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S'Klallam Wellness: Community Engagement Project

Capstone Thesis

Lesley University

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Dance/Movement Therapy

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Abstract

The S'Klallam Nation, composed of three federally recognized tribes, has experienced historical, intergenerational, acute, and complex trauma. Supporting S'Klallam wellness requires cultivation of an understanding of how Native people have faced, and continue to face, and overcome these challenges. A review of literature related to Native wellness, reveals the importance of enculturation. A community engagement project, reveals how exploring cultural arts and activities as modes of fostering wellness is beneficial to the S'Klallam people. The relationship between the expressive arts therapies, including dance/movement therapy, as defined by western academic institutions is questioned.

The author made a conscious choice to incorporate history through narrative form as the frame from which to explore S'Klallam wellness as a means of addressing trauma and resilience in Native communities.

S'Klallam Wellness: Community Engagement Project

Introduction

k'wanúł, observe

“The land chosen by the Salish... was rich in food and natural resources, and enjoyed a mild climate... [T]he Salish were encouraged by their environment to establish villages near the ocean and rivers which were the source of abundant fish. Nearby were berry patches and areas for hunting game...

Because of the seasonal flow of the fish runs and berry ripening, Salish life had stretches of intense activity followed by lengthy leisure periods when special skills could be pursued; there was time for philosophic, religious and artistic development. Their social and ritual structure grew elaborate and sophisticated, and their adroit use of natural materials is remarkable even in light of modern technology. The artifacts left for us from these early people are more than just skillfully made; they have a beauty, a balance and harmony that reflect a high level of understanding” (Gustafson, 1980, p. 18).

The S'Klallam Nation, also referred to as “Clallam” or “Klallam” in many ethnographies, is a Coast Salish Native American Nation now consisting of three federally recognized tribes: the Elwha Klallam, Jamestown S'Klallam, and Port Gamble S'Klallam. The Nation's traditional name is *Nəxʷsłáyəṃ* (Noox-kl-eye-yem), meaning the strong and clever people. Supporting the wellness of Native communities and individuals who have experienced and continue to experience historical, intergenerational, acute, and complex trauma requires simultaneous processes. Two elements of this process include: 1) developing an understanding of the issues contributing to the challenges of these communities and individuals and 2) developing an understanding the ways these communities and individuals face and overcome these challenges.

First, the traumas of the S'Klallam Nation will be explored, as well as literature related to many of the similar traumas experienced by Native populations around the world. In this writing, the word trauma will be utilized many times; however, it is important to understand this concept as referring to a “reaction or response to an injury”, as opposed to merely the psychiatric diagnosis (Linklater, 2014). Also, the term “Native(s)” will be utilized, which can be considered synonymous with the following terms used throughout Indian Country and academia:

Indigenous, Native American(s), Indian(s), American Indian(s), NDN(s), Tribal Member(s), Aboriginal, and First Nations.

Historical trauma (HT) has been defined by Yellow Horse Brave Heart (2003), as “cumulative emotional and psychological wounding, over the lifespan and across generations, emanating from massive group trauma experiences” (p. 7). In S'Klallam history, several of these experiences took place with disease providing the first major disruption to S'Klallam wellness. Gorsline (2016) describes how “[i]n 1782-83, a smallpox epidemic was unleashed among the Indians of the northwest coast by contact with sailors” (p. XVII). Disease spread so badly that some villages were decimated before a single non-native set foot in them. Following this, “[i]n 1830, malaria broke out...and in three years wiped out about three-quarters of the [remaining] population” (p. XVII). The pain and devastation felt by the Nation and its' individuals during this time is incalculable. While the spread of disease may have been unintentional, it is important to note that on multiple occasions, settler-colonizers did attempt or discussed attempts to weaponize smallpox through the distribution of blankets exposed to the disease after noting the effects it had on Native peoples.

Within a few decades, colonization was spreading as rapidly as disease. In 1855, the *Nax^wsłayəm* people were forced to cede most of their traditional lands to the U.S. government in

the Point-No-Point Treaty with a promise of protection for rights to hunt and fish in usual and accustomed territories. However, prior to the “Boldt Decision” of 1974, the S’Klallams were continually displaced and harassed while fishing, hunting, and harvesting. For 119 years following the treaty signing, S’Klallam people were in a continual struggle for the basic necessities of S’Klallam life, namely: access to the land, food, and waters which had sustained the people for thousands of years prior.

