American Indian Perspectives on Healing from Historical Trauma: An Indigenous Inquiry

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American Indian Perspectives on Healing from Historical Trauma:

An Indigenous Inquiry

Renee Beaulieu-Banks, Kim Sundeen, Kyra Christopherson

St. Catherine University

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Acknowledgment

We acknowledge our seven generations: our great grandparents, grandparents, parents, and our children, grandchildren, and great grandchildren. We acknowledge the land of Minnesota, home of the Anishinaabe (Ojibwe), and Dakota (Sioux). We acknowledge the native creatures of this land, the prairie plains, and wooded forest. We acknowledge the lifegiving elements of air, earth, fire, and water, and see the pollution in our waterways like the toxins in our lungs. We can only rightfully acknowledge who has supported and informed this project, when we acknowledge those who have come before, and our children from whom we borrow the earth. Heartfelt miigwech to Wolverine and Char Leecy for Anishinaabe teachings and Anne Westfall for all the guidance during this work.

We created this project in, for, and by the community, and we wish to acknowledge the tremendous support for pursuing the topic of healing from Historical Trauma. Thank you to all the contributors who were generous in their presence and sharing, how you walk in the world is an immeasurable contribution. Tony, thank you for being an incredible, willing facilitator to use your gifts and create a safe, intentional space. The idea and space for this project was created with the guidance of our ancestors, families and teachers. Specifically, our teacher Dr. Carol Geisler, Associate Professor at St. Catherine University was instrumental in the development and progression of this project--the gift of this research sequence has left lessons for a lifetime. Miigwech to Renee’s parents and grandparents who made sacrifices for the love of their family. To Greg Banks, Renee’s husband who generously supported our research with cooking meals, sharing their home, time, and patiently catering to our needs. To Deanna and Natchez Beaulieu, Renee’s daughters who gave their time, advice, and artwork for this work. Thank you to Kim’s family for your love and patience, to Kareem for your support throughout this work and life, and Emray and Mina for being my greatest teachers. To Kyra’s family: Mom and Papa, your strength and love is a testament to the unconditional love provided by your parents. Du bist mein Herz. In the arms and lineage of this family, I have grown up to pass on the teachings of love and peace. Thank you, Lucas for being the best partner and rock, for seeing me, and helping me expand my vision. To my sisters, without you, I would not know the importance and blessing that community can be--you continue to be my sweet honey in the rock.
Dedication

We dedicate this work to Dennis Banks, also known by his Anishinaabe/Spirit name Nowacumig. Dennis was born in Federal Dam on the Leech Lake Indian reservation in Northern Minnesota and was the co-founder of the American Indian Movement. Missed by many people, he began his journey to the Spirit world on October 29, 2017. He was a son, father, brother, grandfather, uncle, a relative and a good friend.
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Abstract

American Indians in the United States have endured a collective history of deliberate mass extermination efforts for over 500 years, resulting in cumulative emotional and psychological trauma across generations, termed Historical Trauma (HT). Mounting research explores the myriad of responses (psychological, physical, mental and spiritual) to this trauma, known as Historical Trauma Response (HTR), within current American Indian populations. The majority of research regarding HT pertains to historical tragedies, inequities, disparities, and ongoing systematically induced deficits in American Indian populations with an emphasis on what can be done to fix it. Furthermore, contemporary Western research has not integrated American Indian perspectives and healing from HT. Based on Indigenous Inquiry and using a Talking Circle method, this qualitative study describes 10 American Indian perspectives on healing HT. The Talking Circle process of storytelling illuminated elements of an interrelated path of healing. Themes that arose from collaborator’s narratives are: connection, traditional healing, and purpose. These results offer insight into the strengths of American Indian ancestry and culture and highlight them as important components to healing HT through community. This study provides insight for American Indian community leaders as well as policy makers, educators and healthcare professionals working with American Indian populations. There is need for further research to explore Indigenous research methods, and to further validate and engage American Indians in healing through traditional ways.

Keywords: American Indian, Historical Trauma, Indigenous research, Talking Circle, healing, traditional healing.
Introduction

Conjure

There is a story.
There is a story that is painted upon the walls of flesh and skin,
Rises before the eyes in splashes of red ocher and cold clear wind.

The storyteller stretches the mind.
Leaping agile memory disguised as song.
It is all there trapped, or liberated, by coffee-stained words woven
Into the warm breath of cigarette smoke and desperate remembrance.
I saw it once--it shimmered and fell heavily against my auntie’s memory of Uppitt.
Uppitt. I smell it on the crisp taste of wind fingerling my hair, watering my eyes.

They say that the story doesn’t change, only the storyteller.
Maybe the feelings are all the same--but a baby dying from hunger knows
That it is loved as his mother, and hers, conjure milk from barren breasts.

There is no miracle of imagined milk for those starving for the purity of Truth.
She sheaths herself in chameleon red and doesn’t want to be recognized anymore.
Orphans, alienated from wardance songs, these babies are as husks.
Crouch in alleyways, huddle in dirty jackets, suckle booze, smell of piss and cedar.

Beauty can be found in the mouth of the teller.
The story creates the world. The Word. There is a story.
There is a story that is painted upon the walls of flesh and skin.
The brush of certainty caresses it sweetly with earth and tears.
There is a story with a different ending, imagining birth

Revah Mariah S. Gover Skidi/Tohono O’odham (Erdrich & Tohe, 2002).

Prior to European contact, there were approximately 5 million American Indian people in
North America.

By 1900, as a result of wars, genocide, disease, and forced removal and relocation, the
population of American Indians plummeted to numbers as low as 375,000 (Thornton, 2000). The
colonization that manifested with the birth of a new nation disembodied the interconnected ways
of living for the American Indian people (Kira, Fawzi, & Fawzi, 2012; Stolfi, 2015) and this long
history of traumatic experiences for American Indians has resulted in an epidemic of disparities.
To this day, when contrasted with any trauma belonging to the dominant white society of the United States, the effects of these colonized traumas reverberate disproportionately through American Indians’ individual and community lives in a multitude of ways. Echo-Hawk (2006) eloquently observes that “We [American Indians] live at the bottom of every socio-economic indicator, whether you’re talking about education, life-expectancy, or housing” (p. 29). While 1990’s literature conceptualized Historical Trauma (HT) as collective intergenerational trauma due to genocidal actions, research and contemporary treatment of this trauma paradigm have yet to demonstrate significant involvement from American Indian perspectives (Brave Heart, 2003; Kira et al., 2012; Kirmayer, 2012; Martinez, 2003; Myhra, 2011).

Since colonization, the Western paradigm for anti-pluralism has attempted to purge the country of American Indians and culture. For that reason, intergenerational trauma arose from genocide, legally sanctioned ethnic cleansing, forced acculturation, dis-emplacement, and alienation from the oppressor (Brave Heart, 2003; Duran, 2006; Mays et al., 2015; Portman & Garrett, 2006; Whitt, 1995). In this research, we use the term Western to reference to the Eurocentric worldview imposed on Indigenous people of North America (Murray, 2003). The agenda of the Western perspective has been to eradicate or assimilate American Indians into the dominant paradigm. This perspective paints a pathological profile picture of American Indians defined by considerable disparities that minimize the strength and resiliency of American Indian communities. However, American Indian communities have always adapted and progressed in the environment (Martinez, 2003), and continue to demonstrate incredible resilience, healing techniques, coping strategies, and cultural identities (Stolfi, 2015). Despite dehumanizing efforts of oppression and extermination (Council, S. T., 1991, American Indian people prevail.
In this paper, we define Historical Trauma (HT) as a result of deliberate attempts to exterminate a group of people (Brave Heart 1999). Most research surrounding HT pertains to historical tragedies, inequities, disparities, and ongoing systemically induced deficits in the American Indian population with an emphasis on speculating what the white Western society can do to “fix it.” While we found the inclusion of this information to be an integral part of healing HT, the perspectives and lived experiences of American Indians are missing in the literature. Therefore, we find it vital to provide a space for American Indian voices to be heard and acknowledged regarding the topic of healing from HT.

Initially, attempting to heal from HT involves an evaluation of the ramifications derived from HT, referred to as Historical Trauma Response (HTR) and unresolved grief (Brave Heart, Chase, Elkins, & Altschul, 2011; Duran, 2006; Sotero, 2006; Myhra, 2011). HTR is the conceptualization of the characteristics that result from HT (BraveHeart et al., 2011, McCabe, 2008). They include depression (Myhra, 2011), post-traumatic stress disorder (Bassett, Tsosie & Nannauck, 2012; Brown, Kallivayalil, Mendelsohn & Harvey, 2012), suicide (Goodkind, Hess, Gorman & Parker, 2012), substance abuse disorder (BraveHeart, 2003), anger (Whitbeck, Adams, Hoyt & Chen, 2004), violent and abusive relationships (Brown-Rice, 2013), and sexual abuse (Maxwell, 2014). The recovery process for healing American Indian HT is complicated as it may face obstacles, such as societal stigmas, lack of understanding by the general public, ongoing assimilation, continued oppression, and microaggressions that continues to perpetuate the unresolved grief of HT (Brave Heart & Debruyn, 1998; Goodkind et al., 2012; Kirmayer, Gone & Moses, 2014; Hodge, 2012; Sotero, 2006). Studies of traumatic processes developed from three paradigms: posttraumatic stress disorder (PTSD), psychoanalytic and development models (including child maltreatment and betrayal traumas), and intergroup paradigm (including
discrimination, genocide, micro & macro aggressions, and HT) (Kira et al., 2012). Currently, the third trauma paradigm, including the re-traumatization process by systemic social aggression, is under the scrutiny of study. Intergenerational trauma that embodies physical and psychological symptoms among American Indians is now a critical area of survey for both academia and the medical profession (Pember, 2016). Previous research on this topic is primarily from a Western worldview, which excludes the Indigenous paradigm (Duran, 2006; Mertens, Cram & Chilisa, 2013; Lambert, 2014; Wilson, 2001, 2008). The Indigenous paradigm is a worldview and an interpretation to create reality. Research from the Indigenous paradigm holds the agreement that knowledge belongs to the cosmos, and knowledge is perceived through ancestral knowledge, experiential, cyclical, subjective and intuitive ways. We don’t own knowledge, we interpret and care for it as we do the earth and each other (Lambert, 2014; Kopecz & Rael, 2016; Smith, 1999; Wilson, 2008). Continuing research from the Indigenous paradigm is vital to advance HT research (BraveHeart, 2006; Myhra, 2011), that includes American Indian perspectives from an Indigenous Research Paradigm (Lambert, 2014; Smith, 1999; Wilson, 2008).

Indigenous is a broad term we use throughout this study referring to people worldwide who identify as original inhabitants. We understand an authentic and respectful approach to refer to each tribe by the affiliated name, such as Anishinaabe, Dakota, Lakota and so forth. However, we use the term American Indians to reflect all tribal groups within Turtle Island, also known as North America, as we did not focus on one particular tribe in this research. We understand the importance and influence of language and reference these terms to gain insight into healing with HT from American Indian perspectives.

As researchers conducting an Indigenous Research Inquiry, we position this work within an Indigenous paradigm. Instead of pursuing a Western reductionist model that seeks to ‘cure’
and ‘conquer’ (Martinez, 2003), we build upon a mindset of interrelation and interdependence. From a dynamic state of harmony and balance, we align with the Indigenous philosophy that individuals connect to all of creation and each living thing is related to everything else (Duran & Duran, 1995). We acknowledge that traditional American Indian healing practices, such as the sweat lodge (Garrett et al., 2011), soul-healing (Duran, Firehammer & Gonzalez, 2008), and ceremonies and rituals (McCabe, 2008) are transformative and fundamental derivatives of the Indigenous paradigm’s values of meaning, balance, and wholeness (Murray, 2003). We honor the ancestors, the Earth, children, and each form of life in relation to every other living being. In affirmation of the Conjure poem, we know there is a story to be heard, and we are here to listen. We intend to be of open mind and heart to imagine a different ending.

The purpose of this research project is to describe American Indian perspectives on healing Historical Trauma. In the first chapter of this research study, we provide the literature review including an overview of HT, evidence and expansion of HT, the definition of the Indigenous paradigm, healing HT, and end with a summary. In the second chapter, we provide a description of our theoretical, personal, and professional lenses including our research paradigm and culture of Inquiry. In the third chapter, we describe the method of our research including the methodology, a call to community – sampling procedures, sacred tools - instrumentation, honoring the stories - data collection, teachings from stories - analysis, integrity/reliability and honor/validity, protection - ethical considerations, and design specific strengths and limitations. The fourth chapter introduces the results of the research study giving collaborator descriptions, and themes. The final and fifth chapter is on discussion focuses on the implications of our findings.
Literature Review

The purpose of this chapter is to review the literature on Historical Trauma (HT) and healing relevant to American Indians. First, we define HT and highlight the growing body of research related to the emerging field of HT theory. We then outline historical evidence of American Indian HT through collective experiences derived from both research literature and historical documents. Next, we describe implications of HT on the health and well-being of current American Indian communities. We then discuss the Western culture attempts to colonize American Indian communities through invasion and domination highlighting the continued systematic elimination of American Indian perspectives in recorded history and HT research. From there we discuss cultural practices for healing HT from an Indigenous Paradigm and perspective, including spirituality, traditional symbols, healing, and healing narratives. Lastly, we summarize our findings and posit our research question.

American Indian Historical Trauma

During the mid-to-late 1990s (Brave Heart & Debruyn, 1998) the conceptualization of American Indian HT emerged as an explanation for the social suffering, cultural bereavement, and regenerative stress of American Indian communities (Stolfi, 2015). Historical Trauma (HT) refers to collective trauma experienced by a group of people resulting in emotional, physical, and psychological wounding influencing future generations of the affected group (BraveHeart, 2003; Kira et al., 2012; Kirmayer, 2012; Myhra, 2011). In contrast to intergenerational trauma, which refers to the specific experience of trauma or individual experience of trauma that crosses familial generations, HT is shared collectively by communities of people resulting from heinous acts of brutality and oppression by a dominant group of people (Mohatt, Thompson, Thai & Tebes, 2014). Absolution of these traumatic acts by the dominant group stems from the
conviction that American Indians were soulless creatures, something less than human (Zinn, 2003).

Brave Heart & DeBruyn (1998) describe HT theory as a relatively new term. Although there is a growing body of research attempting to understand and include American Indian history, focusing on massive trauma, unresolved grief, and a legacy of genocide from American Indian perspectives, more research is needed (Brave Heart & DeBruyn, 1998; Brave Heart et al., 2011; Brown et al., 2012; Crawford, 2014; Duran et al., 2008; Hatala, Desjardins, & Bombay, 2016; Hodge, Limb, & Cross, 2009; McCabe, 2008; Myhra, 2011; Walls & Whitbeck, 2012; Whitbeck et al., 2004). As American Indian history includes more than five hundred years of genocide through mass extermination, legally sanctioned ethnic cleansing by prohibiting religious freedom and spiritual practices, family disruption with boarding schools, and forced acculturation, generations have endured HT affecting communities and individuals’ experiences (Mays et al., 2009).

While there is not sufficient space in this paper to describe all the traumatic events significant in American Indian history, the events we outline provide a depiction of the scope and impact of Historical Trauma for this population. We also acknowledge there is not just one voice among American Indians, because there is no such thing as a culturally and racially monolithic American Indian culture (Miheasuah, 2008) among the current 567 different federally recognized tribes in Alaska and North America (Bureau of Indian Affairs, 2017). However, American Indians share a history of oppression by the dominant culture through deliberate efforts of violent extermination (Deloria, 1988; Duran, 2006; LaDuke, 2005; Sotero, 2006; Stolfi, 2015).
Evidence of Historical Trauma

In this section, we outline evidence of HT by describing forced removal from land, biological warfare, religious and spiritual oppression, and forced separation of children from families through U.S. government boarding schools (Adams, 1995; Beltrán & Begun, 2014; Brave Heart, 2003; Denham, 2008; Duran, 2006; Evans-Campbell, 2008; Hatala et al., 2016; Hodge, 2012; Kirmayer et al., 2014; Maxwell, 2014; Mohatt et al., 2014; Schindlmayr, 2006; Sotero, 2006, Stolfi, 2015).

**Forced removal from land.** The history of American Indians forced removal from native lands, and cultural oppression spans the history of the development of the United States (Brave Heart, 2003). As Stolfi (2015) argues, this sense of place and belonging, which is fundamental to the American Indian cultural identity and belief system, was eliminated and displaced through generations, which reverberates in the research and more importantly through the lived experiences of individuals, forcefully disconnected from cultural ways of life. One path toward cultural recovery and wellbeing involves reconnecting with cultural healing practices (Stolfi, 2015).

In the words of Moreton, “the problem with white people is they think and behave like they own everything” (Moreton-Robinson, 2015, p xi). Columnist and editor, O’Sullivan (1845) exemplifies this ideology describing manifest destiny as a way “to overspread the continent allotted by Providence for the free development of our yearly multiplying millions” expressing the belief that Anglo-Saxon whites had the God-given right to expand westward and displace American Indians (as cited by Lewis, 2011, p. 50). As depicted in the below painting, manifest destiny illustrates an angelic character holding the Bible, smoothly gliding westward across America leaving behind industrialization while American Indians and wild animals flee in terror.
Manifest destiny, like all ideological power, is sanctioned by institutions and works to systematically eradicate American Indian and American Indian culture while simultaneously encouraging European settlement of North America. An example of such laws and legislation include the Indian Removal Act of 1830 (Cave, 2003; Fenelon, Trafzer & Trafzer, 2014; Lewis, 2011; Talbot, 2006). As the name clearly states, this law created by the United States government intended to remove Indians from native lands. As a result of this law, massive numbers of American Indians forced to relocate to foreign geographical locations (Thornton, 1987). What cannot be contained in the pages of this paper is the result of this military action causing disease, starvation, and the extreme harsh conditions that destroyed the ways of life for
the American Indians, particularly the obligatory spiritual and cultural connections American Indians had for Mother Earth (Deloria, 1988; Edmunds, 1995; Fenelon et al., 2014, Poupart, 2003; Romeyn, 2003; Talbot, 2006; Thornton, 1987). In addition to the Dawes Act of 1887 signed by President Cleveland reinforcing the individualism of Western culture onto the American Indians (Otis, 1973), it also resulted in additional loss of common American Indian lands to white folks who often ‘bought’ it in a scandalous capitalistic way.

Forced migration continued into the 20th century, as the federal government’s assimilation policies relocated around 160,000 American Indians from tribal reservations to urban environments throughout the 1950’s (The Relocation Act of 1956). The urban relocation of an entire generation occurred without sufficient support (e.g., jobs, housing, culturally appropriate health care, etc.) creating myriad disparities. Additionally, urban relocation perpetuated the American Indian experience of cultural alienation (Mays et al., 2009; Stolfi, 2015).

In addition to removal from the land, the United States Government utilized strategies to destroy American Indian ways of life through deliberate destruction of plants and animals used for food and medicine. As Thornton (1987) elaborates, destroying crops was a strategy universally adopted by European troop commanders warring against American Indians to destroy the tribes’ food supplies. The destruction of the buffalo also resulted in vast starvation and the social and cultural collapse of many Plains tribes (Thornton, 1987). In addition to the laws that disrupt and eradicate American Indian culture, the contemporary image of American Indians painted by current scholars creates a picture of pathology stemming from American Indians deficits rather than highlighting the systemic injustices that have created such disparities. The perpetuation of such images through “evidence” creates a bleak and hopeless future further
supporting the Western cultural agenda and does not accurately portray the strength and resiliency of American Indians. (Kira et al., 2012; Pember, 2016; Stolfi, 2015).

**Biological warfare.** Given the definition of war, which is a state of active, armed operations, the American government has been at war with the American Indian people throughout the nation’s history. The U.S. War Department, established in 1789, achieved massive removal and relocations of American Indian tribes in the 19th century (Thornton, 1987). In addition to physical relocation, the government conducted biological warfare. Hodge (2012) states the distribution of deliberately infected smallpox blankets to American Indians was responsible for the annihilation of half of the tribal populations across the U.S. (Deloria, 1988; LaDuke, 2005; Smith, Cousineau, & Rhine, 2006; Thornton, 2000). To understand HT, we had to go back to history to glimpse an understanding of the context from which this ongoing trauma occurs.

Contemporary research does not dwell in the history of wars and rampages, yet this history is relevant to what is happening today. One excellent illustration of modern U.S. warfare toward American Indians is the ongoing militaristic violence against non-violent American Indian people and protesters at the Standing Rock reservation (Schandorf & Karatzogianni, 2018). At Standing Rock Indian Reservation, American Indians and allies demonstrated against the Dakota access pipeline in peaceful ways. In violent reprisal, law enforcement started fires, bulldozed camps, sprayed chemicals and water during freezing temperatures, used dogs to attack and intimidate resisters, shot rubber bullets resulting in injuries, used intimidation with large machinery, and cut off food supplies (Macdonald, 2017). This historical and contemporary timeline of governmentally sanctioned physical violence interplays with the overt and covert oppression of American Indian culture.
Religious and cultural oppression. Freire (1968) defines oppression as an overwhelming control enforced through acts which prevent others from being fully human and force them to exist in environments where oppressors see themselves as human beings and the oppressed as objects. Oppressed individuals are economically and politically powerless due to a culture of silence and lack of voice to determine destiny (Poupart, 2003). After 1492, European Americans began colonizing, settling among, and establishing control over, the American Indian people living in what is now known as the United States through a process of subjugation (Cave, 2003; Fenelon et al., 2014; Chilisa, 2012; LaDuke, 2005).

As Chomsky, Mitchell and Schoeffel (2002) explain, part of the whole technique of disempowering people is to make sure that the real agents of change fallout of history. The dominant culture never fully recognizes oppressed peoples for the contribution they make. This renders a distortion of history. The term ‘American’ is a colonizer term that silences and makes invisible all other nations that exist on the “American” continents, including sovereign American Indian nations. This distortion technique is an effective tool to teach U.S. citizens “Great White Men’ hold the power (Chomsky, Mitchell & Schoeffel, 2002). Luther Standing Bear (Sioux) (1987) reaffirms, “The white man does not understand the Indian for the same reason that he does not understand America. He is too far removed from its formative process” (as cited in Thornton, 1987, p. 3).

Colonizers used religion to justify and carry out this oppression through ideology, followed by action (Smith et al., 2006). The diverging viewpoint of Western culture that categorizes spirituality within an institutionalized context of religion uses religious iconography to create an image of white cultural superiority. An example in the depiction of the previous painting, American Progression, where an Angel is clearing the land of American Indians, Bible in hand,
proving Western colonizers have a God-given right to take it. While no American Indian language even had a word for “religion” (let alone institutions, dogma or commandments), American Indian spirituality encompasses a deep spiritual force culminating in a sacred way of life (rather than a belief system), enriched by ceremonies, songs, storytelling, and poetry that forms a complex interconnected heritage with nature and the spiritual path (Smith et al., 2006).

As described by Eastman (1980),

There are no temples or shrines among us save those of nature. Being children of nature, we are intensely poetical. We would deem it sacrilege to build a house for The One who may be met face to face in the mysterious shadowy isles of the primeval forest, or the sunlit bosom of virgin prairies, upon dizzy spires and pinnacles of naked rock, and in the vast jeweled vault of the night sky (p. 6).

The spiritual path called the Good Red Road by many elders also emphasizes community and the great web of life connecting all living things beyond the illusion of separateness marked by institutionalized religions of the world (Smith et al., 2006).

The superiority embedded in the dominant culture through an entirely different spiritual and cultural perception of the world, including the objectification of American Indian peoples, justified actions of cultural and religious oppression of American Indians (Wilson, 2001). The 1883 Indian Religious Crimes Code formally outlawed “pagan” ceremonies under the recommendations of the Secretary of the Interior to eliminate barbaric practices including dances, feasts, traditional religious ceremonies, and the practices of Indian spiritual leaders punishable by imprisonment (Fine-Dare, 2002; Wilson, 2001). A meaningful ceremony, called the Ghost Dance, caught the attention of the U.S. Government.
During the late 1800s, the Ghost Dance spread across tribal nations in the U.S. and the dominant White society saw this dance as a threat (Cave, 2003; Fenelon et al., 2014; Thornton, 1981). The Ghost Dance came in a vision to Wovoka, of the Paiute tribe. According to Mooney and the Smithsonian Institution (1973), his people considered Wovoka a ‘messiah’:

After showing him all, God told him he must go back and tell his people they must be good and love one another, have no quarreling and live in peace with the Whites...where there will be no more death or sickness or old age. He was then given the dance he was commanded to bring back to his people. By performing this dance at intervals, for five consecutive days each time, they would secure this happiness to themselves and hasten the event (p. 772).

