows an understanding that while acknowledging the problem is important, focusing on solutions and support.

In summarizing the flyer from Figure 11, it shows the journey of recovery, combining themes of motivation, community, and cultural identity. This flyer balances recognizing the challenges of addiction with a hopeful message of collective support. It presents recovery as a personal endeavor and a shared objective. As an example of recovery communication, this flyer demonstrates how combining personal stories with a broader message of healing and mutual support can resonate strongly with individuals and communities engaged in the process of recovery.

Figure 12

The flyer, figure 12, makes strategic use of words such as "Honesty," "Hope," and "Wisdom," highlighting a preference for messages that are optimistic and grounded in core values. This choice resonates with the broader goal of framing recovery in a positive light, ensuring the communication emphasizes forward-looking and value-driven narratives.



The display of the word "Hope" on the flyer shows an emphasis on looking toward a brighter future, a key motivator and source of strength for those in the recovery process. This messaging is vital as it creates a sense of possibility and empowerment among individuals, suggesting that change for the better is within reach.

Moreover, the inclusion of "Wisdom" hints at the integration of culturally significant teachings and practices into the recovery program, signifying the importance of cultural sensitivity and relevance in the messaging. This aspect suggests a recognition of the cultural practices that can support individuals through their recovery.

Descriptions of activities like "NA/AA, Spiritual groups, Walks, Fun, Laughter" play a role in illustrating the community and shared experiences central to the recovery journey. These elements point to a collective narrative of recovery, emphasizing the importance of building a supportive community environment.

The flyer also mentions "Amazing staff" and engaging activities, highlighting the role of a supportive community and social network in the recovery process. This aspect shows an understanding that recovery is influenced by positive social interactions and a nurturing environment.

Visually, the flyer centers the name "NMAWC" in large, bold letters, surrounded by supportive words in a handwritten style, creating a welcoming and inclusive atmosphere. The design choices reflect a preference for simplicity and a personal touch, making the message accessible and engaging.

The phrase "Future - it gets better every day" captures the essence of healing and personal transformation, conveying a message of gradual improvement and growth. This statement is a reminder of the ongoing nature of the recovery journey, emphasizing progress and personal development.

The flyer educates potential clients about the values and support available at the center, as indicated by the words around the acronym NMAWC. This approach helps in creating a more

informed understanding of the services and support system offered, contributing to broader education and awareness efforts.

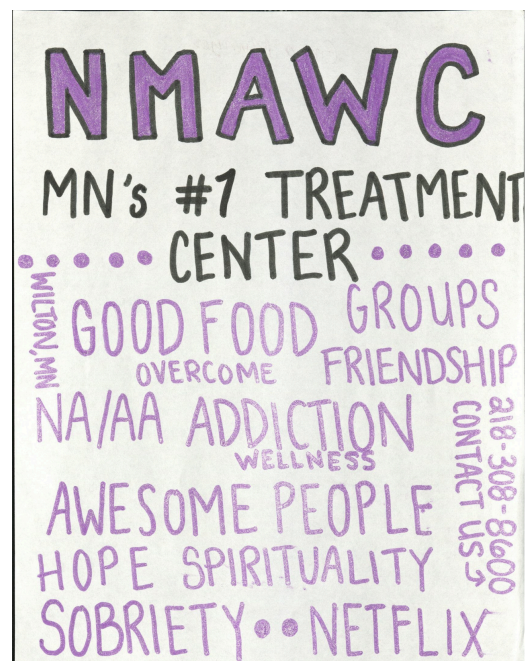
The flyer shown in Figure 12 is an example of how careful choice of words, a focus on community, and appealing design can make a difference in recovery messaging. It shows that using positive words, considering cultural values, and having an attractive design can offer a supportive way to communicate about recovery. This review points out how important it is to create materials that give information and connect with people's feelings. It shows an understanding of the recovery journey and how important it is to maintain community ties.

Figure 13

This flyer highlights the wellness centers services and community-focused approach to addiction recovery. It uses key themes of hope, support, and healing to engage and inspire individuals on their journey to recovery.

Figure 13 starts with a bold statement, identifying itself as "MN's #1 Treatment Center," accompanied by attributes like "GOOD FOOD" and "FRIENDSHIP." These positive statements reflect pride in the services offered and are intended to

resonate with the community. The participant emphasizes the center's dedication to quality and creates a welcoming narrative that encourages community engagement.



Words such as "HOPE" and "OVERCOME" prominently feature in the flyer, conveying messages of resilience and the possibility of overcoming addiction. These terms are important in inspiring individuals who are considering starting or are in the midst of their recovery journey, acting as reminders of the achievable nature of recovery.

References to "FRIENDSHIP," "GROUPS," and "AWESOME PEOPLE" highlight the importance of social support and peer networks, illustrating that recovery is a journey shared with others. This focus on communal experiences and mutual support showcases the importance of connections in the healing process.

By detailing features and services like "GOOD FOOD," "SPIRITUALITY," and "SOBRIETY," the flyer educates potential clients about what to expect, enhancing awareness of the center's offerings and setting clear expectations for the recovery experience.

The design of the flyer, with its straightforward layout and use of purple for emphasis, along with casual mentions like "NETFLIX," tries to engage its audience in a relatable manner. These design choices reflect a careful consideration of how to connect with viewers, creating an atmosphere of warmth and familiarity.

Although the flyer doesn't directly mention specific cultural elements, the inclusion of "SPIRITUALITY" suggests a recovery approach that values a variety of spiritual and cultural practices. This indicates an appreciation for the comprehensive nature of healing, recognizing the role of spiritual health.

Mentions of "NA/AA" and "GROUPS" underline the role of community and social networks in the recovery process. This part of the flyer points to the belief in the power of group efforts and the importance of support groups in aiding recovery, reinforcing the idea that healing is supported by community involvement.

By using the term "OVERCOME ADDICTION," the flyer acknowledges the challenges within the recovery process, portraying the center as a supportive environment where these challenges can be faced. This presentation is both realistic and optimistic, offering encouragement to those on the recovery path. The flyer concludes with the goal of "SOBRIETY," symbolizing personal evolution and healing. This focus on sobriety highlights the essence of the recovery journey, marking an important step toward personal betterment.

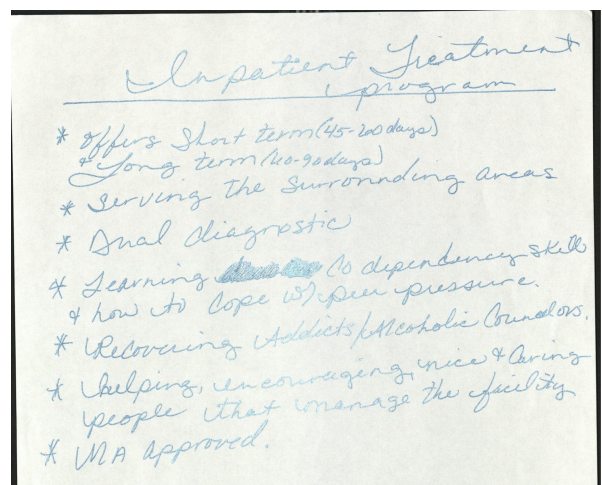
Through strategic design and carefully chosen wording, this flyer sets a tone of optimism and support, stressing the importance of community, spirituality, and comprehensive care in the recovery process. It ends by emphasizing the goal of becoming sober, showing the healing and supportive journey the center offers. Figure 13 embodies the community narratives, empowerment, and hope themes, illustrating how positively framed messaging can motivate engagement with recovery resources.

Figure 14

This flyer, figure 14, stands as a reflection of the participants' journeys, communicating themes of overcoming stigma, healing, and personal transformation through visual and textual storytelling.

Focusing on education and awareness, the flyer thoughtfully details the available

treatment options, differentiating between short-term (45-60 days) and long-term (60-90 days) programs. This distinction not only provides clear information but also highlights the structured



support offered by the center, catering to various needs in the recovery journey. By introducing the concept of dual diagnostic treatment, the flyer acknowledges the multifaceted nature of addiction, suggesting a comprehensive approach that addresses both substance use and co-occurring mental health disorders. This choice reflects an understanding of the complexities involved in recovery, indicating a commitment to holistic care.

The flyer also touches on the challenges and barriers to recovery, subtly addressing the issue of dual diagnosis. This inclusion signals an awareness of the intricate hurdles many face on their path to recovery, emphasizing the center's readiness to tackle these multifaceted challenges. By doing so, it reassures individuals that their journey is supported by an informed and compassionate approach.

Community and social dimensions of recovery are highlighted through the emphasis on learning skills to manage codependency and navigate peer pressure. This focus points to the importance of building healthy relationships and fostering resilience, underscoring the role of community in the recovery process. The mention of "recovering addicts/alcoholic counselors" within the program staff suggests a powerful model of peer support, reinforcing the message that recovery is a shared journey, enriched by mutual understanding and shared experiences.

Visually, the flyer's design preferences suggest an appreciation for clarity and accessibility. Even though this is inferred from text, the structured presentation implies a thoughtful consideration of how information is received, prioritizing ease of understanding to ensure that the message is effectively communicated to its intended audience.

The cultural relevance hinted at by the flyer's nod to serving the surrounding areas reflects an intent to connect with the community on a deeper level, potentially incorporating

elements that resonate with local values and experiences. Although more explicit details would clarify this point, the mention suggests a forward-thinking approach to culturally informed care.

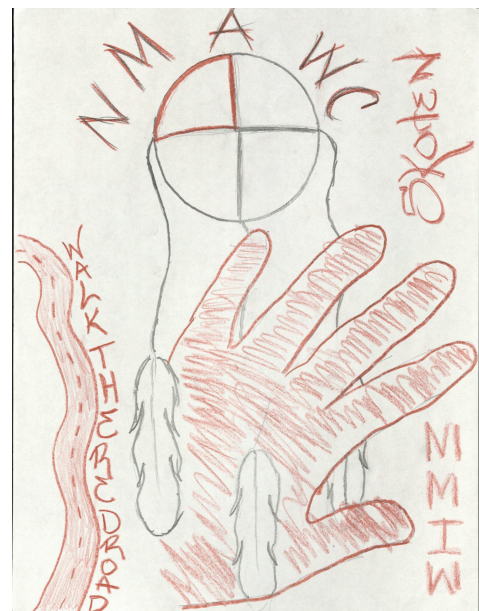
The inclusion of misinformation and accurate information, indicated by the facility's description as "MA approved," assures the audience of the center's credibility and the evidence-based nature of its treatments. This reassurance is crucial in a field where trust and factual accuracy form the cornerstone of effective communication and therapy.

In conclusion, this flyer reflects a broad spectrum of recovery narratives, offering insights into the center's approach to treatment, community involvement, and the importance of empowerment and hope to participants. Through its design and content, it presents a view into the healing journey, advocating for a recovery path marked by understanding, support, and personal growth. This examination highlights the key themes in the participants' creation but also points to the potential of such materials to shape future communication strategies within recovery programs.

Figure 15

In the analysis of Figure 15, presented in the context of addiction recovery, the artwork integrates symbols rooted in cultural significance with elements that visually articulate themes of healing, empowerment, and community interconnectedness.

The medicine wheel, representing life's circle and the balance between physical, mental, emotional, and spiritual health, holds particular resonance within the



context of addiction recovery. Its relevance is heightened for the Ojibwe community, connecting to the broader theme of cultural identity and the healing journey. This symbol's inclusion in the flyer shows an appreciation for cultural heritage and its role in the recovery process. The phrase "WALK THE RED ROAD" serves as a call to live a balanced, correct life, mirroring the journey of recovery in Ojibwe communities. It embodies hope and encouragement for individuals to pursue a life aligned with positive spiritual values.

The artwork features a hand reaching toward the medicine wheel, symbolizing a journey toward balance, wellness, and a comprehensive approach to recovery. The drawing's simplicity, combined with the impactful use of red and black, suggests a preference for meaningful, symbolic imagery that communicates cultural themes without overwhelming complexity. This gesture of reaching upward introduces an element of hope and aspiration, illustrating an empowered path toward recovery. It resonates with themes of empowerment and hope, portraying recovery as an attainable goal marked by personal growth and transformation.

The red handprint is also a symbol associated with the MMIW movement, and adds a layer of social commentary to the artwork, addressing the silenced voices of Indigenous women affected by violence. This inclusion connects deeply with community narratives and the challenges faced in recovery, linking personal healing journeys to broader societal struggles and the fight for justice within Indigenous communities.

The color scheme, particularly the use of red, not only signifies strength and vitality but also calls attention to the MMIW issue, representing the blood of those lost. This choice confronts the stigma surrounding violence against Indigenous women, urging a communal effort toward awareness and change.

Incorporating the acronym MMIW directly addresses the social and systemic issues affecting the Ojibwe and other Indigenous communities, emphasizing the external challenges that can influence the recovery process. The mention of NMAWC (Northern Minnesota Addiction Wellness Center) situates the artwork within a specific context, highlighting the center's role as a space for recovery and awareness.

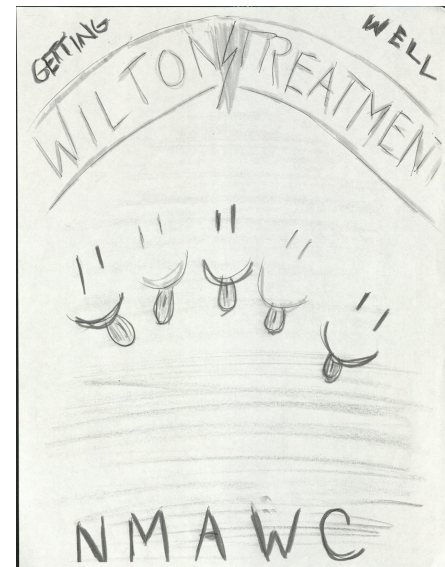
The term "Skoden" is a slang way of saying "let's go then," showing readiness and a push to move forward together. It's like a rallying cry that brings people together, encouraging them to join in a shared journey of getting better and finding hope. Skoden is motivating and inspiring others to take action and believe in a better future.

The artwork in Figure 15 offers a compelling visual narrative that elevates the conversation around addiction recovery. Through the strategic use of culturally significant symbols like the medicine wheel and the red handprint, along with impactful phrases, it highlights the journey of healing and empowerment. The design's simplicity and symbolic depth create a direct connection with viewers, promoting a collective pursuit of healing, awareness, and justice. This artwork strongly supports the idea of working together on personal healing and strengthening the community. It invites people to take action and shows how pictures and symbols can help us tackle tough problems.

Figure 16

This flyer frames the recovery journey positively, incorporating a design that symbolizes renewal and emotional transformation while subtly nodding to the cultural significance of water in Ojibwe tradition.

Figure 16, which features the phrase "GETTING WELL" alongside "TREATMENT" and the wellness center's name, "NMAWC," we see a clear intention to frame the recovery journey positively. Messaging preferences show the emphasis on a forward-moving path to wellness, avoiding the pitfalls of focusing solely on the struggle. Such a positive framing is important to a supportive atmosphere for individuals in recovery.



The design choices in this flyer are notably straightforward, favoring a clean and uncluttered visual approach. The use of raindrops might symbolize renewal, cleansing, or the emotional spectrum associated with recovery—ranging from tears of sorrow to those of joy.

Although the flyer does not explicitly feature Ojibwe language or symbols, the implicit reference to water through rain imagery taps into water as a source of life and healing within Ojibwe culture. This subtle nod to cultural relevance may reflect the artist's intent to integrate culturally meaningful symbols into the narrative of recovery.

Furthermore, the depiction of rain originating from the word "WELL" visually conveys hope and empowerment, integral themes in the journey toward recovery. This metaphorical representation emphasizes the nourishment and motivation derived from the concept of wellness, mirroring the empowerment and hope identified as crucial in the codebook for engaging and supporting individuals in their recovery process.

By focusing on positive messaging and the concept of moving forward toward wellness, figure 16 creates a supportive atmosphere that is supportive for individuals in recovery. This

artistic choice, along with the visualization of hope and empowerment stemming from the concept of wellness, aligns with key themes of renewal and support.

Figure 17

This flyer represents simple design and recovery messaging, focusing on how its direct, clear communication style and visual elements like contrasting colors and bold text are designed to engage and empower individuals on their recovery journey.

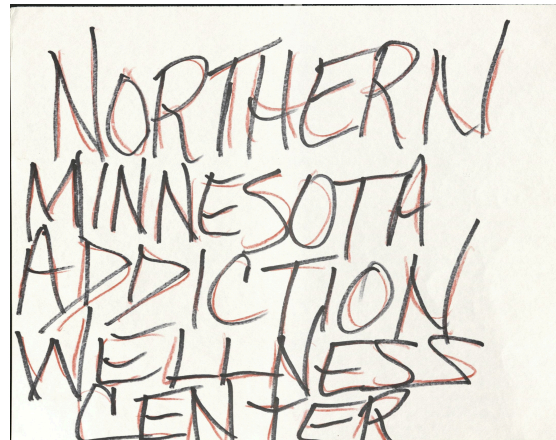
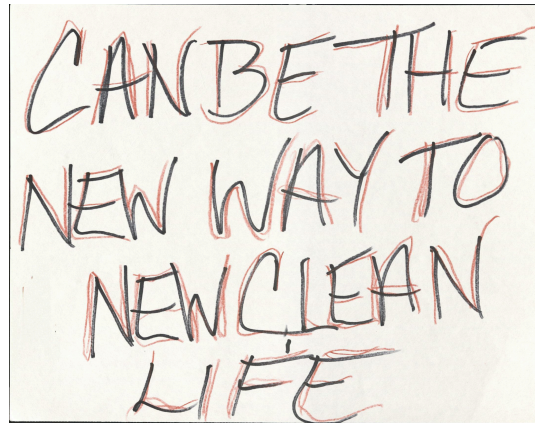


Figure 17a depicts the front of the flyer, the text is characterized by its straightforwardness and bold presentation, indicating a preference for clear, direct communication. This approach ensures the message is accessible and impactful, aligning with recovery program goals of straightforward and effective communication. The choice to present the message in such a manner simplifies complex ideas into understandable and relatable content for the audience, making it more likely to resonate with individuals on their recovery journey. The directness of the text, reflects a preference for clear, unambiguous messaging, essential for effective communication within recovery programs

Visually, the flyer utilizes contrasting colors, possibly red and black, to create a visual impact that draws attention. This design choice makes the message more noticeable and symbolizes resilience and the recovery process's intensity. The dual-layered color scheme suggests a complex nature of recovery.

The bold, capitalized lettering conveys strength and assertiveness, aligning with themes of empowerment and hope. This design choice communicates a strong foundation of support provided by the center to individuals in recovery, portraying an image of reliability and strength.

On the back, figure 17b, the term "clean" is used to talk about not using drugs or alcohol and highlights how important words are in the process of getting better. It suggests a difference that might unintentionally reflect how society views people, showing how choosing certain words in talking about recovery can really shape how people see themselves and how others see them too. Therefore, this could lead to the stigmatization of self.



