

# **JOURNEYS OF HEALING: INDIGENOUS REVITALIZATION OF CULTURE AND TRADITIONAL MEDICINE AS A CURE FOR MENTAL ILLNESS OF INDIGENOUS PEOPLES OF THE PACIFIC NORTHWEST OF THE UNITED STATES OF AMERICA.**

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For a long time indigenous nations the world over were told to be ashamed of their “backwardness.” They thought that their traditional ideas were old-fashioned, and often rejected them in favor of more “modern” methods. Today, however, indigenous nations are realizing that their cultures are beautiful and strong and contain effective methods for healing. In today’s unstable and stressful world the wealth of native traditional knowledge has a significant contribution to make to improve the quality of life and mental and physical wellbeing.

Throughout the last three decades there has been an increasing awareness of the loss of traditional medicinal knowledge of value to all of humankind. A global resurgence of interest in traditional and alternative medicine practices can be observed internationally as a response to the overuse of synthetic pharmaceuticals that are often available only to the wealthy. Traditional medicine provides health care coverage for all people especially the poor, vulnerable and marginalized. The potential of traditional knowledge especially for the psychological well-being of indigenous peoples has long been acknowledged. Empirical research and experience over the millennia has demonstrated efficacy for a wide range of methods, including ritual, botanicals medicines, acupuncture, massage and hands- on healing to name a few.<sup>i</sup> However there is a dearth of studies on local traditional medicine that are designed to bridge the chasm between the delivery of traditional practices and contemporary public health and mental health methods. A collaborative approach to research would further the integration or elevation of indigenous practices into public health delivery and bridge the communication divide between traditional practitioners and allopathic providers. Every system has something to provide. Only through the appropriate application of the best of each method will health be achieved for indigenous peoples. Furthermore, indigenous methods have important contributions to make to the mental health of non -local, non-indigenous peoples health systems. Identifying the appropriate transfer of these technologies is another important mandate to be addressed.

In this paper we address the potential of traditional practices for indigenous well-being by telling the story of Pacific Northwest Coast nations and how they are collaborating to address the application and integration of various forms of traditional medicine for mental health and healing. Their work serves as a role model for indigenous peoples in other parts of the world. We explore here two examples of evolving healing traditions that represent initiatives within this global movement of revitalizing indigenous healing methods and explore the significance of restoration and adaptation of these methods within the contemporary globalized world. The first intervention we explore is Polarity therapy, a traditional medicine/ Complementary/Alternative Medicine (CAM) intervention that is a syncretic, energy medicine method derived from the integration of Ayurvedic Medicine of India and Cranial- Osteopathic traditions of the United States. Polarity therapy was the subject of a clinical research study designed to explore its potential as a method to improve the (mental) health of indigenous family caregivers of chronically ill elders and was chosen as a culturally congruent method similar to many of the hands-on healing practices indigenous to Pacific Northwest peoples. The second practice is the Tribal Canoe Healing Journey a community intervention, practiced traditionally amongst the Indian communities on the Northwest Coast of USA and Canada.

## Indigenous health movement

Tribal communities of the Pacific Northwest Coast of Washington State, USA are engaged in a diverse movement of cultural revival that reflects a growing self-confidence in its claim to self-determination including control of traditional territories, natural resources, cultural autonomy. This movement is directed toward the improvement of living and health conditions.<sup>ii</sup>

The current phase of cultural revival on the Northwest Coast must be considered within the context of the effects of colonization. In this (so-called) post-colonial world, individuals and communities are still grappling with the legacy of the colonization and its ongoing manifestations. Large numbers of mental health problems, including inter-personal violence, substance abuse, and related accidental deaths and suicides, in indigenous communities are theorized to result from the effects of colonization and the

resulting historical trauma and ongoing effects of intergenerational trauma. Health problems arising from the colonial process are embedded in distinct historical, social and legal contexts and can be understood as individual and community expressions of social suffering that reflect severe physiological, social and cultural effects.

Economic, political, and mental control of indigenous nations by the first settlers arriving in the Pacific Northwest at the end of the 18<sup>th</sup> century was achieved through the deliberate destruction of peoples' culture, including the arts, dances, religions, history, geography education, and oral traditions. Forbidding local cultures, including foods and medicines, combined with the introduction of foreign diseases resulted in the loss of ecological balance, including community health. Breaking health and spirit were key methods used to colonize nations along the coast. Introduced diseases against which traditional healers were powerless exacerbated the destruction of many communities whose disrupted lives and culture gradually increased their dependence on new biomedical technologies which continues today.<sup>iii</sup>

By taking back their health through cultural lifeways, indigenous nations work to guarantee their physical and spiritual survival. The revitalization of indigenous Northwest Coast culture, can thus be seen as an act of resistance against historic as well as ongoing oppression. As Native Hawaiian activist Huanani-Kay Trask so accurately states: [Indigenous health] is the result of over a decade of thought and creativity by indigenous peoples actively engaged in their collective liberation.<sup>iv</sup>