Indian people across the nation were suffering from starvation, disease, and death - the Ghost Dance was the last hope (LaDuke, 2005; Deloria, 1988; Thornton, 1981). Thornton (1987) shares an 1890 report from the U.S. Commissioner of Indian Affairs which exclaimed,

...the Great Spirit has promised them that their punishment by the dominant race has been sufficient, and that their numbers having now become so decimated will be reinforced by all Indian who are dead; that the dead are all returning to re-inhabit this earth, which belongs to the Indians; that they are driving back with them, as they return, immense herds of buffalo, and elegant wild horses to have for the catching; that the Great Spirit promises them that the white man will be unable to make gunpowder in future, and all attempts at such will be a failure, and that the gunpowder now on hand will be useless as against Indians, as it will not throw a bullet with sufficient force to pass through the skin of an Indian (p. 148).
The appearance of U.S. military troops in Pine Ridge to stop the Ghost Dance caused tension among the American Indians, resulting in the shooting death of unarmed Hunkpapa Chief Sitting Bull. The attackers justified the violent execution of Chief Sitting Bull citing American Indian failure to stop the Ghost Dance practices as the cause (Andersson, 2008; Deloria, 1988; LaDuke, 2005). Additionally, the Lakota people obstructed the government’s intention to gain ownership of the Black Hills reinforcing the removal of the occupants of Wounded Knee.

Below is a song sang by the Lakota after word spread about the Ghost Dance:

\[
\text{The whole world is coming,} \\
\text{A nation is coming, a nation is coming,} \\
\text{The eagle has brought the message to the tribe.} \\
\text{The father says so, the father says so.} \\
\text{Over the whole earth, they are coming.} \\
\text{The buffalo are coming, the buffalo are coming.} \\
\text{The crow has brought the message to the tribe.} \\
\text{The father says so, the father says so.} \\
\]

(Mooney & the Smithsonian Institution, 1973, p. 1072).

Due to the European agenda (eradication or assimilation) coupled with a lack of understanding regarding the symbolism of the Ghost Dance, the government abolished the right for Indians to practice spiritual traditions (Kracht, 1992). Meanwhile, in 1890, the massacre at Wounded Knee occurred killing nearly 350 Lakota including elders, women, and children (Andersson, 2008; Brown, 1971; Kracht, 1992 & Mooney & Smithsonian Institution, 1973).

The bodies of the slaughtered men, women, and children were found lying about under snow, frozen stiff and covered in blood… A number of women and children were found scattered along for 2 miles from the scene of the encounter, showing that they were killed while trying to escape….no one went out to say a prayer over the poor mangled bodies of these victims of war (Mooney & Smithsonian Institute, 1973, p. 876).

To this day a mass grave bears the evidence of this massacre.
After the tactics as mentioned above of the U.S. Department of war failed to achieve the goal of exterminating American Indians and American Indian culture, the government designed new operations and identified a new target: American Indian children.

**Boarding schools.** As a subdivision of the Department of War in 1824, the federal government gave the Bureau of Indian Affairs (BIA) the task of civilized American Indians according to European American standards through education (Charbonneau-Dahlen, Lowe, & Morris, 2016). Initially, the first 307 schools operated as day schools on reservations; however, parental influence impeded assimilation. As a result, in 1876, the federal government deemed it necessary to remove all American Indian children from families to the confinement of boarding schools. Methods used to enforce mandatory boarding school attendance enforcement included restricting rations or imprisonment for those American Indian parents refusing to have children ripped away from the family (Adams, 1995).

The philosophy of boarding schools, “Kill the Indian; Save the man,” was a phrase coined by Captain Pratt, who modeled the first American Indian boarding school after a prison (Pember, 2016, p. 14). A chilling example of this philosophy and the intention of the boarding schools are outlined in a speech by Lippincott stating, “You cannot become truly American citizens, industrious, intelligent, cultured, civilized until the INDIAN within you is DEAD” (as cited by Adams, 1995, p. 274). The schools intended structure was to brainwash American Indian children, similar to tactics used by cult leaders to coerce recruits into new ways of thinking, with the intention to completely erase the cultural ways and identities of American Indian children from as young as four years old (Charbonneau-Dahlen et al., 2016).

The fundamental mission of these schools was to exterminate children’s American Indian beliefs and foundational attachments (Reyhner, 2004). The boarding schools were often places of...
corporal punishment, varied abuse, contagion, and disease; some schools even needed to have cemeteries due to the high death rate (Stolfi, 2015). Upon initiation to the boarding school, the administration cut the children’s hair for fear of head lice. Most Indian tribes believe that long hair is medicine and upon cutting the hair, the medicine leaks out (Treuer, 2012). The history of mandatory boarding schools from the late 1800s to mid-1900s set the stage for more than six generations of American Indian children who grew up with social fear and shame (Charbonneau-Dahlen et al., 2016). A culture of silence grew out of the horrific traumatic incidents at boarding schools, with individuals and families surviving by avoiding the painful stories (Duran et al., 2008). The indifference, discrimination, maltreatment, and oppression of American Indian children and American Indian culture remain buried in stories untold to this day (BraveHeart et al., 2011; Charbonneau-Dahlen et al., 2016; Denham, 2008; Edmunds, 1995; Evans-Campbell, 2008; Poupart, 2003). In the next section, we explore the ramifications of these heinous acts on present-day American Indian populations.

**Expansion of Contemporary Historical Trauma**

Evidence linking past trauma to current American Indian populations is emerging (Bombay, Matheson & Anisman, 2014; Brokenleg, 2012; Crawford, 2014; Evans-Campbell, 2008; Schindmayr, 2006). Research is mounting regarding the influence of Historical Trauma (HT) impacting subsequent generations, known as Historical Trauma Response (HTR). Disparities resulting from HTR are illustrations of the disproportionate number of inequities experienced by American Indians including high rates of addiction, suicide, mortality rates, mental illness, sexual violence, greater substance and alcohol abuse, higher poverty rates, diabetes, obesity, and both over and under medication than other cultural groups, mainly White Europeans (Bombay et al., 2014; BraveHeart, 2003; BraveHeart & DeBruyn, 1998; Denham,
American Indians are 1.6% of the general United States population, with a life expectancy of 63 years old compared to 74 years old of Americans of European descendant. In addition, the rate of alcohol abuse is six times higher, and the suicide rate is 60% higher in American Indians when compared to European Americans (Horowitz, 2012). Mental illness, dysfunction, and self-destructive behaviors affect nearly 21% of American Indians (Mays et al., 2009). As acknowledged by Center for Disease Control and Prevention,

Today, American Indians and Alaska Natives have higher rates of disease, injury, and premature death than any other racial and ethnic groups in the United States…. These afflictions result from historical insults and injustices, perpetrated over many generations, including massacres, genocidal policies, epidemics from introduced diseases, forced relocation, removal of children through boarding school policies, and the prohibition of spiritual and cultural practices (including use of Native languages)” (CDC, 2017, p. 4).

Even though the statistics are alarming, researchers continue to unravel the meaning and impact of HT. According to Myhra (2011), “Despite the fact that most, if not all, American Indian communities have been touched in some extent by Historical Trauma, the degree to which individuals suffer from it, and the number of those affected, is unknown” (p. 19). There is significant evidence that HT perpetuates in American Indians’ youngest generation. As Pember (2016) explains, “In 2013 all of the babies born addicted to narcotics that were being served by the neonatal unit at the Duluth [Minnesota] Hospital were Native American” (p. 9).

While acknowledging Historical Trauma (HT) as a contributing factor in the health and wellbeing of American Indians is a start, the contemporary efforts of academic research maintain
a limited focus on defining HT. The focus is on analyzing the theoretical framework, conceptualizing and exploring the psychological implications of the embodiment of HT in an effort to intervene with tools and solutions through the lens and methods of inquiry of the dominant culture (Crawford, 2014; Hodge, 2012; Mohatt et al., 2014; Sotero, 2006). There is minimal recognition that American Indian nations of North America were already operating under precise and well-understood principles for millennia before European contact, providing a magnitude and depth of spiritual history and heritage in belief systems linked to interdependent relationships and balance (Benton-Banai, 1988; Hukill, 2006). Additionally, Western Eurocentric society often ignores American Indians as authorities on personal histories and cultures, resulting in literature and essays written about American Indians from non-Native viewpoints (Miheuah, 2003).

Consequently, what is missing from the academic research is American Indian descriptions of healing HT through the American Indian lenses (Duran, 2006). The overt act to “replace and erase” American Indian culture as indicated above leaves a void of the American Indian perspectives in the historical accounts as documented by the dominant White culture. The many layers of HT are challenging to compartmentalize and resolve. In the next section, we address the intersection of dominant culture and American Indian populations through oppressive actions guided by the European-Western worldview.

**Invasion and Domination of Western Culture**

“Where today are the Pequot? Where are the Narragansett, the Mohican, the Pokanoket, and many other once powerful tribes of our people? They have vanished before the avarice and the oppression of the White Man, as snow before a summer sun” Tecumseh (Shawnee)

(Thornton, 1987, para. 1)
According to Oswalt (2009), a discrepancy exists between what anthropologists predict the population of Indians was before European contact. While historians cannot reach an agreement about the number of lives lost during the violent invasion, the 1900 Census reported there were 237,196 Indians at the beginning of the twentieth century (Edmunds, 1995; Hukill, 2006; Thornton, 1987). This invasion and interaction resulting in the oppression of American Indian culture resound in an environment of forced assimilation to the dominant European-Western worldview (Duran et al., 2008).

The definition of dominant culture (previously defined as ‘white man’ by Luther Standing Bear) is the culture that yields the most power and influence in a multicultural system whose traits in language, religion, values, rituals, and social customs are often taken as the norm in the U.S. (Thornton, 1987). Thus, the laws, policies, and even history placed into the foundation of the systems represent the dominant culture’s views, thoughts, and experiences. The impact of European-Western worldview as the dominant culture significantly influences the history and current environmental factors of the American Indian resulting in the untold truth in the literature (LaDuke, 2005; Murray, 2003).

The philosophical worldview influences perceptions about life and all that is around us, and subsequent actions and behaviors whether we are aware of this or not (LaDuke, 2005; Murray, 2003; Myhra, 2011). The importance of this lies in assuming a universally shared understanding of what is around us, and decisions and detrimental actions to those that don’t share the same views (Jones & Nichols, 2013). “The fundamental factor that keeps Indians and non-Indians from communicating is that they are speaking about two entirely different perceptions of the world” (Deloria, 2006, page XVIII). European worldview imposes ideologies such as Manifest Destiny and assimilation. Red Fox’s (Sioux) words encompass the sentiment of assimilation,
“Although I have adapted to my environment, like immigrants have done, I am still a native of the wilderness” (Thornton, 1987, p 159). From the worldview of Manifest Destiny, colonizers considered American Indians non-citizens moreover subhuman, and mostly an obstacle to obtaining land--resulting in laws implemented to vanquish American Indians. The 1790 Naturalization Act wouldn’t even allow an American Indian to be “immigrants” and naturalized because the law only allowed an individual to become a citizen of the United States if they were a white person (Spring, 2001). In fact, American Indians were not allowed U.S. citizenship until the Indian Citizenship Act of 1924, which was a policy of U.S. Congress to assist American Indian assimilation (Spring, 2001).

An exhaustive list of extermination efforts, assimilation attempts, and genocidal expungements by the U.S. government are too extensive to cite, however, specific federal and state laws, acts, policies, and legislation outline a compelling case to erase American Indian culture and assimilate remaining American Indians into the dominant culture (Deloria, 1988; Graves & Ebbott, 2006; LaDuke, 2005; Smith, 2006; Thornton, 1987; Treuer, 2012). In the context of American Indian HT, it is essential to acknowledge the environment and dominant cultural worldview in which these policies came to fruition through the dominant cultural worldview. The Indigenous paradigm and perspective on healing with American Indian HT is not only missing in the dominant culture, but it is also vital to understanding and addressing American Indian HT (Duran et al., 2008; Stolfi, 2015). Therefore, we do not discuss white privilege and systemic racism in a conscious effort to keep the voice and perceptions of American Indians in the forefront instead of veering into focus on the dominant culture and seek an opportunity for listening instead (DiAngelo, 2011, p. 55).
Within the discussions of healing HT, some argue that HT requires Westernized interventions, while others say that treatment must acknowledge HT and approach healing through Indigenous ways and worldview (BraveHeart, 2003; Duran, 2006; LaDuke, 2005; Matamonasa-Bennett, 2017; Pember, 2016). We contend that research need not only approach healing American Indian HT from an Indigenous perspective, moreover that the research itself need to be through an Indigenous epistemology.

**Indigenous worldview.** The Indigenous worldview is an acknowledgment of shared commonalities collectively held among tribes (Kovach, 2009; Wilson, 2008). Later, we address the Indigenous worldview, also known as Indigenous Paradigm, as a Theoretical lens. The Indigenous worldview bases its ontology or ways of knowing on pluralist knowledge systems that emphasize that one’s connection is to all of creation (Duran & Duran, 1995; Whitt, 1995). There is a knowing that ‘we are all related’ and Native People are rooted intimately within Indigenous epistemologies, cultures, and traditions (Absolon, 2010). Portman & Garrett (2006) describe how holistic treatment of Historical Trauma is foundational in the Indigenous Paradigm, as American Indians believe healing practices and traditions function from the context of four quadrants as symbolized in the Medicine Wheel: spirituality (Creator, Mother Earth, Great Father); community (family, tribe, nation), environment (balance, daily life, nature), and self (purpose, peace, values) (Duran & Duran, 1995).

From an Indigenous Paradigm, holism replaces (Western) reductionism, and there are different ways of knowing guided by respect and intuition rather than the mind and understanding (Murray, 2003). Each tribe has a creation story that connects its people to the Creator and emphasizes the purpose of the community instead of individuality. Indigenous ways are often internal, and it is an experiential journey that goes beyond the boundaries of a
theoretical framework (Kovach, 2009). Within the Indigenous paradigm, the truth is a matter of intuitive knowing, of discovering the life force connection to the Creator (Wilson, 2008).

In Duran’s (2006) book, Healing the Soul Wound, he emphasizes the important role of spirituality for American Indians in healing and building resilience. The United Nations expounds that meaning is an essential component for healing for victims of trauma, and that acknowledging and honoring spiritual or religious beliefs are critical to the healing process (Murray, 2003). Research is simultaneously presenting that mindfulness and spirituality engage the prefrontal cortex of the brain, which is the area of the brain to access healing of trauma (Pember, 2016). Therefore, the interrelatedness and spirituality of the Indigenous Paradigm provide healing and effective medicine, recognizing that the healing process connects intrinsically with relationships and responsibilities, with spirituality, nature, and community (Martinez, 2003). Integrating the four quadrants of life is “doing medicine” to heal which includes: language, traditional foods, ceremonies, spiritual beliefs, stories, songs, plants, prayers, gifts, and kindness (LaDuke, 2005; Martinez, 2003; Pember, 2016).

In fact, the term healing, from an Indigenous Paradigm, is associated with actions of doing medicine; medicine and medicinal ways are much more than a Westernized view of an external source of help—and it is indeed not just pills (Martinez, 2003; Pember, 2016). “Medicine is life. Life is medicine” (Martinez, 2003, p. 82). Medicine is “the essence of life or an inner power” (Portman & Garrett, 2006, p. 7), it is both physical and non-physical (Martinez, 2003). Medicine and the healing process is a complex belief system that involves balance, harmony, and conscious existence for all and with all our relations. On the search for well-being, a person needs to have the readiness to change and willingness to address negative patterns (Matamonasa-Bennett, 2017). In this way, behaviors such as substance abuse, from a traditional perspective,
would be an indication of a more profound, spiritual lesson (Portman & Garrett, 2006). Healing is an interconnection between the building of and maintaining relationships; it is a context that requires the strengths that traditional beliefs, practices, and resources provide (Horowitz, 2012; Martinez, 2003).

**Healing from American Indian Perspective**

The purpose of this section is to review the literature on healing from American Indian perspectives. We first define healing and the context of healing from an Indigenous Paradigm. We then focus on forms of healing through traditional healing ways, prayer and spirituality, soul retrieval and finally stories and healing narratives. Although healing is not limited to these notions, our review of the literature in connection with our question and purpose leads to outline healing in these ways. We found the academic research regarding American Indian perspectives of healing is mostly concentrated amongst significant American Indian researchers such as Brave Heart, Duran, Garrett, Martinez, Myhra, Treuer, and Sasakamoose to name a few. American Indian contributions and the contemporary Indigenous Inquiry body of research establish the foundation of our concept of healing from an Indigenous Paradigm.

**Traditional healing.** The term ‘traditional’ in the American Indian paradigm distinguishes that there is no ‘one way’ or right overarching process since all tribes’ practices are different (Treuer, 2012). Treuer (2012) describes one form of ‘traditional’ when he talks about community practices of holding ceremonies. For instance, Red Lake Nation in Minnesota continues to follow traditional funerary rites and has the highest Indigenous fluency of American Indian communities within the state. American Indian communities demonstrate that practicing traditional ways of healing greatly benefits the community members and provides a collective healing and a greater sense of being (Martinez, 2003; Treuer, 2012). The interrelation of social
and Indigenous perspectives addresses the need to move forward with integrating traditional healing practices (McCabe, 2007). Historically American Indian healing traditions involved traditional medicine practitioners such as medicine men and women, herbalists, and shamans who conduct healing and purification ceremonies and therapeutic activities such as songs, prayers, dancing, sand painting and use of herbs, teas and special foods (Murray, 2003).

Shamanism is a controversial term in the American Indian communities. Anthropologists coined the term ‘shaman’ from the Tungus or Evenki language and used it universally (Pharo, 2011). There is not a neutral term for ‘shaman’ across languages as tribes and communities have their native term for these types of healers. Pharo (2011) shares that shamans are healers who can travel to the spirit world, either the upper or lower realms to heal lost souls.

Traditional healing maintains the importance of seeking harmony with oneself, others and one’s environment (Portman & Garrett, 2006); spirituality is essential and spoken of as walking the path of good Medicine and being in harmony and balance with all our relations. It is important to remember the connection that medicine has to all creation and our responsibility to acknowledge this as Indigenous paradigmatic beliefs (Martinez, 2003). Healing encompasses all time (past, present, and future) to call for spirits’ help in guiding and to hold a spiritual perspective. (Portman & Garrett, 2006). Each American Indian tribe has stories, ceremonies, prayers, and traditions derived from tribal history, creating traditional healing practices and ceremonies including smudging, blessing way, pipe, Sun Dance, sweat lodge and vision quest (Martinez, 2003; Portman & Garrett, 2006).

Rather than solely relying on evidence-based medicine to fix ailments and issues, healing defined by Indigenous perspectives refers to healing as relational integrity. Healing this way differs significantly from the dominant Western society, as the notion of healing holds a different
purpose. Tribes have various traditional healing methods such as relying on the power of the spirit, prayer, the influence of ancestral wisdom, looking to plants and animals for greater understanding, and performing a ceremony to maintain health and better understand self (McCabe, 2007). While in the United States there are 567 federally recognized tribes, there are many similarities regarding healing across the United States and Canadian tribes (Bureau of Indian Affairs, 2017; McCabe, 2007; NCAI, 2003).

Integrating traditional methods of healing within a colonized structure continues to gain attention by Indigenous community practitioners and researchers (Brave Heart, 2003; Duran, 2006, Gone, 2009; Martinez, 2003; Treuer, 2012; McCabe, 2007). The interrelation of social and Indigenous perspectives addresses the need to move forward with integrating traditional healing practices (McCabe, 2007). Historically American Indian healing traditions involved traditional medicine practitioners such as medicine men and women, herbalists, and ‘shamans’ who conduct healing and purification ceremonies and therapeutic activities such as songs, prayers, dancing, sand painting and use of herbs, teas and special foods (Murray, 2003). Today the National Advisory Council for Complementary and Alternative Medicine (NACCAM) considers practices from traditional healers a form of complementary and alternative medicine (CAM) (Horowitz, 2012). Before European contact, American Indians grew and harvested food sustainably, and administered healing herbs and plants. The way of life of the American Indian spans over millennia, and settlers appropriated agricultural practices and healing medicines.

Collective practices and traditions continue to offer powerful ways for individuals and families deal with trauma, such as a Sun Dance ceremony (outlawed until the Freedom of Religion Act of 1978, Portman & Garrett, 2006) demonstrate cycles of regeneration in singing, drumming and dancing (Strayer, 2012). Across tribal nations, unique traditions have held
important purpose of restoring harmony and balance, and honoring the process of transformation for the individual, family, clan, community, and nation; yet still to this day American Indian practices, ceremonies, and traditions are denigrated by Western culture (Portman & Garrett, 2006). For example, by naming traditional methods as an “alternative” form of “fixing” an individual, rather than viewing these practices as personal and collective traditions that bring wholeness and healing into the mind, body, environment, and spirit, Western culture again fails to acknowledge American Indian perspectives and Indigenous Worldview.

**Spirituality.** From the Westernized paradigm, researchers reference spirituality as a practice or a concern held by individuals, which is attached to religious values (Merriam-Webster, 2018). Pember (2016) asserts that from a colonized worldview, people conceptualize and segment spirituality into practical forms of religion or even sometimes as a briefly mentioned method to reach heightened states of personal satisfaction and resilience (Pember, 2016). Pember (2016) cited an example of this being the American Psychological Association (APA)’s promotional response to build resilience from trauma through “additional ways” such as meditation and spiritual practices (p.7). Spirituality from Indigenous perspectives is not separable or a means through which to achieve an outcome, it is one of the components of holistic health that is prominent in American Indian culture. Unlike Western medicine, American Indians include spirituality in everything on earth including Mother Earth. “American Indian notions of health and well-being are deeply rooted in a culturally and spiritually embodied sense of place and relationship to land” (Stolfi, 2015, p. 3). Therefore, returning to the land, returning to traditional ways through a spiritual journey enables people to understand themselves better, where they come from and choose a healing path for the future. Furthermore, Indigenous researchers authenticate how this integral spirituality embeds in American Indian culture. Duran,
a renowned psychologist, and researcher attest to the importance spirituality hold in the American Indian worldview, that for successful healing to occur, trauma therapy must address the spiritual root of the trauma (2006).

**Soul wound.** To restore balance, addressing the soul wound is vitally important to emotional and cognitive health, overall positive well-being, and freedom from psychological suffering brought on by marginalization and oppression in the general public (Duran, 2006). In the assertion of research findings, American Indian community members and the literature have identified a need for recognition of HT in prevention and intervention using community-based strategies (Goodkind, LaNoue, Lee, Freeland & Freund, 2012). As Strayer (2012) finds, “people look for different ways to live their lives. A lot of Native American ways are healing, positive, approaches” (p. 1).

Brave Heart (2003) shares extensive community-based work with HT demonstrating that culture-specific interventions are critical to the healing process. In promotion of healing HT, research demonstrates necessary components: recognizing/healing HT, reconnecting with traditional culture, building parent/social (coping and communication) skills, increasing social and community support, reframing negative experiences, strengthening tribal identity, and strengthen spirituality (Goodkind et al., 2012; Matamonasa-Bennett, 2017). Duran et al. (2008) and research collaborators expound further describing the soul wound as a dissection and disconnection of a soul part during a traumatic event. Shaking Tent healers provide a discrete healing practice of soul retrieval that integrates the fragmented soul part held in the spiritual realm (Duran, 2006). Once considered crimes enforceable by imprisonment or death, government officials enforced harsh consequences for individuals and communities practicing traditional American Indian ways of life (LaDuke, 2005; Deloria, 1988). Healing practices took
place underground and in secrecy as enforcers strictly forbade the utterance of any traditional ceremonial words. It is a belief that healing is interrelated with spiritual practices, mindfulness, physical health, and oral narratives shared in all relationships (Kopacz & Rael, 2016).