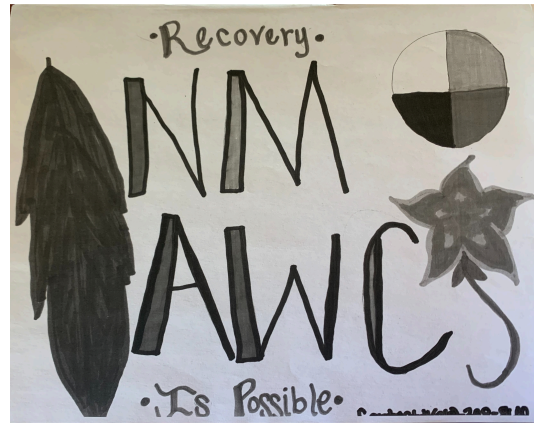
The artwork sends a message about healing, making big changes, and the chance to start over, focusing on being hopeful and supportive for those working to move past addiction. By pairing "new" with "clean," it encourages leaving the past behind and looking forward to a fresh start.

Choosing a handwritten style for the text gives it a personal feel, underlining themes of change and starting anew. Although the phrase "clean new life" aims to challenge negative views or stereotypes, it also supports the idea of people in recovery as changed and refreshed.

Through its thoughtfully chosen words and visuals, Figure 17 illustrates the complex journey of recovery, emphasizing empowerment, renewal, and hope. It portrays how effective communication, grounded in clarity and directness, can influence individuals' perspectives on recovery and societal views on addiction.

Figure 18

In the analysis of Figure 18, the flyer introduces elements that highlight cultural heritage, empowerment, and the journey toward healing within the recovery process. It integrates symbols and messages that directly appeal to and respect the cultural backgrounds and personal experiences of individuals undergoing recovery.



The inclusion of the medicine wheel symbol aligns with the theme of cultural relevance, resonating with Ojibwe beliefs and practices. This symbol, representing the interconnectedness of life, the cycles of nature, and pathways to health and healing, anchors the flyer in a context that values the integration of cultural traditions and wisdom in the recovery journey. It signifies a holistic approach to recovery messaging, acknowledging the importance of balancing physical, mental, emotional, and spiritual health.

The phrase "Recovery Is Possible" is a declaration of empowerment and hope. This message is empowering, reinforcing the belief in positive change and the potential for healing. It aligns with the identified preferences for recovery messaging that creates optimism and confidence in the possibility of recovery, important for motivating individuals to engage with and persevere through the recovery process. With this phrase the flyer challenges the stigma surrounding addiction. It promotes a supportive, non-judgmental approach to recovery, highlighting the success and feasibility of overcoming addiction.

The visual presentation of the Northern Minnesota Addiction Wellness Center's acronym "NMAWC" in bold and large letters immediately draws attention, underlining the supportive

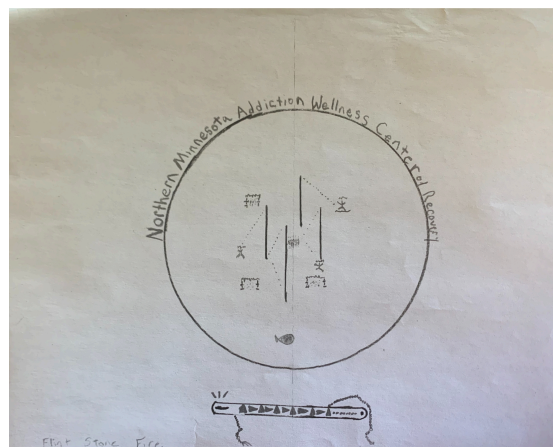
environment offered by the center. The use of black and white contrast throughout the design adds visual impact and may also symbolize the clarity and focus of the recovery message being conveyed. This design choice aligns with visual and design preferences that prioritize clear, impactful, and meaningful communication.

Additionally, the use of a feather alongside the medicine wheel introduces another layer of cultural significance. Feathers are often associated with attributes such as trust, honor, strength, wisdom, power, and freedom—all of which are important in the context of recovery. The medicine wheel's presence directly correlates with the theme of healing and personal transformation.

Together, these elements in Figure 18 show a narrative that is both culturally grounded and universally hopeful. It provides a message of healing, empowerment, and the possibility of transformation. This flyer highlights the participants' perspective on the center in supporting individuals through their recovery with respect for their cultural backgrounds and personal paths to healing.

Figure 19

This flyer, figure 19, presents a compelling visual narrative that seamlessly blends cultural symbols with a message of healing and community engagement in the context of recovery. This flyer's design and content reflect the cultural backgrounds and healing journeys of individuals engaging with the Northern Minnesota Addiction Wellness Center.



The main feature of this flyer is a circle that includes the name "Northern Minnesota Addiction Wellness Center" drawing inspiration from Ojibwe cultural symbols such as the flint stone fire and drum. This circular motif mirrors beliefs in life's cyclical nature and the pursuit of balance and harmony. The phrase "Centered on Recovery," located at the circle's edge, highlights the participants' perspective of the wellness center's dedication to promoting healing within a cultural framework. The flyer also mentions "Flint Stone Fire," referencing traditional fire-making practices and their role in ceremonies and gatherings aimed at community healing.

"Centered on Recovery" highlights the center's focus on healing as its core mission, expressing a commitment to guiding individuals through their recovery with hope and determination. The fire symbol, signifying change and renewal, complements this by suggesting a journey of purification and growth. Moreover, the circular design underlines the importance of community and collective effort in the recovery process, promoting a sense of shared support and resilience. The design's simplicity, characterized by its clear and efficient use of space, aligns with preferences for visual communications that are direct and uncomplicated. The circular focus supports Ojibwe values of symbols representing wholeness and life's cycles.

Figure 19 shows how combining cultural symbols with clear messages can help in talking about recovery. The flyer uses designs inspired by Ojibwe culture to connect with its audience, showing the importance of including cultural traditions in messages about recovery. This makes the message meaningful, helping people feel supported and understood on their journey to recovery.

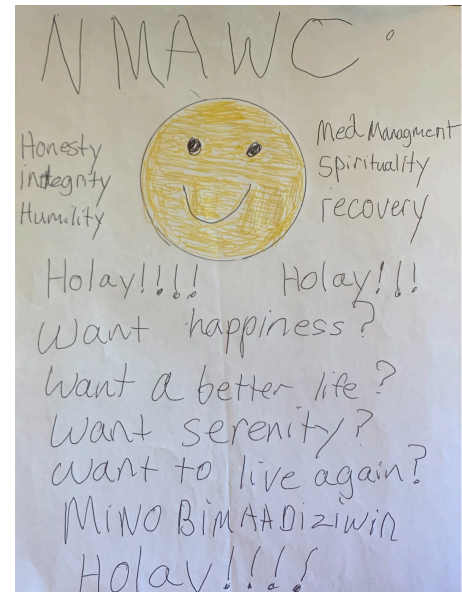
Figure 20

Figure 20 presents a lively and engaging visualization of recovery, mixing hope, cultural depth, and encouraging messaging to motivate individuals toward wellness. Through its use of exclamations, references to cultural heritage, and positive imagery, this artwork paints recovery as a journey filled with joy, potential, and strong cultural connections.

The artwork's lively shouts, "Holay!!!," act as an enthusiastic affirmation of life's brighter possibilities. Paired with questions aimed at the future "Want happiness? Want a better life? Want serenity? Want to live again?," it crafts a narrative of optimism and opportunity. This method prompts individuals to consider a future filled with contentment and peace. It also aligns with themes of encouragement and empowerment, suggesting that the path to recovery is full with positive outcomes.

At the center of the flyer is a special phrase, "Mino Bimaadiziwin," which means living a good life. This idea is really important in Ojibwe culture and talks about looking at health and happiness in a big-picture way. The flyer uses this idea to show how getting better from addiction is tied to who you are and where you come from, mixing personal healing with cultural traditions.

It lists values like "Honesty, Integrity, Humility" next to words like "Med Management, Spirituality, Recovery," which shows what the community thinks is important to the recovery process. These points highlight key parts of getting better, like growing as a person, finding



spiritual peace, and looking after your health in a balanced way. The flyer uses these messages to encourage and support people on their path to feeling better.

There's a big, smiling sun in the center that looks warm and hopeful. Its bright and simple style, plus the handwritten notes, make the flyer feel friendly and real, making the message resonate for people with similar values. This kind of personal touch helps make the message stand out as sincere and direct.

Also, by asking questions such as "Want a better life?" the flyer encourages people to think about the possibilities of a brighter future. It shifts the focus from the struggles to the positive sides of getting better, offering hope and the promise of a happier life ahead. This change is key for helping people see getting better as a chance for a better, more joyful life.

In conclusion, Figure 20 is an animated celebration of the journey to recovery, illustrating through its vibrant tone, cultural references, and hopeful imagery, an invitation to individuals to envisage a future marked by joy, health, and cultural connection. This artwork serves as a powerful message of optimism, showing that recovery is attainable.

Collaborative Creation Circles Conclusion

The analysis of the Collaborative Creation Circles reveals that incorporating cultural sensitivity and community engagement is crucial in creating effective communication tools for addiction recovery within Ojibwe populations. Through the detailed examination of brochures and flyers developed for the Northern Minnesota Addiction Wellness Center, reflected across figures 1a to 20, the importance of blending cultural symbols, community input, and co-design methodologies emerges as a central theme in facilitating a healing journey that honors cultural identity and meets individual needs.

Incorporating Ojibwe cultural symbols such as the medicine wheel, feathers, and Ojibwe phrases such as "Gaanawaanindiwig" ("Take Care of Each Other") in the recovery materials demonstrates respect for and the recognition of the cultural heritage and spiritual practices of the community. These symbols are essential elements in supporting the themes of healing, community support, and cultural identity. Their presence in recovery materials could reinforce the importance of cultural identity as a source of resilience and strength in the recovery process.

Insights from community members and stakeholders through interviews and collaborative circles stress the importance of collaborative efforts in creating materials that resonate on both personal and community levels. The preference for messaging that promotes positivity, empowerment, and hope highlights a collective desire for narratives that inspire and motivate, moving away from fear-based approaches historically associated with substance use disorder

The analysis of visual and design preferences reveals an appreciation for simplicity, clarity, and nature-inspired imagery, reflecting the values and aesthetic preferences of the Ojibwe community. By using visuals drawn from nature and a simple design approach, the materials transcend their informational purpose, becoming a means of cultural expression and connection.

The emphasis on providing accurate information about addiction recovery services and the expressed need for increased education and awareness show a key objective: empowering individuals with the knowledge and resources necessary for recovery. Highlighting culturally tailored programming and comprehensive service overviews emphasizes the necessity of accessible and inclusive recovery services.

A recurring theme across the Collaborative Creation Circles is the challenge of addressing the stigma associated with addiction. By carefully selecting language and imagery, the brochure aims to counteract stigma, creating a narrative of compassion, understanding, and

mutual support. This approach serves immediate needs of those seeking recovery and aims to contribute to a broader cultural shift toward more empathetic and supportive attitudes toward addiction.

The insights from the Collaborative Creation Circles show the integration of cultural sensitivity, community input, and co-design practices is important in developing communication messages for addiction recovery. The materials developed by participants for the Northern Minnesota Addiction Wellness Center highlight the teamwork and cultural connection important in helping individuals recover.

Concluding Insights

In concluding this detailed exploration, the insights from both individual interviews and Collaborative Creation Circles with Ojibwe community members of Northern Minnesota have illuminated a path forward for developing communication strategies that genuinely resonate with Ojibwe peoples navigating the recovery journey. This reveals the potential of culturally specific messaging to enhance engagement, comprehension, and empowerment throughout the recovery journey.

The collaborative approach, integrating community insights and creative expressions, has shown the critical importance of embedding Ojibwe cultural symbols, language, and narratives into recovery messaging. This honors the cultural identity of Ojibwe peoples and strengthens the messages' relevance and impact. The preference for positive, empowering content over fear-based narratives emerged as a clear directive, guiding the creation of materials that inspire hope and convey a deep respect for the community's resilience and capabilities.

Furthermore, the use of varied communication strategies, including personal stories and culturally significant symbols like the medicine wheel, emphasizes the multifaceted nature of effective communication. These strategies transmit information and create connections, providing a sense of belonging, and supporting the community's journey toward healing.

Looking ahead, the findings from this research offer a blueprint for future initiatives aimed at addressing substance use disorder within Ojibwe communities. The research method of co-design used in this dissertation offers a valuable approach for other communities seeking to uncover communication insights tailored to their unique cultural values and traditions, thereby supporting long-term healing and recovery processes. By prioritizing cultural relevance, community involvement, and empowering messaging, there's an opportunity to craft more effective, compassionate, and engaging recovery programs. This effort aligns with the needs and values of the Ojibwe community and sets a precedent for how we understand and support recovery across diverse cultural landscapes.

While the insights and methodologies detailed in this exploration offer promising avenues for culturally tailored communication strategies within Ojibwe communities, it's crucial to recognize that these approaches may not universally translate across different cultural contexts. The incorporation of Ojibwe cultural symbols, language, and narratives into recovery messaging—resonates with Ojibwe peoples—shows the importance of cultural specificity in health communication strategies. This specificity also signals a potential challenge when applying similar methods in communities with distinct cultural identities and values. For example, symbols and narratives that hold meaning and provide comfort to Ojibwe communities may not have the same relevance or could even have unintended negative implications in other cultural settings. This emphasizes the need for a nuanced understanding of each community's

unique cultural framework before implementing communication strategies derived from one specific cultural context. Therefore, while the co-design approach and the emphasis on positive, empowering messaging offer valuable lessons, they must be adapted with sensitivity to the cultural dynamics of other communities to ensure they support healing and recovery without inadvertently causing alienation or misunderstanding. This delicate balance between cultural specificity and universal applicability highlights the complexity of designing health communication strategies that are both effective and respectful across diverse cultural landscapes.

In essence, this is just the beginning of a journey toward a deeper understanding of how to effectively communicate within the context of addiction recovery in a way that honors and incorporates cultural identity and community strength. It advocates for a shift toward more inclusive, empathetic, and culturally attuned approaches in the field of health communication, highlighting the indispensable role of community collaboration in creating meaningful and effective recovery support tools.

DISCUSSION

Summary of Primary Findings

In this discussion section, I reflect on the core discoveries of the study, which investigates the Ojibwe community's preferences in communication strategies in recovery messaging. The research questions that guided this study asked: What preferences do Ojibwe community members in Northern Minnesota have for messaging within addiction recovery program materials? In what ways can their preferences inform the creation of effective communication tools that encourage engagement with available recovery resources? This research uncovered insights, notably emphasizing the importance of cultural relevance, community engagement, and favored communication strategies as key to improving recovery messages among Ojibwe peoples.

Key findings reveal a strong preference for recovery messaging that resonates with the Ojibwe community's cultural values and traditions. This involves incorporating the Ojibwe language, symbols, and stories into recovery program materials. Doing so respects the community's cultural identity. Additionally, discussing the teachings and wisdom of Elders with cultural practices greatly improves the success of these programs. As such culturally tailored messaging creates a greater sense of connection and relevance, encouraging more meaningful connection with recovery resources and their programming.

Preferred communication messaging emerged as another central theme, with a clear preference for approaches that empower and inspire hope, rather than those that instill fear. The findings suggest a shift toward positive, strengths-based messaging that emphasizes recovery as a journey of healing and growth, grounded in the community's cultural and spiritual beliefs. This

aligns with the broader desire for recovery resources that are informative and resonate on an emotional and cultural level.

The communication preferences identified for reaching and engaging the Ojibwe community in recovery programs highlight a diverse range of modes. A preference is in-person recruitment, which is effectively supported by the distribution of flyers. These flyers are not only handed out during direct recruitment efforts but are also strategically placed in locations where they are likely to reach potential participants, such as jails, hospitals, and community colleges. This method ensures that information about recovery programs is accessible in spaces frequented by community members who may benefit most from these services.

Radio chats and educational talks are also favored communication strategies, leveraging local media and community gatherings to spread awareness and knowledge about addiction and recovery. These platforms offer a dynamic way to engage the community, providing opportunities for interaction and immediate feedback. Furthermore, word of mouth is a powerful tool within the community, harnessing the trust and existing networks of community members to share information organically.

Once individuals are engaged with recovery facilities, online tools become more relevant, with website searches serving as a primary method for accessing detailed program information and resources. This dual approach of using both traditional and digital media ensures comprehensive coverage that respects the community's preferences and maximizes the reach and impact of recovery messaging.

Peer support also proved to be invaluable in recovery programs where shared experiences resonate strongly. This support system utilizes the unique perspective of individuals who have navigated their own paths through addiction and recovery, offering guidance rooted in empathy

and shared understanding. Such peer relationships foster trust and accountability, enhancing engagement in recovery efforts. Moreover, peer support strengthens community bonds, instills hope, and builds resilience by demonstrating that recovery is both achievable and sustainable within the community. The involvement of peers in the recovery process makes it more relatable and accessible, leveraging personal triumphs and struggles to empower others.

Moreover, the findings highlight the critical role of community engagement in the development of communication strategies. By involving community members, Elders, and healthcare professionals in a collaborative process, the research ensures that the communication tools created are culturally appropriate and address the specific needs and preferences of the Ojibwe community. This collaborative approach, particularly through methods like Collaborative Creation Circles, ensures that recovery messages are authentic and empowering, reflecting the community's collective experiences and insights.

These findings offer contributions to the field of health communication, highlighting the critical importance of cultural sensitivity and community participation in crafting effective communication strategies for recovery messaging. They show the need for communication tools that are seen, heard, felt, and lived by the community members they aim to serve. This research lays the groundwork for future efforts to improve the health and recovery results of Ojibwe communities. It supports a respectful and inclusive strategy that values the distinct cultural identities and strengths of community members.

Findings in Relation to Existing Literature

The field of recovery messaging in health communication has increasingly recognized the importance of culturally responsive and empowering strategies, particularly within diverse

communities. This section explores how the findings from this dissertation align with and expand upon the existing literature on effective communication strategies in recovery programs, with a focus on the Ojibwe community. It highlights the crucial role of using empowering and hopeful communication, the necessity for diverse and accessible communication strategies, and the critical influence of cultural sensitivity in enhancing the effectiveness of recovery programs (Lefebvre et al., 2020; Skinstad, 2021). Empowering and hopeful communication strategies are highlighted as essential for enhancing motivation and engagement in recovery programs. The findings from this study confirm the literature's advocacy for positive, strengths-based approaches rather than fear-based messaging, which has been shown to foster more proactive and responsive engagement among participants (Lefebvre et al., 2020; Skinstad, 2021). Additionally, the dissertation emphasizes the importance of a varied toolkit for communication, incorporating in-person recruitment, strategic placement of flyers, and the use of radio chats and educational talks. This approach aligns with the literature on the effectiveness of utilizing multiple communication channels to ensure broad reach and deep impact within the community (Boyd et al., 2021; Venner et al., 2018).