Another massive group trauma experience occurred in 1871, when the city of Port Townsend burned the village of *qatáy* (Kuh-tie), the largest and, likely, most important village at the time. In 1940, history repeated itself when the government decided to relocate the Port Gamble S’Klallam village off the spit of Pt. Julia. They (the government) had built twenty new houses and cited good intentions for the move; however, elders have discussed the devastating impacts of this event. Harry Fulton Sr. is cited as recalling how “Mrs. Mary Ann Adams...[was] singing a tribal song in her chair, crying as her old village burned” (Port Gamble S’Klallam Tribe, 2012, p. 19). Ron Charles further described how following this event, “[a] way of life is gone. The Port Gamble S’Klallam would be hereafter expected to live their lives the way the rest of America lived, forsaking even more of their traditional ways” (p. 19).

čáqʷ, burn

Louise occasionally lifted her head from clam digging to observe her young boy. James was three years old, now. Occasionally he would take an interest in her work, attempting it himself. She would show him how to dig clams. With his tiny fingers, he would take the clam and examine it, looking to his mother for approval. Once given, he would place it in the basket before running off again.

Louise remembers the first time a clam spit water up at James. He looked up at her startled, with water dripping off his little nose. After a moment, he smiled from ear to ear, showing his deep dimples, and together they giggled and laughed. Louise would only have a few years with him like this, before his father would take him during the day, to fish.

As afternoon turned to evening, Louise and many others waited for the men to come home, sitting at the edge of qatáy, their village. She looked over the water as the sun set, and James traced imaginary stories on her hands. They spotted the canoes, and Louise spotted Jim, her mate and James' father, coming in with a small catch of fish.

Tonight, the village would meet to discuss their impending relocation, which Cheets-mahan, an important man in the village, had been informed of by the great white fathers in Washington D.C. and Olympia. In the matter of a few days, they were ordered to pack their families and belongings and paddle their canoes out to meet a waiting steamboat.

The day had come. Townsmen and government workers stood in the village as orders were carried out. Louise held James' hand as they followed Jim, carrying a few belongings toward the canoes. Then, she heard an elder in the village declaring,

“I was born on this soil, a Clallam, and I will die here a Clallam as my forefathers have done.”

Admiration filled her heart, but she dared not show it in the face of the men. Louise was born on the very day of the treaty signing. On that snowy day, her family paddled in, and both her and Jim's people ceded over 750,000 acres of their traditional lands to the U.S. government. She had learned since birth that you cannot push the white men too much, even as you fight to survive. So, with admiration tucked deep into her chest, they continued toward the beach.

When they arrived, Louise got in the canoe, and Jim lifted their son in before pushing off to join the other 50 or so families. When they arrived at the government boat, their canoes were being tied together in one very long line to be towed toward their government mandated home on a reservation in Skokomish. The boat began pulling, and after a while Louise and a few others looked back. They saw flames. Not only had the government ordered them away, but they burned their home to the ground.

Louise looked toward Jim.

They looked at James.

That was the end of the village of qatáy.

Louise Adams Webster Butner was a Chimacum woman, born in 1855 at the signing of the Treaty of Point no Point. She was married to a S'Klallam man named Jim Webster. They lived in the village of *qatáy*, which was burned in 1871 as it was being replaced by the city of Port Townsend, Washington. Five days following this event, in the dead of night, many S'Klallams returned to *qatáy*, as it lay in ruins. Jim, Louise, and James ended up in the S'Klallam village at Pt. Julia, where the Port Gamble S'Klallam reservation was eventually established, and which still exists today.