**Stories and healing narratives.** As McCabe (2008) states, the sharing of healing narratives supports the inner dialogue because it helps to remove blockages of emotions and thoughts, particularly about the self. As a person tells a story, they re-experience the whole event, not just parts of it (Duran, 2006). Consciousness, whether derived from experience or story embodies in our being (Strozzi-Heckler, 2014); therefore, to experience an integral awareness and storytelling can create a powerful new map for change for an individual, group and or the community. The sharing of one’s experience holds a strong connection between client and healer, which then can be an opening for new action (McCabe, 2008).

As Martinez (2003) shares,

> Stories keep us connected. Stories are a way to share our hardships that teach and help us learn as well as to share a laugh. The stories are for people to use and tell in their personal ways to keep in balance and harmony with and for all. The story may be told to specifically help in healing or to offer knowledge but it is not guaranteed. Sometimes, stories are told because there is an opportunity to do so. It is very powerful (p.134).

Power is a way that humans create reality; people experience power through awareness, choices, intentionality, and involvement in creating changes. The act of sharing wisdom is a powerful tradition in American Indian communities: it plays a significant role in setting in a converging of the reality and tailoring the pattern and meaning from the imagined (Gone, 2010). The sharing and telling of one’s story is an important cultural value and tradition for American Indians and within the context of storytelling, there is an opportunity to reframe negative past
experiences. When viewed from the Indigenous paradigm, stories are medicine (Matamonasa-Bennett, 2017). Research supports this idea by showing that storytelling from a traditional healing approach is effective for a diverse range of people from Native youth to those suffering from substance abuse, even cancer (Horowitz, 2012).

An Indigenous perspective of storytelling presents a worldview of “life, love, and the pursuit of harmony” while the narrative from the Western paradigm paints a different picture, one that seeks, “life, liberty, and the pursuit of happiness” (Portman & Garrett, 2006). Whitt (1995) argues that from the dominance of Western thought, an epistemology of anti-pluralism devalues, dismisses and destroys alternative ways of thinking. For example, from the early days of Western ideologies of healing, the power of the Church and its influence over the practices of the priests continue to colonize and oppress American Indians (Duran, 2006). The one-sided metaphoric healing techniques used by the priests are incongruent to American Indian cultural beliefs systems, impeding American Indian healing and promoting institutional racism and social injustice (Duran et al., 2008). As willful as mental health and health practitioners are today regarding the examination of professional health care practices, Western ethnocentricity fosters the types of social injustices and conformities that are responsible for the creation and conservation of HT which also surface in these health professions (Duran, 2006; Maxwell, 2014). Thus, it is imperative that practitioners, researchers, and community members incorporate the Indigenous paradigm and American Indian cultural healing traditions, and approach healing HT by addressing the underlying wounded spirits through this new narrative (Horowitz, 2012).

If someone is left defenseless and prohibited from fleeing or fighting back (as is the case for HT), the automatic sympathetic physiological response system fails, and the individual remains with a triggered unresolved traumatic response (Murray, 2003). Ongoing trauma
exposure produces prolonged grief, sadness, separation, distress, guilt and psychic numbness (BraveHeart, 2010). Consequently, individual resiliency contributes to the ability to cope with ongoing stress (Murray, 2003), therefore healing HT responses and restoring the well-being of American Indians must also include resiliency. Adults are accountable for as parents, and responsible community members to ensure protection, set good examples, and give encouragement and guidance (Gilgun, 2002). Reconnecting to traditional values in the community while offering training for practitioners and healers within the community is vital to promote American Indian well-being (Sasakamoose, Scerbe, Wenaus & Scandrett, 2016, p. 646).

**Summary and Research Question**

Researchers define and outline the emerging theory of Historical Trauma (HT) while mounting research continues to explore the plethora of psychological, physical, mental, and spiritual responses to this trauma, known as Historical Trauma Response (HTR), in current American Indian populations. The majority of HT research focus on historical tragedies, inequities, disparities, and ongoing deficits in the American Indian population with an emphasis on what contemporary institutions and organizations can do to fix it. Furthermore, this research operates from a contemporary Western research paradigm and approach. Healing as understood from an Indigenous Paradigm and American Indian perspective is missing from current HT research literature. The gap we found in current HT research is the lack of integration between American Indian perspectives in research around HT as well as a lack acknowledgment of traditional healing already happening in American Indian communities. Therefore, the purpose of this research is to describe American Indian perspectives on healing from Historical Trauma. Our research question is: “What are American Indian perspectives on healing from Historical Trauma?”
In the following chapters, we share our lenses as authors; describe the research methods, collaborators, and the process of teachings from the stories – data analysis; explain the results of the research, interpret and present the results and offer implications for them.
Lenses

Collective wisdom is arrived at by a process of ‘putting our minds together’

(Castellano, 2000, p. 26.)

The purpose of this chapter is to distinguish the relevant research lenses that are fundamental to the creation and implementation of this study. It is with an intentionality that we recognize and include our multiple epistemologies, ontologies, and cultures of inquiry, to acknowledge the underlying assumptions and how they have influenced us. Our lenses shaped the design of this study, the teachings from the stories – data analysis, and the conclusions we drew. We hold ourselves accountable to the researchers’ standards in provocation of the integrity/reliability and honor/validity assessments.

First, we clarify how our research paradigm and culture inquiry frame our research project. Then, we describe the theoretical lenses guiding our study and how they influenced the project’s development. Finally, we characterize our personal and professional lenses to demonstrate impact on the study.

Research Paradigm and Culture of Inquiry

As we began the research process together, we found commonality in our perception of reality from the constructivist paradigm. Although we have genetic and cultural differences, we agree as constructivists that human beings engage with the world they are interpreting to construct meaning based on historical and social perspectives and that the generation of meaning arises through interaction with community and environment (Creswell, 2014). From the constructivist paradigm, with a relativist ontology and subjectivist epistemology, this research allows us to connect to our own subjective experiences as well as the research collaborators in a way that allowed varied perspectives to generate a pattern of meaning and transformation.
(Creswell, 2014; Denzin & Lincoln, 2000; Guba & Lincoln, 1994; Mertens, 2009). We recognize that there is no single truth in this paradigm, and the goal of the research is to rely on the collaborator’s views of the research topic and to look for complexity through the collaborator’s construction of meaning (Guba & Lincoln, 1994; Creswell, 2014). Neither the constructivist viewpoint nor our culture of inquiry was sufficient to connect to our understanding of our study.

Our initial inclination was to use an Organic Inquiry as our culture and method. The Organic Inquiry is a mutable process based on the power of providing space, and then listening and presenting stories among researchers and collaborators as a way of inviting transformative change (Anderson & Braud, 2011). However, this COI and its terminology are created and validated Westernized antecedent research which excludes Indigenous worldview and narrative. In searching for a COI that fit our vision, we originally felt organic inquiry was most appropriate for this study’s focus on perceptions in healing American Indian HT as we resonated with the process of research as transformation through interconnectedness and the inclusion of liminal experience. However, as we continued through the research process, we realized we are actually operating from an Indigenous COI and method. It was not only that we partnered with spirit as in organic inquiry, we are spirit and fundamentally guided by a holistic model. Instead of observing and documenting American Indian ways of being from the outside of the community, we needed to stand in the experience of American Indian ways and view the world from this perspective. We needed to come from this way of being. We understood “Indigenous communities are being examined by non-Indigenous academics who pursue Western research on Western terms,” and therefore we chose a different path for our research paradigm and culture of inquiry (Kovach, 2009, p. 28). The intention of this study is to capture the perspectives from the American Indian
community where the work is ongoing. “Research is not just something that’s out there: it’s something that you’re building for yourself and for your community” (Wilson, 2001, p.179)

An Indigenous research paradigm aligned innately with Renee’s relational ontology and Anishinaabe epistemology. We observed as a team how our own awareness grew. Throughout our process, many elements contributed to our growing awareness: continuous research, ongoing reflection and conversations, and participation in community events that addressed trauma and systematic racism. We realized the research we had tended toward and relied on was from an Indigenous Paradigm, and often written by Indigenous scholars. The Indigenous worldview, with its relational framework, aligns with both our personal and professional values for this research project. The claiming of our research and culture of inquiry as Indigenous brings with it a sense of sacredness, responsibility, and calibration that guides us in the right direction of where this research needed to go. As two members of our team are of European descent, it was critical that we held space for an equitable mindset as to not impose a Western way of being and assumptions into this inquiry. Through collaboration, we mitigated the possibility of usurping the Indigenous COI with Westernized concepts and constructs of research. Through this process, we discovered and acknowledged Indigenous ways of thinking and being in the world. Through an Indigenous epistemology, we perceived how the process is interconnected with our self-reflection of how are we in relationship to this inquiry, how are we in relationship to each other, the American Indian community and the collaborators of the Talking Circle research method. Wilson (2008) suggests using the term “collaborators” for Indigenous research as it respectfully acknowledges their critical role and involvement with the research. Therefore, we termed the participants of the Talking Circle collaborators. The interrelation thought process bridges two worldviews, Western
and Indigenous, which requires the non-Indian researches to abandon familiar Eurocentric ways of being and critically look at the lenses that influence our worldviews.

**Theoretical Lenses**

Two theoretical frameworks provide the necessary conceptual grounding for this study: Indigenous Paradigm and The Medicine Wheel. Below, we summarize each lens and highlight how they specifically connect to this project.

**Indigenous paradigm.** An Indigenous Paradigm is a worldview; a way of being that is beyond a singular perspective or individualization. As Wilson (2001) states, research from an Indigenous Paradigm must move beyond utilizing Indigenous perspective within a non-Indigenous Paradigm. There are indeed connections between the American Indian culture and paradigm, in that a critical theorist would argue that the ontology, epistemology, and axiologies affect the Indigenous culture and therefore creating an Indigenous perspective. The constructivist understands that individuals co-create reality, and this is similar to the Indigenous relational paradigm. There are a clear distinction and fundamental difference in the Indigenous standard apart from Western paradigmatic thinking. Indigenous ontology is traditional, empirically, and revealed. Within this paradigm, knowledge is subjectively acquired (epistemology) through personal experiences, conversations, experiential knowing, holistic and spiritual integration, and narrative methods. The axiology pertains to the values, ethics, and principles grafted in the knowledge (Kovach, 2009). The Indigenous Paradigm is relational knowledge and guides our actions for research (Kovach, 2009; Wilson 2001).

As researchers, we fundamentally experience that we were not alone and that our knowledge was not its own entity. We are not on an individualized search for knowledge, nor could that knowledge be owned. Furthermore, all of the creation shares existing knowledge. We
hold the relationship to each other, and how we share that knowledge that matters. When we began the research process, we did not yet have the words to know how to claim our research methodology. As a triad of researchers seeking to connect meaningfully with collaborators in the Talking Circle, we claim an Ojibwe name for our triad: Ogichiidaakwewag meaning Women leaders/warrior women. By naming our relationship to each other and our work, we extend an idea of our relationship as more than our individualized identities. Western dominated research frameworks cannot contain the concept that relations/relationships are more important than reality (Wilson, 2001).

Therefore, we are speaking of relational accountability. During this research process, we are accountable for all our relations. Rather than decolonizing Westernized methodologies through an Indigenous perspective, we are choosing to base our research in an Indigenous paradigm. Rather than making judgments of what is better or worse, we are merely stating what our reality with this project was. In relation to the Westernized focus group model, we call our method the Talking Circle. It coincides with an Indigenous epistemology due to the importance of relationships, however now we see the importance of calling something what it is and the language collaborators naturally call it: Talking Circle. There is a clear distinction between what arose naturally in the Talking Circle, respecting elders, open-ended questions, and circular storytelling in comparison to the ask and answer prompting of a focus group experience. The circle is an important symbol in the Indigenous communities, it represents life, and therefore we must acknowledge the medicine wheel as the healing circle of life (Kopacz & Rael, 2016).

Medicine Wheel. The Medicine Wheel is a representation of an ancestral concept (demonstrating the Indigenous Holistic Theory) that provides a multi-layered depth of being. It is an ancient metaphor, philosophy, and a way of life in which we can discover our collective
meaning and conceptualize “wellbeing” for generations (Sundlie, 2009). The Medicine Wheel is a circular rock formation put in place by North American Native peoples (Sundlie, 2009). There are 20,000 representations of the Medicine Wheel found across North America (Gilgun, 2002). While original purposes are unknown, they have become a pan-Indian icon with widespread recognition and adherence (Gone, 2010). The concepts of health and wellness connect with the Medicine Wheel and remind people to walk in balance (Sasakamoose et al., 2016). According to Dapice (2006) the concept of the Medicine Wheel is to maintain homeostasis, a state of equilibrium and interdependence. This symbol teaches about our being and maps an “Aboriginal topography of the self” (Gone, 2010, p. 194). Thus, to integrate this tool into the research process, it is to seek personal and collective health and well-being: In the words of the elders of the Seneca Reservation:

This we know. The earth does not belong to man; man belongs to the earth. This we know. All things are connected like the blood which unites one family. All things are connected. Whatever befalls the earth befalls the sons of the earth. Man did not weave the web of life, he is merely a strand in it. Whatever he does to the web, he does to himself. (Personal Communication, 1992, of Seneca Native American teachings provided by the elders of the Seneca Reservation, New York, USA, cited in Meredith et al., 1988, p. 527).

Regarding contemporary theories for human development, the Medicine Wheel is an organizing construct that provides Indigenous wisdom and ways of knowing that hold an ecological, holistic perspective (Wenger-Nabigon, 2010). Although there are variations and interpretations of the Medicine Wheel and its usage, the underlying principle remains that we are whole and complete beings, and there is an inherent connection between mind, body, emotions, and spirit (Gone, 2010; McCabe, 2008). The circular representation of the medicine wheel represents the connection to the earth and all living beings (Johnston, Hixon & Anton, 2009). The symbol integrates four quadrants from bisected perpendicular lines, each indicating four parts of a unified whole. This image coherently depicts directional space and cyclical time (Gone, 2010).
The Medicine Wheel quadrants each represent an integral thread of healing in the Indigenous tradition (Martinez, 2003).

*Sundlie (2009) wrote that while there are many conceptual variations of the Medicine Wheel based on various tribal norms, the symbolism attached to the quadrants is freely shared amongst tribes and even outside the Indigenous Paradigm. Most communities agree that the quadrants represent the four aspects of humanity and associated with the sacred cardinal directions. These directions represent four ‘original skin colors’: black, yellow, red and white (Sundlie, 2009). Additionally, Martinez (2003) shares that East is yellow and signifies spirituality, South is red and represents the emotions/relationships, West is black and symbolizes the body, and North is white and signifies the intellect of the mind, and sometimes these colors vary among groups. The incorporated colors also connect to the physical, emotional, mental and spiritual aspects of humanity, and the cycles of life from birth, youth, adult, and elder.*
Therefore, in this Medicine Wheel Theory suffering arises from a state of disconnect or imbalance within the whole (McCabe, 2008). A practitioner or healer can be a window to that state of disconnect by connecting to the whole individual and empowering self-healing through working on, with, and through the body (Strozzi-Heckler, 2014). Thusly, when deriving healing assessments and practices from the theory of the Medicine Wheel, the relationship between the healer and healed are intrinsically connected. In the role of a healer or practitioner, there is an ecological responsibility to embrace the Medicine Wheel theory of holism and sacred teaching of humility (McCabe, 2008). A healer or practitioner, from an Indigenous perspective, is not an expert, rather a conduit through which the Creator is witnessed (Murray, 2003).

The Medicine Wheel, as a theory applied to this project, allows spaces for a nonlinear process of designing and implementing our research by acknowledging the influence of our environment and how we are interconnected. Additionally, this theory influences this project in ways beyond language. It represents the belief of interrelatedness that underpins our research inquiry, actions, and reflective process. As this Theory shows, our mind, body, spirit, and environment are all connected; therefore, we must acknowledge as researchers what lenses we contribute to this circular process.

**Personal and Professional Lenses**

Even though the idea of the individual in Indigenous Inquiry operates in a state of relatedness, we acknowledgment that we bring our interpretations to this study. Through our discussions and work together, our shared view of interconnectedness and balance became apparent. However, we also came to this project with our own life experiences, and we include ourselves as instruments of honoring the stories - data collection and teachings from the stories - analysis. Therefore, we describe our professional and personal experiences and how we believe
they influenced our research process. We include poetry (credit to Dr. Joi Lewis) to express who we are, and where we come from, and how this links us to this project.

**Renee.** I am the daughter of John Beaulieu (Fairbanks - paternal Grandmother) from White Earth Nation and Lorene (Smith) Beaulieu (Bongo - maternal Grandmother) from Leech Lake Nation. I am proud to say that my mom’s grandpa was Chief Noodinaakwaum and my grandfather from several generations back was George Bongo, a well-known Black Indian. My parents are products of government schools; they both attended Flandreau boarding school in South Dakota. They met several years later and raised seven surviving children.

My dad learned carpentry as a trade in boarding school, and he began working in construction when he got out of the Navy. With hard work and a keen sense of intelligence, my dad became a superintendent of a construction firm before his stroke forced him to retire. My mom was a stay at home wife raising a family, getting her children through school and into college. Being an Indigenous woman and a daughter of boarding school recipients, I struggled in life. My parents did the best they could with what they had, materially and psychologically. However, I felt like I never fit in - not in Catholic school, high school, college, positions I held at colleges and universities – not in my own skin.

My research journey and student stewardship changed me. My professor is encouraging me to keep up with the writing because of my lived-experience and the passion I have for sharing knowledge. I believe writing is a mechanism to avenge in a non-threatening way what happened to my ancestors by educating the truth about American Indian history. I was reflecting on this idea of writing and presenting my work, and never in a million years did I consider myself a writer, never! So, my daughter and I were talking about my lack of confidence as a writer, and we surmise that recipients of historical trauma, especially boarding school survivors didn’t
receive the encouragement they needed. Call it humility or maybe a lack of confidence because I don’t think I’m worthy to be the spokesperson for American Indians to do this valuable and insightful research. After presenting at research night with my classmates, my sisters, I feel different about what I want to do. I’ve changed.

Not only has my discovery of HT changed my life, but the Holistic Health program changed me as well. I realize for once and for all there is nothing wrong with me, it was something that happened to me through my ancestors. That is why this thesis on HT is essential; I have had opportunities to study HT and acquire healing skills, I feel I could offer something if this study could help others. This venture was hard, I cried often, I felt alone and afraid, and I didn’t know if I was credible to write about Indigenous HT.

When we decided to use an Indigenous Paradigm, that I was born into, I was elated and apprehensive simultaneously. The information we found on ‘Indigenous research’ affirmed for me the information we needed for credibility in the American Indian community. However, we stumbled on how to present this information in an Indigenous paradigm within a Western framework. Is it possible to use ancestral knowledge to validate a colonized western-based research? We are doing the best with this research, but the credibility of Indigenous knowledge is far from having a seat at academia’s table. This study is to acknowledge my parents, who didn’t know about HT, I think about my parents attending boarding school enduring racist abuse, and I feel sad inside. I don’t know if my parents endured sexual abuse if so they never talked about it. However, it was a common and daily experience for boarding school children.

American Indian children did not learn to understand emotions, experience self-worth, hug, love themselves, or know that they deserve good things while they grew up in boarding school. Boarding schools were another form of genocide; many children never made it back home.
Authorities exercised humiliation, ridicule, and many forms of abuse daily at the boarding schools. If you humiliate a person, it does not make them humble; it makes them angry. My dad told me that they [boarding school authorities] would say to him, “What are you smiling about, you don’t have anything to be happy about, you’re just a dirty Indian,” he would cry when he’d tell me this, and I’d cry with him. My dad liked to laugh, tease, and have fun. They wanted him to suffer because he was born the “wrong color,” he was so proud to be Indian, so was my mom.

This research project has taken on a life of its own, and I’ve learned so many people do not know about Indigenous history, what HT is, and some people’s indifference to the subject. This research study, I hope will help change the perception of American Indians through educating others.

I attended a workshop some years ago, and one of the assignments was to write a letter, I thought now is the time to share it:

_**Dear Oppressor,**_

*I resent you for all the things that you have done. I resent you for taking something that was not yours to take. I have animosity for the deliberate intention to destroy my language, culture, and traditions._

*I blame you for the alcoholism, overdoses, self-esteem problems, gang violence, homelessness, despair, and all the other attributing factors that the removal of one’s way of life can cause._

*I want you to suffer as my people, and I have suffered, pitting race against race, man against man, and for establishing a system in this society that only benefits the majority leaving out all humankind._

*I’ve held on to this ugly past and have let the beast grow and grow to a point where I hate myself. I’ve blamed you for my feelings of being unworthy, unloved and unimportant. I’ve blamed you for not allowing me to see the beautiful, powerful woman that I am, simply because I’m an American Indian woman. I have been carrying the pain in my heart of the atrocities that have befallen my ancestors, my community, my family and me. I choose to let that go._

*I forgive you. I have found peace in forgiveness, but I will not stop until there is equality for all. I want to have an open expressive conversation with you to end the oppression that*
is happening to the underrepresented, at-risk communities. Until we are equal, there will not be quietness in our minds and hearts. Until we find food, shelter, medicine, and advantages for everyone, we cannot live as one and be complete.

I will embark on a journey to enlighten everyone and invite them to share the experience I had this weekend for it has set me free. My past is complete, and I can let it go. I am free. I have found my voice. I am empowered. I am a powerful American Indian woman. I am free.

I am educating my daughters on what resilience means, and I encourage them to be courageous Anishinaabe women and to love themselves the way the Creator does. The ancestors who have gone before us do not want us to suffer; they sacrificed so much for our survival. It is our responsibility to keep the culture alive.

I met a woman who is a Jiisakiiwikwe, a shaking tent healer. She told me that I came here to grieve the ancestors. She also retrieved a fragmented soul part that stayed behind during a traumatic event of my life, and she said the spirits were guarding that part of my soul for me. The impact of soul healing and my experience shifted my disjointed sense of self. The soul retrieval ceremony and integration of the lost soul needed to happen for holistic healing and reintegration of balance in my life. Not long after, I met a Mashkikiiwikwe (medicine woman) who gave me my second Anishinaabe name and assisted me through prayer and ceremony. I realize my tears and this research project are for healing; they my ancestors and me.

I’ve worked with the state higher education system for over 25 years, and it is a constant challenge explaining, teaching, describing, pleading, and advocating for the services of the American Indian students and staff. I learned about social justice, racism, oppression, microaggressions, assimilation, and white privilege, and I realize how difficult this knowledge is to acknowledge, but it helps me with the healing process. Sometimes I think ignorance is bliss, and maybe I shouldn’t have opened that door, but it has led me to meet great spiritual elders, teachers, and friends who support me. I believe some would find it surprising, while others may
not, to know how little employees, administrators, and students know about the history of American Indian history before and during the European invasion. At St. Catherine University, we received push back when we asked to smudge at our presentation. American Indians practiced this ritual far beyond European contact, yet we find obstacles today as we practice our cultural preferences. The injustices toward race, equality, and the lack of inclusion has brought me to this research. I, as well as others, must have forgiveness in our hearts to heal, forgiving ourselves first, and then others who have betrayed us.

We were assigned to write a story about where we are from to help as researchers understand how we influence this research project.

_I am from_

_I am from the Woodlands in Northern Minnesota where the pine trees grow tall offering a fresh scent that reminds me that I am always home, and like the trees, I belong to the earth. From the woods, is where I find shelter, shade and a place to be mindful, grateful, and peaceful, and from a sacred space that I share with my two legged, four legged, crawlers, swimmers, and winged relatives._

_From the woods where the eagles nest and raise their offspring, and who carry messages to and from the Creator on my behalf. From the woods where the roads, once footed trails, that led to clearings for pow wows, hunting grounds, gardens, and to sacred spaces used for ceremonies, sweats, burial grounds, and vision quests._

_From ancestors who lived off the land and held all energy beings sacred including mother earth and from the couple who raised me and who survived the forced educational system of government boarding schools. From a place where we use laughter, ceremonies, love of community and family for resiliency purposes overcoming continued barrages of assault, racism, colonization, abuse and more._

_From dreams of love, positive energy, spirit knowledge, the “Seven Teachings,” and winter storytelling. From a culture where we learn to live in balance, juggling lived experiences and the belief that we are all related. From a community who protect each other and provide support when bad things happen to ensure that everything will be ok. From a belief that we are deserving and feel safe to dream that good things will come to us by offering tobacco, food, and living a good life._

_I am going to a place where I will reunite with my ancestors who have gone before me. Meanwhile, walk the good road while I am part of this plant world to impact people’s lives_
in a good way hopefully. Toward opening my heart to its fullest, letting go and channeling my anger and suffering for my ancestors in a positive way.