The findings show the importance of using empowering and hopeful communication strategies, a theme that is supported by the literature review's discussion on the effectiveness of positive, strengths-based approaches. This preference for inspiring rather than fear-based messaging aligns with broader research findings that suggest such strategies enhance motivation and engagement among participants (Lefebvre et al., 2020; Skinstad, 2021).

Furthermore, the emphasis on diverse communication strategies, including in-person recruitment and the strategic placement of flyers, reflects insights from the literature on the necessity of accessible and community-integrated communication methods. The use of radio

chats, educational talks, and word of mouth as primary tools for spreading awareness and engaging the community is particularly noteworthy. This multi-modal approach aligns with the literature's assertion that varied communication channels can broaden the reach and impact of recovery programs, ensuring that messages resonate across different segments of the community (Boyd et al., 2021; Venner et al., 2018).

The findings on the role of cultural sensitivity in recovery programs for the Ojibwe community align with existing literature that highlights the importance of integrating cultural practices, symbols, and languages into recovery efforts. This literature highlights that cultural incorporation enhances the acceptance and effectiveness of these programs but also fundamentally supports the identity and social cohesion of Indigenous communities. For example, Venner et al. (2018) have demonstrated that recovery programs tailored to the cultural contexts of Indigenous groups markedly improve participation and outcomes. This aligns with findings from this study that show preference for the integration of the Ojibwe language and cultural symbols into recovery messaging can enhance program reception by Ojibwe peoples.

Further support comes from Boyd et al. (2021), who explore the effectiveness of recovery programs that include Indigenous languages and traditional practices. Their research concludes that these elements substantially increase the programs' relevance and acceptability among Indigenous participants—a conclusion that mirrors the observations regarding the Ojibwe community. Additionally, the research by Lefebvre et al. (2020) into health communication strategies show the importance of involving community members in the creation of health messages, a practice that leads to more effective and culturally congruent health communication strategies. This approach is reflected in the dissertation's methodology, which involves the Ojibwe community in the development of culturally resonant recovery messaging.

Moreover, the findings from this dissertation contribute to the discourse on cultural competence in health communication, as highlighted by Skinstad (2021) and Lefebvre et al. (2020). These studies highlight the importance of culturally sensitive approaches in reducing stigma and enhancing the delivery of health services. They advocate for the involvement of community members in developing health messages and interventions, which leads to more effective and culturally congruent health communication strategies.

The dissertation's examination of the stigma associated with addiction within the Ojibwe community offers important insights, aligning with broader research that stresses the importance of culturally sensitive approaches to stigma reduction. By focusing on empowering language and incorporating community-driven narratives, this study provides valuable strategies for addressing and mitigating the negative perceptions surrounding addiction.

Existing research, such as that by Lefebvre et al. (2020), supports the idea that stigma reduction is crucial for the success of health interventions, particularly in communities where addiction may be heavily stigmatized. The findings of this dissertation suggest that using language that emphasizes strength, recovery, and community connection can help to reframe the perception of addiction from a negative to a more constructive perspective. This approach is in line with studies that highlight the power of positive and empowering narratives in changing public attitudes and reducing stigma (Skinstad, 2021).

Participants expressed that the use of Ojibwe language and the inclusion of local stories and symbols in recovery messaging create a sense of pride and ownership, which is essential for combating stigma. For example, an Elder stated, "When we hear our language and see our symbols, it reminds us of our strength and history, not just our struggles." This aligns with Boyd

et al. (2021), who discuss how Indigenous languages and cultural practices enhance the relevance and acceptance of health interventions among Indigenous communities.

Additionally, the integration of community narratives in recovery messaging contributes to a better understanding of effective strategies for stigma reduction. By including stories of resilience and recovery from community members themselves, recovery programs can provide relatable and realistic examples of overcoming addiction. This method aligns with the research advocating for the use of personal stories as a means to humanize the issue of addiction and reduce associated stigma (Boyd et al., 2021).

Resonating with existing studies on the effectiveness of peer support, family involvement, and community-based recovery initiatives - this research emphasizes how community connections and support mechanisms can greatly enhance recovery outcomes, aligning with broader literature that points to the benefits of integrated social support in treatment programs.

Research such as that by Lefebvre et al. (2020) and Boyd et al. (2021) indicates that recovery is more successful when supported by a network of peers, family, and community members. This adds to the discourse by detailing how Ojibwe community-based recovery programs utilize local cultural practices and community gatherings to facilitate peer support, thus embedding recovery within culturally significant and familiar contexts.

This work demonstrates how peer-led initiatives incorporate the lived experiences of individuals who have successfully navigated their own recovery journeys. Peers serve as mentors and models of resilience, providing both emotional support and practical guidance crucial for long-term recovery. This mirrors findings from Lefebvre et al. (2020), who emphasize the role of peer support in enhancing the effectiveness of recovery programs by offering a sense of

community, accountability, and mutual understanding among participants. Additionally, the dissertation's focus on peer recovery aligns with Boyd et al. (2021), who note that culturally tailored peer interactions can improve engagement and outcomes in health interventions by embedding recovery programs within the cultural and social fabric of the community. This dual approach of cultural sensitivity combined with peer support effectively enriches the recovery process, reinforcing both individual and communal pathways to healing within the Ojibwe community.

Moreover, the importance of community-based recovery initiatives is distinctly outlined in this study. It reveals how these initiatives provide a supportive network that also helps integrate individuals into a positive social environment, reinforcing recovery goals. This approach corresponds with findings from Skinstad (2021), who observed that recovery programs integrated within community structures tend to be more successful due to their accessibility and relevance.

This dissertation corroborates existing research on effective recovery messaging but also contributes new insights into the application of these strategies within the Ojibwe community. The integration of empowering language, a multimodal communication strategy, and cultural sensitivity are all shown to play roles in the success of recovery initiatives. These findings reinforce the necessity of developing recovery programs that are culturally congruent and are also strongly linked with the community's social and cultural fabrics, ensuring that they are both effective and sustainable. This enriches the discourse on cultural competence in health communication, particularly within contexts for the Ojibwe community, highlighting the potential for community-driven, culturally informed approaches to enhance the public health landscape.

Interpretation of Findings

The findings from the dissertation illustrate the influence of traditional Ojibwe practices and beliefs on recovery pathways. These cultural practices, such as the use of traditional medicine, participation in spiritual rituals, and the emphasis on community and kinship ties, are essential components of the recovery process. They are not only therapeutic but also integral to the identity and resilience among the Ojibwe. The integration of these practices into recovery programs has shown positive outcomes, aligning with community values and enhancing the relevance and effectiveness of support provided.

The research provides examples of successful integration, such as recovery programs that incorporate Ojibwe language and cultural symbols, making the recovery environment more familiar and supportive for participants. Such culturally adapted interventions receive greater acceptance and participation, leading to improved recovery rates and sustained engagement with treatment programs. These examples highlight the critical role of cultural competence among healthcare providers. The findings emphasize that healthcare providers who understand and incorporate Ojibwe cultural contexts into their practice can build trust with community members, which is crucial for effective communication and increasing adherence to recovery programs.

Moreover, the approaches adopted by culturally competent healthcare providers directly influence the effectiveness of recovery messaging and the overall success of recovery programs. When providers respect Ojibwe traditions and social structures, they deliver messages that resonate with the community members' lived experiences. This alignment can enhance the relevance and impact of the messaging, leading to higher levels of program adherence and success in recovery outcomes. The evidence suggests that when recovery programs are culturally

congruent, they not only address the immediate needs of the individuals but also promote a supportive environment that sustains long-term well-being and resilience within the community.

The findings illustrate the role that community engagement and social support hold in the recovery processes within Ojibwe communities, aligning closely with Indigenous values about collective involvement and mutual assistance. These preferences are essential, reflecting principles in Indigenous standpoint theory and grounded theory that guided the research methodology and analysis. Indigenous standpoint theory is particularly beneficial for understanding how Indigenous values and community frameworks influence recovery outcomes, emphasizing the need for recovery efforts that are culturally attuned and supported by the community.

Grounded theory, employed to systematically derive conclusions from the data, facilitates the inclusion of community-centric insights into the design of recovery programs. This ensures that the programs accurately reflect and respond to the genuine needs and cultural practices of the Ojibwe community. The data indicates a preference for recovery programs that integrate communal activities and the support of an extensive social network, essential for enhancing the effectiveness of recovery outcomes.

Strong community connections and active participation in social networks, as highlighted by community members, lead to more successful recovery experiences. Programs that incorporate these elements show higher engagement rates and improved outcomes. Examples from the research include recovery initiatives that incorporate traditional ceremonies and group therapy sessions conducted by respected community Elders. These programs provide emotional and spiritual support while reinforcing cultural identity and communal responsibility, all crucial for effective recovery.

To encourage community involvement in recovery programs, it is recommended to create more opportunities for community participation and leadership within these initiatives. Allowing community members to assume roles such as mentors or group facilitators can empower individuals and strengthen community bonds. Moreover, recovery programs designed and led by community members ensure alignment with cultural practices and expectations of Ojibwe communities. Involving the community in the planning stages of recovery programs also enhances the relevance and acceptance of these initiatives, making them more effective at meeting the community's needs.

Findings demonstrate the effectiveness of culturally grounded communication strategies in reducing stigma associated with recovery from addiction within the Ojibwe community. By integrating cultural elements that resonate with community values and historical context, these communication strategies address and diminish the stigma surrounding addiction, thereby enhancing the openness and engagement of community members in discussing and seeking recovery options.

Specific strategies that have shown alignment with community preferences for addressing stigma involve the use of traditional narratives and language that reflect the community's cultural heritage and collective identity. These strategies include storytelling sessions led by Elders that incorporate traditional Ojibwe teachings and recovery stories, which educate and reinforce community bonds and shared understanding. Another effective approach has been the integration of cultural symbols and practices into public health campaigns, which helps normalize recovery and portrays it as a strength-based process supported by the community.

The implications of these findings for public health messaging and policy-making are important. By demonstrating the effectiveness of culturally informed communication strategies,

the research provides a model for how public health messages can be designed to resonate more with specific communities, particularly Indigenous populations. This approach not only improves the effectiveness of these messages in achieving their health promotion goals but also supports the broader objective of cultural preservation and respect.

Furthermore, these culturally grounded approaches have the potential to transform perceptions of addiction and recovery not just within Ojibwe communities but also in broader cultural communities. By showcasing successful strategies that respect and incorporate Indigenous knowledge and practices, public health policy can shift toward more inclusive and culturally sensitive frameworks. This shift has the potential to influence public perceptions and reduce stigma on a wider scale, encouraging a more empathetic and holistic view of addiction and recovery.

The importance of integrating cultural sensitivity, community engagement, and effective stigma reduction efforts into addiction and recovery messaging for the Ojibwe and broader Indigenous populations cannot be overstated. This dissertation highlights the role that culturally tailored messaging plays in enhancing the effectiveness of recovery programs. By ensuring that recovery messages are aligned with cultural values and community norms, these initiatives not only respect and preserve Indigenous heritage but also improve engagement and outcomes.

Cultural sensitivity is crucial in the crafting of health messages, ensuring that they are perceived as relevant and respectful. This relevance is key to enhancing receptivity and participation among community members, fostering an environment where individuals feel understood and supported. Community engagement strengthens these messaging efforts, drawing on the collective power and support inherent in Indigenous communities. This approach supports individual resilience and reinforces community cohesion, important for recovery efforts.

Stigma reduction through culturally informed messaging further amplifies the effectiveness of these programs. By addressing stigma in a way that resonates culturally, these messages break down barriers to seeking help, which is often a hurdle. Culturally resonant messaging not only educates but also changes perceptions, promoting a more compassionate and understanding view of addiction as a manageable condition rather than a personal failing.

Reflecting on the potential of these findings to influence future research, policy, and practice, there is a profound opportunity to expand the application of culturally resonant messaging within recovery programs. Future research should continue to explore the impact of such messaging on recovery rates and long-term outcomes, providing data to support policy changes and the broader adoption of culturally informed practices. Policy makers are encouraged to recognize the efficacy of culturally tailored messaging and to support initiatives that integrate these practices.

In practice, the implementation of recovery programs that incorporate these findings can lead to more effective engagement for recovery outcomes. There is a clear need for continued investment in recovery programs that respect and utilize the cultural values of Indigenous communities. Such programs serve the immediate needs of individuals and contribute to the health and vitality of entire communities, marking a step forward in public health and wellness.

Implications for Theory and Practice

The findings of this study expand existing theoretical frameworks in health communication by integrating the specific cultural context of the Ojibwe community and their unique recovery messaging needs. Using Grounded Theory and Indigenous Standpoint Theory, this research respects and reflects Indigenous epistemologies and ontologies, challenging and

extending current understandings of recovery communication by incorporating cultural resilience and community-specific strategies.

Through grounded analysis of interview data and collaborative circles, the research reveals the critical role of culturally informed recovery strategies, emphasizing the need for health communication models to adapt and include the cultural values and traditional practices of Indigenous communities. This alignment improves the efficacy of recovery programs, offering a stronger platform for engagement and sustained recovery among the Ojibwe. Insights from this study suggest that recovery is not just an individual journey but a community process that is enhanced by culturally resonant support systems.

Moreover, this dissertation revises the depth of peer support systems within Indigenous communities, showing how these networks function as support mechanisms and as essential components of the healing process. By doing so, it advocates for a broader interpretation of recovery models that consider social and cultural dimensions as essential elements of health communication strategies. This approach calls for a shift toward recovery programs that are culturally tailored and actively involve community members in their development and implementation, ensuring that they are relevant and respectful of Ojibwe sovereignty and self-determination.

The implications of this study for both theory and practice offer a pathway for integrating Indigenous knowledge and practices into health communication theories. It encourages scholars and practitioners to consider more inclusive models that genuinely reflect the diversity of communities they aim to serve, particularly in contexts of health crises like the opioid epidemic affecting the Ojibwe and other Indigenous peoples. By doing so, it contributes to the broader

discourse on health equity, suggesting that truly effective recovery strategies and messaging should be rooted in an understanding and respect for cultural identities and values.

This study's exploration of cultural resilience through the lens of Indigenous Standpoint Theory illustrates how cultural practices, beliefs, and community solidarity are essential resilience factors in recovery processes within the Ojibwe community. Cultural practices such as storytelling, ceremonies, and the revitalization of language, strengthen individual and collective identities, supporting recovery efforts. These elements reinforce the community's connection to their heritage, providing spiritual strength and a structure for addressing substance misuse (Foley, 2007).

Beliefs rooted in Ojibwe traditions contribute to resilience by portraying recovery not just as a physical healing process, but as a restoration of balance and wellness across spiritual, emotional, and community dimensions. This holistic view of health, inherent in many Indigenous paradigms, contrasts with conventional health frameworks that often focus on the physical aspects of recovery. The Indigenous health paradigm considers wellness as a balance among various life aspects, including connections with the land, community, and ancestors, all regarded as sources of strength (Moreton-Robinson, 2013).

Community solidarity is particularly emphasized as a resilience factor. Findings from the study show that recovery is supported through communal activities and collective participation in cultural and ceremonial practices. This solidarity is about mutual support and reinforces a shared dedication to the values and wellness of the community. Such participation helps individuals in recovery feel recognized and valued within their social context, enhancing their sense of belonging and purpose (Nakata, 2007).

These findings also complicate the understanding of resilience in the context of Indigenous health and wellness. While affirming the importance of integrating cultural practices and community engagement into recovery programs, they also highlight the challenges communities face in maintaining traditional practices amidst modern pressures and historical traumas. The resilience of the community is challenged by external factors such as economic hardships, social discrimination, and the impacts of colonization, which can diminish cultural identity and community cohesion (Smith, 2012).

Furthermore, the study examines how resilience is conceptualized and operationalized within the community. It questions whether resilience should be viewed just as the ability to recover from adversity, suggesting instead that it involves proactive engagement with cultural renewal and the reclamation of Indigenous identity as essential to wellness. This perspective invites broader reflection on how health interventions can react and proactively meet the needs of Indigenous communities, creating environments where cultural practices are preserved and promoted (Foley, 2007; Moreton-Robinson, 2013).

This study aligns with Indigenous Standpoint Theory by illustrating the role of Indigenous knowledge and practices in the discourse on addiction and recovery messaging. Indigenous Standpoint Theory advocates for research grounded in the lived experiences and cultural frameworks of Indigenous peoples, providing essential perspectives that challenge dominant narrative structures (Foley, 2007). This theory guides the study's focus on how recovery messages are created and received within the Ojibwe community, emphasizing the importance of language, cultural symbols, and collective narratives in promoting health and wellness.

Grounded Theory has been important in revealing culturally specific insights into communication. This methodology facilitates the emergence of themes from qualitative data, such as interviews with community members and health practitioners, focusing on how messages about recovery are crafted and perceived within a cultural context (Chun Tie, Birks, & Francis, 2019). Using this approach, the study identifies the central role of traditional communication methods, like storytelling and ceremonial dialogue, in supporting recovery by strengthening community bonds and affirming cultural identity.

The findings suggest that effective recovery messaging must resonate with cultural values and practices to be impactful. Messages incorporating traditional languages, metaphors related to healing, and narratives of community resilience engage more deeply with community members, enhancing their involvement with recovery programs. This strategy respects the cultural dimensions of communication and improves the relevance and receptivity of health messages within the community.

Integrating Indigenous Standpoint Theory with Grounded Theory to examine recovery messaging offers a comprehensive view of how Indigenous knowledge systems can influence health communication. This research highlights the need for developing recovery messaging strategies that are informative and culturally consonant, ensuring they respect and reflect the values and experiences of Indigenous communities.

The research highlights the critical need to develop recovery materials that align culturally, emphasizing the integration of traditional symbols, narratives, and languages specific to the Ojibwe community. Including these elements enhances the effectiveness of recovery messages, making them resonate more deeply and meaningfully with community members.

Traditional symbols and narratives connect the content to the community's values and history, potentially serving as powerful motivational tools within the recovery process.

Incorporating traditional languages into recovery materials strengthens this approach by ensuring that messages are not only understood intellectually but also felt emotionally. Language carries layers of cultural meaning and values that deeply resonate, bridging clinical advice and cultural practices, and making health messages more relatable and accessible.

This research also stresses the importance of co-design processes that include community members in the development of these materials. Co-design ensures that the materials are culturally appropriate and meet the specific needs and preferences of the community. This collaborative approach is crucial for the efficacy of recovery programs, as it empowers community members by giving them an active role in creating materials designed to support them. Participatory practices increase the likelihood that recovery materials will be accepted and utilized, leading to improved health outcomes.