Historical trauma is often recognized through the acknowledgment of milestone events, but it is accompanied by acute traumas woven into the daily experiences of individuals and groups between these milestone events. Over time, these acute traumas compound, becoming complex trauma, which Terr (1991) defined as the experience of “multiple, pervasive, violent events beginning at an early age and continuing over a long period of time” (as cited in Solomon & Heide, 1999, p. 202). All these traumas and experiences together create a variety of wellness

issues and negative biopsychosocial symptoms. The most obvious of these symptoms on an individual level include Post Traumatic Stress Disorder (PTSD), Depression, and Substance Abuse. These symptoms are then experienced intergenerationally, often becoming cyclical.

Yahuda, Halligan, & Bierer (2001) explained, “Intergenerational trauma refers to trauma that is manifested in psychological symptoms and is transferred to future generations” (as cited in Stevens, Andrade, Korchmaros, & Sharron, 2015, p. 9). Recent data on opioid abuse reveals increases in the already disproportionate rates of overdose in American Indian/Alaskan Native people, citing a 519% increase from 1999-2015 (Mack, Jones, & Ballesteros, 2017, p. 5). The Port Gamble S’Klallam Tribe discussed this in a Testimony on March 14, 2018. They further discuss how the Tribe’s “Children & Family Services Department feels the effects of the opioid crisis acutely”, explaining that “[n]inety-eight percent of all dependency cases are due to drug use” (Port Gamble S’Klallam Tribe, 2018, p. 3). Within the “first eight weeks of 2018, the Tribe filed four new dependency cases, three of which were related to parent(s) opioid abuse” (p. 3). According to Pilowsky & Wu (2006), “[a]dolescents involved with foster care were about four times more likely to have attempted suicide...and about five times more likely to receive a drug dependence diagnosis” (p. 351). Many times over, the tribe has experienced the intergenerational trauma of substance abuse and child welfare cases, which, due to the trauma of family separation, often leads to more substance abuse and more child welfare cases.

šáčəŋ, bleed

Seya walked into the emergency room, quickly spotting her husband buckled down outside one of the curtained rooms. She walked past him and saw her son. Less than 30 minutes

before, Jackson had complained to his father of chest pains and they jumped in the van to come to the hospital. The nurse told Seya he had died on the way, just outside the emergency room doors, in his father's arms. The rest of the family arrived quickly and gathered around the bed.

Jackson's youngest daughter looked at the man they called her father as he lay there. She calmly walked over to her grandma, offering comfort as she cried. Seya had adopted her when she was a baby, in order to save her from the system. Jackson was in his early 40s at the time of his death. He had struggled with substance abuse since his teen years.

His older brother sat next to his mom and wept as he remembered their years together in Concho Indian boarding school. During those years, Seya had gotten to drinking, partying, and fighting so bad that he had asked her to put him and his brother in the school, but it wasn't easy there either. Together, they fought off many of the other Native boys who teased them for being half-breeds. Once, he was being jumped by three older boys when Jackson came out of nowhere and leapt onto the back of the largest one, throwing as many punches as he could. They ran off together, two bloody and bruised, half-breed brothers. When Seya stopped drinking, she came and got them. Their family remained united thereafter.

Next to him sat their younger sister. She wept next to her eldest brother and rock, while she thought about all those times they had fished together, finding peace on the water. She mostly remembered the times they fished the ponds and rivers of Oklahoma, but she also recalled some memory of watching her brothers pull away in a small boat off the shores of their Indian reservation in Washington state. The waves would splash on her toes, and she could taste the salt water in the air like she could taste her tears now. She could not believe they would never be on the water together again.

Seya wept, holding the hand of her son while her eldest granddaughter, now 19 years old, watched in shock. When she was a child, she remembered running barefoot in the backyard with her cousins and getting a small shard of wood from a fallen tree stuck in her foot. The family gathered around as she cried big tears, and her dad began pulling it out. Grandma Seya came over and said, "Hey!", in that deep, Native-woman voice that could shake the core of any man or woman alive. "Indians don't cry", she said. It must've been true, because she hadn't seen her grandmother cry much. Even when she told her about how she lost her mother, how she was abused and left at an orphanage by her father, or how the boys in the home tried to rape her at night, she didn't cry. Even when she told her about how she wasn't allowed to be involved in sports (though she was the fastest runner) or school (though she was the smartest student), all because she was Indian, she didn't cry.