I will surround myself with positive influences; such as, my devoted husband, Greg, who is my rock and my true hearts love, and toward Mother Earth, who lives for me and takes abuse for me, she cries for help, but never stops nurturing, nourishing, and providing beauty beyond words. And when I’m discouraged, I will turn to Mother Earth for comfort, offering her and the spirits tobacco and other sacred plants.

I will turn to my family, trusted friends, spiritual helpers, who are both in the physical and spiritual realms. I am steering clear of influences from the dark side and beliefs that offer lack and fear because I am resilient, humble, loving, and kind, and I know that the universe is abundant. that Above all else, I know that I am beautiful, strong, and by staying on my positive track, anything is possible.

This research study is important for my healing journey, the therapy of research, writing, the thought process, the work with my co-researchers, and the dreams that I have as we approached completion of this work has led me to a renewed sense of being. The Creator gave American Indians tobacco as an amazing gift – remember to offer tobacco, honor the spirits, and trust the process to heal spiritually.

**Kim.** My career as a Registered Nurse spanning 23 years includes working in hospitals and health care facilities in California and Texas to my current employment on a cardiac unit in a large Midwestern urban hospital. Education and training in the Western medical model grounded me in the importance of evidence-based practice, with empirical data given the highest credibility. While I appreciate the advances in Western medicine and continue to enjoy my work, the years of interacting with people from multicultural backgrounds and my own healing path led me to philosophies and healing modalities we cannot measure in a strictly scientific lens.

I experienced a conundrum as I tried to integrate my interest in energy therapy with my grounding in this medical model. I wrestled with how I could prove the validity of energy therapy from this understanding of the world. This led me to pursue a Master of Arts in Holistic
Health Studies degree, where I believed education in a Western academic institution would help me explore the disconnect I was experiencing.

As I made my way through graduate school, I found myself challenging the assumptions that I had grown up believing about health and healing through my acculturation as a member of the dominant culture in the United States: a middle-class white woman, my Christian upbringing as a preacher’s daughter, and my rooting in the Western educational and medical systems. Instead of holding empirical evidence wrapped up in nice little packages I could hand to others, I held more questions; stretching out of my comfort zone of linear, rational thought. As a result, I found myself unable to reduce and take apart what is knowable. I resonate with the view that everything is relational and connected; I see the world as a linked web. While I am compelled to move beyond my own self-interests into action as I see there are broader implications for my community and the world, it is not always with a sense of ease that I find myself moving forward.

This research project is a part of my path in graduate school and life as I continue to grapple with more questions than answers. As I contemplate the very act of holding one worldview over another as an act of dominance, I am compelled to examine the influence of my own role as a researcher from the dominant culture in a Western academic setting on this research project about American Indian Historical Trauma. Am I coming from a place of trying to fix, provide tools or answers from a dominant perspective? Does my involvement hinder the process of healing, or do harm? How do my unconscious and conscious bias play apart from beginning to end through each stage of the research process? Will my unawareness and lack of knowledge of Indigenous culture and wisdom lead to romanticizing, othering, or objectifying American Indians? Will my fear of saying something hurtful, racist, disrespectful or
misinterpretation cause me to hold back my views or become disengaged? How can I participate in an Indigenous worldview I don’t entirely comprehend? Which leads to: what is my place in this work?

Holding the above questions while exploring my own beliefs and values about knowledge plays a role in shaping the process and input of this project. Once again, out of my comfort zone, as we shifted into Indigenous Inquiry, I am also aware that I am one individual in a collective process with my research partners, the collaborators in this project, and the researchers who came before us. We are adding our cup to the river of knowledge already flowing. Continuing to check in and hold each other accountable to the integrity of this project is a part of our process as researcher partners in relationship building and support. As I believe we are all connected, one of my roles is examining my own whiteness, white (un)consciousness, power, and our collective American history, however painful. The dance is to continue to bring what I am as a non-Native to this project while keeping our focus on our question: What are American Indian perspectives on healing from Historical Trauma? I believe this dance can only be done in relationship.

Relationship is what brings me to my involvement in this topic and helps me define my relationship to this work. From the first friend I met as a lonely 13-year old girl moving to rural Minnesota, whose mom fed us fry bread and treated me like family; to my research class, research partners and collaborators; to the American Indian woman who showed up in my dreams as we started this project, and many others; I am grateful. The following poem grounds me in the knowledge that where I am from is not only a place; it is the relationship with others. My place in this research also includes where I am from.

*I am from*

*I am from dreams of pulling roots, finding refuge in the shadows of creaking trees, smoke mingling in the air with horses and forest floor dirt while the taste of sweet lemon drops*
hides the shame, But not really.

I am from memories of an old woman who lets her long, gray hair down after dark and comes alive every chance she’s given to speak the language running through my blood that I don’t understand.

In dreams, I am alone pulling this net full of pain and old women in disguises joke with each other.

I’m on a swing and reach out to touch your hair that is different from mine,
Strong and thick
And I admire you for it
Children play, and I join the dancing and celebration, I am not alone.
I am swinging out of the shadows
Now I am not from an empty place far from anything, so I go higher and higher, dropping the net, so my own children don’t have to carry it
And the old women cheer

This research project has challenged me intellectually as well as spiritually. Working with my research partners and collaborators on this research topic has pushed me to be comfortable with the uncomfortable. I have come to realize what it means to trust the process in my relationship to this work as we move forward.

Kyra. Aho Mitakuye Oyasin. Everything I have experienced in this moment is in relationship to all my relatives. My Lakota friends, who have welcomed my husband and I as family, taught me this phrase. The meaning of interrelatedness has reiterated for me throughout many healing experiences. I see my friends and family as wonderful teachers and guides. It has been an adventurous path to becoming a teacher myself. Whenever I think of my own journey, I feel a heart connection to those whose footsteps I have walked in. My grandmother who raised me, my second grade teacher who encouraged me, my mentors who believed in me, and my friends who have shown me a different way of being, and taken me in as family. In and beside their steps, I continue to heal. For years I have sought a journey of healing--of transformation, rebalancing, centering, remaining grounded in my authentic self. Without having wanted to learn
and grow, I would not have learned so much about myself and the beauty that exists. Therefore, I consider myself a lifelong learner.

I began Holistic Health graduate studies at St. Catherine University in 2015 because I had already personally experienced the transformative power of shifting my thinking, and discovered the revealing physical and researched evidence of psychoneuroimmunology. In 2014 I had completed a personal/professional growth program and then became trained in the modality as a Higher Brain Living Facilitator. In my personal life, I began to bridge the concept of healing and higher potential. I could see objectively that healing is important work for everyone. It is the work of forgiveness, of finding and maintaining priorities and eliminating detrimental behavior and thought patterns. Seeking my family history and my own connected identity, I was able to understand the intergenerational trauma of my own family. Tracing back five generations, I discovered interconnected patterns of codependency and women being the family martyr. I knew I did not wish to continue that pattern. I began to live purposefully for future generations.

My present moment picture of self is filled with passion and purpose for community-based work, creativity and joy of teaching, and priority of family. I have come to this point in my life when I witnessed my return. My return home to Minnesota was after many opportunities and travels. My undergraduate degree was in Visual Arts and Art History, at Wells College in New York. This education greatly served building my analytical and artistic awareness and desire to tell stories. I love listening to and telling stories that are meaningful for people and create beauty in the world. Thus, it was a natural translation to combine my educational background and passion for working with children as a career. I began teaching directly after my college years and fell in love with teaching. My teaching career has been a range of ages and subjects. From preschool to adult ESL, from community art to public education, I resounded with the notion that
we are lifelong learners. For the past five years, I have been teaching Elementary age children in the Minneapolis Public School district, and am currently a Kindergarten teacher at Bancroft Elementary school.

My focus on education resounded within this research project, because as a teacher in the urban public schools I witnessed the realities of American Indian children and the need for healing within the community. The statistics and projected future for American Indian children in the United States education system are dismal, and yet firmly believe that these children, like any other, are capable and deserve a bright future. Prior to beginning this research sequence I knew I wanted to commit to a research project that impacted how and what we teach—to expand our vision to enable a more equitable outlook for our future generations. When I first began teaching in Minneapolis, I wanted to intentionally address the achievement gap, and work feverishly towards equality, because it was difficult to witness the suffering of my students. There was a significant need and evidence that students and families were enduring trauma—both current and historical. At the time, I did not know how to communicate why there was a need for healing, yet it was an intuitive knowing that systematic oppression was arising in the daily stress of these children. Since taking that teaching job five years ago, I have been committed to learning and developing myself to better understand and transform our current education system to serve those under privileged. I attempt to see how the privilege I have as a white, educated woman works in the world—and to use it for good.

Now, I see how my past led me to this specific research project, and how my lens has influenced our process. My personal and professional life transformed in many ways. I developed myself through various modalities, and theoretic models. I became a Landmark Introduction Leader, to empower transformation. As mentioned previously, I became certified as
a Higher Brain Living Facilitator, to better understand and address the need for evolution and growing our human potential. I am continuing my studies as a graduate student in the Master of Arts in Holistic Health Studies and completed a coach certificate training through the Institute of Integrative Nutrition. All of these experiences and the acquiring of knowledge was an effort to seek perspective from outside of my own limited view--to expand to something greater. I sought expansion, that greatness experienced through being in community with people--hearing and sharing stories, feeling connected and mutual respect. While this has been my experience, I also see how often times trauma isolates people and creates a feeling of not belonging. Researching HT was a confirmation of this, and an awakening, a naming to the suffering that I could not previously name. In the growth mindset, I felt committed to seeking a solution after learning in depth of the problem. That idea in itself--seeing the problem as it is and then seeking a solution, alone has had immeasurable impact on my life and the life of my students.

Throughout this research sequence, I turned often to prayer, intuition and ceremony. I attended sweat with my Lakota brothers and sisters who took me in like family. This family had accepted my husband like a brother, had been deeply connected and influential throughout his recovery journey. The way of being while in ceremony showed me a palpable interrelatedness and prayerful way to walk in the world. I found this research project to be an alignment with that way of viewing the world, and a confirmation for me to continually be open to expand my vision and think outside of my own perspective. During sweat, we can leave our egos, our created identities, and be present to something much greater than ourselves. This communal experience, I believe, is vital work in the world. It allows people to share personal stories, to reframe trauma, to heal and live in purpose. I was committed to this work because I was ready for it, and I was ready for it because I was committed. I will continue to seek personal growth in alignment with
my work, dedicated to empower and enable people to achieve what truly matters to them.

Throughout this process, reflection is crucial. With my dedicated partners, Renee and Kim, we each committed to our own personal reflections and grew from sharing vulnerably where we are from.

“I Am From...”

I AM From stardust dreams and staring into the Void, from the window of a young girl—stuck. Impatiently, waiting. Believe that One day people will be free.

I AM From journeys across oceans and never really knowing where to belong. From Gemutlichkeit und Gewalt, wrapped in father’s stories. Where Lulu und Fritz go on unbounded adventures. Rhyming, tenderly holding attention and hearts. Loving innocence of childhood, I teach. With every beat of the daily rhythm, my heart grows stronger in pulse with power of education.

I AM from the chords of Bach and Schumann, descendent of shoemaker and musician, floating through time on melody memories, hearing dissonance in realities. Whisked away from family illness and trauma, I keep my eyes on blue skies. Always to return. Soaring to greater heights than imagined, only to fall, grounded in heartbreak.

I AM from a long line of unbreakable women, holding down the fort. Prioritizing family and future over fairness for themselves. Educated, strong and stoic, sacrificing is within my birthright and blood. And I choose to Thrive. I AM From honoring my ancestors and walking a different path, knowing I am borrowing earthly time from our children. I rise.

I AM from You are my sunshine cat calls and whispers of family secrets, resting in the comfortable bed of Minnesota Nice covering tension and unrest. I AM From warm embrace of grandmothers, mothers, daughters, cloaked in grief and soothed by love. Raised by my mother’s mother, I remember. I remember her smell and the way she permed her hair, trying on clip-on earrings and that pearl necklace; putting on privilege and glancing in the mirror.

I AM From Now and Then Sisterhood and belly laughter dancing. Weaving together our creative juices as we flow through life together, aging gracefully and not at all. Collecting passion and placing it in the water, we drink of ideas with a thirst for transformation and telling of stories. We Are From hopes of healing and collective dreaming. We Are From the secret life of bees bringing sweet honey and the rock back home.
Method

Stories as data are important and one key to collecting these data is hearing the story

(Lambert, 2014, p. 32).

The purpose of this chapter is to articulate the culture of inquiry (COI) and methodology used to design and carry out this research project to answer our question: What are American Indian perspectives on healing from Historical Trauma? To reflect an integrative research study, the heading terminologies used throughout our method chapter reflect a conscious choice to bridge Indigenous active concepts and Westernized research terms. These terms cannot be one or the other; they must indicate both because of who we are as a research triad and what we are proposing within this research study. We first describe the constructivist paradigm and the rationale for its use in the initial stages of this study. We then describe an Indigenous research paradigm as the emerging paradigm and basis of our implementation process for this study. Next, we outline an introduction to Indigenous Inquiry as our COI and describe the Talking Circle as our research method that is congruent within our established paradigms. This chapter continues with integrated descriptions of a call to community - sampling procedures, sacred tools - instrumentation, honoring the stories – data collection, teachings from the stories - data analysis, integrity/reliability and honor/validity, and protecting collaborators - ethical considerations. We conclude with the strengths and limitations of this research design.

Constructivist Paradigm

At the beginning of our research process, our research triad identified as constructivists. Constructivists believe that human beings engage with the world they are interpreting to construct meaning based on their historical and social perspectives and that the generation of meaning arises through interaction with a human community and environment (Creswell, 2014).
In a constructivist paradigm, there is a fundamental belief that people create their realities, construct their own lived experiences and interpretations, and that there are innumerable possibilities for those perceptions (Wilson, 2008). This approach alleviates the idea that the world is something “out there” that needs further studies while asserting that we can alter our experience and perception of life directly through awareness. In this paradigm, there is no single truth-making the goal of the research is to rely as much as possible on the collaborators’ views of the research topic and to look for complexity through collaborator’s construction of meaning (Lincoln & Guba, 2013; Creswell, 2014). In this paradigm, researchers also connect to subjective experiences and the collaborators in a way that will enable those perspectives to generate a pattern of meaning and transformation in relation to each other (Creswell, 2014; Denzin & Lincoln, 2003; Lincoln & Guba, 2013; Mertens, 2009). Situated in the constructivist paradigm, we believe our research study acknowledges multiple ways of knowing and allows deeper understanding and meaning through a process of co-creation and qualitative findings.

While the Constructivist paradigm initially aligned with our goal which was to honor the process of transformation through generating patterns of meanings (rather than the goal of creating knowledge in and of itself) (Creswell, 2014, Denzin & Lincoln, 2000; Lincoln & Guba, 2013; Mertens, 2009; Wilson, 2008), it didn’t encompass the entirety of what was happening in our process. As our work evolved, we used Wilson’s (2008) book Research is Ceremony, which delves into the construct of Indigenous researchers and Indigenous research inquiry. At this moment, the influence of these Indigenous writers and researchers changed our thought process and the outlook of our study. We realized during the reflection and writing process that we were operating from an Indigenous Research Paradigm, unidentified as a prominent option in colonized research methodology.
We acknowledge there are implications and complexities of two non-American Indian researchers working in an Indigenous paradigm. We also recognize the context of an academic graduate program and a non-American Indian professor influenced the parameters of this study. There were the risk and potential for colonizing the process. We honored the paradigm, as we repeatedly returned to the collaborative process and saw participants of the Talking Circle as collaborators. The collaborative group process was vital to problem-solving and information of our research question, what are the American Indian perspectives of healing HT? To best represent our research and answer the research question, we concluded an Indigenous research paradigm was essential.

**Indigenous Research Paradigm**

Western dominant educational systems impede the epistemology, ontology, and axiology of the American Indian paradigm due to the conquest and subjugation of Indigenous people including the exploitation of their land (Duran, 2006; Mertens et al., 2013; Lambert, 2014; Wilson, 2001, 2008). Guba and Lincoln (1994) relay that Western research paradigms default to the common theme of “individual,” excluding the Indigenous interrelated epistemology. The foundation of Indigenous Paradigm shares that knowledge is relational to nature and the cosmos. The relational construct of the Indigenous Paradigm incorporates an interrelated connection with all living and nonliving things (Kopacz & Rael, 2016; Wilson, 2008). Additionally, there is a fluidity with the past, present, and future giving credence to the Seven Generation prophecy. Intergenerational oral traditions validate this prophecy rather than academic postulation. The Seven Generation prophecy differs among tribes. The Anishinaabe (Ojibwe) tribes recognize that the relationship the ancestors had with all things seven generations ago affects the ties today, as well as in the future generations (Bergstrom, Cleary, & Peacock, 2003).
Accordingly, Wilson (2008) proposes researchers follow the Indigenous Research method rather than the dominant paradigms to portray and capture the authenticity of the data significantly. Western linear logic may flounder in the Indigenous Paradigm and the circular axiology emanating from Indigenous livelihood. Additionally, the Indigenous Research paradigm spawns from the perspectives of the American Indian people. Despite painstaking challenges, during the assimilation period, a small number of Indigenous scholars were triumphant in establishing a place in the educational setting (Wilson, 2008). One of these scholars was an American Indian named Caleb Cheeshateaumuck. He was a member of the Wôpanâak tribe in Missouri and graduated from Harvard University in 1665 speaking four fluent languages (Wright & Tierney, 1991). “Although fully able to meet Harvard’s rigorous academic demands, the young native scholar did not escape the dangers associated with the life in an alien environment” (Wright & Tierney, 1991, p. 11). A survival technique that Indigenous students use to assimilate unconsciously and consciously is to impersonate the dominant colloquial climate. When American Indian students consciously adapt to Western academia ideologies without compromising American Indian axiology, they create the reality of what is to be an American Indian is employed, creating the phrase, “walk in two worlds” (Henze & Vanett, 1993, p. 116).

There is no right fit for research methods with Indigenous worldviews. Decolonizing research with the intent to portray Indigenous worldviews challenges Western methods and Western-focused researchers who have studied Indigenous peoples. According to Wilson (2008), “It is time for Indigenous peoples and Indigenous research to break free from the hegemony dominance of the dominant system, into a place where we are deciding our own research agendas” (p. 17). A new concept to research is to give voice to the Indigenous people, permitting
them to tell their own stories, sharing their ancestral knowledge through Indigenous language with researchers who reflect them and disseminate the results in ways that are congruent with the culture.

**Indigenous Inquiry**

Conducting this study using an Indigenous Culture of Inquiry is a voluntary commitment to collect qualitative research from an Indigenous paradigm. Wilson (2008) uses the term “Indigenous Strategy Inquiry” and says it must strategically align with the Indigenous methodology used in each research project (p. 39). The relational concept central to Indigenous research outlined in the previous section promotes an interrelationship between the COI and the methodology.

The Indigenous research method is the process of obtaining and analyzing data that is congruent to the Indigenous worldviews (Duran et al., 2008; Lambert, 2014; Simonds & Christopher, 2013; Smith, 1999; Wilson, 2008). The worldview or paradigm of the Indigenous people varies significantly from the Western approaches to research. Postcolonial Indigenous research methodologies are ‘relational’ perspectives of the Indigenous epistemology, ontology, and axiology.

This dynamic played out in our research process as we began this study with the intention of using the constructivist paradigm conspiring with an Organic Inquiry. Although Organic Inquiry somewhat aligns with our formerly named ‘focus group’ method and with shared stories and the authentic voice narration of each collaborator, our approach tends to align with American Indian perspectives. Considering Indigenous Inquiry is relatively new and not fully introduced in the academic realm; therefore, a quandary arises around to describe colonial linear steps in research from a relational and circular worldview. The method we explained in the following
section is like a focus group in Western research. However, the epistemology of the Indigenous paradigm coincides with the Talking Circle to gather information using a cultural framework rather than the Westernized construct of focus groups. Given the topic, COI and research question we chose for this study, we selected the Talking Circle as the appropriate methodology for our research.

In the Sage Handbook of Critical and Indigenous Methodologies, Denzin and Lincoln (2008) explain Indigenous inquiry and that such a framework is establishing the foundations of “critical indigenous qualitative research”:

Critical indigenous inquiry begins with the concerns of indigenous people. It is assessed in terms of the benefits it creates for them. The work must represent indigenous persons honestly, without distortion or stereotype, and the research should honor indigenous knowledge, customs, and rituals. It should not be judged in terms of neocolonial paradigms. Finally, researchers should be accountable to indigenous persons. They, not Western scholars, should have first access to research findings and control over the distribution of knowledge. (p. 2)

**Talking Circle as Method**

Unlike using the dominant perspective of Western research which tries to fit Indigenous research into a Western approach rationally, Indigenous research methodology gives back the voice, beliefs, lenses, and stories to the Indigenous people who are still trying to fit into Western Culture and methods of inquiry. The Talking Circle is compatible with authentic communication systems in natural settings that are customary for Native groups (Chilisa, 2012). As described by Black Elk (as cited in Smith, 2006) “The Power of the World always works in circles, and everything tries to be round... the life of a human being is a circle from childhood to childhood,
and so it is in everything where power moves” (p. 60). Indigenous research is a method that provides a space for a story; a forum for people to share and relate their stories in a flexible, rather than a fragmented interview approach (Kovach, 2009). Hence, the Talking Circle methodology provides a non-hierarchical opportunity for sharing and collecting qualitative data, as well as an integration of the relational experiences of Indigenous research method into the research (Chilisa, 2012; Duran, 2006; Lambert, 2014; Smith, 1999; Wilson, 2008).

We are not proposing that a few people’s perspectives can speak for all American Indians. As Lakota writer Bruchac (2006) says, although “no one voice speaks for all” sometimes many speak as one (Smith, page XIV). Regardless, for this research study, the Talking Circle provides an opportunity for collaborators to share in a fluid, relational framework rather than a linear model of question and answers. As Kovach (2009) elaborates, by listening intently to one another “…story as a method elevates the research from an extractive exercise serving the fragmentation of knowledge to a holistic endeavor that situates research firmly within the nest of relationship” (p. 99). This description of a story as a method aligns with Wilson’s (2008) assertion that Indigenous relational research is inclusive of all living and nonliving things spiritually and respectfully.

**A Call to Community – Sampling Procedures**

Our goal was to include a total of 8-10 adults, over age 25, who are enrolled citizens of a U.S. Federally Recognized Tribe, to participate in a Talking Circle about their perspectives on healing American Indian Historical Trauma. Our age requirement is driven by neuroscientific research that demonstrates the development of the brain that becomes more mature and capable of self-awareness by the mid-20s (Johnson, Blum, & Giedd, 2009). Due to the small size of our Talking Circle, our rationale was to include only enrolled citizens of a U.S. Federally
Recognized Tribe to keep the sampling specific to the American Indian community that resides in the Twin Cities community. Wilson (2008) suggests using the term “collaborators” for Indigenous research as it recognizes the interrelated nature of the process. Therefore, we termed the participants of the Talking Circle collaborators to align with previously held Indigenous oriented research and to demonstrate value for co-creation and the contribution of each person. In this following section, we discuss collaborator recruitment for our research study.