By involving community members in the development process, the materials not only gain cultural legitimacy but also become more tailored to address the unique challenges faced by the community. This collaborative method enhances the trust and credibility of the recovery programs and fosters a stronger commitment to the recovery process among community members. Additionally, this direct and meaningful involvement strengthens communal bonds and reinforces shared responsibility for health and wellness, which are central to the Ojibwe way of life.

The findings from this study stress the importance of creating interventions that are culturally sensitive and rooted in the lived experiences of Indigenous peoples in recovery. These interventions should move beyond typical recovery frameworks by integrating culturally-specific

elements that reflect the unique values, practices, and historical contexts of Indigenous communities (Foley, 2007).

Engaging the community in the design and implementation of these interventions is crucial. This involves collaboration with local leaders, Elders, and community members who have direct experiences with addiction and recovery. By incorporating traditional healing practices—such as the use of ceremonial rituals, herbal medicines, and community gatherings—these interventions align with the spiritual and cultural practices of the community, thus enhancing their relevance and effectiveness (Moreton-Robinson, 2013).

Such culturally tailored interventions are likely to be more successful because they resonate with the community's own healing traditions and are perceived as legitimate and respectful methods of addressing health issues. This cultural congruence helps to secure community buy-in, which is essential for the success and sustainability of recovery programs (Nakata, 2007).

Developing effective communication strategies for addiction recovery in Indigenous communities requires a deep understanding of the community's communication norms, values, and channels. Insights gathered from interviews with various stakeholders, including healthcare providers, community Elders, and people in recovery, are invaluable in shaping these strategies. They provide a diverse range of perspectives that highlight different facets of the addiction and recovery experience within the community (Chun Tie, Birks, & Francis, 2019).

One effective approach is to create communication strategies that are informative, empowering, and motivational. This involves framing messages in a way that highlights stories of recovery and resilience rather than focusing solely on the perils of addiction. Such positive framing can inspire hope and motivate engagement with recovery programs. It's also important

to ensure that these messages are disseminated through channels that are widely accepted and trusted by the community, such as local radio stations, community gatherings and spaces, and through the endorsement of respected community members (Smith, 2012).

Moreover, incorporating the community's language in communication materials ensures that the messages are clearly indicated for the community, understood, and that they resonate with the intended audience. Language is a powerful tool for connection and can greatly enhance the emotional impact of recovery messages, making them more compelling and persuasive. The integration of culturally specific symbols and metaphors can also enrich the messages, making them more relatable and impactful without relying on language. This is a way to reach individuals who may not be familiar with (all or some) of their communities' language.

By drawing on comprehensive stakeholder insights and respecting the unique cultural context of the community, the development of communication strategies in addiction recovery can be improved. This tailored approach enhances the clarity and reach of recovery messages and strengthens the overall community engagement and support for individuals in their recovery journey.

This study enhances our understanding of recovery communication by integrating culturally informed approaches within Ojibwe communities. Utilizing Grounded Theory and Indigenous Standpoint Theory, the research respects and reflects Indigenous knowledge systems, challenging and expanding existing health communication models. The findings emphasize the necessity of incorporating cultural values and traditional practices into recovery strategies, demonstrating that recovery extends beyond the individual to encompass community-wide engagement and support.

The research demonstrates that recovery messaging is not solely an individual-focused endeavor but a community-centric process that thrives on culturally resonant support systems. Traditional practices such as storytelling, ceremonies, and language revitalization play essential roles in reinforcing community bonds and fostering a supportive environment for recovery. These cultural elements not only convey messages in ways that are meaningful and respectful to the community but also strengthen the communal fabric, essential for collective healing and resilience.

The implications for theory and practice are clear: there is a need for recovery messaging to be crafted with cultural sensitivity and active community involvement. This approach ensures that messages are heard and felt, resonating with the community's values and experiences, and supporting their journey toward recovery.

This study calls on researchers, practitioners, and policymakers to prioritize cultural relevance and community engagement in developing and implementing recovery messaging strategies. By embracing and integrating Indigenous knowledge and practices, recovery messaging can be transformed to serve as a tool for information dissemination and as a powerful catalyst for healing and empowerment within Indigenous communities. As we move forward, continued exploration, validation, and promotion of culturally informed messaging approaches will be essential in advancing health equity and enhancing the efficacy of recovery programs in Indigenous settings.

Limitations and Future Research

The research conducted in Northern Minnesota focused on Ojibwe community members' preferences for recovery messaging, employing a qualitative approach that integrated Indigenous

Standpoint Theory and Grounded Theory. The study faces limitations due to its sample size and composition. The semi-structured interviews involved a select group of 24 participants, including four clinical staff, two community Elders, and 18 Ojibwe individuals personally affected by substance use disorder. While this provided rich, in-depth data, the relatively small and specific sample limits the generalizability of the findings. There's a bias due to the singular representation of certain sub-groups within the broader Native American and Ojibwe populations, such as age, socioeconomic, and geographic diversity, which may not have been fully captured.

These limitations raise concerns about the extent to which the findings can be applied to other Indigenous communities. The sample's composition also may not accurately reflect the full spectrum of experiences and views within Ojibwe communities as well as in broader Indigenous contexts, potentially affecting the validity and applicability of the study's conclusions outside the specific community studied.

The geographic scope of the study is a potential limitation. The research was localized to the Ojibwe community in Northern Minnesota, where specific cultural, social, and environmental factors influence recovery messaging preferences and the efficacy of community engagement strategies. This geographic limitation suggests that the findings may not directly transfer to other communities with different cultural backgrounds or regional characteristics.

These geographic constraints limit the findings' relevance and applicability to other Indigenous populations, requiring adjustments or additional research to tailor recovery messaging strategies to different communities. Future research should expand to include a variety of communities across specific regions to enhance the diversity of cultural perspectives and experiences captured, thereby improving the robustness and applicability of the research findings to broader Indigenous communities.

The study's reliance on qualitative data, while providing rich and detailed insights into the perspectives of the Ojibwe community, introduces methodological limitations that affect the interpretation and broader application of its findings. Qualitative research, as used in this study through semi-structured interviews and collaborative creation circles, excels in exploring in-depth personal and cultural dynamics but does not offer the broader information that quantitative methods provide (Chun Tie, Birks, & Francis, 2019). This reliance on qualitative methods restricts the ability to extrapolate findings to all Ojibwe individuals, as the collected data represent a deep but narrow view focused on individual experiences and perceptions.

Additionally, potential biases in data collection processes must be considered. The subjective nature of qualitative inquiry can introduce variations in how data are collected, interpreted, and presented. Factors such as the interviewer's perspective, the specific phrasing of questions, and the participants' perceptions of the research could influence the responses, possibly leading to biased data or interpretations (Chun Tie, Birks, & Francis, 2019).

Despite these limitations, the study's focus on the Ojibwe community is both its strength and its specialization. While this focus provides detailed insights into a specific cultural context, it also means that the findings are particularly tailored to that setting and may not directly transfer to other contexts without consideration of their unique cultural, social, and environmental circumstances (Foley, 2007).

To address these methodological constraints in future research, it would be beneficial to employ mixed-methods approaches that combine qualitative depth with quantitative breadth. This would allow researchers to map the extent of observed phenomena more comprehensively and validate qualitative findings with empirical data. Expanding the scope of research to include diverse segments within the Ojibwe community including communities in Canada and other

Indigenous groups in larger regions such as the Great Lakes could also help to enhance the generalizability and applicability of the findings within specific Indigenous communities (Foley, 2007).

Future longitudinal research is essential for a deeper understanding of the recovery journey over time among Indigenous individuals. I recommend that future studies track participants over extended periods to observe the sustainability of recovery outcomes and the long-term impacts of culturally sensitive interventions and their messaging modes and methods. These studies should aim to measure various outcomes such as relapse rates, psychological well-being, community integration, and the revitalization of cultural practices. By documenting changes over time, researchers can identify which aspects of culturally tailored programs are most effective and how they contribute to sustained recovery. Additionally, such research could explore intergenerational effects, examining how recovery impacts families and future generations within these communities (Smith, 2012). This approach will provide valuable insights into the long-term benefits and potential areas for improvement in recovery strategies tailored to Indigenous populations.

Comparative studies would also be helpful for understanding how addiction and recovery messaging dynamics operate across different cultural and ethnic groups. I advocate for research that compares the impacts of addiction and recovery processes between Indigenous communities and other racial or ethnic groups. This analysis should focus on identifying unique challenges and strengths within Indigenous communities that might influence recovery outcomes differently from those in non-Indigenous contexts (Chun Tie, Birks, & Francis, 2019). Then inquire how these recovery spaces communicate to their audiences and why.

Furthermore, it is beneficial to conduct comparative analyses within various Indigenous communities to evaluate the effectiveness of different culturally tailored intervention programs. Such studies would involve multiple communities that vary in geographical, cultural, and social attributes to determine how these variables affect the success of recovery interventions. By comparing these programs, researchers can identify best practices and elements that are universally effective, as well as those that should be customized to fit specific community needs (Foley, 2007).

A Need for Future Research

This dissertation highlights the critical need for recovery messaging that is culturally sensitive and closely engaged with community practices, especially within Ojibwe and other Indigenous groups in the United States. The research clearly shows a gap between the existing approaches in recovery messaging and the specific needs and preferences expressed by Ojibwe community members. This gap points to a general neglect in mainstream recovery programs to include culturally specific elements that resonate with Indigenous values and healing practices.

The findings reveal that the Ojibwe community prefers recovery messages that reflect their cultural narratives and are intertwined with communal and spiritual aspects of healing. This alignment not only makes the messages more relevant but also improves engagement and effectiveness of recovery programming. Mainstream recovery messaging often lacks this cultural connection, leading to disengagement among Indigenous populations who do not see their cultural identity and communal values reflected.

Therefore, there is an urgent need for a change in how recovery programs are designed and communicated. This change should involve a model that genuinely incorporates Indigenous

knowledge, traditions, and communication preferences. Such an approach would not only fill the current gap but also empower Indigenous communities by affirming their cultural identities and supporting their unique pathways to recovery. This study calls for public health stakeholders, community leaders, and policymakers to rethink and realign recovery efforts with the cultural realities and preferences of Indigenous communities. It is time for committed action to ensure that recovery messaging is as culturally resonant and effective as it is respectful and inclusive.

Building on the findings of this research, it is crucial for researchers to continue exploring culturally specific recovery strategies. There is a substantial need for more qualitative and quantitative studies that look into the nuances of effective communication and intervention strategies within Indigenous populations in the United States. Such studies are essential to expand our knowledge base, enabling the development of recovery programs that are truly aligned with the cultural identities and healing traditions of Indigenous communities. This continued inquiry will not only enhance the efficacy of interventions but also contribute to the broader academic (and applied) discourse on culturally competent healthcare practices.

In addition to further exploration, this research strongly advocates for the adoption of collaborative research models. These models should actively involve members of Indigenous communities in the research process, thereby ensuring that the studies are informed by the lived experiences and cultural knowledge of those communities. Participatory research approaches are crucial for creating genuine engagement and trust between researchers and community members. By integrating Indigenous perspectives at every stage of the research process, from design to implementation and evaluation, these models generate results that are scientifically sound and culturally relevant. This approach promotes a more ethical, respectful, and effective way to address the unique needs and challenges faced by Indigenous community members in recovery.

Conclusion

This dissertation has illuminated effective communication strategies that resonate with the Ojibwe community, particularly in the context of recovery messaging. It has revealed critical insights into the community's preferences for messaging, which emphasize empowerment and hope, offering an alternative to fear-based approaches. These insights stress the importance of employing mediums of communication that are culturally consonant and physically accessible, such as in-person discussions, radio chats, and strategically placed flyers.

Additionally, the research highlights how the integration of cultural symbols, languages, and narratives into recovery messaging not only respect and preserve Ojibwe cultural identity but also can enhance the engagement and effectiveness of communications. By integrating traditional elements into modern recovery strategies, the dissertation highlights the role of cultural respect and sensitivity in developing communication approaches that are heard and felt by the community. This integration acts as a bridge, connecting the Ojibwe community's heritage with contemporary health interventions, thereby creating a more inclusive and supportive recovery environment. The study has documented that recovery messages that integrate aspects such as Ojibwe language, storytelling, and spiritual rituals resonate more with the community, facilitating a more engaged and responsive audience.

This contributes to the understanding of the role that community engagement and social support play in creating environments conducive to recovery. It demonstrates how incorporating communal narratives and involving community members, including Elders and healthcare professionals, in the development of recovery messaging can enhance the effectiveness of these

interventions. The research shows that recovery programs integrated with the community's cultural and social structure are more likely to succeed.

The findings stress the importance of basing recovery interventions on the principles of community solidarity and active participation. Engaging the Ojibwe community in the development and execution of recovery strategies ensures cultural relevance and promotes empowerment. This involvement creates a sense of ownership and pride among community members, which is crucial for sustaining recovery outcomes over time.

Furthermore, the dissertation highlights how community-based support systems, such as peer networks and Elder-led discussions, provide essential social support necessary to sustain recovery efforts. These systems reinforce community bonds which are vital for supporting individuals on their recovery journeys. By leveraging community resources and capabilities, these interventions can lead to more resilient and lasting recovery outcomes.

This dissertation reinforces the crucial need for an integrated approach that merges community engagement, cultural sensitivity, and evidence-based practices in addressing recovery messaging within Indigenous communities. The research emphasizes that such strategies are necessary to create interventions that are effective and respect the unique cultural contexts of these communities.

The findings point to the limitations of generic, one-size-fits-all solutions in recovery messaging, especially when addressing diverse populations such as Indigenous communities. The study highlights the importance of developing customized strategies that are finely tuned to the specific cultural norms and values of these groups. By incorporating cultural elements—from language and symbols to community values and traditional practices—into health messaging,

these strategies build a deeper connection with the audience, enhancing receptivity and the overall impact.

Additionally, the research underlines how culturally sensitive approaches not only improve the effectiveness of interventions but also promote community empowerment by reinforcing cultural identity and pride. This integrated approach, which honors and leverages the cultural strengths of Indigenous communities, is important for creating trust and cooperation between healthcare providers and community members, thereby boosting the success of recovery efforts.

The necessity to move away from broad-brush methods to embrace more refined and culturally informed strategies is a key theme of this dissertation. Such approaches are not just recommended but essential for advancing health communication and public health interventions targeting Indigenous populations, ensuring that recovery messages are heard, resonant, and meaningful to the communities they are meant to serve.

This analysis highlights several opportunities for advancing research on recovery intervention and communication strategies within diverse Indigenous populations. It points to the necessity for further studies that examine the complexities and effectiveness of culturally tailored recovery messaging across various Indigenous groups. Future research should investigate how cultural distinctions impact the success of intervention strategies, aiming to broaden our understanding and identify effective approaches that resonate across different communities.

There is also a call for ongoing collaboration between researchers, community leaders, healthcare professionals, and policymakers. Such cooperative efforts are crucial to building upon the groundwork established by this dissertation. By uniting these diverse perspectives, the development and implementation of recovery messaging can be enhanced, ensuring that

interventions are both evidence-based and rooted in the cultural realities of the communities they aim to support.

Further, promoting interdisciplinary research teams could introduce new insights and methods into the study of addiction recovery messaging within Indigenous populations. These teams are well-positioned to apply advanced research techniques and technologies that can more accurately assess the efficacy of culturally informed interventions.

In summary, the proposed future directions aim to widen the research scope, increase community involvement, and refine recovery messaging strategies. This approach is intended to contribute to more effective and culturally sensitive addiction recovery interventions for Indigenous populations, aligning scientific inquiry with community-based knowledge and practices.

Reflecting on this research journey, it has enhanced my understanding of the needs and challenges Indigenous communities face in recovery - as a whole. This dissertation has not only highlighted the complexities involved in creating effective recovery messaging but also demonstrated the potential impact of culturally sensitive and community-engaged approaches. The insights gained emphasize the need for communication strategies that align with the cultural and social fabrics of Indigenous populations, which can lead to better engagement and more sustainable recovery outcomes.

This work brings hope that with the right approaches, substantial progress can be made in addressing this critical public health issue. It shows how blending traditional ways of knowing with modern health practices can lead to more respectful and effective health interventions. The potential for these culturally attuned strategies to enhance the well-being of many is significant, offering a pathway that respects cultural identities while tackling health challenges.

I am grateful to all the individuals who generously shared their experiences and insights with me throughout this project. Their willingness to open up about their personal journeys and provide such deep, detailed perspectives has been invaluable. I appreciate the time, energy, and genuine presence each person devoted, which has shaped the outcomes of this research.

Additionally, my gratitude extends to my mentors and colleagues, whose guidance and expertise were crucial in shaping this study. Their knowledge and critical insights provided a solid foundation from which this work could evolve. Their support proved indispensable, not only in navigating the technical aspects of this project but also in offering moral and intellectual encouragement throughout the process (because the Creator knew I needed each and every one of you).

Finally, I acknowledge the collective effort of everyone involved in this research, including community leaders and healthcare professionals. Their collaboration and dedication have been essential in enhancing our understanding and in developing effective communication strategies. I express my heartfelt gratitude to the Elders, whose involvement in this project was an honor. Their active participation and meaningful discussions were critical in shaping every facet of messaging, ensuring it truly reflected and conveyed the authentic voice and traditions of Ojibwe peoples. Their guidance was important in linking traditional knowledge with modern communication efforts, enriching this work with insights that only they could provide.

Chi-miigwetch bizindawiyeg (thank you very much to everyone who listened).

APPENDICES

Informed Consent

Researcher: Nii Mahliaire, Doctoral Candidate, University of Oregon

Study: Minobimaadizi: Culturally Responsive Health Communication in Ojibwe Communities

Introduction

We are invited to join a study exploring how to share messages about opioid use disorder (OUD) recovery resources within Ojibwe communities in northern Minnesota. This study aims to find the most impactful ways to reach and engage the Ojibwe community, while involving family in the process. Please review this document thoroughly before deciding to participate.

Purpose of the Study

The goal of this study seeks effective communication modes/methods for sharing information about opioid use disorder recovery resources within Indigenous communities in northern Minnesota. Aiming to understand the elements that make communication strategies effective for conveying health messages about opioid use disorder recovery and treatment choices.

Study Procedures

Should you agree to take part, you will have a one-on-one interview with the researcher, Nii Mahliaire. This interview will last anywhere from 45 to 60 minutes, will be audio-recorded for accuracy and can take place in person, over a call, or via a video conferencing platform like Zoom. We'll explore your views and experiences on the best ways to share information about opioid use disorder recovery resources within your community through a series of open-ended questions.

Risks and Discomforts

Discussing personal experiences with opioid use disorder or its community impact might stir minor emotional discomfort. Feel free to skip any question that unsettles you. Also, you may exit the study anytime without any repercussions.

Benefits

While there may not be direct benefits to you, your input could contribute to enhancing how information on opioid use disorder recovery resources is shared within Indigenous communities moving forward.