Still mental health problems persist. Substance use diseases such as alcoholism is 627% higher than among other United States ethnic groups and suicide is over -represented within indigenous communities who also have a significantly lower life expectancy. The processes underlying these stress mechanisms: are “ due to historic trauma indigenous people feel depressed, helpless, anxious, irritable, and then they blame themselves for feeling that way. These feelings often lead to self medication with sugar and carbohydrates, drugs, alcohol, sex and other activities... these substances exacerbate the trauma and stress and the cycle continues... until it is stopped.”<sup>v</sup>

#### United States health care system and traditional medicine

Traditional healing remains only marginally integrated into treatment practices in the United States. During the 19<sup>th</sup> and early 20<sup>th</sup> centuries Western allopathic health care became dominant due to dramatic breakthroughs in the treatment of infectious diseases including the use of antiseptic surgery, vaccines and bacteriology. This was also a time when lobbying groups such as the American Medical Association achieved hegemony in the delivery of medical care. Medicine in the minds of the public became the legitimate domain of specialized experts excluding most other health care practitioners from practice.<sup>vi</sup> Previous providers of care; midwives, herbalists, homeopaths were pushed out of power as they were seen as a threat to the financial interests of the physicians.

By the 21<sup>st</sup> century this hegemonic control over medicine had evolved into a health care system bloated by overhead expenses and the excessive use of expensive technologies. This has resulted in a health care system that (unlike a social service that delivers care universally) is based solely on profit-seeking, controlled by market forces and the financial interests of insurers and providers.

This current system is designed to care for people who have become ill or injured. It is not designed (nor profitable) to provide services for health promotion and disease prevention. This has resulted in a system of “sickness care”, not health care, marked by outsized expenditures, ever increasing morbidity and low accessibility for the poor and ethnic minorities.

By contrast, traditional methods of healing are holistic; they focus primarily on health promotion and disease prevention, are often rooted in local cultural realities and correspond to indigenous cosmovision. Therefore indigenous health care alternatives are much more congruent with community and individual values, traditional beliefs, and philosophical orientations toward the balance of health and life and one's place in the cosmos. Indigenous healing methods derive their methods from complex interactions and ritual ceremony with the natural world; customary food gathering and preparation, medicines from animals, plants and the sea as well as the altered states of consciousness engendered by ritual and human-energetic exchanges. Many traditional methods have also become part of the repertoire now referred to as CAM. We might consider these valuable methods as often consisting of traditional practices that have been stripped of cultural or religious significance.<sup>vii</sup>

Few doubt the importance of culture in fostering different ways of coping and achieving better health, but relevant and holistic research on this topic is sparse. Culture and social as well as historic contexts, while not the only determinants, shape the mental health of minorities. Currently, however, there is virtually no formal, policy-driven or funded support for any of the existing tribal specific health activities in the US.

#### Integrating traditional medicine and CAM for indigenous caregivers

The movement to restore cultural healing traditions among indigenous peoples is complemented by the integration and application of CAM methods for tribal and non-tribal peoples. CAM methods have an important role to play in supporting the health of tribal communities. One research initiative to support changes in tribal and public health policy to support the restoration and integration of traditional and CAM methods was developed by the Center for Traditional Medicine, an agency of the Center for World Indigenous Studies an Indian -directed non-profit research and education organization in Washington State.

A holistic randomized study was designed to provide information about the physical, mental, emotional, and spiritual response to Polarity therapy among American Indian dementia caregivers in the Pacific Northwest. The major aim was to assess the reduction of stress, which among caregivers is very high. The caregiver of a person with dementia experiences higher morbidity due to the stress of caregiving. Emotionally, s/he experiences the "ongoing living loss" of her family member, even as (s)he remains alive. This holds profound psychophysiological and spiritual implications for the caregiver. The study was designed to be culturally congruent and to respond to racial and ethnic health disparities. The polarity protocol provided a gentle energetic touch therapy for 1 hr a week for 8 weeks and a control group received another relaxation therapy and respite care for their family member. Polarity therapy, a syncretic energy medicine developed by Randolph Stone in the 20th century integrates traditional Ayurvedic medicine, energy meridian therapies and cranial-osteopathic medical practices. Health and healing are seen as attributes of energy that flow in natural and unobstructed states. The goal of polarity therapy is to trace by palpation and release by touch, energy blockages that lead to pain or dysfunction. Hands are placed at two poles of the body, facilitating polarization of subtle energy currents. Quantitative and qualitative data was collected on psychological, physiological and biological indices. Statistically significant results were demonstrated in a reduction of stress, depression and pain and increased in vitality. In Western Washington state tribal communities there are approximately 3,160 individuals caregivers.<sup>viii</sup> The delivery of holistic health services during the caregiver study met with great interest and benefits to caregivers who expressed their need for health interventions closely aligned with their own cultural practices