**Engaging the community/recruitment and sacred circle/enrollment.** We engaged the community using a call to community - sampling procedure. A call to community - sampling procedure also known as purposive sampling is a technique in qualitative research involving the identification and selection of individuals or groups of individuals with knowledge or experience of our topic of study (Lincoln & Guba, 1985). Snowball sampling is a technique in which the identified individuals assist in identifying other potential collaborators (Lincoln & Guba, 1985). As Indigenous Inquiry is a relational way of conducting research, not expecting generalizable results, it is acceptable for collaborators to know each other. Snowball sampling is conducive to Indigenous research mainly because of vested knowledge and information on the phenomenon of the study and the community (Chilisa, 2012). Our first step involved purposefully identifying individuals that we knew in the Twin Cities with knowledge of our topic, as well as leaders and directors of American Indian centers and programs.

We sent scripted emails (see Appendix A) to organizational directors at the following sites, and with their permission, engaging the community/recruitment flyers (see Appendix B):

Minneapolis American Indian Center, Upper Midwest American Indian Center, MIGIZI Communications, Native American Community Clinic (NACC), Indian Health Board, All My Relations Gallery, Division of Indian Works in Minneapolis, American Indian Family Center in...
St. Paul, and the Red Lake Embassy in Minneapolis. Also, our engaging the community/recruitment methods included posting to the community on Social Media and Facebook post (see Appendix C), and an invitation flyer at Seward Co-op grocery store (see Appendix D).

Interested collaborators contacted researchers face to face, by phone numbers listed on the Invitation (Engaging the community/Recruitment) Flyer, or via the email account listed on the Flyer. The first contact with one of the researchers involved a conversation communicating the details of study using the Engaging the Community/Recruitment Script (see Appendix E) that gave an overview of the research. If the collaborator was interested in continuing, the researcher reviewed the following inclusion criteria:

1. An enrolled citizen of a U.S. Federally Recognized Tribe
2. An adult over the age 25

Once determined eligible, and if the prospective collaborator remained interested in continuing, a researcher reviewed the Written Information and Integrity/Consent form (see Appendix F), gathered contact information to email the written information and integrity/consent form with attached Talking Circle prompted questions (see Appendix G). We asked those who decided to participate to sign the written information and integrity/consent form before participating or upon arrival to the Talking Circle. The questions attached to the written information and integrity/consent form gave collaborators an opportunity to review before meeting at the Talking Circle on January 20, 2018, for approximately three hours. We also provided a post-Talking Circle question form for collaborator reflections. We gave follow up contact reminders via phone or emails one week before the date of the Talking Circle session.
We received more interest to participate than we had room for in this study after ten confirmed collaborators. We had to turn away five more people interested in the study due to the intention to keep the Talking Circle to a number where each collaborator would have an opportunity to share their voice. Of the five others interested, two were not yet 25 years old and expressed wanting to take part, and 1 was American Indian but not an enrolled citizen of a Federally Recognized Tribe. All ten of the confirmed collaborators attended the Talking Circle on January 20, 2018.

We discovered that purposive snowballing sampling was a Westernized technique and we got the word out mostly through an interrelated process. We found that phone calling and emails were ineffective, while interpersonal connections were proactive for engaging the community/recruitment. The best results arose from in-person or verbal communications. When speaking with potential collaborators, a conversation led to immediate interest and confirmation of participation. We received a few emails stating interest, even a couple after the Talking Circle date.

**Sacred Tools - Instrumentation**

We used four instruments in honoring the stories - data collection: Talking Circle prompted questions, Talking Circle facilitator, post-Talking Circle evaluation, and researchers as instruments. There is no hierarchical order amongst these instruments, instead are all elements within the Talking Circle.

**Talking Circle prompted questions.** Based on the literature on healing HT, we developed several Talking Circle prompted questions (Appendix G). We designed our Talking Circle prompted questions for the following reasons: in response to the literature and knowing that we wanted to glean individual perspectives regarding HT from an American Indian cultural lens; to
offer the historically oppressed the opportunity to share stories from a non-anthropological view; and to provide a platform for American Indians to share their stories in a safe space (Probyn, 1989). Our open-ended questions prompt narrative responses rather than answers to predetermined questions. The sacred tools support our intention to discover and describe themes of healing HT and to contribute to this field of research through the wisdom of American Indians’ lived experience and perspectives. The facilitator focused on introductions by asking the group to share who they are, their given name at birth, spirit name and where they were from lineage and logistically. Then collaborators were asked to share a gift they bring to this group, their family, and community in service of who they are becoming. From collaborators introductions and stories, lived experiences of HT resounded within narratives. Later the facilitator prompted an open discussion regarding how HT impacts collaborators in daily life.

**Talking Circle facilitator.** We initially planned for Dr. Ruby Gibson, Th.D., LMT, to facilitate the Talking Circle. However, during the process, she became unable to provide her services, so we asked for and received IRB approval to change the facilitator. Dr. Antony Stately graciously acquiesced to the role of the facilitator, even though he initially agreed to be a collaborator in the Talking Circle. Dr. Stately is Anishinaabe and Oneida, holds a Ph.D. in clinical psychology and is the Chief Executive Officer of the Native American Community Clinic. Dr. Stately has been a consultant to numerous international, national, and local agencies, and has taught in several graduate programs in clinical psychology. Aligned with the non-hierarchical Indigenous framework of the Talking Circle, Dr. Stately, as the facilitator, was in the relationship with the discussion and shared personal stories as a collaborator.

**Post-Talking Circle questions.** The researcher developed post-Talking Circle questions (see Appendix I) consisting of three open-ended written questions for each collaborator to
answer at the end of the session. The purpose of using this post-Talking Circle question was to offer a way for collaborators to provide additional information in a written format. It was another opportunity to gather data on further awareness after the circle and ask the collaborators what worked and did not work with the Talking Circle process. The strength of this instrument was to collect additional data regarding collaborators’ perspective on the experience and provide an opportunity for them to communicate thoughts and ideas that arose upon reflection after the Talking Circle session.

**Researcher as instruments.** According to Braud and Anderson (1998), the researcher is an integral instrument in collecting and analyzing the data, because their preparedness, knowledge, and realities continue to sharpen during each session and throughout the transcription and translation of the data. As researchers, we remained in the background of the sessions and did not partake in the moderation or sharing of the experiences within the group. However, the researcher’s relationships with each other and the research through the process continued to evolve throughout the entire project. We met at least two times a week throughout the research project at libraries, cafes, or one of the researcher’s house. We began our meetings with a check in how each of us was doing and then a grounding or prayer and often smudging as we set the intention for our work together.

**Renee.** As an American Indian survivor of HT, I have worked on healing my own HT in a variety of ways. To prepare myself for this research project: I attended two conferences to learn more about HT. The conferences were the American Indian Mental Health (AIMH) and the Minnesota American Indian Institute on Alcohol and Drug Studies (MAIIADS) conferences hosted in Fond du Lac, MN. The theme of the MAIIADS conference was on Historical Trauma last year, and the AIMH conference had any breakout sessions on HT. I also visited with spiritual
elders and advisors while I was at the meetings to talk about HT and requested permission to write about it. I have many contacts in the community who assist in healing HT or have written about the topic, I’ve engaged in many conversations about varying perspectives on HT. I’ve had the opportunity to hear Eduardo Duran speak on several occasions and I talked with him briefly on healing using American Indian spirituality. To capture more insight from other perspectives, I attended the *Breaking Chains* conference at Metropolitan State University in 2017 that emphasized Historical Trauma from the African American and American Indian perspectives. Also, I’ve attended multiple White Privilege conferences around the country as well as the National Conference on Race and Equity in New York. Most recently, I attended a three-day workshop on the Three Principles, a mindfulness training. My cultural and inherent right as an American Indian encompasses sweat lodge ceremonies, pipe ceremonies, and other ritual use daily. Without the Anishinaabe paradigm that I connect to and its inclusivity of the ontology, epistemology, and axiology pertaining to research, my perspective of this research would be decidedly different.

**Kim.** In addition to our collective research process, I read many non-research books such as *Buddha in Redface* by Duran and *Beloved Child* by Wilson. I participated in community focus groups such as *Racism Ends with Me* and *Dismantling Systemic Racism Community Conversation* at St. Catherine University, and continued conversations about this research topic at my work at the hospital. I journaled and painted on a regular basis to process emotions due to the nature of the topic as well as the ongoing challenges of research. I also sought Healing Touch to restore balance and healing in my own life to allow for healing to remain present in this work.

**Kyra.** Throughout the year and a half research process, I wrote extensively in journals. I recorded both notes from meetings, collective work together and my reflections at night.
Throughout the process, I would seek out both academic research and books I was intuitively drawn to such as *The Art of Somatic Coaching: Embodying Skillful Action, Wisdom, and Compassion* by Richard Strozzi-Heckler; *Beloved Child* by Diane Wilson; and *Recovering the Sacred: The Power of Naming and Claiming* by Winona LaDuke. I attended community events to better understand my role in this research and the larger systemic issues at hand. The main events I attended were the YMCA’s panel entitled *Racism Ends with Me*; an engaging community conversation at St. Catherine University: *Dismantling Systemic Racism*, led by Father Bryan Massingale; and a Wisdom Ways center panel discussion called *More than a Single Story: Rituals and Cultural Stories that Sustain Us*; and attended the *Women’s Congress for Future Generations*. Throughout the year, I also attended sweat lodge with my friends in the Lakota community, and am preparing to be a dancer in a Moon Dance ceremony this summer. These practices were acts of purification and ritual for me that helped sustain my centeredness during a very busy academic year as I was also in a Masters of Arts in Education program at the University of Minnesota and teaching kindergarten. This research sequence helped me align and prioritize my own values of family, self-care, and transformation from my work into my daily life. The collaborative process with Kim and Renee affirmed the support of co-creating ceremony and intentional work in purposeful service.

In addition to conducting research through a process of ceremony together, we also shared dreams and synchronicities occurring in our lives related to research. We valued this integrated spiritual knowing as part of our group process, and as Kovach (2009) explains, the inward knowing is an integral component that must be congruent with the holistic beliefs of indigenous epistemology. We related to these personal and collective experiences as part of the process of doing research--as an inward journey as well as external doings. Experiencing personal and
collective insights enabled us to shift our own perspectives. Considering ourselves instruments of this study, we sought to clear ourselves by becoming aware of our own biases and prejudices to enable objective, intentional listening. We desired to be of service to our community. As Wilson (2001) shares, “Research is not just something that’s out there: it’s something that you’re building for yourself and for your community” (p.179). The experiences we sought presented the needed teachings for our personal growth and readiness to undertake and relentlessly work on this study. This transformative process involved letting go of old ways of being and seeing and allowing for others’ stories to deeply impact our awareness.

**Honoring the Stories - Data Collection**

We held the Talking Circle and collected data on Saturday, January 20, 2018, beginning at 3:00 pm at the Minneapolis Indian Women’s Resource Center in Minneapolis. We welcomed collaborators at the registration table and gave them journals, gift cards, answered any questions they had, and asked them to sign the **written information and integrity/consent forms**. The **written information and integrity/consent forms** are a necessary Western dominant contract that we submitted to the IRB committee before the transition to using the Indigenous research methodology. Colonization requires adaptation to systemic processes and procedures, **written information and integrity/consent forms** is a legal document to ensure that no one is harmed emotionally, monetarily, and physically. Traditionally for American Indian people, a person’s word was their binding contract. The **written information and integrity/consent forms** noted explicitly the collaborator’s desire to have their information be confidential or shared openly within the study. For those who chose to remain confidential, we requested the use of a pseudonym. It also informed collaborators that we would be recording the Talking Circle.
With registration completed, and questions answered, we extended offers to enjoy the refreshments and beverages provided by the researchers. Next, we proceeded to the Talking Circle space. We set up three separate audio-recording devices around the room to record collaborators' stories within the Talking Circle. The circle consisted of 13 chairs (with blankets and pillows), with an open space in the middle. The locked doors to the building were locked, ensured security and privacy. The room became warm, and collaborators suggested opening a window, but it was locked, so we put on a fan. The Talking Circle began with the traditional custom of smudging as each collaborator passed a shell around the circle in a clockwise fashion. The shell contained burning sage, and individually each person in the circle used the smoke to release evil spirits. An integrated prayer and grounding meditation (Appendix J) opened the session, and we closed the event with a gratitude prayer offered by an elder in the Talking Circle.

During the Talking Circle, an Indigenous method of storytelling emerged organically. We did not interrupt the process to follow a set, preplanned structure with questions followed by answers. The conversation became interconnected as the stories from the collaborators were relational to each other and all living and nonliving things. Neither the researchers nor the facilitator heeded to the Western model of discussion, and this allowed for fluidity in the conversation with no beginning and end to a specific subject or question. Whereas, a question and answer format would cause disconnection with the organic and traditional flow of the stories. Initially, two of the non-American Indian researchers planned to take notes during the Talking Circle but note taking did not feel appropriate, and the importance of listening took precedence. Some collaborators thanked each other for sharing, acknowledging the courage to take a risk and open up to each other.
While we had initially planned for breaks in the conversation, the Talking Circle continued for the entire designated time (3:00 pm to 6:00 pm) and beyond. The facilitator checked with the group regarding the length of the Talking Circle, and the collaborators chose to keep talking until we closed with a prayer. For the closing, an elder provided an intentional prayer giving thanks to the Creator for bringing the Talking Circle collaborators together and for the ongoing work on this study and offered a spirit dish to feed the spirits. The researchers intended to provide a spirit dish. However, it was the Talking Circle group who selected the elder to pray. After offering the elder tobacco and the spirit dish, we commenced with the closing of the session.

After the Talking Circle, we enjoyed a feast catered by the Sioux Chef, Sean Sherman whose mission is to bring Indigenous sustainably harvested food to the community. We ate delicious Wild Rice soup, three sisters’ salad with corn, beans and squash and cranberry dressing, cornbread, and cedar maple tea. There was a lot of food left over, so we invited the collaborators to take food home with them. Upon closure of the session, we handed out a written evaluation form. We asked them to return the evaluation to one of the researchers if they choose to fill it out. We received all but two evaluations from the collaborators.

**Teachings from the Stories – Data Analysis**

We transcribed the Talking Circle recordings and conducted teachings from the stories - data analysis through February 27, 2018. Through this Talking Circle process, we witnessed the nature of oral culture where stories exist within an interdependent relationship. In teachings from the stories – data analysis, however, we needed to take responsibility for our interpretation, knowing that we cannot present the powerful experience of a Talking Circle in raw written form. Our intention through the act of analyzing the data is to share the knowledge and present information to readers for healing from HT. Each of the researchers transcribed one-third of the
recording for a complete written copy. Keeping in mind that we had little time to transcribe the data before our teachings from the stories – data analysis, we hired a company called Rev to transcribe the entire transcription for a second complete written copy, and then we compared the two transcripts for accuracy while listening to the recording again. It took 24 hours for the results to come back from the hired company.

We booked a three-bedroom cabin on a Friday to Sunday to collectively immerse ourselves in the teachings from the stories – data analysis. At the cabin, we began with a meal, held ceremony together, and smudged as we started the analysis process. First, we listened again to the Talking Circle audio together; then, we individually began thematic analysis of the transcripts. We each took notes on different themes that pertained to phrases, ideas, feelings sensations, and words to help hypothesize the data (Mertens, 2009). The colonized thematic research method requires an analytical approach to categorize information captured from our method. Assigning codes by classifying main ideas, themes begin to formalize to interpret the data (Mertens, 2009). Additionally, Boyatzis (1998) shares that an excellent thematic code includes the following five elements: a label, definition of what the theme concerns, indicators on how to “flag” the theme, a description of any qualifications or exclusions to an identification of the idea, and examples. However, the Indigenous inquiry includes relational and interrelated ontology creating a challenge of interpreting and dissecting the information categorically (Smith, 1999).

The act of teachings from the stories – data analysis was unsettling to us researchers due to the process of extracting findings from the context of collaborators’ stories. The process of coding involved classification of certain statements as relevant to one theme, and we found it challenging to segment stories using this individualistic interpretation. When we analyzed the
data, we did not want to take an ego-driven mentality of interpreting through our lens and understanding. We had to be in a relationship with what the participants said. We got to know people through what they said, and what they did not say. Additionally, we saw how storytelling is not an isolated answer to our question. As storytellers, responsible for sharing this data through a research context, we wrestled with the dilemma of condensing stories while staying true to the voices of the collaborators and the process required of research to distill the information.

Each researcher approached the raw information to reduce it in their way to come up with an initial outline and then themes within subsamples. Renee highlighted themes in the transcript and then used large pieces of paper spread out across the room to categorize concepts, words, and ideas in the data. Kim placed the entire transcript around the room on the walls in the order each person spoke in the Talking Circle, and Kyra posted the transcript from each collaborator in a circle in the order that they were sitting for a visual of the Talking Circle itself and divided it up as a medicine wheel representation circle and recorded insights. We came together this weekend periodically to take breaks, go for walks together, eat, and discuss how we were feeling and what was showing up in the data. We then compiled all the data together, compared themes across our subsamples to create codes. Over the next few weeks, we identified codes and returned to the data together to validate the codes were data-driven through a process of discernment with each other.

**Integrity/Reliability and Honor/Validity**

In this section, we address the integrity and honor of the method within this study. First, we discuss the integrity of this study, followed by honoring the trustworthiness of replicability. Wilson’s (2012) view, Indigenous research need not answer questions of validity or reliability.
We are not here to make judgments for better or worse, rather from an Indigenous Paradigm we are fulfilling our relationships with the world. Validation builds within the relational exchanges between collaborators through the methodology of the research, whether it is through storytelling, song, or Talking Circles. Western research methods discount circular logic, and according to Wilson (2012), the dominant culture considers that nonlinear logic is disorganized and illogical. Using the Indigenous research paradigm and method of Talking Circle, we followed the circular logic of the American Indian culture. We acknowledge that we are conducting this study under the umbrella of a colonized system, attempting an Indigenous Inquiry by walking in two worlds.

**Integrity/reliability.** Integrity ensures the consistency of the results and the ease with replicating this research study (Anderson & Braud, 2011). It is essential to validate and guarantee the authenticity of this study and to portray a clear outline of our sacred tools - instrumentation, a call to community – sampling procedures, honoring the stories - data collection, and teachings from the stories process. Western evidence-based science relies on research to provide acceptable explanations. With this belief, Western science considers Indigenous paradigmatic structures as witchcraft (McCabe, 2007). To satisfy western approaches to this study, we ensured integrity by going over the data four times, often referring back to the original transcription for the integrity of the data. Additionally, to ensure the integrity of the study from an Indigenous paradigm, we sought out spiritual elders in the community, and after offering tobacco, Renee asked for guidance and acknowledgment to bring this project forward. As McCabe (2007) exclaims, “It is time to throw off the shroud of rejection and marginality and embrace the indigenous model as legitimate without embarrassment or fear” (p. 150). Recognizing, acknowledging, and honoring the Indigenous paradigm and research method within academia
may help Indigenous researchers legitimize their work in the Western dominant academic society.

**Honor/validity.** Kovach (2009) describes that truth is in the subjective and validity [honor] is in a relationship with culture. Subjectivity based on ancestral knowledge will not allow disassociation from the authenticity of one’s lived experience. The Western research community (Kovach, 2009) must embrace this veracity and acceptance of this concept and the inherent value it brings to the Indigenous paradigm. Additionally, reflexivity of the researcher’s self-thought bases its effect on “truth-value” and on the closeness of the interactions with the collaborators and researchers that is necessary of establishing credibility (Chilisa, 2012; Kovach, 2009). We therefore assess and articulate our trustworthiness through identification of our process. At the beginning of our research journey, we were following a Westernized research framework. Throughout this research process, while paying careful attention to how we related to the subject of HT, we found these Western methods were not appropriate nor were they valid or reliable for this project. According to Chilisa (2012) validating research from a postcolonial framework, it is necessary to connect the researcher to the researched to ensure that they share and understand Talking Circle collaborators’ beliefs and way of life.

As researchers using an Indigenous Research paradigmatic method, heeded careful attention to ensure that our honoring the stories - data collection and teachings from the stories - analysis methods come from the perspective of American Indians. Acknowledging the Indigenous ontology of knowledge, we considered how we portrayed information through the collaborators’ lens, which gives credibility to the study (Wilson, 2012). We began to ask ourselves *what my relationship to this research is?*
Since we are using a paradigm that is not widely validated traditionally in Western research, we show integrity and honor in American Indian traditional way. Some examples are: collaborators respectfully listened and then added their relational stories one after another, and the younger collaborators let the elders go first, which is a substantial value in American Indian cultures. Within our study, integrity and honor demonstrate through the fundamental belief that we need to be accountable to *all our relations* in the research process.

Validating and replicating this Indigenous research study is a colonized concept. It may be difficult to replicate, because, from an Indigenous methodology, research is regarding what is genuine and relational in the moment, and that moment only. According to Wilson (2012), relational methods of collecting data are more than likely to have different outcomes. As people relate to each other, the topic, or their community immersion, the method will lead to a natural process. Each study will be dependent on the interactions and relationships occurring during the process of the research (Wilson, 2008). It was necessary for us to structure the Talking Circle in the way we did for this study to be respectful to and gather information from the Indigenous community (Evans, Hole, Berg, Hutchinson, & Sookraj, 2009).

**Protecting Collaborators – Ethical Considerations**

The St. Catherine University Institutional Review Board (IRB) approved this project at the expedited level on December 26, 2017. As with all research, this project had several risks including confidentiality, coercion, and potentially raising traumatic issues. We outline each of these risks and what we did to mitigate them. We also include protection for research from an Indigenous Paradigm, reflecting on the relationship of the research in how it can give back to the community as the basis of Indigenous research.
Due to the sensitive nature of this topic and the methodology of the Talking Circle, informed consent as a procedure involves not only a form but a means to ensure that everyone understands the implications including their right to withdraw from the study at any anytime (Mertens, 2009). In the Written Information and Integrity/Consent form (see Appendix F), we outlined the volunteer nature of participating in this study. The consent also explained confidentiality and direct benefits and risks as described below.

**Respect - Confidentiality.** Because the American Indian community in the Twin Cities is small and interconnected, we wanted to ensure privacy. To ensure this, we:

1. Asked the collaborators to give a pseudonym to use for the data results if they were not comfortable using their own name.
2. Informed each collaborator that any family members, friends, colleagues or others mentioned in the Talking Circle would be identified by a pseudonym.
3. Deleted the audio recordings immediately from devices and put them on a password protected computer.
4. De-identified the data by assigning codes for collaborators.
5. Secured the de-identified data on password protected computers.
6. Destroyed the audio recordings and original data on May 16, 2018.

Mertens (2009) exclaims it is impossible to avoid privacy leaks outside the focus group (Talking Circle) method. The facilitator communicated the expectation of respectability as the responsibility of each collaborator involved in the Talking Circle.

**Coercion.** Coercion may involve overt or implicit threat to gain collaborators in research. In the Indigenous Paradigm, relations provide context for what people share as well as provide meaning in the research through how those interactions relate to each other. However, as we
were operating under a Western paradigm in the recruitment phase of engaging the community/recruitment, we also took the following steps to make sure we did not coerce collaborators. We divided the contact lists; with each researcher contacting people we did not know, with a blanket approach to emails and flyers to disseminate the invitation.

**Potentially recapitulating Historical Trauma.** There is the possibility of negative emotional and mental outcomes, and unintended consequences with the use of a focus group (Talking Circle) (Mertens, 2009), due to the nature of the unknown group interactions. Talking about the impact of Historical Trauma may provoke stress. Although our study focused on healing HT, and not the trauma itself, collaborators received information through the consent and start of the circle of their right to share only what they felt comfortable sharing, or not to answer a question at all. We made a list of available resources (see Appendix H) for collaborators if these conversations trigger traumatic recall or cause undue stress.

**Design Specific Strengths and Limitations**

Describing the strengths and limitations of this study using an Indigenous Research method is parallel to the Indigenous interrelated epistemological framework. First, we discuss the strengths of this study, and then we explore the limitations and the impact on the honoring the stories - data collection and teachings from the stories - analysis.

**Strengths.** That one of the researchers is an American Indian woman is an asset to the trust and acceptance from the American Indian community. Some of the collaborators remarked that they would not have participated if they did not recognize the name as American Indian. Building and maintaining trust was a key component and strength of our relational inquiry. The power of story and transformative power of the Talking Circle experience demonstrated the
intention of being present. The Talking Circle, conducted from an Indigenous epistemological view, was a sacred circle in which people treat one another in a respectful manner.