Now, she cried. Her children cried. Her grandchildren cried. They cried for their loss. And the granddaughter wondered in the back of her heart, are we less Indian now?

*The names have been changed in order to protect the identity of those in this family story. Seya is a descendant of Louise.

In Bronfenbrenner's bioecological model of development, a multifaceted view of an individual's development is described as being encompassed by:

- 1) "an individual's human relationships, interpersonal interactions and immediate surroundings" (the *Microsystem*),
- 2) "different interactions between the characters of the microsystem" (the *Mesosystem*),
- 3) "elements of the microsystem which do not affect the individual directly, but may do so indirectly" (the *Exosystem*), and

4) “cultural and societal beliefs and programming that influence an individual’s development” (the *Macrosystem*) (Madeline, 2017, para 4-7).

The historical, acute, complex, and intergenerational traumas experienced by the S’Klallam people was/is felt throughout every facet of S’Klallam life, which was/is highly interconnected and interdependent. Going beyond the parameters of Bronfenbrenner’s model, for S’Klallam people, this sense of connectedness was/is not limited to human relations. S’Klallam people have had a deep sense of connectedness with the animals, the land, and the sea. Even amongst human relations, the honoring of kinship ties extends far beyond the familial boundaries often observed by Americans of Anglo-European descent. This sense of connection is still present with the S’Klallam people, many of whom attribute this sense of connectedness to the tribe’s survival and resilience. The fact that S’Klallam people still exist today, despite such intense experiences with trauma, reveals a strength of mind, body, and spirit which deserves at least as much, if not more, acknowledgment as the traumas themselves.

So, with some initial understanding of these traumas, it is vital to address the second element to supporting S’Klallam wellness which is found in cultivating an understanding of the ways these communities and individuals face and overcome these challenges. At present, no peer-reviewed data exists on topics related specifically to S’Klallam wellness. Though there are many differences between the Native Tribes and Nations in North America, some commonalities in experience are evident. The Literature Review will explore some of the literature related to Native wellness in general, including the themes of both trauma and recovery. The external validity found in many of these studies may serve to further support the exploration of S’Klallam wellness.

Literature Review

When examining the topic of Native wellness through qualitative research, it is especially important to examine the ontology of the researcher(s). As stated by Cruz & Tantia (2017), “[b]y offering an ontological perspective, the [reader] can understand how the background of the researcher can affect what is being studied” (p. 83). Since first contact (the first time Europeans encountered Native peoples on the Americas), non-Native (NN) perspectives have been riddled with misinterpretation and misunderstanding of Native individuals, communities, culture, and traditions. Coupled with an uneven power-dynamic, continued acts of physical and cultural genocide were enacted. Examining ontological perspective may help guard against the further perpetuation of colonialism which leads to further oppression and traumatization in Native individuals and communities. For this reason, tribal affiliation, or lack thereof, will be listed throughout the literature review.

Freeman et al. (2016), examined the value of Lakota Traditional Healing for youth resiliency and family functioning through both qualitative and quantitative measures. Freeman, a NN, seems to be accompanied by another NN and four Native people in the publication of this literature. Twenty-seven families were involved in the quantitative sample and eight families were involved in the qualitative sample. Freeman et al. (2016), described how “the purpose of this study was to investigate the impact of traditional healing on Oglala Lakota children struggling with serious emotional and behavioral problems and their families” (p. 455). Traditional healing is defined as “Indigenous healing ceremonies, customs, and beliefs specific to tribes and clans within American Indian cultures...” (p. 455-456). Staggering statistics are reviewed as evidence of the effects of colonization and forced assimilation. The studies seemed to be strongly grounded in traditions of the Lakota people, as evidenced by the following of customs such as how “[t]he youth were an integral part of the healing services but did not fill out

the measures due to potential violation of Lakota protocol related to protecting the young against unwanted or unnecessary intrusions” (p. 462). The family dynamic was further attuned to as they stated how “[a]s part of Lakota protocol, the families were involved in the planning and implementation of services to the youth, which is considered a crucial factor in the success of the delivery of traditional healing services” (p. 462).