#### Tribal Canoe Healing Journey

A popular indigenous community event on the Pacific Northwest Coast is the Tribal Canoe Journey that takes place annually during the summer. The Canoe Journey is a celebration of life and Northwest Coast culture. Honoring the centuries-old custom of transport, harvest and trade by the Coast Salish tribes canoe teams, or families travel by canoe the traditional sea-ways of their ancestors in a journey of cultural revitalization and healing from historic and intergenerational trauma.<sup>ix</sup>

The return of traditional ocean-going canoe travels emerged in 1989 with the historic event, called the "Paddle to Seattle", when nine traditional cedar dug-out canoes paddling from tribal communities of Northwest Washington and British Columbia, made their journey to the Port of Seattle to coincide with Washington State Centennial Celebration.<sup>x</sup>

The arrival of the canoes is a grand ritual, marked by drumming, dance and song. Tribes proclaim their common history and their mutual respect and mutual interdependence. Tribal elders and leaders engage in a modern networking process, building new or renewing established alliances and strengthening family ties. American Indians are generally very connected to their immediate and extended families. For many indigenous peoples worldwide, social ties are the real indicator of a person's worth. Relationships to people as well as places are central to identity and well-being. The support from kin and family during the canoe journey is an important avenue of healing as is the expression of the shared dedication to maintaining indigenous traditions.

The canoe journey requires a year -round commitment by its participants to participate in rigorous physical and psychological training in a drug-free environment, while learning the ways of one's ancestors, including cultural practices, traditional foods and receptivity to the peace and serenity found in the outdoors.

Elders believe that through canoe-pulling, a tribe achieves perfect harmony and balance. Great healing occurs, naturally, out on the water.

#### Conclusion

Nothing can justify the delay in doing whatever we can to address the overwhelming health problems and the social and economic factors that contribute to the poor health of indigenous peoples. The medical community has begun to realize the relationship between traditional healing beliefs and practices and the maintenance of health among Native peoples.<sup>xi</sup> Full access to these health and related services of the highest quality has to be ensured.

Deliberate integration or elevation of Native healing with treatment methods- especially in areas where Biomedical treatment strategies have proven ineffective or cause damaging side effects. The positive results include self- confidence and pride and decrease in the chronic depression and other diseases

resulting from the stress of historical trauma and cultural disconnection experienced by many native people.

To reintegrate traditional healing back into tribal culture and reevaluate traditional healing practices will lead to increased willingness to share and discuss cultural healing practices. Individuals will learn to use medical practices lost to acculturation. The benefits of community healing and indigenous medical practices (as well as potential negative outcomes) should be explored and elucidated. Questions have to be asked such as: what are the benefits and disadvantages of combining indigenous healing practices with Biomedicine? The work of developing regulations that effectively protect the ancient treasury of medicinal knowledge and the people who own it must continue, not just for indigenous peoples but for all of humanity.

i World Health Organization (2003). Fifty-Sixth World Health Assembly, Resolution on Traditional Medicine, WHA 56.31, Geneva, [http://apps.who.int/gh/archive/pdf\\_files/WHA56/ea56r31.pdf](http://apps.who.int/gh/archive/pdf_files/WHA56/ea56r31.pdf)

ii United Nations Economic and Social Council E/CN.4/Sub.2/AC.4/1996/3 GE. 96-16751 (E) 11 June 1996 Commission on Human Rights Sub-Commission on Prevention of Discrimination and Protection of Minorities Working Group on Indigenous Populations Fourteenth session 29 July - 2 August 1996.

iii Ibid.

iv Trask, Haunani-Kay (1986). *Eros and Power: The Promise of Feminist Theory*. University of Pennsylvania Press, Philadelphia, p.177.

v Korn, Leslie and Ryser, Rudolph (2009). *Preventing and Treating Diabetes the Native Way*, Center for World Indigenous Studies, Olympia, Wa, USA, p. 12.

vi Guilmet, G. M. and Whited, D. L. (1989). *The People Who Give More: Health and Mental Health Among the Contemporary Puyallup Indian Tribal Community*. American Indian and Alaska Native Mental Health Research, Monograph 4. Denver, CO: University of Colorado Health Sciences Center, p. 27.

vii Rudolph C. Rýser, Ph.D. Leslie E. Korn, Ph.D. Clara W. Berridge (2008). *American Indian Caregiver Policy Study*, Center for World Indigenous Studies, Center For Traditional Medicine, Olympia, Washington, p. 10.

viii Rudolph C. Rýser, Ph.D. Leslie E. Korn, Ph.D. et. al, p. 24.

ix Cat Sieh, Potlatch marks end of tribal fest: Thousands celebrate week of Northwest native traditions at Lummi Nation, Bellingham Herald, Aug. 6, 2007.

x Elaine Streitberger, Paddle To Seattle, Celebrating the survival of a people and the endurance of their spirituality, in *The Ecology Of Media*, Fall 1989, page 9.

xi Guilmet, p. 26.