Considering the Indigenous Research design is relatively new and not readily accredited in the Western academic realm; a quandary arises to describe colonial linear steps in research from a circular relational worldview. The Talking Circle method is like what Westerners consider a focus group. However, using the epistemology of the Indigenous paradigm coinciding with the Talking Circle to gather information uses a cultural framework for our story gathering. Based on our COI and research question, we chose the Talking Circle as the best method for this study. Combined with the collaborators sitting within the Talking Circle, we honored each other’s stories while respectfully listening.

A strength of this study is our diversity as a research team. As researchers, we named and claimed our personal and professional lenses and intentions for pursuing this study. With having both American Indian and non-American Indian teammates, we candidly represented what we discuss as an implication of this Indigenous research work: the need to bridge the Indigenous paradigm and Westernized worldview to heal from HT. Through our interrelated and rigorous research process, we reflected as individuals and as a research collective to be accountable to the data - stories from the Talking Circle.

Through an Indigenous COI and methodology based in a Talking Circle, we present research from an Indigenous approach that establishes power with instead of power over people sharing their story (Collins, Machmeier & Mulvihill, 2016). The strengths of having Talking Circle intentions as an instrument provides reverence and alignment to the Indigenous paradigm. This way of research, however, has the limitation of potentially being misinterpreted, and or being discredited by Western academics due to the nature of subjectivity (Kovach, 2009).
Limitations. Logistically we encountered several limitations within our study: we discovered that we did not allow enough time for the Talking Circle; culturally, there was an informal structure of ‘being’ that was present, powerful and yet difficult to replicate precisely for further research; and we had to turn people away because there was more interest than allocated space.

Although stated first as a strength to bridge cultural understanding and research paradigms, there is also an inherent limitation in being a research team with two non-American Indian members working on an Indigenous Inquiry. As a triad of researchers, we sought to hear stories and perspectives on healing from HT, and we needed to check our own biases and Western-dominant worldviews throughout the process. The American Indian researcher needed to filter her lens to ensure her lived experiences with HT did not bias the sacred tools – data collection used in this research. The researchers did not instruct the Indigenous ways of conducting the Talking Circle. By preference we allowed and honored these ways of being together that led to the natural evolution of trust. The facilitator modified our initial questions given for the conversation to occur colloquially, which worked particularly well for this method. However, this way of facilitating would be more difficult to repeat precisely. Setting up the questions in a formal “ask” then wait for a “response” format is incongruent of the storytelling fluidity of the Talking Circle method. Throughout our study, we walked this line of seeing both the influence of Whiteness from this Indigenous realm and the possibility to embrace both--our privileges and the power to be interrelated advocates. To be respectful of the research and be in both an Indigenous Inquiry and a Westernized educational institution, we relied on previous Indigenous research and collaborators’ contributions.
We found it difficult to describe the Indigenous method of research coming from a colonized Western educational framework because of the marginalization of the Indigenous ontologies and epistemologies in the educational arena. Western beliefs view Indigenous axiology as ‘folklore or myth’ and not valid science (Simonds & Christopher, 2013).
Results

*I know from my own struggles how difficult it is to change the way we see the world. But I believe that change is possible if we can learn to listen deeply, to feel empathy for our shared experience as human beings, and to treat each other as good relatives* (Wilson, 2011, p. 12).

The purpose of this chapter is to report the findings of American Indian lived experiences of healing from Historical Trauma (HT). First, we start with a description of the collaborators. Then, we review the observational data. Lastly, we share the qualitative results from the emergent themes: connection, traditional healing and purpose.

Description of Collaborators

All ten recruited collaborators are enrolled citizens of a U.S. federally recognized tribe and are over the age of 25. There were three male and seven female collaborators who live and work in the Twin Cities. In the Talking Circle, three collaborators are enrolled members of Anishinaabe tribes in Minnesota; three collaborators are from North and South Dakota, two are Lakota, one Dakota, other tribes represented are Diné, Oneida, Aleut, and Blackfeet. While we did not intentionally target a specific group of people within the American Indian community, they all self-identify as counselors, advocates or administrators serving the American Indian community. Additionally, although we did not specifically ask for shared Historical Traumatic experiences, we noticed commonalities amongst collaborators' stories regarding Historical Trauma including boarding school and physical, sexual, verbal, emotional, and/or drug abuse. Collaborators made many references toward ancestral wisdom, land, language, spirituality and spirit names, and healing.
Observational Data

During the engaging the community/recruitment process, the interest in our research exceeded our expectations. We were honored with the way in which people in the community wanted to partake in this Talking Circle and how they showed up in community. At the Talking Circle, collaborators shared how they were thankful for this experience, for this work, and the space to share from their perspective. Several collaborators elaborated to say that this type of circle experience is beneficial and wanted to know what is next in terms of this research work. At the beginning of recruiting, there was an assumption on our part that potential collaborators would confirm participation via email or phone. However, what happened, is consistent with Indigenous culture - people simply showed up as they would to any significant community event. In turn, we had more people planning to come than we had anticipated.

This demonstration of being your word, being in integrity with a commitment agreed upon, was a remarkable foundation for the Talking Circle. This way of being demonstrated living from the Indigenous Paradigm in which integrity is an innate value. While we had written information and integrity/consent form and a Westernized research protocol, it did not take a reminder or a contract for people to keep their word. During the Talking Circle, some of the collaborators looked down as others were speaking, some fidgeted. There was joking and laughter interspersed throughout the session. No one visibly cried, although there were tissue boxes among the circle from a previous group. The Talking Circle conversation flowed into more story sharing around the dinner table.

Themes

The intention of thematic analysis was to discover themes that highlight healing; however what was evident from collaborator’s narratives was the inherent storytelling beginning with
their experience and understanding of HT. Therefore, we first recount collaborators’ awareness of HT, and then we elaborate on the emerging three themes of healing from HT: connection, traditional healing and purpose.

**Collaborators’ awareness of Historical Trauma.** While the purpose of this project was not to describe HT, descriptions of it emerged organically. We first need to honor collaborators’ description of HT and how it has occurred from their perspectives to discuss the suggestions for healing HT that surfaced during this Talking Circle. Therefore, we begin with these descriptions to give context for the themes related to healing from HT, which answers our research question.

HT is not only a conceptual idea for American Indians, it is terminology to describe lived experiences:

> *I didn’t really know the concept or understand the concept of Historical Trauma until I read it. I think, in a research article when I went to college. I think maybe that’s when I had that ah-ha moment and thought, oh wow. This is me. This is what I grew up with. Seeing and experiencing different forms of abuse. It was normal. For example, every woman I knew growing up experienced sexual assault in some form. Including my sisters.*

Several collaborators shared about an awakening experience. It could be described as an ah-ha moment, also referred to as a moment of clarity, in which they saw and understood patterns in their life and chose a different way of being than how they had been prior:

> *You ask people, ”What was your clarifying moment when you just stopped drinking?”, and everyone knows what it was.*

There was an awareness and recognition of the struggles for both individuals and the community related to HT:

> *I look at all of the things that we’re struggling with this as a community, currently, right now, human trafficking, and chemical addiction... we have ridiculous rates of Native kids who are not graduating from school, who are ending up and still in foster care and in the juvenile justice setting, and then pipeline to prison... the genesis of those things are directly related to the Historical Traumatic events....*
Collaborators represented how HT is an underlying current (or umbrella) creating negative health outcomes and life events for American Indians:

*I think that everything in her life was impacted by Historical Trauma. She got adopted, ... sexually abused by the father, ended up in an abusive relationship ... and just seeing all these things that had happened. So I told my director that... Historical Trauma is going to be the umbrella and everything else is going to fall underneath it.*

HT is perpetuated by both systematic oppression and ignorance and the effects it has on everyone, not just American Indians:

*Thinking about Historical Trauma, not only that it impacts natives but also, like, non-natives, and what they don't know, and then, because they don't know certain things, it impacts us too.*

One collaborator shared how healing isn’t intellectual, it must be a connection between heart and head. Collaborators shared their understanding and experience of HT, moreover how they began their own healing journeys:

*I think that’s how we start, as individuals and communities and families, to heal from Historical Trauma. Not by coming at it from an intellectual perspective. Coming at it from a human perspective. Our families were in pain. Our communities are in pain. And being a lot more forgiving and lot more compassionate to ourselves and to others...That [conceptual] understanding is important from an intellectual perspective, but it's not really helpful for the healing process at all. That's been my experience.*

A description of an integral healing process powerfully related to the act of choosing:

*There’s this intellectual and spiritual and emotional sort of process we all have to go through before we get that place where we, sort of, begin to understand how [HT] impacts us. Not just us, but our family and our kids,... allow ourselves to be thoughtful and intentional is being really [pause] being forgiving to ourselves. Right? This is a really lifelong process of [pause] we’re never going to be perfect at it. Right? It’s not about ending up at a specific place where hurt and pain never, ever impact us. It's about being responsive when it does happen and choosing to do something different other than be silent or running or drinking or this or acting violent. It's about intentionally choosing something different.*

Having chosen to take a different path in life, this collaborator recalled the turning point when a relationship created the purpose for him to live in a different way:
Her mom leaned forward to me and said, "You'd better be worth it." I said, "Oh shit, now I've got to do something for real." You know? That's when I took it seriously about my employment, career. It was a serious thing because I was with her. I embarked upon my journey of employment, which before I never did that. Didn't really care to, because I had nothing. I had no reason to be employed because I'd either be back in there [adult correctional facility] or out here, short-lived, so why even try to work?

Simultaneously knowing the concept of HT and its impact, allows us to focus on the experiences of healing from HT. We present this information through thematic analysis and inclusion of collaborator quotes. In the following section, we describe three themes for healing from HT that emerged: connection, traditional healing, and purpose.

**Connection.** It is significant that at the beginning of the Talking Circle, everyone spoke to who they are, where they are from, and to who they are becoming. From an Indigenous paradigm, there is clear connection between each individual and the web of life. Not only were people speaking about themselves, moreover who they were for their family, tribe, and greater community. Every collaborator in the Talking Circle proudly shared where they come from, either through enrollment connections or by family lineage. In one way or another, each collaborator spoke to the innate human need and feeling of connection. Collaborators described the importance of connecting through their personal narratives and values of being responsible, humble, giving back and gratefulness. The collaborators highlighted the belief that we are all related and this belief was evident in the collaborators’ engagement in the Talking Circle. One collaborator states:

> All around me there are always people showing me something. To be invited to a circle like this I always feel real humbled because I think...there are not accidents in my life. If I end up somewhere like this I’m supposed to tell the story. What I teach other people is, your genuine, authentic self is the power you carry. And if you can share that with other people in a true and straight way, it will be helpful to someone.

Several collaborators spoke to the feeling of disconnection as well:

> That’s what Historical Trauma has done is it’s taken all the beautiful, strong, good things
that we had and turned them into destructive things, and then we don’t even know who we are because we think this is what it means to be Indian and you just gotta suck it up...

Collaborators demonstrated connection by speaking in their native language and connecting deeply to the meaning:

What I said in my language... means my name and my second name... and when I say that name... I call not only my mother, that’s her name, my great-grandmother, and I’m the seventh generation to hold that name.

Collaborators reported a connection between their Indian names, how they received their name and the anticipation of receiving one:

In our ways we give our daughter or our sons over to their grandmothers. So on my grandmother’s side I was called.... That means your favorite child. So as I get older, I find out, my mom says more. She just said that, "They took you at birth, and so I can't say no." So I spent my years way out in the country, following my grandmother around with my other sister, and learning about medicines and plants. I didn't know that's what I was doing at that time but ... But I one day had an opportunity to have a naming ceremony for my adult name, and it was just a beautiful ceremony at about the age of 19.

Each name, from all the collaborators, held significance for whom had named them:

That's my Ojibwe name. It was given to me by an Elder from my home.

Personal awareness of HT resulted in stories of how it impacted daily life. This quote connects how personal awareness of trauma has affected one's’ life:

So, you kind of go through life being impacted by the trauma of the boarding school. How it impacts you as a person, but also your relationships.

This is an additional quote on the effects of HT with relationships and the connection through interaction with each other:

How it impacts you as a person, but also your relationships.....I sort of refer to us [as a couple] as being the misfits. That we weren't really supposed to make it together, as a couple, 'cause you have to kinda have to work through a lot of stuff. It impacts how you interact with each other.

The following story ties together awareness and connection to family:
I remember that conversation ... I remember that moment when [my mother] told me, [...] she said, "I was told by Child Welfare if I didn't find a way to take care of you, or find some way to make sure that there wasn't an adult with you all the time, they were going to take me, take you and your brothers and sisters away, and you would go into foster care." She said, "I knew, in 1965, which is the time that this was all happening, in '66, '67, and I knew that if that happened, I would never see you again, because that's happened to all the Indian kids that went into foster care; they never came home. It wasn't the best decision, but it was the only decision that felt like I had at the time". ...

It's like all of a sudden all the puzzle pieces of my life fell into place. I could start to understand our relationship and why it was always so much struggle, why it was so troubling. I could understand all of the stuff that was happening between my mom and my dad my entire life....

Stories of connection to family were abundant in the Talking Circle, and everyone spoke of other relatives. Collaborators recalled both sentimental and challenging times with family.

Collaborators mentioned the connections to the family heritage, patterns, and the influence it had in their lives:

So [American Indian Language] means holy, medicine, shining. From my grandmother's side on my mom's side, even though you're kind of fighting it off, and fighting it off, they were what they called ceremonial herbalists. Got my first name from my grandmother on my dad's side. Spent most of my upbringing from the age of one or two with my grandmother.

Collaborators spoke about their connection to past and future generations and referred to the continued pattern and cultural strength of secret keeping:

So I started to ask about my great grandparents and that generation of why three generations ago it seems like those were the people who really experienced the most pain. They saw the most violence and they saw the most greed. I recently learned ... since I live up here, I'm learning a little Ojibwe and Dakota...I learned the Ojibwa word “Odaanogoghichiigan” which is that generation from me. It means that being to which I'm inextricably connected. Even though I only met some of them ... I did meet my great grandparents, I knew some of them but they didn't speak much English so I didn't really communicate with them but I started asking about those guys and what did they do and why do these things happen the way they did when they did? I realized ... that secret keeping is actually a great cultural strength that we had, that we could really persevere and really endure a lot. That was a lot of our strength was to keep silent.
Collaborators share a deeper connection with family, seeing the community as extended family:

> I think I feel this great sense of compassion and love for all people wherever I go, so that's one of the gifts of things that I bring. I view my clients as extended family, and that we're all really healing together. That my healing is also in theirs, and we heal together. So, I love that work. I also seek other ways of healing that are more in line with our ancestor's wisdom.

The concept of connection was evident in how collaborators spoke of their tribal heritage and history:

> We're all the same people, the same language, ceremonies, everything, just that the US came through and split us. At that time, when so many of our people were dying during those poor times, five of our tribes just took their people heading up north. And the only Blackfeet remained in my town are still here.

Connection to the environment was distinctly present. This collaborator spoke about her connection to the city, which demonstrates the importance of connection to place:

> I needed to settle down and I came here to the cities. I tried to be, not so much let go of the past, but to recognize that I was trying to ground myself. Now I always said I would never live in a city, so I recognize that I started to make this city a little town, and that's what I made it. My little village.

In connection to the land, this collaborator speaks to her connection of her tribal land:

> My tribe ... a band actually, we were part of the non-removal Mille Lacs Band of Ojibwe, even though the settlers in the community there, they were burning my family out. My family actually... lived right where... is now and I always think that's really our land right there, so I always tell my kids that when we go there, that this is where our home is.

This collaborator shared the connection between generations and how the old ways of healing are returning:

> I see it happening in my generation, and I see it happening in the little ones, that a different time is coming and that they're gonna bring that back because they're like the same. Those ones and those ones are like the same. It's happening.

Connecting to traditional wisdom ways, one collaborator talks about the importance of connecting with their family and culture when they state:
Learning how to go back to the original instructions because those original instructions I think my great grandparents were some of the last ones, that really know and understand what it was. I know I'm still inextricably connected to them and it's the same word in [inaudible] is your great grandchildren from, so we go back three generations and you go forward three generations and you know yourself, that's the seven generations. We're all inextricably connected. It happens all together like that, right?

Therefore, connection within the American Indian culture is significant with the use of traditional healing ways.

**Traditional healing.** While is it important to remember that there is no appropriate way to segment stories in an Indigenous paradigm for lineal categorization, the quotes on traditional healing relate to the previous theme of connection. Collaborators spoke about healing using traditional methods, such as: ancestral knowledge, prayer, spirituality and ceremonies, herbs, and rituals to retrieve fragmented soul parts. American Indians believe that integrating the soul by retrieving the soul parts heal the soul wound. The following quote encompasses the traditional ways to heal and highlights that it’s necessary to go back to the ancestor’s way of healing and praying:

*It's really, really important to go there for the healing, to go to the original instructions and to go back. As we slowly piece by piece, each time I sit in and need be...it's healing space and it's prayerful space and every time little by little, healing comes through that in really inexplicable ways.*

Collaborators not only talked about the use of ancestral knowledge for their own healing from HT, but also the importance of teaching the ancestral knowledge to others:

*It's been coming back stronger and stronger and stronger, the old medicine.... women in healing journeys, our women that just walk in every day, are lost, addicted to drugs, homeless, maybe sexual assault, domestic violence, just meeting them where they're at, not judging them in any way. We do a lot of healing practices, we work with Young people, we work with children, we work with elders, when we go in there, we teach how to heal, with our model.*

A collaborator shared traditional healing on adults healing from HT:

*So, I use mind-body medicine. I use aboriginal focused oriented therapy. I use healing*
in medicines. I like to say, I see the 40 and over crowd, now. Even at that age, they're lost.

A collaborator shared the path of prayer and how their path went full circle from the past to a healing place:

*For me, that was the path of the prayer in my life. Right? Prayer had to take me to that. All those spaces and places and bring me to this place where I've had this actual physical experience, where I can say, "Okay. I've made full circle, and I can let go of this. And I don't have to be angry anymore. I don't have to be any of those things." Right?*

Another collaborator remarks on the power of prayer as a way of healing from HT:

*You never know what's going to happen when you enter a space and place from a prayerful moment.*

Collaborators talked about the connection between spirituality and ceremonies:

*I like that aha moment, though, because I think I've experienced that too, and I tend not to talk as much about things that have happened in the past, but you do have to address it spiritually.*

Collaborators talked about the importance of not only praying for oneself in ceremonies but also to include the Creator and others during their healing journey:

*I always say a prayer, help me. Whoever's going to walk in our building or walk in our door, help me.*

This quote represents prayer to come full circle to heal:

*And I said a prayer for those people that had harmed me and hurt me. And I said ... It made my life in a full circle, right there.*

This collaborator shared a description of the healing through spirit:

*I sobered up by Creator's help. Had nothing to do with me. I had no intention of sobering up. Things just happen...Miracle after miracle has happened to me since I've been sober.*

A collaborator shared the meaning of calling on the grandmothers’ spirits for help:

*Glorious life, um so when I say [a word in her tribal Language] I'm saying, and I'm calling my grandmothers to come here to help me.*
This collaborator mentions her dad’s spirit coming to her in a dream giving her an Indian name and an important component to healing:

*My dad came to me in a dream after he passed so I had always wondered why I thought I didn’t have an Indian name but he came to me, and he said, “My name was …”*

Specific plants and herbs are considered traditional medicine. Collaborators talked about the importance of asemaa (tobacco) in ceremonies and healing:

*You just have your tobacco in there, and you just can offer ... so when I see an eagle or something, then I can just offer a pinch of tobacco.*

Another collaborator shared the meaningful purpose of asemaa use:

*I was so discouraged and lonesome for my family and lost. Then I remember what my mom said, “Take out tobacco and pray,” so I stood on that corner, and I prayed, “Show me where I need to belong.” I looked up, and I saw this building...I’ve been here ever since.*

Collaborators also talked about sage, another sacred medicine plant used in the smudging ritual. This specific smudging ritual occurred when the collaborator was told by an elder to return to the boarding school site where she was traumatized in order to heal. Some people spoke of going back to the place where their soul wound occurred in childhood for a healing experience:

*So we got there finally... walked around and smudged and prayed. And just haunting memories of children playing and things going on...you put your food down there. Bring some toys, because we had a lot of that in those days. And then call yourself four times. Like that’s when the beginning of healing began for me. I've never been through therapy. Heal through ceremony.*

The concept of going back, refers to revisiting both in place and/or memory the times of traumatization and going back to ancestral knowledge. This collaborator talks about the soul wound and the how the understanding of going back to ancestral knowledge is coming back to this and future generations:

*It’s different than therapy and I do therapy. But it’s also different than church and I do church. It’s all dealing with that soul wound that we carry, even if you don’t know you’re carrying it, eventually you come to understand that and then you start to go back. I see it*
happening in my generation and I see it happening in the little ones, that a different time is coming and that they're gonna bring that back because they're like the same.

Another collaborator shared a powerful story about healing from HT by reintegrating the soul:

I would say about five years ago. I would [pause] stop running. Stopped fighting. It’s time to confront it, and I actually went to go see a medicine woman, elder was in the sweat with us. We were in a sweat, and we came out. Just the two of us. Helped her out by laying her on the grass. Much older than me.... she said, “You’re not all here. There’s a little one of you, you have to go back for. And I was looking around, it’s getting dark, and I was looking at the stars, and then I was wondering what does she mean, and she just sat back and she said, “she’s far away, way out on the prairie, go a long, long ways and there’s a big huge building, still just looking out of the window.” I sat there, and I thought wow [pause] And then I, I, I kept going to see her and meeting with her and she finally instructed me on what to do. To go, to go back because I chose to go back to the school, all the way home...

This collaborator shares a story about her soul loss and how a healer helped her HTR symptoms:

Somehow I ended up seeing [healers name] who was saying "You have soul loss.... I know what depression, and feeling suicidal like. So I am not like that anymore, which is also like really nice, it's a nice change.

A collaborator in the Talking Circle mentions the use of an integrative technique combining Western and American Indian ways of life for healing HT:

Groups therapy are based around healing practices of our natural healers. They took ten Elder healers and ten therapists, and they combined them together. So, we learned from the Western model, and they learned how the elders heal...Those are really important contributions, really, really important contributions.

This collaborator expounds that healing is a continuous process of humility and learning:

Even after his life experience is still learning and how learning is a continuous process and that makes us humble. I feel like it does because at one point we'll never know everything.

In the next section, we share the collaborators quotes pertaining to purpose.

**Purpose.** Inextricably tied to the themes of connection and traditional healing, purpose emerged as an ongoing reflection and awareness in ways collaborators contribute to the healing of themselves and others through relationships. Each collaborator indicated, in some fashion, purpose brings meaning to connections with family and community and this recognition is an
important part of the journey of healing from HT. Although individuals may not know their purpose, collaborators suggest that everyone has a purpose:

_I don’t know where my life is taking me. It’s taking me somewhere. I think that every person we see, even that person signing on the corner, that they have a purpose._

One collaborator spoke to the value of recognizing the purpose each person has in gathering with others:

_I think that’s been my biggest life learning experience I guess I would say that made me kind of recognize that we all come here with purpose tonight._

Collaborators expressed recognition of having purpose through a leadership position or role in family that may start as a child and continued throughout their lives, influencing others in the community:

_A big part of being an oldest has been to recognize that I kind of always had to break the ground for my family, of my kids, and my brothers and sisters. That could be good, or that could be bad, but that’s a big part of how I sort of lived my life as recognizing they were watching me and they were always behind me, or they always gonna pay attention to what I was saying so I had to be kind of careful._

This quote signifies a collaborator’s purpose to be the protector, and continued to protect the younger generation throughout later life:

_I have six documented injuries. I was always a fighter.... Even at that age when I went to [boarding] school, I was always protecting the little ones._

Another collaborator reflects on having a purpose even when family is far away. This relates to the quote in connection regarding making this “my little village,” and demonstrates purpose in where you find yourself:

_I always think to myself, even today I pray about it, “Now what is your purpose for being in Minnesota?” with all my family about a thousand miles away._

Collaborators expressed how their healing journey involved asking questions about the meaning of their own life experience:
I was thinking to myself, for myself, “There’s got to be something different for me than this. What is that, though?” I couldn’t figure out, “What is that?” Do I know? I don’t...I just wanted to do something different.”