Results from the qualitative study “yielded strong agreement that traditional healing had a positive impact on families” (p. 465). The eight participant responses described how “the nature of traditional healing included establishing deeper connections with culture, helping provide positive role models within the family system, resolving conflicts, and teaching spiritual practices” (p. 465). Limitations and cultural considerations were further discussed in the article.

Wilson & Boatright (2011) “examined one eighth-grade student, Jon, and how he expresse[d] his identity as a Native person at a predominantly non-Native school (p. 252). The researchers hoped the study would result “in a commentary on how [their] own teaching could be made more supportive of the expression of Native identities in school” (p. 258). After gathering the data from Jon, including, “assignments and artifacts; fieldnotes from observations; and interviews with Jon and his other teachers”, the researchers examined that data and came up with a hypothesis (p. 258). Wilson & Boatright, (2011) concluded that greater benefits for Native students might be found in multimodal teaching.

Wilson & Boatright (2011), clearly “acknowledge[d] [their] perspective as European American teachers and researchers” (p. 262). They identified this as a limitation and made some measures to reduce the impacts of their inherent biases or lack of understanding by including a few Native voices on the research project. However, the author of this capstone thesis wonders whether more inclusion of Native voices throughout the process would have been more

appropriate. Wilson & Boatright (2011) also asserted, “Unlike many Native scholars (e.g., Browder, 1997; Garouette, 2003) who asserted that blood quantum or tribal endorsement is often essential to Native identity, [they] instead described the establishment of Jon’s Native identity in terms of the texts [Jon] designed” (p. 262). That assertion, by non-Native researchers discounted a disputed, but vital component to Native identity formation. While it does not seem to have influenced the operations of this study, the author of this capstone thesis questions the motivations of the researchers, as evidenced by a lack of Native inclusion in the process, as well as a quick dismissal of a Native expression of sovereignty.

Fryberg, Markus, Oyserman, & Stone (2008), addressed some of the systemic issues which contribute to the challenges of Natives regarding the negative effects and “consequences of American Indian mascots and other prevalent representations of American Indians on aspects of the self-concept for American Indian students” (p. 208). Fryberg is a member of the Tulalip Tribe, with the other three researchers being NN. Four studies, with both quantitative and qualitative measures, are utilized to examine these consequences by asking two questions:

1) “[W]hat associations come to mind when American Indian students are exposed to mascot representations of American Indians (Study 1)?” and

2) “[W]hat are the consequences of making these representations salient for American Indian students’ feelings of self-worth (Study 2), community worth (Study 3), and content of possible selves (Study 4)?” (p. 211).

Fryberg, Markus, Oyserman, and Stone (2008), hypothesized “that, whether mascots have positive or negative associations, exposure to mascot representations of American Indians will be associated with lower self-esteem, lower community worth, and fewer achievement-related possible selves” (p. 211).

The results suggested complexities in “straightforward application of the stereotyping literature” (Fryberg, Markus, Oyserman, and Stone, 2008, p. 214). Participants maintained some positive associations with stereotypical imagery and mascots; however, the “results demonstrate negative consequences for self-esteem, community worth, and possible selves, even when the social representations were viewed as primarily positive” (p. 216). They suggested that a lack of representation of Native peoples in mainstream media is an important factor in the discussion of these negative impacts.

Minthorn & Marsh (2016), explored how Native participants “viewed their college-going experience in relation to space and place, and how [the university] might more adequately serve Native American college students” through critical arts-based inquiry (p. 4). Minthorn is a Kiowa tribal member and Marsh appears to be NN. They “(1) examine[d] the factors that shape Native American students experience and sense of belonging at the University of New Mexico [and] (2) their perspectives on the manner in which their identities can be expressed, and how they experience community within the institution” (p. 5). Photovoice, defined by Wang and Burris (1997) as a “process by which people can identify, represent and enhance their community through a specific photographic technique” (p. 369), and photo-elicitation, described by Copes, Tchoula, Brookman, & Ragland (2018) as “a qualitative interview technique where researchers solicit responses, reactions, and insights from participants by using photographs or other images as stimuli, were used as the artistic modality for exploration.