Confidentiality

We prioritize your confidentiality. Any identifying details will be detached from the interview transcripts. Only Nii Mahliaire will have access to the secure storage of audio recordings and transcripts. Although study findings may be shared publicly or at professional gatherings, your identity will remain undisclosed.

Voluntary Participation

Your engagement in this study is entirely voluntary. Feel free to opt-out or withdraw at any stage without any penalty or loss. Should you withdraw, all your provided data till that point will be erased.

Contact Information

If you have any questions or concerns about the study, you may contact Nii Mahliaire at aricam@uoregon.edu.

Why oral consent?

Considering the Ojibwe community's comfort and traditions, I am using an oral consent method for this study. This friendly approach lets us discuss the study details verbally, making it easier for you to understand and decide on participation, while respecting cultural norms.

Consent

If you agree to participate in this study, please confirm your understanding of the provided information by reading the following statement at the start of the audio recording:

"I have read the consent form and I agree to participate in this study."

Semi-Structured Interview Questions

Interview Guide - 30 mins to 1 hour interviews

1. Have you read the consent form, and do you agree to participate?
2. What is the brochure telling you? (Give participants time to look it over and answer)
3. How do you usually see information like this?
4. Who tells you about this kind of information? (Resources, education, etc.)
5. How does the brochure make you feel?
 - a. What do you like about the brochure?
 - b. What do you dislike/what could be better?
6. After reading this brochure how likely are you to tell people about it?
7. How could this brochure “speak to you” or better represent you?
8. Does it represent your cultural values in any way? How or why not?
 - a. Do you find the use of cultural symbols, imagery, and language respectful? Are there specific elements you would add or change?
9. How did you hear about this place?

Addiction Treatment Center: Creation Circles

We're diving into a hands-on creative task. We want you to whip up a flyer or brochure for our treatment center, one that catches your eye and makes you stop. We're looking for something that feels authentic, talks your language, and shows respect for diverse cultural backgrounds.

Objectives

- Craft a flyer or brochure that grabs attention and feels real.
- Celebrate diverse cultures, including, but not limited to, Ojibwe culture.
- Use language that's down-to-earth and resonates with you.
- Aim to create something that other people would recognize and connect with too in a public setting.

Instructions

- What's the Buzz?: Consider what makes this place tick for you. Highlight the stuff that you think is cool and beneficial.
- Talk the Talk: Use words that resonate with you, the lingo you and your friends would use. Or any other slang that feels real. Always remember to be respectful with your word choices.
- Culture Vibes: This is your chance to honor the diverse cultures that make up our community.
- If you're drawn to Ojibwe culture or any other, feel free to incorporate elements like language, symbols, art, and patterns into your design.
- Get Crafty: Use the paper and art materials provided to bring your flyer or brochure to life. You don't need any tech, just your hands, your creativity, and your passion!
- Time Check: You've got 1 hour to roll with this. Don't stress over the clock though. This is all about the ideas, not a race to perfection.
- Show and Tell: Get ready to show off your creation and share why you made the choices you did. How does your design reach out to you and the community?

What We're Looking For

- A flyer that shouts out what our center is all about.
- A genuine celebration of diverse cultures and heritage.
- Down-to-earth language and terminology that hits home.
- A design that's eye-catching and gets the message across.

Codebook

Messaging Preferences

- Code: Messaging_Preferences
 - Definition: Preferences for types of messages (e.g., tone, style, content) in recovery program materials.
 - Rationale: Identifies the specific messaging characteristics that resonate with community members.
 - Examples: Positive vs. negative framing, success stories, holistic vs. clinical approaches.
 - Inclusion Criteria: Direct mentions of preferred message types, descriptions of effective messaging seen in other contexts, suggestions for ideal messaging.
 - Exclusion Criteria: General discussions on communication that do not relate to recovery program messaging.

Communication Channels

- Code: Communication_Channels
 - Definition: Preferred methods for receiving recovery program information (e.g., digital, print, community meetings).
 - Rationale: Aims to identify the most effective platforms for disseminating recovery messages.
 - Examples: Social media, brochures, word-of-mouth, community gatherings.
 - Inclusion Criteria: Preferences for specific communication methods, successful outreach examples, critiques of current methods.
 - Exclusion Criteria: General discussions on communication technologies not related to recovery information dissemination.

Visual and Design Preferences

- Code: Visual_Design_Preferences
 - Definition: Preferences for the visual and design aspects of recovery program materials.
 - Rationale: Understands the impact of visual aesthetics and design on the effectiveness of messaging.
 - Examples: Color schemes, imagery use (e.g., nature, community symbols), layout simplicity.
 - Inclusion Criteria: Direct mentions of visual or design elements that enhance message reception, suggestions for design improvements.
 - Exclusion Criteria: General discussions on art or design not related to recovery program materials.

Cultural Relevance

- Code: Cultural_Relevance
 - Definition: The importance of cultural elements in recovery messaging, including traditional practices, languages, and symbols.
 - Rationale: Highlights the critical role of cultural sensitivity and appropriateness in messaging to enhance engagement.

- Examples: Use of Ojibwe language, references to traditional ceremonies, incorporation of cultural symbols like the medicine wheel.
- Inclusion Criteria: Mentions of cultural practices, discussions on the significance of cultural identity in recovery, examples of culturally relevant messages.
- Exclusion Criteria: General mentions of culture not connected to recovery messaging.

Community Narratives

- Code: Community_Narratives
 - Definition: Stories and narratives shared by community members about addiction and recovery.
 - Rationale: Provides insight into the shared experiences and stories that could inform effective messaging.
 - Examples: Personal recovery stories, community challenges with addiction, success stories.
 - Inclusion Criteria: Narratives that highlight experiences with substance use disorder and recovery, both personal and observed.
 - Exclusion Criteria: Stories not related to addiction or recovery.

Empowerment and Hope

- Code: Empowerment_Hope
 - Definition: Elements of messaging that inspire hope, empowerment, and motivation in the recovery journey.
 - Rationale: Pinpoints the tone and content that can motivate individuals to engage with recovery resources.
 - Examples: Success stories, empowerment language, focus on recovery possibilities.
 - Inclusion Criteria: Messages that are seen as uplifting, motivational narratives, language that conveys hope and empowerment.
 - Exclusion Criteria: Messages that induce fear, shame, or hopelessness.

Stigma and Language

- Code: Stigma_Language
 - Definition: Addresses the impact of social stigma and the power of language on recovery, highlighting non-stigmatizing terminology.
 - Rationale: Highlights how societal perceptions and language choices influence individual recovery journeys, emphasizing the need for compassionate, supportive narratives and language.
 - Examples: Discussions on the effects of terms like "addict," advocacy for terms such as "person with a substance use disorder."
 - Inclusion Criteria: Mentions of stigmatizing language, discussions advocating for empowering terminology, reflections on the impact of societal perceptions.
 - Exclusion Criteria: General discussions on communication or language that do not directly relate to recovery or the experience of stigma.

Misinformation and Accurate Information

- Code: Misinformation_AccurateInfo
 - Definition: Encompasses discussions around the impact of misinformation in addiction recovery education and the emphasis on the necessity for accurate, clear information in recovery program messaging.
 - Rationale: Identifies how misinformation affects community engagement and trust in recovery resources and underscores the community's call for reliable, evidence-based messaging.
 - Examples: Criticisms of drug education inaccuracies, discussions on the importance of precise language in describing addiction, suggestions for enhancing message accuracy.
 - Inclusion Criteria: Discussions highlighting worries about false information in messages about recovery. Calls for sharing information that is factual and scientifically verified.
 - Exclusion Criteria: Wide-ranging criticisms of educational methods that don't directly tie to addiction recovery. Ways of spreading information that don't focus on ensuring truthfulness or combating false information in recovery discussions.

Education and Awareness

- Code: Access_Awareness
 - Definition: The extent to which potential clients are informed about the treatment center, services, and information about use.
 - Rationale: Assesses the effectiveness of outreach efforts and identifies opportunities for improving awareness among the target population.
 - Examples: First contact stories, discussions on community knowledge of the center.
 - Inclusion Criteria: Mentions of how individuals learn about the center and the methods used for outreach.
 - Exclusion Criteria: Detailed discussions of treatment modalities not related to outreach or awareness efforts.

Cultural Foundations in Recovery

- Code: Cultural_Sensitivity_Integration
 - Definition: The integration and respect for Indigenous cultural practices, values, and symbols within the recovery process.
 - Rationale: To highlight the importance of culturally relevant care in supporting the healing journey of Indigenous clients.
 - Examples: Integration of smudging ceremonies, beadwork sessions, and the use of Indigenous languages within treatment programs.
 - Inclusion Criteria: References to specific cultural practices, discussions on the importance of cultural relevance in treatment.
 - Exclusion Criteria: General mentions of therapy that do not specifically incorporate or acknowledge Indigenous cultural practices.
- Code: Cultural_Restoration_Identity
 - Definition: Efforts aimed at reviving and reinforcing Indigenous identity through traditional practices, ceremonies, and language learning.

- Rationale: Emphasizes the pivotal role of cultural heritage in fostering a sense of belonging and identity, essential for recovery.
- Examples: Participation in pipe ceremonies, language classes, and traditional crafting sessions like drum making.
- Inclusion Criteria: Activities and initiatives focused on preserving and practicing Indigenous traditions and languages.
- Exclusion Criteria: Non-Indigenous cultural activities or therapeutic activities not connected to cultural restoration.

Community and Social Dimensions of Recovery

- Code: Community_Social_Recovery
 - Definition: Focuses on the support structure provided by the community, including peer support, mentorship by Elders and former clients, and the building of recovery-oriented communities.
 - Rationale: Emphasizes the critical role of communal relationships and social networks in supporting recovery, highlighting the value of shared experiences and communal resilience.
 - Examples: Peer-led support groups, Elder-guided cultural teachings, community recovery events.
 - Inclusion Criteria: Narratives of community support, discussions of social support networks, descriptions of community-building efforts.
 - Exclusion Criteria: Individual recovery strategies or professional support mechanisms without a community or cultural component.

Challenges and Barriers to Recovery

- Code: Recovery_Challenges_Barriers
 - Definition: Identifies external and internal obstacles to the recovery process, including systemic challenges, personal struggles, and the diversity of recovery experiences.
 - Rationale: Offers insights into the complexities of the recovery journey, emphasizing the need for addressing these barriers to facilitate more effective recovery outcomes.
 - Examples: Accounts of encountering systemic barriers, personal narratives of overcoming addiction-related challenges, discussions on the importance of recognizing diverse recovery paths.
 - Inclusion Criteria: Specific mentions of challenges faced during recovery, discussions highlighting the diversity of recovery experiences.
 - Exclusion Criteria: Broad or theoretical discussions on addiction that do not directly address specific obstacles or challenges in recovery.

Healing and Personal Transformation

- Code: Healing_Personal_Transformation
 - Definition: Captures the healing journey through nature, spirituality, personal transformation processes, and the importance of forgiveness in recovery.

- Rationale: Reflects the therapeutic benefits of engaging with the natural world and spiritual practices, and the transformative power of forgiveness and personal growth in overcoming substance use disorder.
- Examples: Participation in outdoor spiritual ceremonies, narratives of personal breakthroughs in recovery, accounts of forgiving oneself or others.
- Inclusion Criteria: Descriptions of outdoor healing practices, personal stories of transformation, discussions around the theme of forgiveness.
- Exclusion Criteria: General recovery activities or therapies that do not involve a clear connection to nature, spirituality, or the process of personal transformation and forgiveness.

Future Directions and Expansion

- Code: Future Direction_Expansion
 - Definition: Plans and initiatives aimed at broadening the center's services and capacity, including new programs and facilities.
 - Rationale: Highlights the center's commitment to addressing unmet needs and enhancing support for clients through various recovery stages.
 - Examples: Strategic planning for establishing a detox center or transitional housing.
 - Inclusion Criteria: Detailed discussions on specific future projects and expansions.
 - Exclusion Criteria: Vague aspirations or goals without concrete plans for implementation.

Co-design Materials

Figure 1a

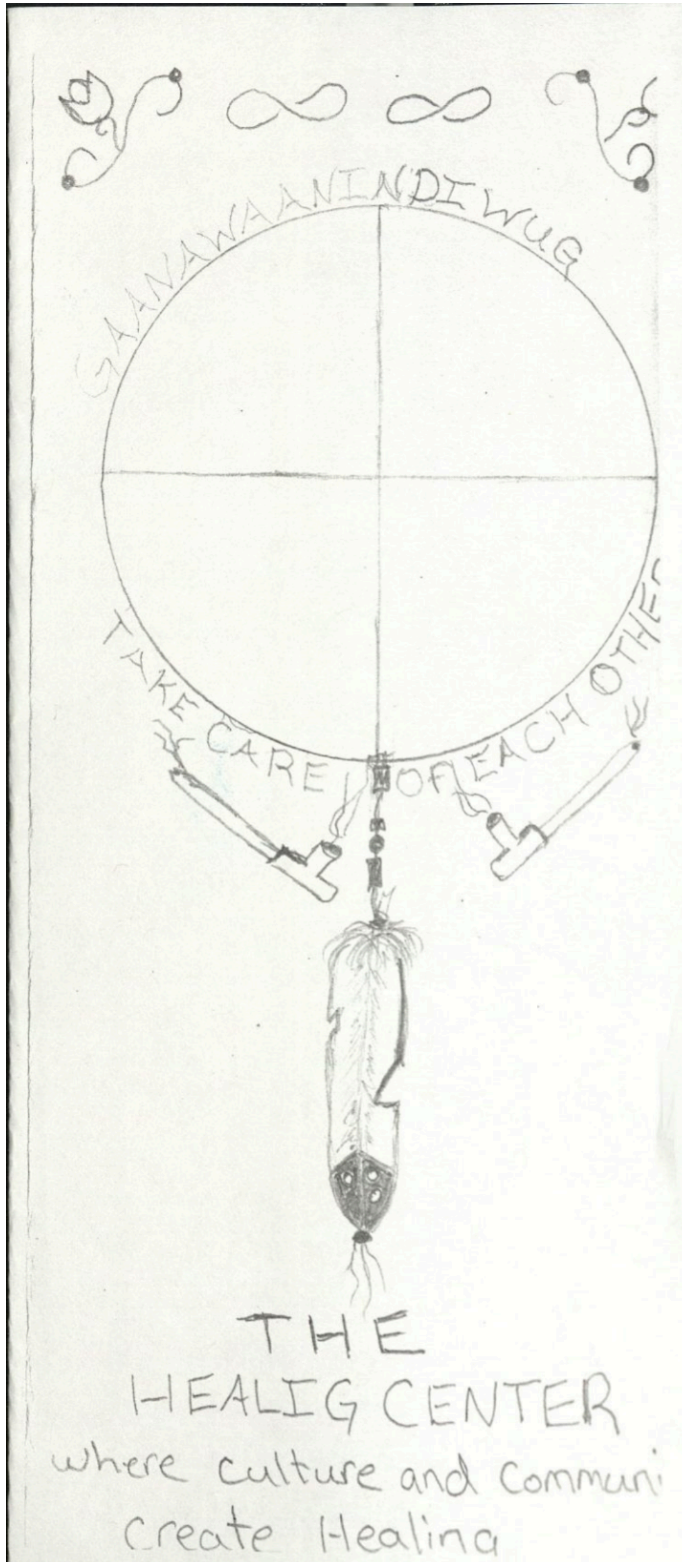


Figure 1b

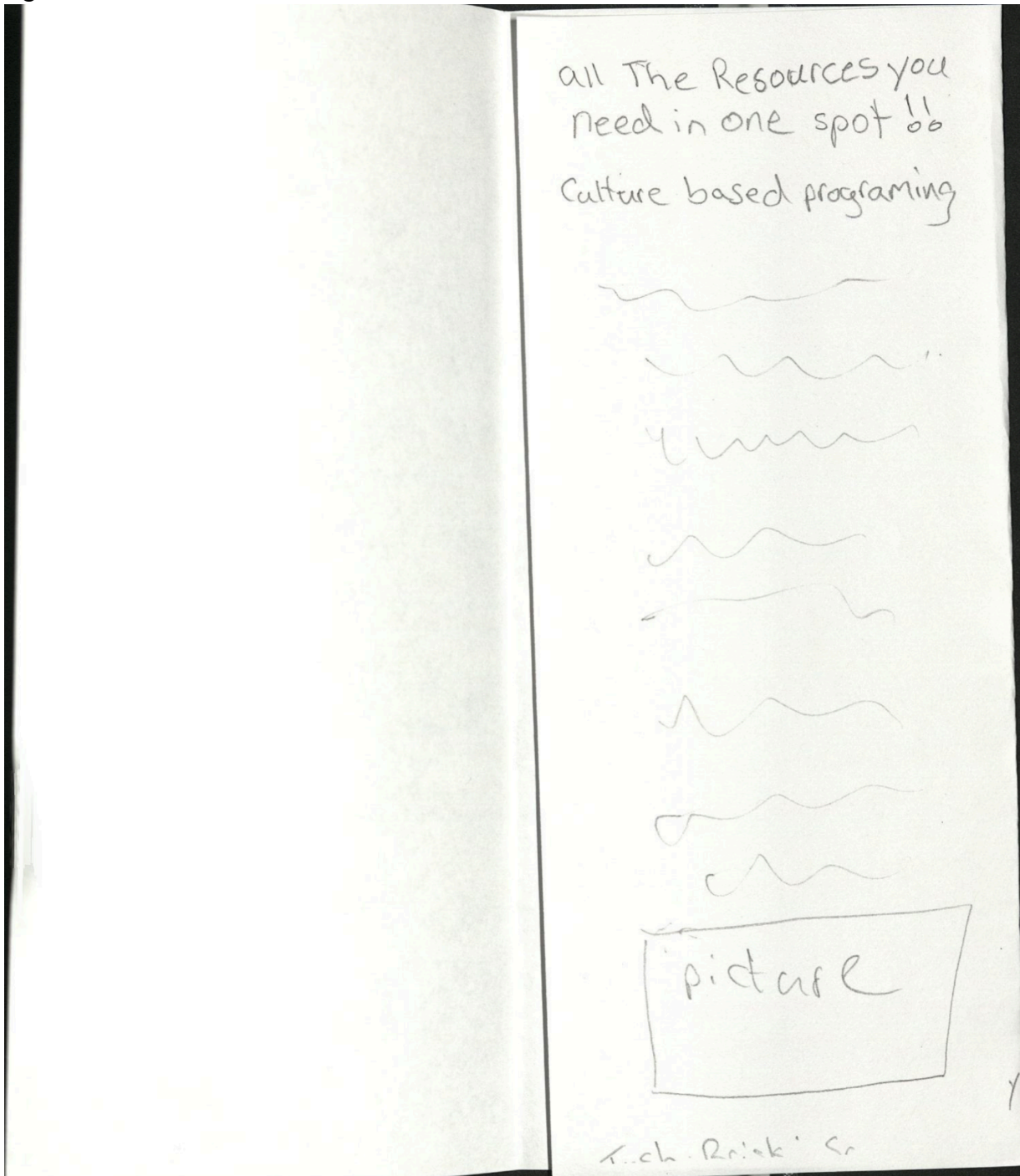


Figure 2a

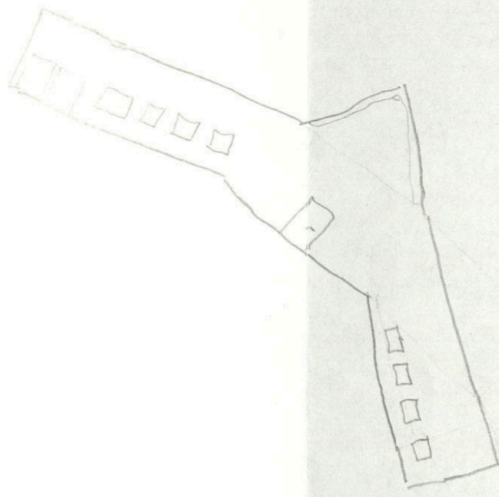
Northern Minnesota
Addiction
Wellness
Center