A collaborator spoke to purpose as a reoccurring contemplation:

So I think a lot of my contributions to my living now have been through actually seeing what I’ve lost and how do I have a purposeful life now? Did I have a purposeful life already? Am I done?

The purpose of contemplation includes changing with values, as one collaborator expressed aligning those values by honoring relationships and connections:

I used to value things, but anymore, I don’t value things as much as I value that human touch or that conversation or some food. My nephew just made Indian tacos…. I just came from my grandsons birthday party. Those are the things that I now value and how do I perpetuate those, how do I make those be more, continuously.

The collaborators discovery that everyone has a purpose also led them to start asking questions about breaking the cycle of HT; alluding to the impact of healing as a ripple effect:

...I don’t know how many people it impacts to break that cycle, that Historical Trauma and that PTSD if I could just break it for my sons I’d be happy. You know?

This ties in with this collaborators comment about ways to reconnect people to their purpose and heal from HT in their communities:

So I’m like [other collaborator’s name], I’m a late bloomer. I wanna do something working with the community. I’m more of a healing, helping, that sort of thing.

As one collaborator elaborates, healing of self can bring a commitment to assist others in their healing process:

I don’t know what we can do to help these band members that are just so in trauma. There’s.... something that needs to be done, and that’s why I wanted to see [this research] how this could possibly help with different ways to reach out to our people...it’s all over, across the country...Those that work in the community too, they need to get like invigorated, refreshed every so often so they can help others.

Collaborators talked about purpose as a responsibility and opportunity to give back to others:
Now I can take my lived experience, and what I’m doing in research to understand both my experience with the experience of my community...now I have something to give back”, right? All of a sudden, now I have this sense of purpose too.

This sense of responsibility carried over into commitments and chosen field of work:

They were looking for people like me to go in the [particular school system] school and work with the high risk, at risk Native American students. That fit my journey, what I wanted to do. I kind of relate it back to, I’m in a position now where I can protect and take care of the students, the Native American students going through the school system, so they don’t have to experience what I experienced when I was a child going through the system.

This sense of purpose through life experience often came with a sense of passion and excitement to bring healing from HT to others:

I’ve been working most of my life, working with [American Indian] young people, working with [American Indian] women and children. I have a long history working in domestic violence. That’s my passion. I’ve been through that myself..... I enjoy working with people. I work at the Elder’s lodge now, working with our Elders there.

There was a resounding passion when collaborators shared about their meaningful work. One such collaborator shared how an awareness and realization of the problem fueled their purposeful work:

I guess I have always been interested in counseling and I try and help people with their problems and ... then I was working at [name] High School and trying to figure out why so many [American Indian] kids were dropping out. Then I realized that chemicals were a big problem, addiction. So I decided to go back to school and be an addiction counselor.... I'm really excited to be there [new job] and excited too at what's going to come.

Collaborators see that there is currently a need and importance to hold conversations regarding Historical Trauma. They see their purpose as being responsible and stepping into and up into these kinds of conversations:

Everywhere I go, that conversation [Historical Trauma] seems to come up, so I think it’s on the front burner just across this country right now. That’s a conversation that people want to have. And I just feel responsible to have it have it in a responsible manner, just take the facts I know and the teachers I know and my own experience. So I just want to have it.

Making safe spaces for these courageous conversations is an important aspect to being able to share authentically and vulnerably:
To be able to create a work space... to create a space where it feels comfortable, where someone’s able to come in and know this is a safe place where they could start, maybe talk a little bit about it.

Community healing and role within the community demonstrates that this is not an individualistic path, rather a collaborative effort and journey:

*I’m a part of their healing generations team.*

Collaborators spoke about gratitude for the opportunity to be involved with others. People feel like they have the experience and stories that may make a difference in community:

*You know I've been really blessed, just that I sit here and I'm asking to come in a circle like this, I always feel like "Wow, a guy like me."*

This quote demonstrates the willingness, humility, and intention for this Talking Circle work to help in community:

*So I’m glad that I’m part of this group, because I feel that I have something to share.... I'm glad we’re all here. I’m glad you’re doing this as a research. Hopefully, it will open up something that’ll help the community to heal.*

The youngest collaborator of the Talking Circle listened intently and spoke last with purpose:

*I think even now I’m still understanding what historical trauma really does mean. I know, I recognize that I’m extremely young and a fledgling counselor and how my experiences have shaped where I am now and where I will be going. I resonated a lot with what [the facilitator] was talking about too, and then I had another thought about how historical trauma. There’s a lot of bad attached to it but sometimes I feel there’s a lot of good attached to it, too because it kinda points us in the right direction in our own journeys that we were meant to go.*

In summary, these three themes emphasize the ongoing healing already occurring in American Indian communities. The themes of connection, traditional healing, and purpose are not numerical or hierarchical in importance; instead they are indicative of the interrelatedness of the collaborators’ storytelling. The image below is to illustrate how these themes intersect. The image depicts three circles that are interconnected, much like the interrelated storytelling within the Talking Circle.
Discussion

“Grandmother, and great Mother Earth,
Upon You the people will walk;
May they follow the sacred path with Light,
not with the darkness of ignorance.
May they always remember their relatives at the four quarters,
To all that moves upon the universe....”

(Black Elk, as cited in Gustafson, 1997, p. 31).

In this chapter, we interpret the results of our research findings to answer our question — what are American Indian perspectives on healing from Historical Trauma (HT)? First, we discuss our findings that are supported by the literature. Then we discuss unexpected findings of this study. Next, we consider the implications of the study for holistic health and future research. We end this chapter with our conclusion.

Findings Supported by the Literature

In this section, we relate the themes found in our study to the literature. Several of our findings are consistent with the literature. The literature regarding American Indian HT supports the Talking Circle collaborators’ experience of HT as collective intergenerational trauma due to genocidal actions and assimilation, continuing to reverberate through individual and community life (BraveHeart, 1999; Brave Heart, 2003; DeBruyn, 1998: Kira, et al., 2012; Kirmayer, 2012; Myhra, 2011; Mohatt et al., 2014; Stolfi, 2015; Pascoe & Richman, 2009). The density in previous research regarding HT of American Indians dwells on the pathological trauma profile rather than seeking asset-based capacities to heal present in the Talking Circle (Adams, 1995; Beltran & Begun, 2014; Denham, 2008; Duran, 2006; Evans-Campbell, 2008; Hatala et al., 2016; Hodge, 2012; Kira, et al., 2012; Kirmayer et al., 2014; Maxwell, 2014; Mohatt et al., 2014; Schindlmayr, 2006; Sotero, 2006, Stolfi, 2015). Consistent with the previous Indigenous literature, we suggest that the definition and treatment of HT lacks the voice of American Indian
HEALING FROM HISTORICAL TRAUMA

Through the Talking Circle discussion, there were commonalities amongst collaborators’ perspectives of healing from HT. Our results from the Talking Circle, and awareness of local actions within the Twin Cities suggest there is already effective healing happening in our local American Indian community. Previous Western dominated research does not acknowledge the phenomenon of American Indian perspectives on healing with their HT (Brave Heart, 2003; Duran, 2006; McCabe, 2007). This description of the lived experience is coming out of a process that cannot be a linear model definition due to the interrelated nature of the Indigenous paradigm. It seems that everyone understands that individually and collectively, the American Indian community needs healing, and there is a need to bridge the Indigenous and Western world. American Indians embrace a cyclical way of life, and their experiences with healing HT may never be complete due to the interrelatedness with each other (Wilson, 2008).

The stories highlight experiences of American Indians to provide culturally relevant healing, which is supported by the literature describing the relationality within the Indigenous paradigm (Duran & Duran, 1995; Duran et al., 2008; Goodkind et al., 2015; LaDuke, 2005; Matamonasa-Bennet, 2017; Murray, 2003; Pember, 2016; Portman & Garrett, 2006; Stolfi, 2015). From this Talking Circle stories, three themes emerged from participants’ stories that offer ways to heal from HT from American Indian perspectives. The themes are: connection, traditional healing, and purpose. The Indigenous Paradigm is circular and non-linear; however, it is essential to present the results in a way that helps others understand the broader themes that we found. The collaborators’ perspectives are powerfully important for the processes or steps we need to take to heal from HT.
**Connection.** Acknowledging and valuing the interrelatedness with self, ancestry, land, tribe, and community provides the groundwork for a healing process to begin. Indigenous research is grounded in this holistic connection (Ehlers, Gizer, Gilder, & Yehuda, 2013; Goodkind et al., 2015; Horowitz, 2012; Horse, 2001; Kirmayer, 2012; Weatherford, 2010). Collaborators shared, dealing with HT means addressing who you are, where you are from and who you are becoming in a way that acknowledges the soul wound that has occurred. The literature supports the belief of the soul wound, which is an emotional wound that is currently unaddressed (Brave Heart, & DeBruyn, 1998; Brokenleg, 2012; Duran, 2006; Duran et at., 2008).
Collaborators in our group confirmed an interrelated worldview by sharing relational experiences within their narrative stories and gave voice to how connecting to their account provided healing. Extensive literature supports this belief of healing and resilience through connecting to one’s story (Bassett et al., 2012; Beltrán, & Begun, 2014; Brave Heart, 2003; Brown et al., 2012; Edmunds, 1995; Kallivayalil, Mendelsohn, & Harvey, 2012; Chase, Elkins, & Altschul, 2011; Brokenleg, 2012; Charbonneau-Dahlen, Lowe & Morris, 2016; Denham, 2008; Horowitz, 2012; Matamonasa-Bennett, 2017; Smith, Cousineau, & Rhine, 2006; Strayer, 2012; Struthers, Lauderdale, Nichols, Tom-Orme, & Strickland, 2005). Through narratives, individuals connect to their Native identity. Indian names, tribal affiliations and relatives, and service in the native community also connect American Indians to their identity and ancestry (Garrett et al., 2011; LaDuke, 2005). The literature also suggests the importance of relating to one’s Indigenous heritage throughout the healing process (Brown et al., 2012; Crawford, 2014; Ehlers, Gizer, Gilder, & Yehuda, 2013).

Collaborators spoke of the connection to the family heritage, patterns and the influence HT had on their lives. The intergenerational behavior patterns such as abuse, spiritual disconnection, and silence about the history of the trauma resonate within the literature (Brave Heart, 2003; Duran, 2006; LaDuke, 2005; Myhra, 2011). Historical Trauma affects American Indian people, whether realized or not (Myhra, 2011). Understandably, once people heard the concept of HT in their lived experience, and had an ‘ah-ha’ moment, they were able to see the Historical Trauma impact had on their life and community. Collaborators spoke about the connection between this knowledge and their participation in traditional ways of healing.

**Traditional ways of healing.** Within the academic discussion of healing, contemporary researchers, argue that healing from HT requires traditional ways of acknowledgment and
treatment (Brave Heart, 2003; Duran, 2006; LaDuke, 2005; Matamonasa-Benett, 2017; Pember, 2016; Wilson, 2012). The collaborators in this research support traditional healing approaches to heal from HT, including going to traditional practitioners, practicing healing and purification ceremonies, doing therapeutic activities, and using ancestral wisdom and medicine to address the soul wound (Duran et al., 2008). Collaborators referenced spirituality in their stories by sharing the importance of respect to a higher power. In addition, from the perspective of Indigenous Research, spirituality is a fundamental aspect of healing (Evans et al., 2009; Duran, 2006; Mertens et al., 2013; Lambert, 2014; Simonds & Christopher, 2013; Wilson, 2001, 2008).

Within the Talking Circle, collaborators consistently presented the idea that Indigenous and Western healing methods would benefit from cultural integration efforts. Moreover, integration of traditional healing may provide access to effective American Indian healing practices in colonized, contemporary society. Research supports the necessity to move beyond tested Western models and incorporate a holistic, Indigenous Paradigmatic healing approach so that American Indians can effectively engage in the process of healing from HT (Duran, 2006; Mertens et al., 2013; Lambert, 2014; Wilson, 2001, 2008). A healing path from the Indigenous Paradigm is a continuous process without a linear framework (Duran, 2006). The collaborators describe their healing is not a destination but instead as a process that is painful and necessary to heal oneself, the community, the land, and the spirits (Duran et al., 2008).

**Purpose.** During the Talking Circle, collaborators spoke about why they are here and where they are on their healing journey. They spoke of their purpose as a way of walking in the world—whether that be entering a space with intention, addressing past trauma, or learning from the most intense challenges. Several collaborators mentioned the belief that *everyone* has a purpose. Moreover, one’s purpose has an impact on the community. This relational viewpoint
holds accountability for individuals to be in service of and reconnect with values from their American Indian culture (Kovach, 2009). The American Indian collaborators and the literature reinforce that increasing social and community support, strengthening tribal identity, and reframing negative experiences promotes healing from HT (Sasakamoose et al., 2016; Goodkind et al., 2012; Matamonasa-Bennett, 2017).

Many of our collaborators confirm what contemporary researchers (Brave Heart 2003; Duran, 2006; Myhra, 2011) demonstrate the importance of community-based work such as sharing the responsibility to pass on teachings and help others heal. Educating others about HT comes from a place of authentic sharing and a responsibility to teach the wisdom acquired from both going through pain and coming out on the other side of that suffering.

**Unexpected Findings**

Our research study also has some unexpected findings. First, we found that we had more people interested in participating than allowable space capacity. Popularity for engaging in the research demonstrates the need and desire within the community to have courageous conversations regarding HT and healing from it. Surprisingly, all collaborators were counselors, advocates or administrators in the community. In addition to an eagerness to be a part of the study, many participants expressed gratitude that we were doing research regarding HT. Had this community discussion been a support group rather than a Talking Circle research opportunity, we wonder whether it would have had the same appeal. One possible explanation is that the participants viewed it as an essential chance to validate stories within an academic context, as many of the participants are connected and familiar with the weight of research in their professional fields. Another possibility is that the community saw this as a unique offering that varied from other types of group meetings. We think this is important because we also see the
need for more research from an Indigenous Paradigm to bridge to Western academic research to bring attention and authenticity from academia.

We were also surprised at the original discovery of how we were operating from an Indigenous Paradigm instead of the Organic Inquiry model. We had begun our research embedded with the idea that this research project would take on a life of its own and be a transformational experience for our collaborators, and us as researchers. We trusted the process to be a natural occurrence, and as research demands--continued to search and search again. We discovered an awareness of how everything that was occurring for us as researchers, both in uncovering literature, Talking Circle observation, and our lives are interconnected. We were ready for this research in our paths of personal transformation, and we are also at the point of listening to provide information on healing with HT. When we listen, we connect. Once in the relationship with research, research became a part of us. Our research process became an integration of the Indigenous and Westernized paradigms in which we operate.

Part of the transformative process was to be present and share our innate responses, assumptions, judgments, and learnings. In one instance, a collaborator shared a thought that was at first striking to us as researchers. They spoke to the idea that HT may not be “bad,” instead it is an experience that brings us further along our path--and there is wisdom in this suffering. While at first, the comment was contrary to our notion as suffering being ‘bad,’ upon further reflection, it was an incredible offering of Truth; that it is not bad vs. good, rather simply what is. It is a powerful act to be present to what is and to humbly believe that that experience has something to teach us. From conducting this Talking Circle, we as researchers developed a strong sense of connectedness and faith of our interrelated path and purpose to contribute to our local and larger community. By being present to ourselves, the collaborators, and their stories,
we recognize we have much to learn, and that much is unknown. In our current American
society, we have developed ways of knowing that reside in judgment and righteousness to rise
above. In the circle, we found there was no need to rise above; we were grounded together in
knowing.

From the Talking Circle, we found that awareness of HT is important as collaborators
talked about personal recognition and an ah-ha moment of connecting the definition of HT to
what is and what has happened. The lack of literature is also an indication of the need for
growing awareness. Awareness is a vital component of healing (Murray, 2003). One collaborator
shared how healing isn’t intellectual; it must be a connection between heart and head. This idea
could mean that we are each on a destined path in which our lives are contributing to a greater
evolution. Such as referenced in one collaborator’s sharing of the Seven Generation teachings. In
this way of living, a commitment to mirror the past three generations, and those three future
generations will be our mirror (Benton-Benai, 1988). A mindset shift is required to bridge the
conjointly interrelated Indigenous way of being into individualized contemporary society.
Therefore, we believe we need to work together--using both Indigenous and Western wisdom.

We found little research literature on soul retrieval and healing the soul wound, due to the
sacredness that cannot be openly communicated and furthermore has the potential for
misjudgment or misappropriation (McCabe, 2008). Consequently, the Talking Circle felt sacred
as several collaborators shared stories regarding the journey of going back to the place of abuse
and trauma. Whether that was boarding or public school, people spoke of going back for a
healing experience to occur because they could recognize their soul wound that happened in
childhood. This recognition and acceptance of one’s past and the suffering that occurred allows
people to integrate lost parts of themselves into their present being. In these stories, they would
not go alone. They would travel with a trusted someone and hold acceptance and love during the emotional process. One collaborator offered an excellent suggestion given to them by a medicine woman, that to heal, one should prepare a meal for their family; it is critical to gather the family and talk about the past to heal together.

**Implications**

From an Indigenous Paradigm, healing is a process of returning to balance, and there is the great need in both American Indian and non-American Indian communities for people to return to equilibrium (LaDuke, 2005). Our findings suggest that American Indians hold ancestral knowledge, language, and spiritual knowing that provide excellent healing potential and connection to a place of balance within oneself and community. Therefore, American Indian traditional ways of healing deserve and require both further attention and recognition from Western society. In the research literature, we found a lack of support for the integration and awareness using traditional ways of healing from HT. A collaborator in the Talking Circle mentions an impactful healing model taken from coursework that integrates, and further Western research also ignores the transformative power of spirituality in the healing process. The healing process comes little by little in inexplicable ways, and this recognition incorporates spirituality in everyday experience. From the Indigenous epistemology, the Creator is doing the healing, and one cannot divide spirituality from other areas of life (Duran, 2006). One collaborator shared how the Creator presents “miracle after miracle.” We present implications of our research to enhance the dialogue about how we understand, teach, treat, and further explore healing from HT.

**Holistic health.** Health concerns and problems continue to affect American Indians individually and collectively (CDC, 2017). In addition to Western medicine, Complementary and
Alternative Medicine (CAM) practitioners need to strengthen cultural competences, and the humility to ask rather than provide answers on how to cure or fix health issues (Horowitz, 2012). American Indian healing methods are alternative modalities compared to allopathic medicine and (CAM) should incorporate Indigenous healing techniques for American Indians interested in learning more about traditional ways of healing within the cultural context. American Indians could benefit from increased use of CAM modalities and the incorporation of the values of Indigenous ways of knowing in their healing processes. One way of implementing this is through institutional and community support of Traditional Indigenous Medicine practitioners such as Native Elders in Residence, community healers, and knowledge of Indigenous resources (Brokenleg, 2012; Brown et al., 2012; Echo-Hawk, 2006).

This research can inform and influence practitioner to client care in the CAM field for practitioners who care for American Indian people healing from HT. Education and awareness of HT is a beginning to gain knowledge of HT, understand responses to HT and unresolved grief, and seek healing techniques that can provide insight and alleviate suffering. Although we’ve found that the traditional methods presented in the literature and our results are useful for healing HT, some references resemble CAM modalities; such as meditation and energy work (Gone, 2010; Goodkind et al., 2015; Horowitz, 2012). Utilizing CAM-based mind-body practices, integrated with the physical and conceptual understanding of HT, will enable the patient/client relationship to dwell in the collaborators’ knowledge rather than the hierarchical dichotomy of seeker/expert. The mandorla image, literally meaning an almond-shaped area of light, we created post-Talking Circle, presents the concept of integrated healing--bridging the dominant Western research and American Indian perspectives.
Importantly then in the discussion of this research, we desire to acknowledge community and practitioner awareness of HT. When people learned about HT, they had an awakening moment of ‘this is me!’ Due to the deliberate attempt to ‘erase and replace,’ there is a continued experience of not belonging. And the historically oppressed may enjoy a renewed sense of connection with awareness of HT and its implications. This magnitude of needed research studies must reach the broader public, and the impact practitioners, therapists and others who work with the oppressed communities will be multifold (Denham, 2008; Duran & Duran, 1998; Duran, 2006; Duran et al., 2008; Evans-Campbell, 2008; Horowitz, 2012; Kira et al., 2012; McCabe, 2008; Sotero, 2006).
**Education.** Creating awareness of and education about of HT and its implications for to educators, teachers, administrators and support staff, and the educational community will generate greater understanding, support, and service to their American Indian students and families.

Due to colonization, the United States lacks the perspectives and stories of American Indian history and classes taught by American Indian teachers. Recent statistics show that less than one percent of teachers in the United States are American Indians (States News Service, 2016). Lack of American Indian educators demonstrates the gap within our U.S. school system to integrate an Indigenous worldview and to have a culturally reflective teacher population. Striving for greater American Indian teacher candidate enrollment would have a positive impact on the issue of HT and Historical Trauma Response visible to students today.

Similar to how the collaborators spoke to the shift in life that occurred when they heard and understood the concept of HT, educators and community members might also experience a change in their perspective with a greater awareness of what HT is, and how it is real for their American Indian students. Educators can be connected to the healing process by inquiring about their role in their students’ oppression. They need not seek to fix or resolve this unresolvable issue. Instead, they can listen intently to a student or student’s family member in a way to see them as they are instead of imposing judgments and prejudices. The education system and individuals within often hold dismal expectations for American Indian students, which may be consciously or unconsciously ignores the capability of American Indian students (Adams, 1995; Jones, & Nichols, 2013). Educators can be powerful advocates for American Indian students. They can seek ways of bridging American Indian knowledge into the classroom. Often American Indians and other racial groups labeled as the ‘other’ in Eurocentric society have the
responsibility to teach about oppression. Educators, regardless of race, must have the power to inform, inspire and serve students in families in a culturally competent manner (Jones, & Nichols, 2013; Mays et al., 2009). Strayer, 2012).

Children need to hear Indigenous ways of knowing directly from Indigenous teachers because it is an authentic reflection of themselves (Reyhner, 2004; Strayer, 2012). Educators may understand that you can’t just heal one individual--it takes a village. Like a classroom culture, a community that values right relationship amongst all people allow all to thrive. If an individual is healed or brought back to authentic balance and placed back into a toxic environment, the unresolved grief will reoccur. Environment and support are critical for individuals to feel connected, whether that is at home, school or in the greater community. We believe that education can shift the focus from surviving towards thriving on a healing journey. School settings are a place to begin to teach adults and youth about HT. Therefore, there must be advocacy for Indigenous ways of knowing and Indigenous teachers, especially in the field of education. We wish to see more community members who have experienced healing share with others to inspire and provide authentic hope for others. Populations who share hope together could be in a formal or informal educational context--either in schools or community centers.

**Community.** Each of the collaborators involved in this Talking Circle are leaders in the community in some capacity. They also all participated in taking steps to get involved in learning about HT, such as taking classes, getting degrees to work in the American Indian community as support, educators, and leaders. Involving leaders such as these collaborators in bringing awareness of HT to American Indian communities as well as institutional settings may open more avenues for people to engage in the process of healing from HT through community involvement and building connections for healing.
One participant mentioned a need for support to those already working in the American Indian community in this capacity. Traditionally, American Indian community members seeking healing support would offer goods and services for assistance. Today, the commodity is money, and people need money to survive (Deloria, 2006; Weatherford, 2010). Currently, healthcare under Western model is a hierarchical, top-down approach. The findings in the literature and our research support the importance of the Indigenous Paradigm and perspective in healing American Indian HT, which is relational, and community supported. Therefore, American Indian involvement and leadership in schools, politics, and healthcare needs to be encouraged to affect change at policy levels. Culturally informed policy changes would effectively move actions into motion to address HT in various sectors, promoting awareness and community actions towards healing.