Results showed that students valued Native spaces as “safe spaces for them to go to and be themselves culturally, as well as where they can find social, emotional and academic support” (Minthorn and Marsh, 2016, p.7). However, even with the existence of safe spaces, oppressive ideologies are still exemplified at the university level, often right outside the doors of these

spaces. At the University of New Mexico (UNM), one safe space is mentioned as being juxtaposed by a corridor full “of the conquistadors who ‘conquered’ New Mexico...on full display through life size murals where the brown people in the paintings do not have mouths, eyes, and in some cases, faces” (p. 8). This artistic inquiry seems to “highlight the voices and lived experiences of Native American college students at UNM”, specifically exploring the challenges Native people face while walking in two worlds (p. 135). This phrase, “walking in two worlds”, is commonly used in reference to the separate worlds of Native life and dominant society. Due to the historical traumas experienced by Native communities, this navigation is not optional and continues to impact Native people.

Basto, Warson, & Barbour (2012), conducted a workshop that incorporated art-therapy in a community-driven ethnographic study. They explored Native adolescents’ needs through visual art making with 31 tribal members from the Coharie tribe, and Lumbee Nation living in proximity to the Coharie Tribal Center in Clinton, North Carolina. Basto and Warson are NN, and Barbour is a Coharie Tribal member who was highly involved with the interpretation of the data. Results demonstrated that “the highest number of references were community involvement, connection to nature, discrimination, family member, and tribal identity” (p. 137). These results seem to demonstrate a way expressive therapies may serve to give voice to Native needs; however, it is important to point out that while it was the intention of the researchers to keep “Tribal customs and viewpoints...at the forefront to meet the community’s expectations”, some important feedback seems to have been overlooked (p. 136).

Following the workshop, “[t]he need for [multigenerational] cultural art workshops was also expressed by community members as not only a means to preserve and strengthen cultural identity but also as a form of personal expression” (Basto, Warson, & Barbour, 2012, p. 141).

This feedback seems to address each of the needs expressed by the community in the study.

Despite this feedback, Basto, Warson, & Barbour (2012) asserted a desire for future art therapy interventions and research with Native people. They expressed their belief that “[a]rt therapy is congruent with the importance of art in [Native] culture”, which may be only partially true (p. 134). The feedback of the community involved a request for a similar workshop, utilizing tribal arts in a multigenerational way. Considering the historical trauma and traumas experienced in the macrosystem of Native life, Basto, Warson, & Barbour (2012) seem to have missed an important element to art therapy work with Native people: culturally specific artistic foundations.

The challenge that exists here is grounded in the reality that many creative arts therapists would not be equipped with either the culture knowledge or tribal relationships required to ethically and accurately deliver such a culturally centered workshop to Native people. Should nonnative therapists undergo culturally specific training? Should associations and academic institutions open pathways for education and training to native people with the Expressive Arts Therapies? These questions merit further discussion and will be addressed in the final section of this capstone thesis.

Promising research on culturally based uses of Native arts is found in the literature of Archibald & Dewar (2010). Archibald is a NN with experience working in Native communities, and Dewar is of Huron-Wendat descent. Before examining their work, it is important that the reader understand some of the historical trauma faced by Native peoples of North America that has not yet been addressed.

From 1883 to 1996, Canada operated what are called “residential schools”. The American Indian College Fund describes how more than 150,000 First Nations, Métis, and Inuit children were placed in residential schools during this time (“Facts About American Indian Education”,

n.d). Over the course of the program, the odds of children dying at residential schools was 1 in 25; however, in the early life of the program, the odds were 1 in 2 (Schwartz, 2015). November 23, 1907, Saturday Night magazine reported that "Indian boys and girls are dying like flies.... Even war seldom shows as large a percentage of fatalities as does the education system we have imposed on our Indian wards" (as cited in Schwartz, 2015). The United States operated similar programs called "boarding schools".

