

# Joy & Healing

January 2024  
community listening report on mental health

# Background

In 2022, Catalyst North Consulting, in close partnership with Marnita's Table, and with funding from the Margaret A. Cargill Foundation Fund of the Minneapolis Foundation and the Margaret A. Cargill Foundation Fund of the Saint Paul & Minnesota Foundation, gathered perspectives on ways to support the mental well-being of historically marginalized communities, including Asian, Black, Indigenous, Latine, and Rural Minnesotans. This is an executive summary of the six-month statewide inquiry to better understand what is needed to foster joy and healing in community. We are sharing this report to raise awareness as well as to share knowledge.

In addition to the 2022 community listening sessions from scores of one-on-one and small group conversations, and two Healing from Trauma convenings (one virtual and one in-person), this document offers key insights and analysis of lessons learned from eight years of philanthropic investments by the Catalyst Initiative at the George Family Foundation and the Minneapolis Foundation as well as a review of 24 Marnita's Table convenings addressing health and wellness between 2016-2022.

# Defining our terms is important.

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## Trauma

may be understood in different ways to different groups. The federal Substance Abuse and Mental Health Services Administration defines it as an **individual** response that “results from an event, a series of events or set of circumstances experienced by an individual as physically or emotionally harmful or life-threatening with lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual wellbeing.”<sup>1</sup> However, many cultures consider the **collective** impact of trauma as more relevant.

## Historical Trauma

refers to the cumulative emotional and psychological wounding of an individual or generation caused by traumatic experience or event, such as the devastating impact of the boarding school era in the United States and Canada.<sup>2</sup>

## Collective Trauma

happens to large groups of individuals and can be transmitted inter-generationally and across communities. War, genocide, slavery, terrorism, and natural disasters can cause collective trauma.<sup>3</sup>

## Toxic Stress

is defined as “strong, frequent, and/or prolonged adversity—such as physical or emotional abuse, chronic neglect, caregiver substance abuse or mental illness, exposure to violence, and/or the accumulated burdens of family economic hardship—without adequate adult support. This kind of prolonged activation of the stress response systems can disrupt the development of brain architecture and other organ systems and increase the risk for stress-related disease and cognitive impairment.”<sup>4</sup>

## A wellness ecosystem may be described

as a complex web of social and cultural factors that create and support the conditions for whole health for individuals, families, and communities. It can include socioeconomic, relational aspects, natural and built environments, and access to meaningful mental and physical healthcare. Existing dominant culture clinical health systems use a public health lens to encourage individuals to proactively make good behavioral choices so that they may lead healthier lives. When adopted, wellness behaviors have benefits for people immediately, despite persistent systemic inequities.

Adopting wellness behaviors – or caring for self - is more complicated in the lived experiences of people who are not privileged to have resources, information, and ability to access such services, and who are more likely to suffer from multigenerational, complex trauma and other health disparities. Moreover, the existing focus on individual behaviors and the pathologizing of human suffering has alienated many people in populations where communal knowledge and shared flourishing has deeper meaning.

## Such an ecosystem would result in the following outcomes:

- More individuals, communities, and organizations are seen, heard, and are stronger in their solutions to manage toxic stress and trauma resulting from racism, poverty, violence, social neglect, and geographical isolation.
- People across Minnesota have increased knowledge of, access to, and are co-creating non-clinical and culturally meaningful wellbeing initiatives that foster Joy & Healing in their specific communities.
- A sustainable ecosystem of wellbeing takes deeper root, connecting individuals, communities, and organizations with collective knowledge sharing, learning, and influence.

# What We Learned

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## **The Macro Ecosystem Constraints:**

Individuals live within families, communities, societies, and are impacted by systems.

### **Larger systems challenges to achieving consistent mental wellbeing were repeatedly cited across demographics:**

- Over-policing
- Poverty
- Disproportionate involvement of child welfare
- Disproportionate involvement of justice systems
- Unstable housing
- Community violence
- Interpersonal violence
- Lack of transportation (frequently noted in immigrant and rural populations)
- Lack of access to care (frequently noted in immigrant and rural populations)
- Sustained stigma around mental health (frequently noted in immigrant and rural populations)

### **Gaps in the existing mental health system:**

- Shortage of therapists in rural areas
- Lack of BIPOC clinicians
- Historic mistrust of clinical systems
- Devaluing of traditional practices
- Long wait times
- Reluctance to be pathologized and/or medicated
- Limitations of insurance coverage

# Key Barriers and Opportunities

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1.

**BARRIER:**

Lack of basic information of non-clinical methods of healing trauma and coping with toxic stress.

**OPPORTUNITY:**

Build community awareness and understanding of the potential for individual, collective, and cultural healing as an antidote to toxic stress, anxiety, and trauma.

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2.

**BARRIER:**

Lack of opportunity to experiment with healing methods to vet best practices. Lack of support for culturally grounded healing curriculum development and train the trainer models. Rigid funder timelines and outcome requirements exclude innovation and limit capacity.

**OPPORTUNITY:**

Seed experimental community programs that introduce linguistically and culturally meaningful practices and expand the pool of practitioners over time.

3.

**BARRIER:**

Lack of investment in scaling promising/innovative practices, lack of robust data and evidence of efficacy of non-clinical healing to encourage additional investments.

**OPPORTUNITY:**

Invest in bringing existing promising practices to scale and better understanding of impact using a community lens.

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4.

**BARRIER:**

Lack of large system/institutional uptake, norming and sharing of non-clinical healing practices.