- licensed LADC
counselors
- licensed
nursing staff
- med management
- great positive
environment
- coed
- inpatient and
outpatient

Figure 2b

NMAWC
NMAWC



We accommodate to
all your addiction
recovery needs

218-308-8600

We also
have:

- live in pet dog
- horseshoes
- cornhole
- smoking
- 36 hours of
classes weekly
- 24 hour staff
- men's and woman's
lounges
- smudging
- Ojibwe
culture friendly

Figure 3

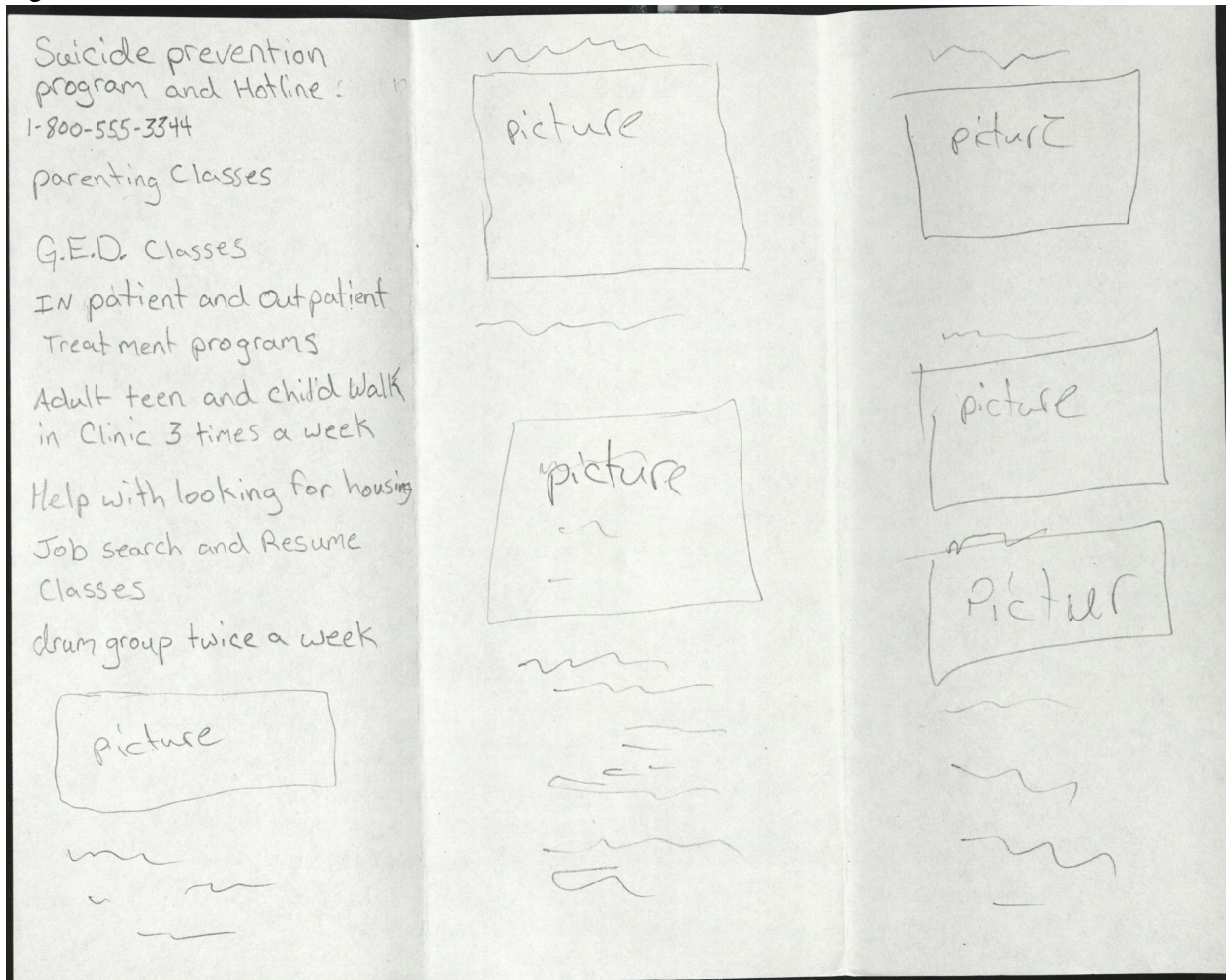


Figure 4

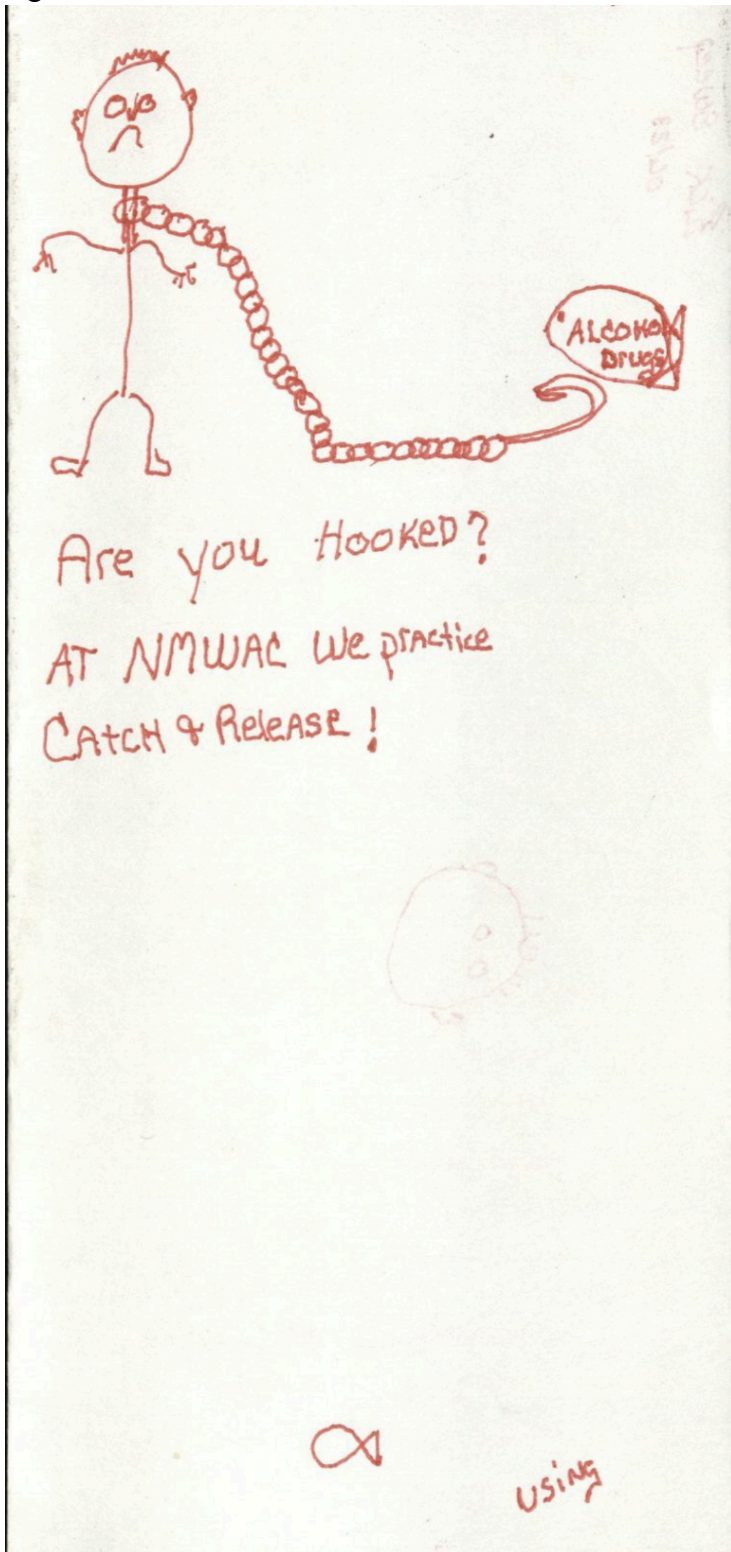


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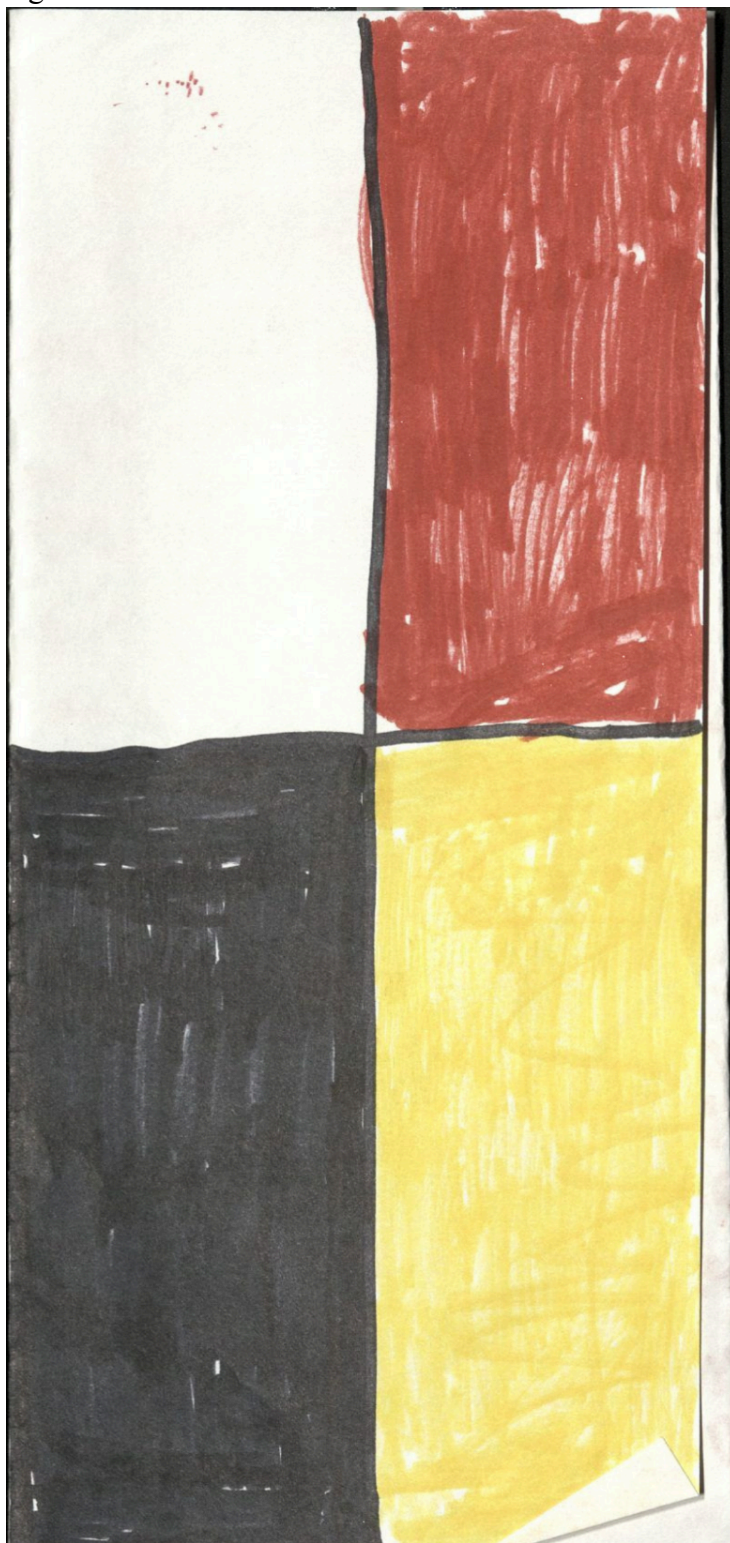


Figure 5b

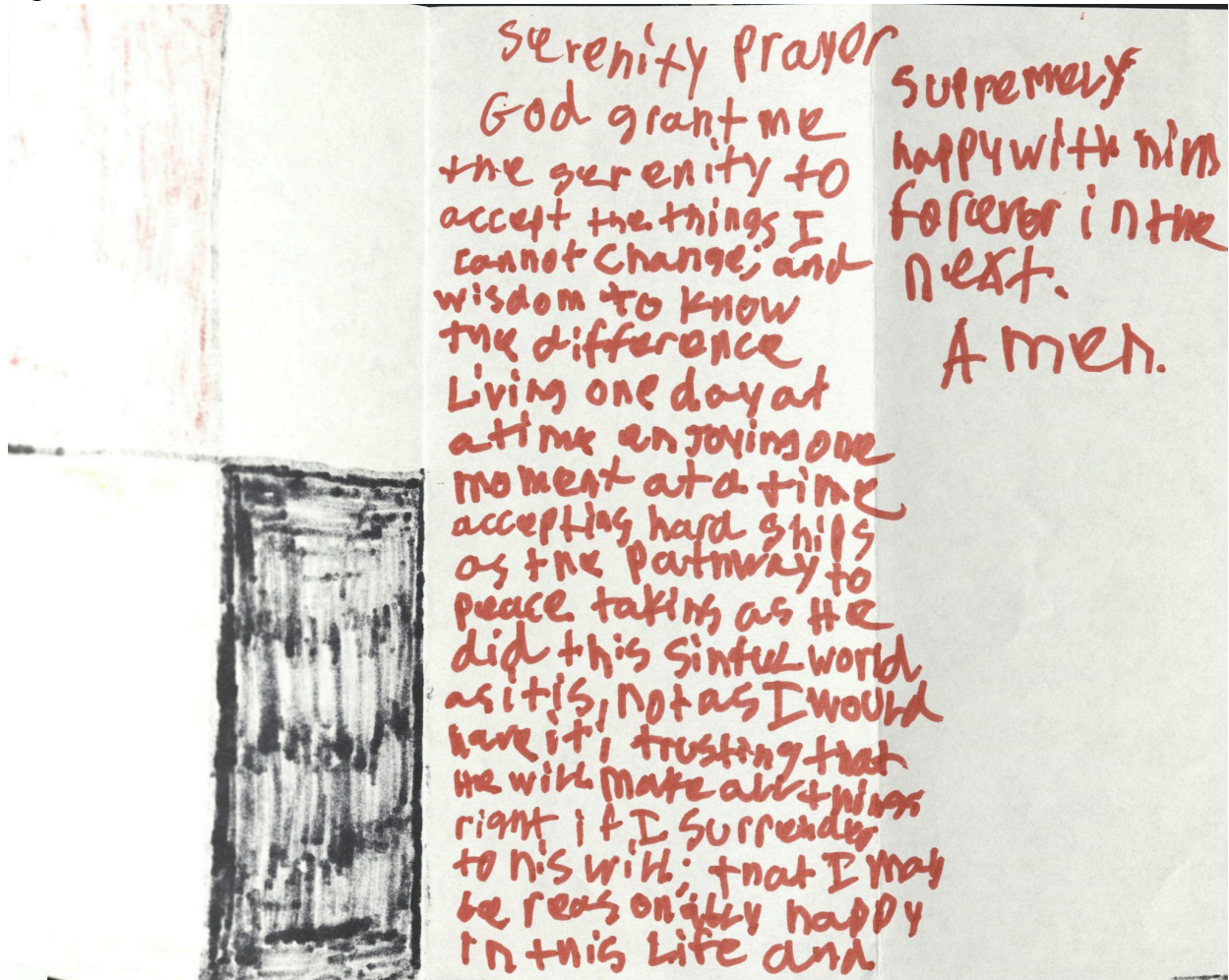


Figure 6

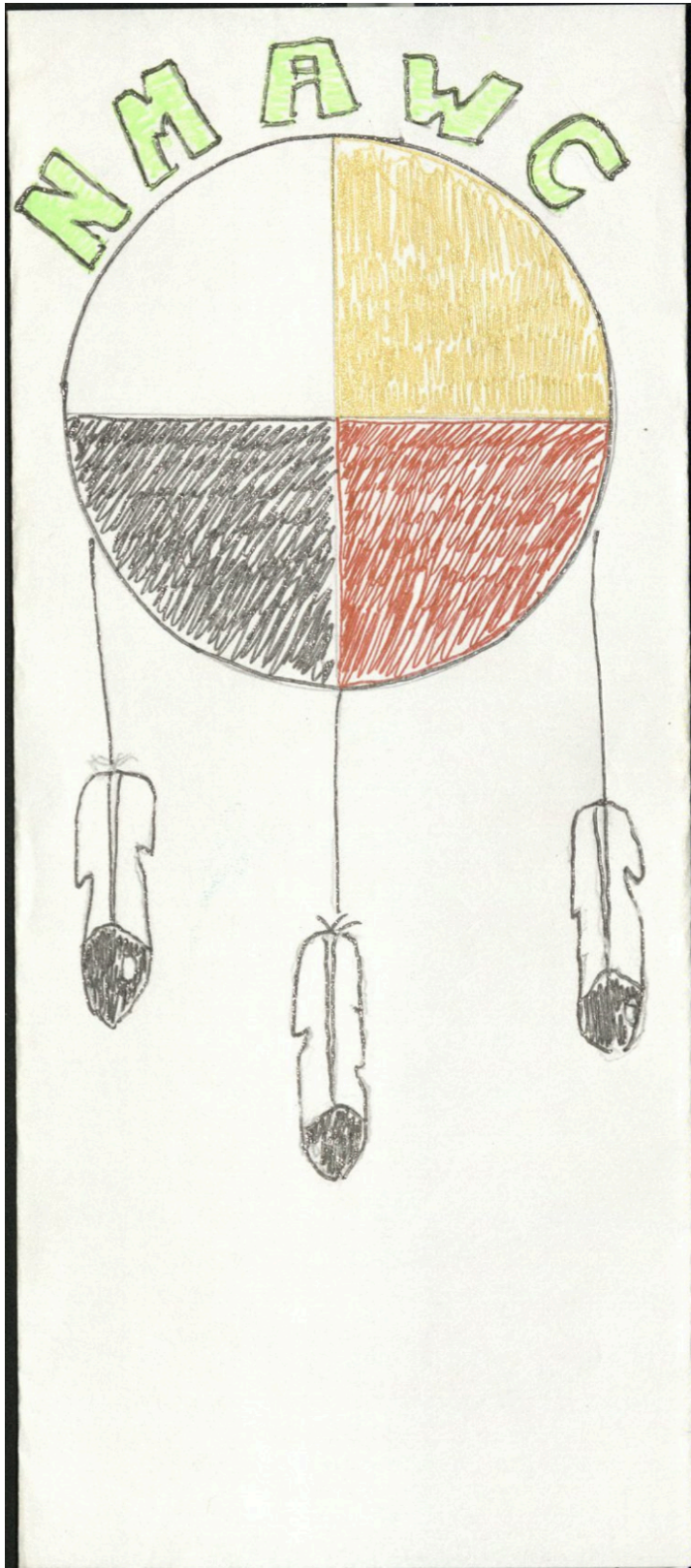


Figure 7a

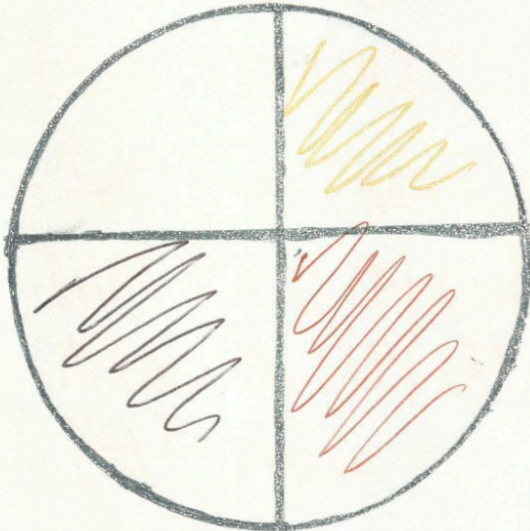


Figure 7b



Figure 8a

NORTHERN
MINNESOTA
ADDICTION
WELLNESS
CENTER



FEEL HOPELESS? LIKE
LIFE WILL NEVER CHANGE?