Currently, HT is undefined in the DSM-IV, and that creates a lack of medical or mental diagnoses for the affliction of HT (DSM-IV, 1995). Although it has been proven by some scientists that HT has changed the DNA of Indigenous people, without medical attention, it’s more difficult to treat or assist with healing. Until American Indians suffering from HTR receive the care needed, insurance dollars for treatment programs, education training, degree programs, and medication are not available. From our study, we’ve learned that non-profit organizations in the community offer services for clients with HT as collaborators in the Talking Circle were advocates, leaders and service providers in local non-profit work. While this may be working in local sectors, the United States needs a broader approach to address HT nationally.

**Research.** There is a lack of literature about healing from HT and only a glimpse of literature regarding Indigenous research. American Indian people, as this study focused on, are not represented culturally in the research realm. There are many reasons for this, but ultimately,
the epistemology, ontology, and axiology of the American Indian people, even after attempted
genocidal efforts, is significantly different than the dominant culture (Chilisa, 2012; Lambert,
2014; Kovach, 2009; Simonds & Christopher, 2013; Wilson, 2008).

Further Indigenous research will provide culturally relevant healing practices and medical
care. While the English language around HT has evolved, health and medical care of American
Indians have not. The fields of research, medicine, education, and the government, must include
the Indigenous paradigm in a culturally respectful and deserving manner. CAM practitioners
need to understand that American Indians walk in two worlds. Providing culturally sensitive
techniques in education and research institutions will benefit funding and further research.
Without offering Indigenous education on healing from HTR further alienates American Indians.
Inclusive education and medical care would provide knowledge of American Indian forms of
healing such as the Shaking Tent ceremony, known to the Anishinaabe population. Healing the
soul wound incorporates a Shaking Tent healer who performs a ceremony to retrieve a
fragmented soul part. This ceremonial act reunites the fragmented part of the soul left at the
scene or scenes of trauma when it occurred. Further research from an Indigenous Paradigm
would benefit both American Indian and non-American Indian populations due to the holistic
approach towards healing.

Further research implications from this specific Talking Circle are that we found that three
hours was not enough time for the number of collaborators. A possibility would be smaller
groups sizes for Talking Circles or increase the time allowed for discussion. The Talking Circle
process was said to be beneficial by collaborators and offered healing to all those who
contributed. Upon reviewing the literature, we noticed that, similar to our research group, fellow
researchers of HT often are or include American Indian community members within the research
cohort. Since many non-American Indian researchers still use Westernized methodologies, our contribution to the field of research through this work is to forward the acknowledgment and use of the Indigenous Paradigm in the larger research community. Although our research question provided significant results, it raises more unanswered questions for further study.

Additional questions arose during our research process that would provide the foundation for further study. These questions include: Where is the Indigenous Research method used and how is it influencing researchers and the collaborators? How can the Indigenous Paradigm influence leaders in the Western community? How do Talking Circles and community work impact healing of people in recovery? Are there contemporary community examples of Indigenous infrastructure? What would result from an American Indian Talking Circle regarding healing HT in a different location?

**Conclusion**

*We are always, and we will always be beginning new journeys. We will always be there for ending journeys. Then we will start all over again because we are forever beings of eternity. We came out of eternity into the sunlight and into the light beings of vibration of divineness*

*(Kopacz & Rael, 2016, p. 141).*

Western dominant society made many debilitating attempts to exterminate American Indians from the continent yet failed to completely eradicate American Indians and Indigenous culture, leaving soul wounds for American Indians in the wake of these genocidal actions (Duran, 2006; Duran, Firehammer, & Gonzalez, 2008). Derived from the harsh treatments enforced by the dominant culture, American Indian communities carry intergenerational Historical Trauma (HT) passed down through personal and collective histories that include psychological, physical, and spiritual ailments (Adams, 1995; Bombay, Matheson, & Anisman,
Furthermore, this intergenerational wounding for American Indian community members cannot heal as enduring systematic racism, microaggressions, discrimination, and oppression continue to occur throughout the U.S., and acknowledgment of the continued silence and inattentiveness of these atrocities must end. Over 500 years of overt violent annihilation, colonization, ostracization, and inequality has diminished the condition of the Indigenous communities’ health; continually increasing and disproportionate statistics of suicide, overdoses, substance abuse disorders, depression, and many forms of abuse viscerally represent this reality.

It is of paramount importance to the health and well-being of American Indian communities that the Indigenous paradigm, perspectives, and research methods gain recognition and equal integration into the research that is currently dominated by a Western research paradigm. Further advocacy for Indigenous researchers and non-American Indian advocates will significantly benefit further attention and legitimacy within the academic context and healing possibilities within the community. This research study describes that integrating research and healing wisdom from the community members will offer a supportive environment to heal this deep-seated insidious trauma.

The Talking Circle method gave ten American Indian community members a sacred space to share their perspectives and stories on HT. First, we purported that awareness and personal connection to HT need to exist before acknowledging the impact and possibility of healing. The interrelated themes about healing that emerged were: connection, tradition, and purpose. The importance of these themes relates intrinsically to the worldview of an Indigenous paradigm, and we conclude from this research that it requires more research from this framework to build
bridges of healing between the Western dominant and American Indian worldviews. Due to the lack of integration between traditional healing and allopathic medicine, there is a disconnection and lack of access to traditional healing. Until we establish independent and legitimized procedures to heal trauma response and unresolved grief in overarching medical models, insurance companies, medical doctors, tribal agencies, or mental health care will not participate.

While there is no end in sight for healing the response to HT for American Indian people, we can take steps to rebalance and seek harmony by sharing stories, bringing family and community together, and listening deeply with sole intention to be present. From this research, we conclude that healing HT is not a task for one community nor individual, it is a grand challenge that requires collective healing. Now is the time to actively seek healing for individuals and communities by bridging a Westernized framework with an interrelated Indigenous paradigm and an interconnected way of being for healing. For we are all related.
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Appendices

Appendix A

Scripted Email for Permission to Hang Flyers

American Indian Perspectives on Healing from Historical Trauma: An Indigenous Inquiry

Dear ________________________,

We are Holistic Health graduate students from St. Catherine University and are working on a research thesis to describe the perspectives on healing and coping from American Indian Historical Trauma (HT). We are seeking American Indians to share their journey through their soul wound process and recovery efforts of Historical Trauma. We are writing to ask you to share the following information to American Indians working in your organization. You are under no obligation to share this information and whether or not you share this information will not affect your relationship with the staff at St. Catherine University.

HT refers to a violent and purposeful genocidal effort on the American Indian people. The response to HT creates a soul wound that affects the mind, body, spirit and emotions (relationships). And left untreated, the impact of HT Unresolved Grief impacts further generations and may ultimately lead to untimely death. Families in the Indian community continue to suffer from the historical violence and the deliberate act by the U.S. government boarding school system to “replace and erase” American Indian culture.

History has left a void of American Indian perspectives in the dominant culture, as well as in research. This project will hopefully enhance the research literature by adding an authentic American Indian perspective. You can help us in two ways; first, by granting us permission to post our recruitment flyers at your organization, and second, by sending the following recruitment flyer to your organization’s constituents.

Please help us to promote this project as we seek American Indian individuals to partake in this work. Our intention is to hold a Talking Circle session on Saturday, January 20, 2018. Each person will be a gifted a journal, $25 gift card to Woodland Indian Crafts, and a feast catered by the Sioux Chef, Sean Sherman.

The following criteria is required; the American Indian participants must be 25 years of age or older, and be an enrolled citizen of a US federally recognized tribe. Potential participants will be asked to contact us via email or phone to learn more about this research. Researchers will follow up with potential participants via phone to explain the project, determine participant eligibility by meeting the basic criteria for the study, go over the written information and integrity/consent form, and gather contact information to send the consent with attached Talking Circle questions. Those who decide to participate will be asked to:

1) Sign the consent to participate in the study prior to the Talking Circle.
2) Reflect on the questions attached to the written information and integrity/consent form prior to the Talking Circle.

3) Meet with the Talking Circle for approx. 3 hours on the January 20, 2018 to be held at a culturally safe, comfortable location: MN Indian Women's Resource Center in Minneapolis, MN. The Talking Circle will be conducted first with breaks then a feast afterward.

4) Fill out post-Talking Circle questions.

5) If they so choose: participants will be invited to the culminating research night at St. Catherine University in May 2018 to honor their participation and impact as co-researchers.

The Talking Circle will be facilitated by: Dr. Ruby Gibson. Dr. Gibson, ThD, LMT, is an international educator, researcher, author and Certified Somatic Therapist in private practice for 30 years both for individuals and groups. She specializes in transgenerational healing and recovery, and enjoys working with adults and adolescents in cross-cultural settings. Ruby is the developer of Somatic Archaeology© and Generational Brainspotting™. She is the author of My Body, My Earth, The Practice of Somatic Archaeology. She will be using the researcher developed questions supplied to participants.

In gratitude and respect,

Ogichiidaakwewag: healinghistoricaltrauma@gamil.com

Renee Beaulieu-Banks       Kyra Christopherson       Kim Sundeen
612-434-0038                612-749-4800                612-963-1320

Included enclosure(s) as applicable: Recruitment flyer, and Written Information and Integrity/Consent form.
Appendix B

Flyer

American Indian Perspectives on Healing from Historical Trauma: An Indigenous Inquiry

Decolonization is a process of conducting research in such a way that the worldviews of those who have suffered a long history of oppression and marginalization are given space to communicate from their frames of reference

Chilisa (2012).

YOUR VOICE MATTERS

Please participate to share your lived experience with Historical Trauma. We are graduate Holistic Health students at St. Catherine University inviting you to talk about healing and coping with American Indian HT. Participants receive a $25 gift card, a journal, and a feast.

Please contact healinghistoricaltrauma@gmail.com
Appendix C

Engaging the Community/Recruitment on Social Media and Facebook Posts

American Indian Perspectives on Healing from Historical Trauma: An Indigenous Inquiry

Decolonization is a process of conducting research in such a way that the worldviews of those who have suffered a long history of oppression and marginalization are given space to communicate from their frames of reference

Bagele Chilisa (2012).

YOUR VOICE MATTERS...

You are invited to participate in an organic inquiry study to share your lived experience with Historical Trauma.

We are graduate Holistic Health students at St. Catherine University wanting to hear your challenges, hopes and healing as an American Indian community member. Those chosen to participate in the study on Saturday, January 20, 2018 will receive a $25 gift card to Woodland Indian Crafts and a journal.

*Security Precaution: This post will only be made to certain closed groups that are of invitation only—for example American Indian community groups of which researchers are currently members. The post will be made so that any responses must be made with permission, a feature that enables us to screen what comments/posts/responses would be made publicly.
Appendix D

Engaging the community/Recruitment Post

American Indian Perspectives on Healing from Historical Trauma: An Indigenous Inquiry

Decolonization is thus a process of conducting research in such a way that the worldviews of those who have suffered a long history of oppression and marginalization are given space to communicate from their frames of reference

Bagele Chilisa (2012).

YOUR VOICE MATTERS...

You are invited to participate in an organic inquiry study to share your lived experience with Historical Trauma. We are graduate Holistic Health students at St. Catherine University wanting to hear your challenges, hopes and healing as an American Indian community member. If you are an enrolled tribal member and over the age of 25, please contact us here or email at healinghistoricaltrauma@gmail.com. Those chosen to participate in the study on Saturday, January 20*, 2018 will receive a $25 gift card to Woodland Indian Crafts.

If you meet the criteria and agree to be in this study, we will ask you to do these things:

1) Speak with a researcher on the phone to learn more about the project, go over the written information and integrity/consent form, and Talking Circle questions which may take up to 45 min.

2) Attend one 3-hour Talking Circle session on January 20*, 2018 from 3:00 to 6:00 pm. Please arrive 30 minutes early to complete required paperwork. The session will include smudging, grounding exercise, introductions and questions. We will offer two 10-minute breaks with intermission after to enjoy a feast.

3) Complete a Talking Circle evaluation which may take 30 minutes to an hour depending on feedback.
Appendix E

Scripted Engaging the Community/Recruitment Response

American Indian Perspectives on Healing from Historical Trauma: An Indigenous Inquiry

Thank you for your interest in participating in this Talking Circle. We are a team of Holistic Health graduate students from St. Catherine University. We are working on a research project describing healing the soul wound of Historical Trauma from an American Indian perspective. We are seeking American Indian people to share their experiences with us on how they walk with soul wounding and recovery of Historical Trauma.

We will be contacting you for more information regarding this research project. Please provide a telephone number, and available time to receive a call. If you decide to participate in the study on Saturday, January 20, 2018 you will receive a journal at the Talking Circle and $25 gift card to Woodland Indian Crafts at the completion of your evaluation.

If you meet the criteria and agree to be in this study, we will ask you to do these things:

1) Speak with a researcher on the phone to learn more about the project, go over the written information and integrity/consent form, and Talking Circle questions which may take up to 45 min.

2) Attend one 3-hour Talking Circle session on January 20, 2018 from 3:00 to 6:00 pm. Please arrive at 2:30 to complete required paperwork. The session will include smudging, grounding exercise, introductions and questions. We will offer two 10-minute breaks with intermission after to enjoy a feast.

3) Complete a Talking Circle evaluation which may take 30 minutes to an hour depending on feedback.

In total, this study will take approximately 5 hours including the Talking Circle session and time for email and phone conversations as well as the evaluation form completion. Does this sound like something you are interested in? If not, we thank you for your time and consideration. If yes, we look forward to connecting with you soon.

In gratitude and respect,

Renee Beaulieu-Banks  Kyra Christopherson  Kim Sundeen

Screening questions via phone:
Are you over the age of 25?
Are you an enrolled member of a US federally recognized tribal nation?
Appendix F

Written Information and Integrity/Consent Form

American Indian Perspectives on Healing from Historical Trauma: An Indigenous Inquiry

Introduction:

We invite you to participate in a research study investigating healing Historical Trauma the soul wounds from an American Indian perspective. We, Renee Beaulieu-Banks, Kyra Christopherson, and Kim Sundeen, are conducting this study. We are graduate students in the Master of Arts in Holistic Health Studies Program at St. Catherine University under the supervision of faculty member Carol C. Geisler, Ph.D. We selected you as a possible participant in this research because of your tribal affiliation with a federally recognized tribe and are healing and coping with Historical Trauma (HT).

Background Information:

The purpose of this study is to provide participants with an opportunity to reflect on their own perception of healing Historical Trauma (HT). This study is important because we believe that in sharing your perspective regarding healing historical trauma, you may contribute to widen the understanding of healing, bringing the authentic voice of living with HT. Approximately 10 – 12 people may participate in this research.

Participation:

If you meet the criteria and agree to be in this study, we will ask you to do these things:

1) Speak with a researcher on the phone to learn more about the project, go over the written information and integrity/consent form, and Talking Circle questions which may take up to 45 minutes.

2) Attend one 3-hour Talking Circle session will begin at 3:00 pm, however we ask you arrive at 2:30 to complete the required paperwork. The session will include smudging, grounding exercise, introductions and questions. We will offer two 10-minute breaks with intermission midway through to enjoy a feast.

3) Complete a Talking Circle evaluation which may take 30 minutes to an hour depending on feedback.

In total, this study will take approximately 5 hours including the Talking Circle session and time for email and phone conversations as well as the evaluation form completion.

Voluntary nature of this study:

Participation in this study is completely voluntary. If you decide you do not want to participate in this study, please feel free to say so, and do not sign this form. If you decide to participate in this study, but later change your mind, and want to withdraw, we ask that you do this no later than January 20, 2018. Simply notify any of the researchers listed below and omission will take place...
immediately. You may withdraw until January 20, 2018, after this date withdrawal will no longer be possible. Your decision of whether or not to participate will have no negative or positive impact on your relationship with St. Catherine University, nor with any of the students or faculty involved in the research.

Direct risks and benefits of participation:

Talking about the impact of Historical Trauma may provoke distress. This study focuses on healing and coping with trauma, not the trauma itself. The group facilitator, Dr. Ruby Gibson, Th.D., has thirty years’ experience working as a therapist, and specializes in generational healing and recovery. Throughout the process you always have the right to share only what you are comfortable in sharing, or to not answer a question at all. In the event that this research activity results in psychological harm, any medical care for research-related injuries should be paid by you or your insurance company. If you think you have suffered a research-related injury, please let us know right away. There are no direct benefits to you for participating in this research; however, your participation may benefit the community to promote awareness and healing Historical Trauma.

Compensation:

If you participate you will receive a journal to record your thoughts and a $25 gift card to Woodland Indian Crafts upon completion of the Talking Circle and post-Talking Circle questions. You will receive the gift card even if you choose not to answer some questions.

Confidentiality:

Any information obtained through this research study that can be identified with you will be disclosed only with your permission; what you share will be kept confidential. You will choose a pseudonym if you wish, and in any presentations, written reports, or publications, you will not be identified. If you decide initially that you want us to use your name, you can change your mind at any point as well. All family members, friends, colleagues or others, who are mentioned in the Talking Circle will be identified by pseudonym. At the end of your interview, we will also ask you to let us know if there is anything you share with us that you would not want in any published results within two weeks of our interview.

We will use an iPhone and a voice recorder to record our Talking Circle, so we can report what you share accurately. Any recordings of the Talking Circle will be kept in a locked file box in a safe location. All forms, recordings, transcripts, computer access, and internet connection will be password protected and secured. Only our advisor and the co-researchers will have access to these recordings while working on this project. We will finish analyzing the data by March 2018 and will then destroy all original reports and identifying information that can be linked to you.

Contacts and questions:

If you have any questions, you can ask them before you sign this form. You can also feel free to contact us at healinghistoricaltrauma@gmail.com. If you would like to talk to the faculty advisor, please contact Carol Geisler, Ph.D. If you have other questions or concerns regarding
the study and would like to talk to someone other than the researcher(s), you may also contact Dr. John Schmitt, Chair of the St. Catherine University Institutional Review Board. You may keep a copy of this form for your records.

Ogichiidaakwewag

Renee Beaulieu-Banks Kyra Christopherson Kim Sundeen

**Statement of Consent:**

I consent to participate in the study and to be audiotaped.

My signature indicates that I have read this information and my questions have been answered. I also know that even after signing this form, I may withdraw from the study by informing the researcher(s).

________________________  ______________________
Signature of Participant    Date

________________________  ______________________
Signature of Researcher     Date
Appendix G

Talking Circle Prompted Questions

American Indian Perspectives on Healing from Historical Trauma: An Indigenous Inquiry

Opening Question: If you feel comfortable, tell us your name, and would you share the name of your tribe and one thing that you are proud of about your tribe?

Jot down on a piece of paper one phrase or sentence that describes Historical Trauma (HT).

We’re here today to talk about HT. What can you tell us about that?

In your perception, did you experience a sense of belonging; for instance, belonging to your tribe, community, or in general?

What impact has HT, from your perception, had on your life, family, relationships and work?

How is the conversation around HT present in your life?

When were you introduced to the term HT?

Was there a shift in your perception?

We’re interested in healing HT. What healing experiences have you had?

What cultural teachings do you incorporate for healing?

What steps towards healing have you taken in your own life?

We’re interested in coping with HT. How do you cope with HT on a daily basis?

What have you seen regarding healing and coping with HT within your community?

From your perspective, what needs to be done regarding HT in society?

What is the greatest priority for action?

What advice can you lend for non-American Indians regarding healing HT?

In conclusion of this experience, in moving forward, what is the next step to heal HT?
Appendix H

Resources

American Indian Perspectives on Healing from Historical Trauma: An Indigenous Inquiry

2-1-1 - Local Resources
From: http://www.211unitedway.org/

Why use 2-1-1?
United Way 2-1-1 offers free and confidential health and human services information for people in Minnesota. They are available 24 hours a day, Monday through Sunday. It’s a place to connect with someone who can recommend resources and information needed in a crisis.

2-1-1 Offers information on a broad range of services, including:

- Basic Needs
- Consumer
- Criminal Justice and Legal
- Education
- Environmental and Public Health/Safety
- Health Care
- Income Support and Employment
- Mental Health and Community/International
- Organizational/Community/International
- Target Populations

More than 80% of the United States has access to 211, along with several areas of Canada. For more information on the national 2-1-1, visit www.211US.org

Searching 2-1-1 for Information
2-1-1 offers Minnesota a comprehensive database for individuals and professionals to access more than 40,000 programs and services. The database is efficient and quick to use by entering various criteria such as; service category, agency/organization name, or keywords. This online directory is kept up to date with new programs, services, and agencies.

Minnesota and 2-1-1
Currently, there are five call center hubs and six resource hubs across the state with a shared database containing more than 40,000 resources. Greater Twin Cities United Way funds and operates the largest call center in the state, covering the Metro region and most of the southern region. Since Minnesota first started using 2-1-1 in 2002, more than two million referrals have been made. Approximately 50 percent of calls are inquiries regarding basic needs such as food, shelter and transportation. For more information on the other 2-1-1 call centers in Minnesota, click on the statewide map.
Specific and Local Programs and Services for American Indians

American Indian Family Center
Services include a Healing Generations Program: Therapeutic Services
579 Wells Street St. Paul MN 55130
(651) 793-3803

Indian Health Board (IHB)
Provides medical, dental and counseling services, as well as specialty health and wellness programs
1315 East 24th Street, Minneapolis, MN 55404
(612) 721-9800

Minnesota Indian Women’s Sexual Assault Coalition
Services include trauma counseling for all American Indians
1619 Dayton Ave. Suite. 202
St. Paul, MN 55104
Phone: (651) 646-4800 or 1-877-995-4800

Minnesota Indian Women's Resource Center
Offers counseling and therapy services for all American Indian clients
2300 15th Avenue South
Minneapolis, MN 55404
(612) 728-2000

Native American Community Clinic
Provides health & wellness of body, mind & spirit in Native American families and decreases health disparities of Native Americans in the metropolitan area
1213 E Franklin Ave, Minneapolis, MN 55404
(612) 596-1223

White Earth Recovery Project
Provides counseling and wellness services to all American Indians
1730 Clifton Place
Minneapolis, MN 55403
(612) 871-6460
Appendix I

Post-Talking Circle Questions

American Indian Perspectives on Healing from Historical Trauma: An Indigenous Inquiry

Please answer the following questions to assist us in evaluating the Talking Circle session. We appreciate your valuable time, wisdom, and knowledge with this very important topic and research work.

What didn’t you like about the Talking Circle?

Did you experience a shift in perspective? Why or why not?

Have any thoughts occurred since the Talking Circle that you wish to add to this discussion?
Appendix J

Integrated Prayer and Grounding Meditation

American Indian Perspectives on Healing from Historical Trauma: An Indigenous Inquiry

Put both feet firmly on the ground as you close your eyes for this meditation and blessing. Inhale deeply through your nose and exhale using your mouth. With each breath imagine Mother Earth planted firmly beneath your feet, your feet planted into the healing soil of Mother Earth. Great spirit, Grandmother and Grandfather, please guide and protect us as we venture together to discuss the healing and coping of Historical Trauma. When you inhale, imagine the breath filling all the cells in your body with the light and peaceful presence of the Universe. On your next exhale, imagine all the doubt, worries, and pain turning to smoke leaving your body and turning to smoke and floating into the universe as butterflies. Take three more deep breaths in and out letting go of the pain we carry. We pray to the spirits from the four directions: East, south, west, and north. To the four leggeds, two leggeds, crawlers, winged, and swimmers. Please take mercy on us and forgive us for the things we may have done to wrong you.

Now imagine, as you feel your breath, steady and rooted into the earth, feel the peace around you. You are free to be. In this moment imagine what we hold in this circle is a precious seed. See this wonder in your hand. You are a seedkeeper of this sacred gift, this unfolding that will sprout and grow with intentional care. You gently place the seed in the earth, knowing, waiting. With each breath send your exhale into the earth to bless this seed, and with each inhale, watch it grow. As it sprouts and breaks the surface of this incredible force of nature, it also sends roots into the depth. Know that you, just as this seed have deeper roots than anyone can see on the surface; and you too offer the world beautiful unfolding of your journey, your journey of growth and life. As you connect to this seed in yourself, know that collectively we are planting a sacred seed, honoring those who have come before us, those amongst us, and those who are to come. Knowing that we are all related, we stand tall as a tree, and remain open to growth and thriving. May we peace within us, peace all around us, and peace planted in the heart of our work together.