**OPPORTUNITY:**

Explore embedding healing practices into established, state-wide systems such as community health worker hubs for greater reach.

It is important to note that these are not linear processes and often overlap. For example, introducing concepts and practices might be the concurrent launchpad for seeding and experimenting new pathways.

## People across the state showed:

- Keen interest in learning more about cultural and integrative healing to address burnout, anxiety, and isolation. For example, young people are using creative social media to break down taboo about mental health and connect people with cultural traditions.
- Innovative responses to toxic stress and trauma are currently being explored and require support and connection with trainers and development of cultural models to test promising practices and embed healing into organizational programming and culture.
- Multiple examples of successfully seeded projects that are poised to scale and need support to expand impact were uncovered.

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**In listening to Minnesotans reflect on this topic, there was widespread enthusiasm to dive into creating the conditions to thrive, with many people coming to this conversation from a place of utter exhaustion and yearning for a connection to joy and a sense of wholeness.**

## We also note

that the existing clinical frameworks which require dominant culture standards of accreditation and credentialing provide safeguards to ensure that no harm is done in the pursuit of healing the wounds of trauma. These are requirements for billing mechanisms to take place. However, it is vital that community set the standards for their healing practitioners rather than requiring cultural healers to conform to clinical standards. Community councils, elders and leaders who have the best interest of their people as a guiding value will promote authentic practices and practitioners and vet any opportunistic and harmful attempts to profit at the expense of people's trauma.

## Bigger questions arose:

- What does healing involve?
- How do we foster individual healing and collective healing?

It may include being in nature, gardening, movement, rest, breath work/prayer/meditation, acupuncture, body work, ceremony, language, storytelling, being in beloved community and cultural camps.

It is important that those in need of healing identify the practices that resonate with them and that they will benefit from the most.

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## Any response

must honor regional, organizational, cultural, and demographic nuances and timelines and commit to long-term relationships. Toxic stress and trauma are often cumulative in nature and any effort to address the wounding must allow for the time needed to heal. Non-profit staff regularly reported being burned out in large part due to the demands of funders at a time of increased demand for services and staff shortages.

Reliable, flexible funding that allows for local experimentation, seeding and scaling healing work is necessary to allow community-based organizations to lead in this space.

The framework of a community-based healing ecosystem already exists with much good work taking place, but requires additional resources, connection, and validation to fully scale.

# Recommendations

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## Philanthropy

- Commit to support community and culturally based healing initiatives that honor cultural assets and center equity in addressing historic and intergenerational trauma, social isolation and stigmatization, and toxic stress.
  - Develop knowledge in cultural healing, wellbeing and/or fostering community-based ecosystems and networks.
  - Provide multi-year, flexible funding to grassroots organizations who are trusted by, and well-connected in their communities with minimal administrative tasks to allow for relevance and innovation
  - Allocate resources to coordinate, convene, and share knowledge, creating regional and national networks to encourage investments, raise visibility of the issues, and inform the deeper ecosystem.
  - Seek community designed solutions to inform short-term and long-term action plans.
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## Healthcare & Public Health

- Nurture authentic community partnerships grounded in the understanding that toxic stress and trauma are a public health crisis affecting physical and mental health.
- Embed cultural spiritual care and healers into clinical models.

## Government

- Include healing practices for staff and community in your resource allocations.
- Minimize administrative barriers and requirements in grant application and reporting processes and allow for realistic overhead costs, so that small and community based organizations can equitably access public funding.
- Move beyond attachment to “evidence-based practices” as the gold standard for funding and accept “practice-based evidence” as led by community as a reliable intervention to be supported
- Implement Medicaid payment waiver pilot programs to support cultural healing in community.
- Provide training on managing toxic stress and other resilience building activities for grantees.



# About the partners

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## Catalyst North Consulting

has ten years of deep experience in supporting philanthropic investments in non-clinical and culturally based mental wellness and partnering on community-led solutions.

## Marnita's Table,

a nonprofit, has decades-long experience in multiracial convening to build consensus. We create the conditions necessary to promote openness, authenticity, and connection to engage communities in conversations around access to culturally responsive integrative health and wellbeing modalities.

## Margaret A. Cargill Philanthropies

(MACP) has a mission to provide meaningful assistance and support to society, the arts, and the environment. We are committed to supporting organizations and communities in Minnesota, especially with our Local Initiatives' prioritized program themes. They include Mental Health to seed and scale Joy & Healing initiatives of, by, and for historically marginalized groups who have been disproportionately impacted by toxic stress, historical trauma, social exclusion, and rural isolation, so that supported communities are seen, heard, recognized, and strong. In 2023, informed by this report and through the Margaret A. Cargill Foundation Fund of the Minneapolis Foundation and the Margaret A. Cargill Foundation Fund of the Saint Paul & Minnesota Foundation, Local Initiatives supported more than fifty Minnesota organizations. In the coming years, we will deepen our knowledge to further define additional ways to continue our Joy & Healing priority.

## References

- <sup>1</sup> SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach | SAMHSA Publications and Digital Products)
- <sup>2</sup> Impact of Historical Trauma - The National Native American Boarding School Healing Coalition
- <sup>3</sup> <https://www.preventioninstitute.org/publications/adverse-community-experiences-and-resilience-framework-addressing-and-preventing>
- <sup>4</sup> Impact of Toxic Stress on Individuals and Communities-A Review of the Literature.pdf (mhanational.org)

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