WE COULD HELP FIX THAT

Figure 8b

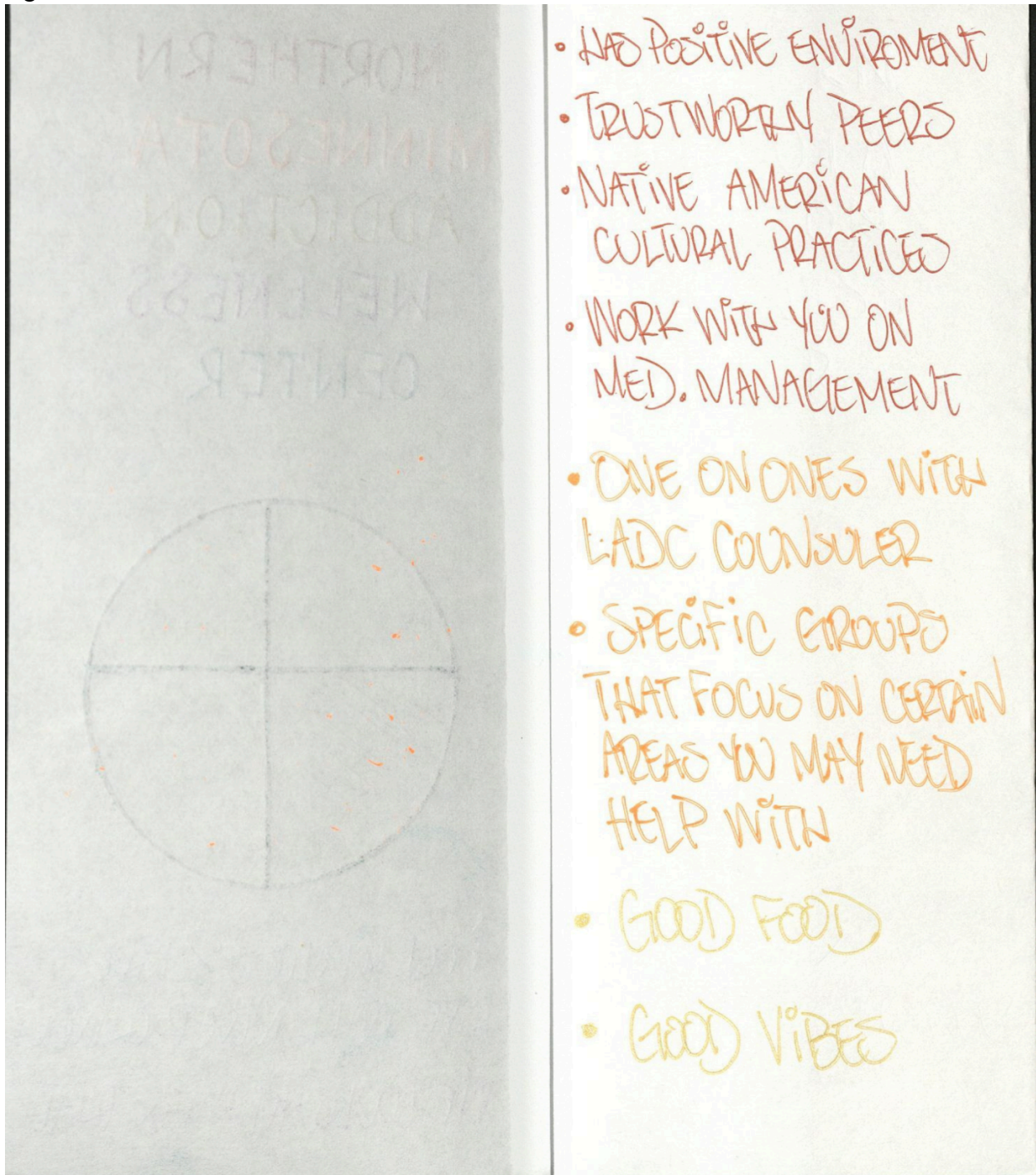


Figure 9

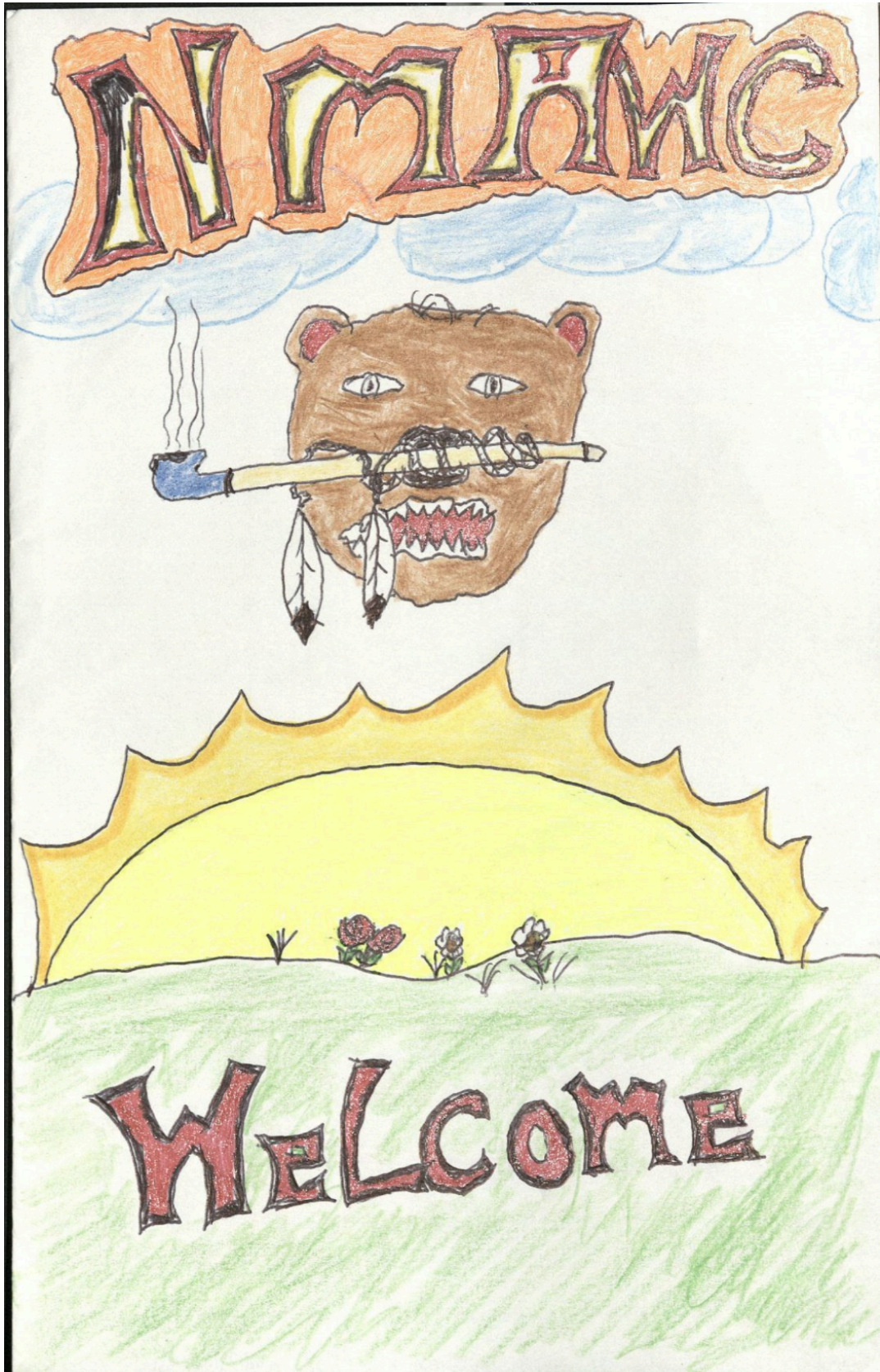


Figure 10a

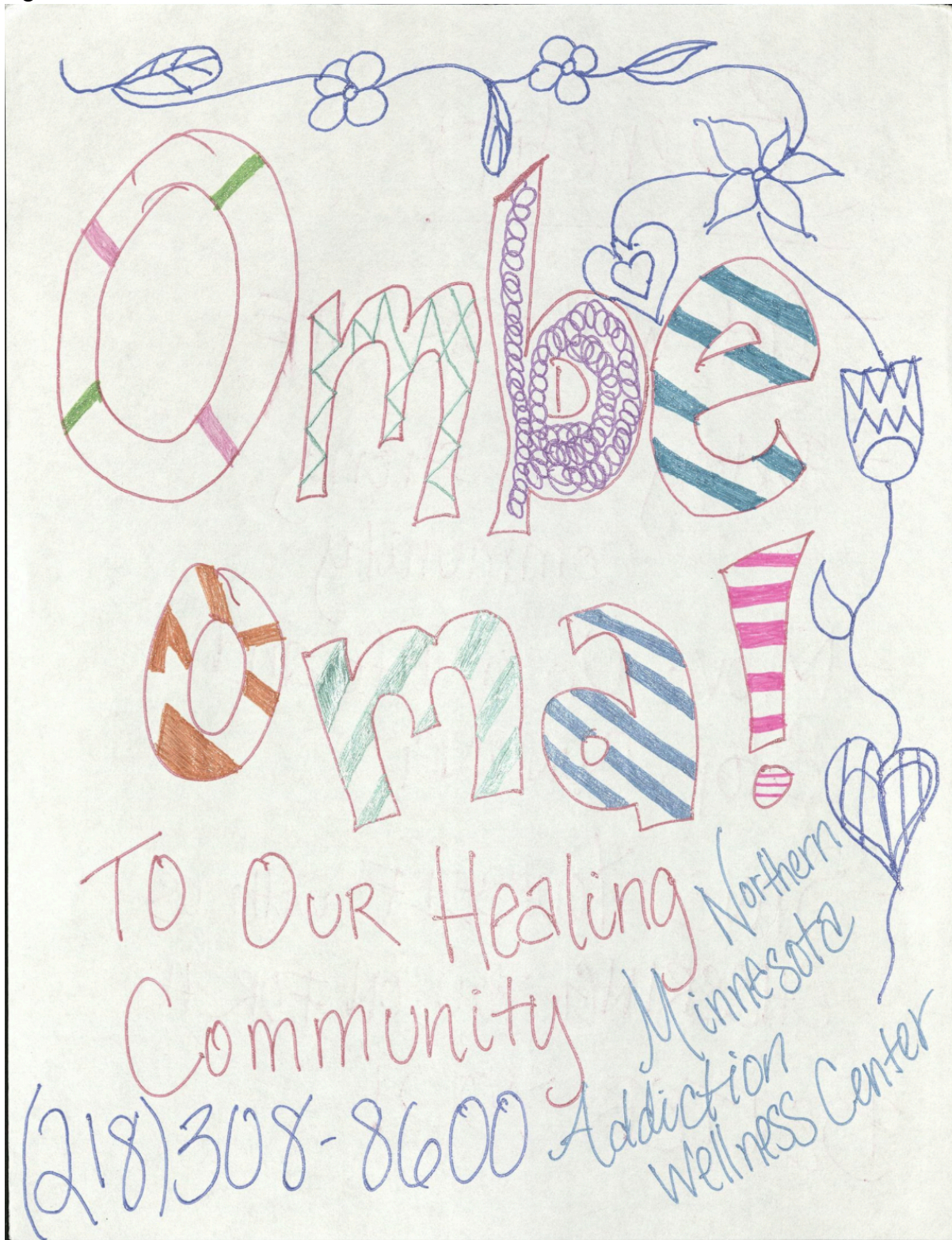
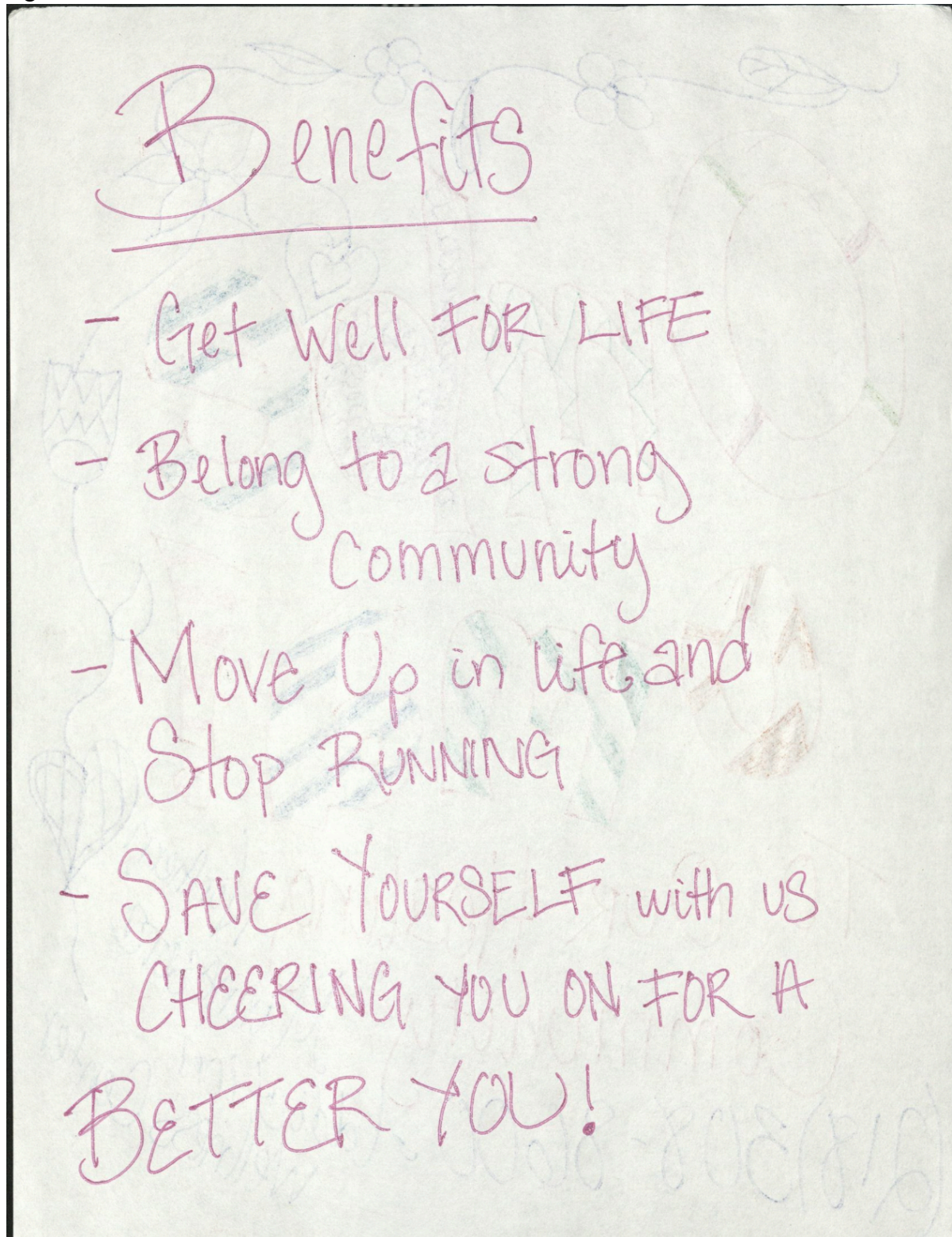


Figure 10b



Benefits

- Get Well FOR LIFE
- Belong to a strong Community
- Move Up in life and Stop RUNNING
- SAVE YOURSELF with us CHEERING YOU ON FOR A BETTER YOU!

Figure 11

N.M.A.W.C. Their work is AMAZING
The team they have here care deeply about
overcoming the horrors of addiction
they give you the tools you need
to be successful in long term recovery.
If we all come together & support
one another we can beat statistics,
So our children & their children
& so forth, have, a better chance at
Mino Bii Maadiziwin. We need to lead
by example to break the horrors of
addiction. The time is now! Lets
lift one another up so future generations
don't get wiped out - Choose Recovery

Figure 12



Figure 13

NMAWC
MN's #1 TREATMENT
CENTER
GOOD FOOD GROUPS
OVERCOME FRIENDSHIP
NA/AA ADDICTION WELLNESS
AWESOME PEOPLE
HOPE SPIRITUALITY
SOBRIETY • NETFLIX

MILTON, MN
218-308-8600
CONTACT US ↴

Figure 14

Inpatient Treatment Program

- * offers short term (45-200 days)
* long term (90-90 days)
- * serving the surrounding areas
- * dual diagnostic
- * Learning ~~about~~ to dependency skills
* how to cope w/ peer pressure.
- * Recovering Addicts / Alcoholic Counselors.
- * Helping, encouraging, nice & caring
people that manage the facility
- * MA approved.

Figure 15



Figure 16

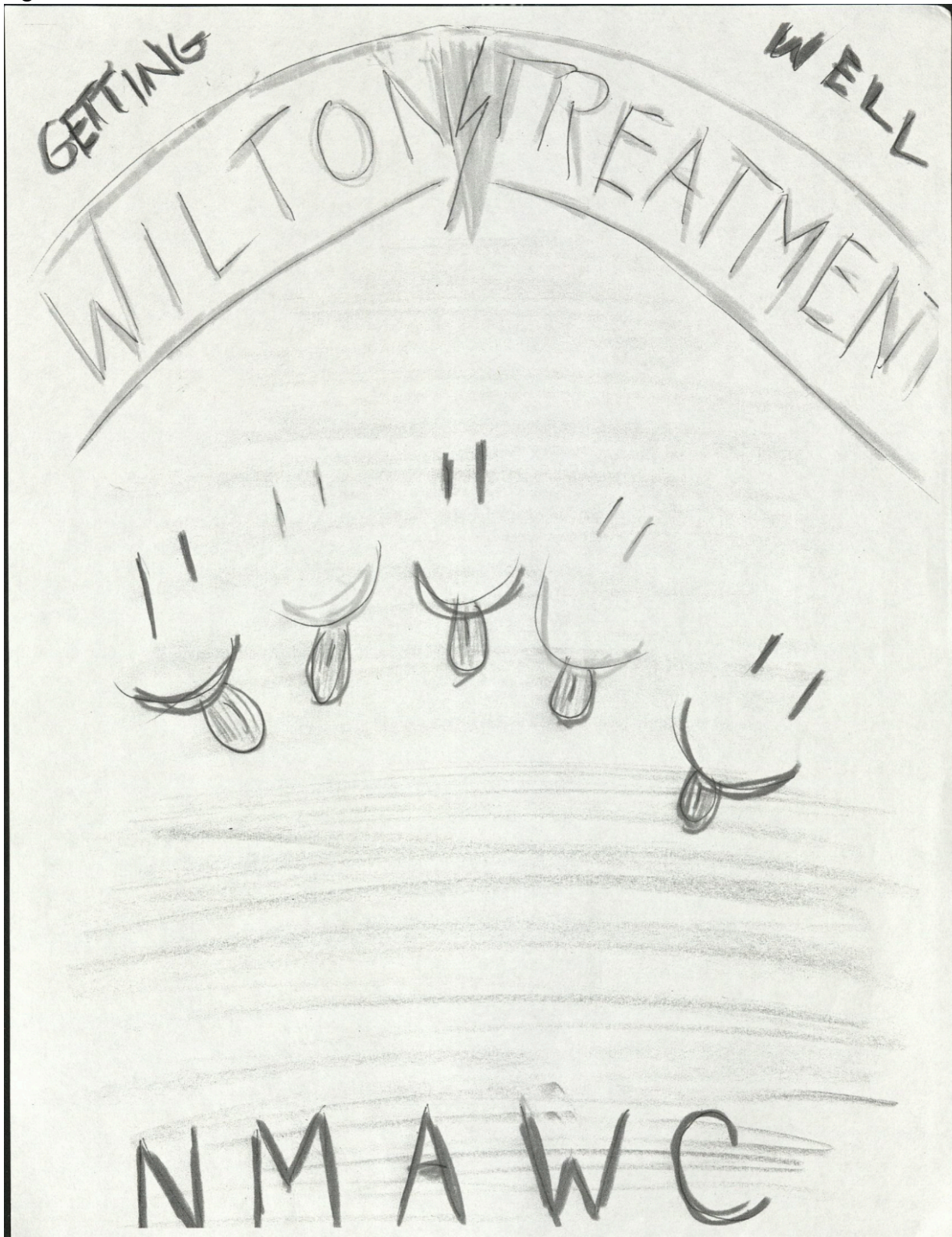


Figure 17a

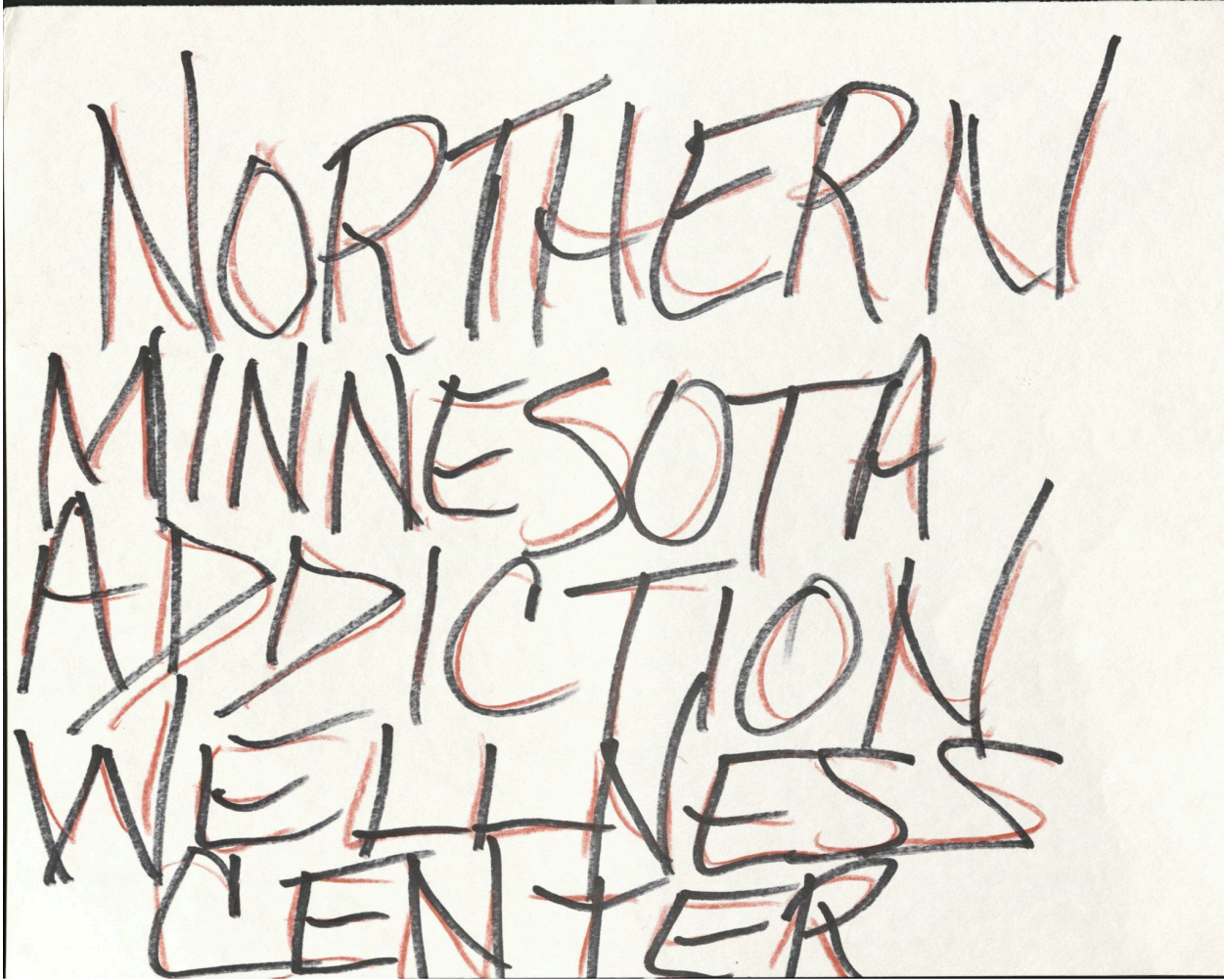


Figure 17b

CAN BE THE
NEW WAY TO
NEW CLEAN
LIFE

Figure 18

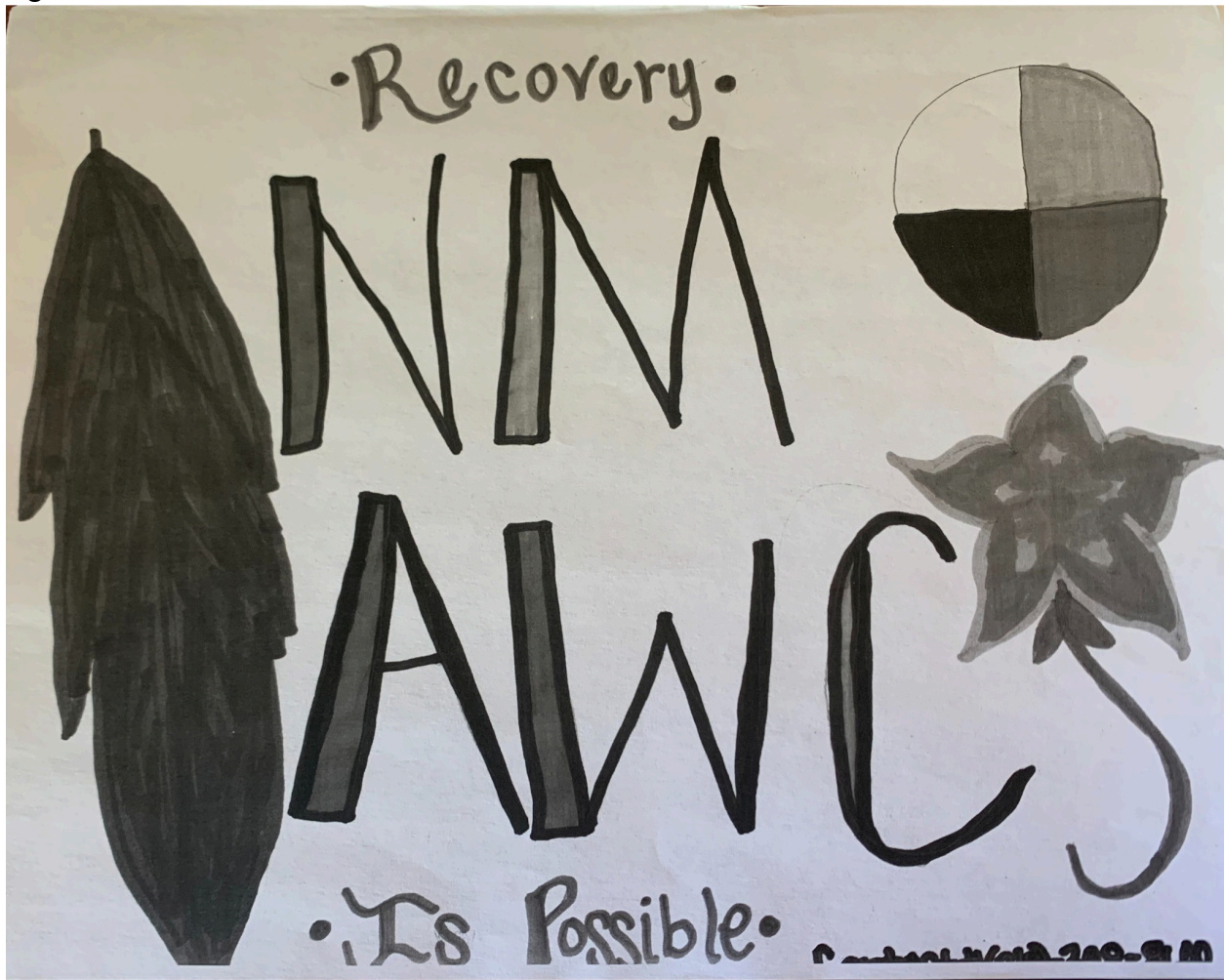


Figure 19

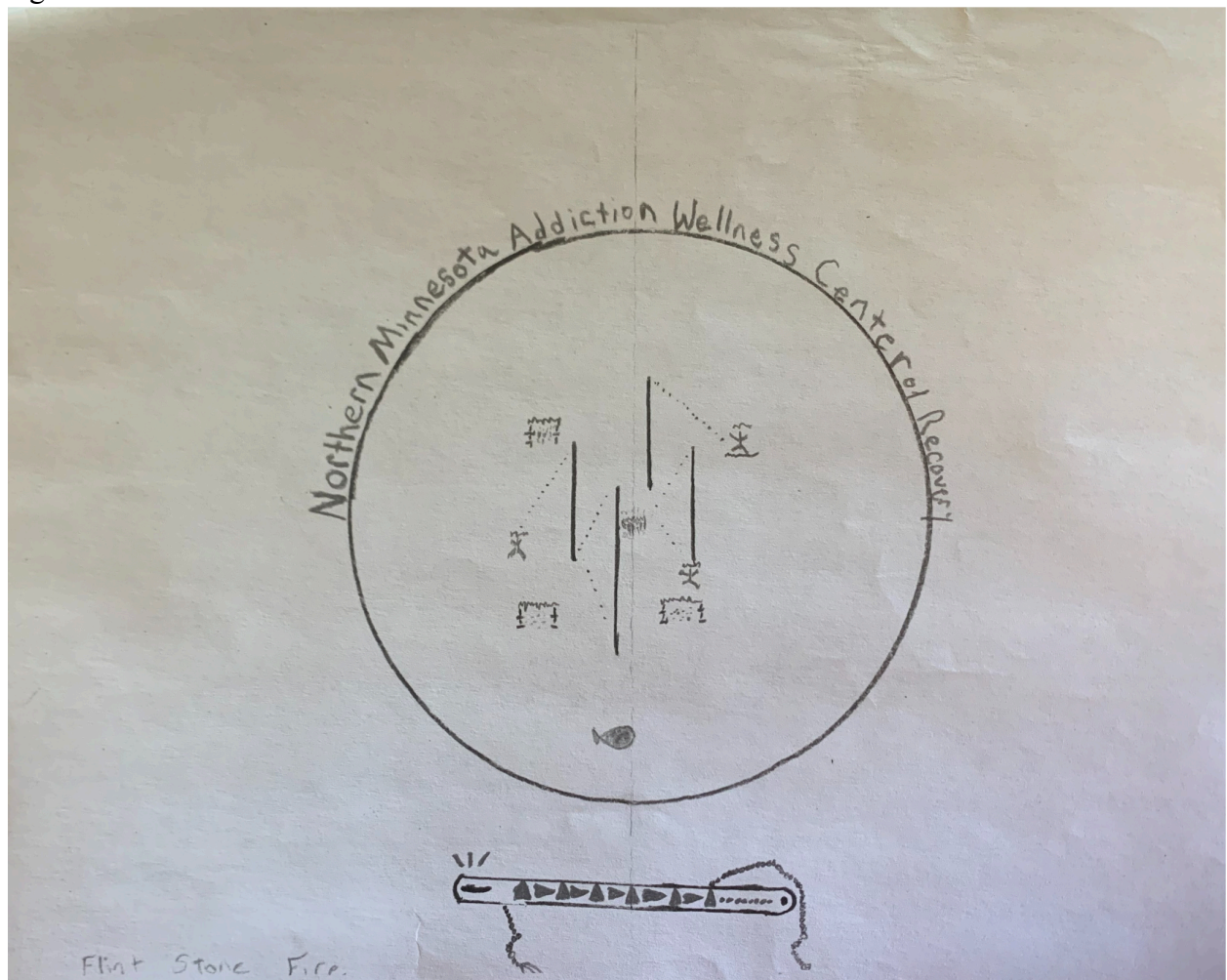
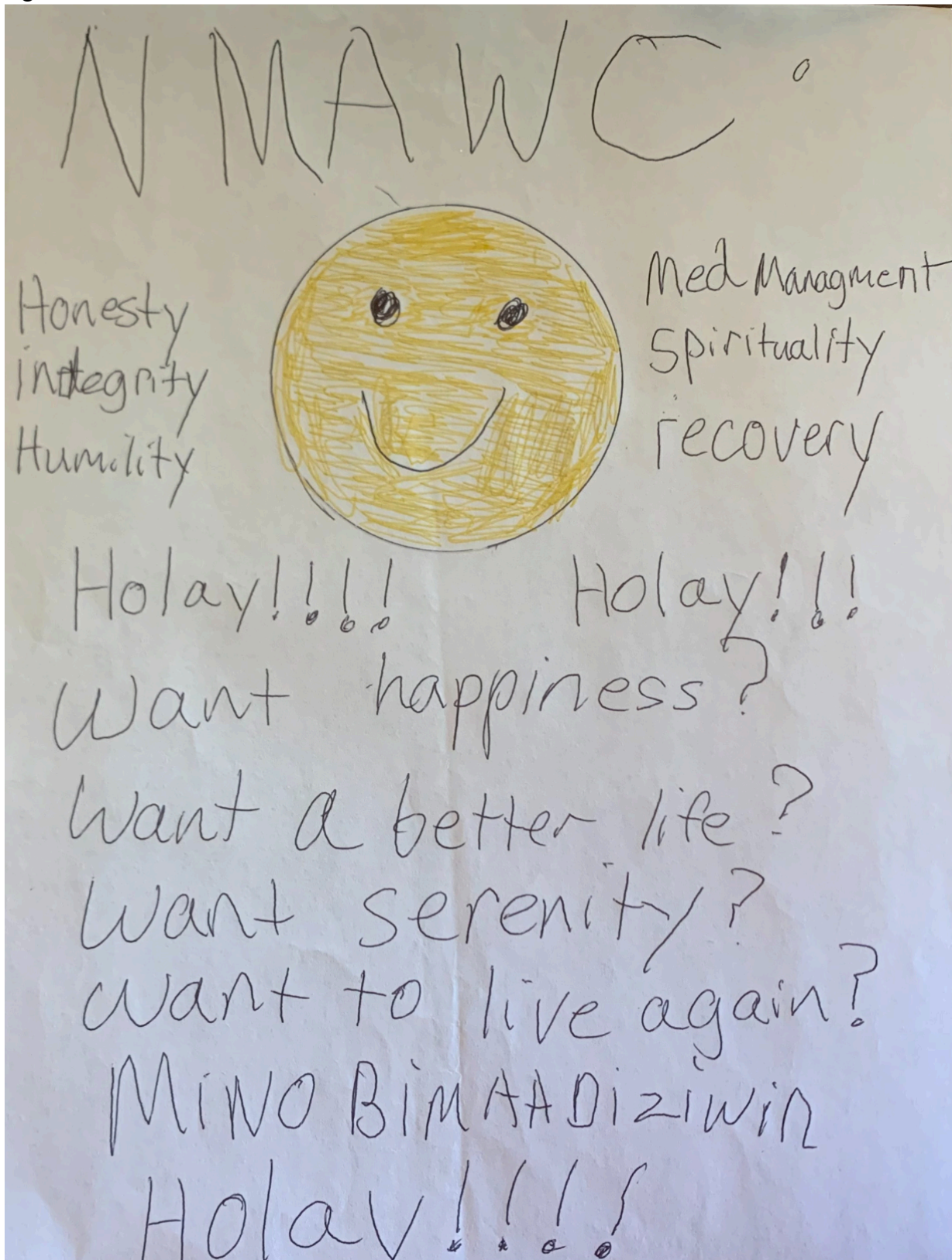


Figure 20



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