In 1860, the federal government of the U.S.A. established the first Indian boarding school ("Facts About American Indian Education", n.d). Pevar (2012), explained how "[d]uring the relocation period of 1828-1887, over 200 boarding schools were established for Indian children, and 14,000 Indian children were forcibly removed from their homes" (as cited in Cromer, Gray, Vasquez, & Freyd, 2018, p.102). In 1892, "Captain Richard Pratt declare[d] it necessary to 'Kill the Indian in him, and save the man' by removing children from reservations and inculcating in them 'civilized' ways through education" (as cited in "Facts About American Indian Education", n.d). This "educational philosophy" of "killing the indian and saving the man" is in many ways still in practice, sustaining the legacy of white supremacy and making it difficult for Native peoples to heal from the various forms of trauma perpetuated onto them.

One of the primary functions of residential schools and boarding schools was cultural genocide and assimilation as noted by Captain Richard Pratt and legislated by the governments of Canada and The United States. Children were not allowed to speak their languages or observe any traditional practices, which included cultural arts. Traditionally, Native arts are not separate from Native life but instead, are integrated into life and identity. Children who engaged in this aspect of Native life and identity, were the victims of punishment and shaming tactics that were severe. As noted by Yellow Horse Brave Heart's (2003) definition of Historical trauma (HT) as

“cumulative emotional and psychological wounding, over the lifespan and across generations, emanating from massive group trauma experiences” (p. 7), the ingredients for cultural genocide were innate in the “educational philosophy” of both residential and boarding schools. Smith (2009) explains how, during this time, “for Native peoples to become fully ‘human,’ they would have to lose their Native cultures” (p. 2).

Not all Port Gamble S’Klallam people were forced to attend boarding school, though some were. One father, “when faced with the prospect of turning his sons over to an agent to go to boarding school”, fled to Hood Canal “and hid out until they could safely return” (Port Gamble S’Klallam Tribe, 2012, p. 186). Even if Native children were not required to attend boarding school, many tribes, including the Port Gamble S’Klallam Tribe, were provided with Indian schools on their reservations. The boarding school system and the reservation day-schools were mandated by Canada and the United States of America and were predominantly run by NNs, usually with missional mindsets and white supremacist ideologies. Children were strictly discouraged from expressing any forms of their Native identity. Often the reservation day-schools were underfunded, and educational standards were low, causing a large educational gap for those who wanted to pursue higher education.

In light of these facts, as well as the biopsychosocial, cultural, and spiritual devastation still experienced by Native people recovering from this historical trauma, “[i]t is not surprising... to find that the restoration of language, culture, and spiritual traditions has a positive influence on mental health” (Archibald & Dewar, 2010, p. 2). Archibald & Dewar (2010), present what they call, “compelling evidence that creative arts, culture, and healing are linked” (p. 1). The research was guided by the question, “‘What happens when art, music, dance, storytelling, and other creative arts become a part of healing programs?’” (p. 4). The study was multifaceted,

including utilization of the arts, survey distribution and collection among willing participants, as well as follow-up interviews conducted with the option of anonymity. The data was examined through both qualitative and quantitative measures, and a discussion of the impacts of the arts in the healing process of individuals is documented and discussed throughout the article. Culturally specific explorations of healing through Native arts, resulted in “more than half of the responses mention[ing] how participants benefited from learning and participating in traditional creative arts, including sewing, beading, drum-making, drumming, dancing, and storytelling” (p. 15). Several Native counselors, therapists, and healers seemed to be involved in the work strengthening the observations and results presented.

Another compelling discourse in favor of cultural arts in Native wellness is made by Bamarki (2016), who suggested that “one way of blocking [Native women’s] path to prisons [is] through the use of song and music as a healing method” (p. 18). Bamarki (2016) discussed the disproportional incarceration rates of Native women in Canada and further explored the impacts of colonial violence on Native communities, hypothesizing how “cultural revitalization and institutional reform that would allow [Native] peoples to reclaim their traditional culture and to reassert their distinct identity” (p. 3). Bamarki (2016) discussed different Tribes, Nations, and Indigenous peoples’ ways of considering and honoring the role of music and called for researchers “to shed light on these matters” (p. 18). While the heritage of Bamarki (2016) is unknown, these ideas support the process many S’Klallam people find themselves in today. In the last two decades, an immense cultural resurgence has occurred, particularly with song. Further research regarding the therapeutic benefits of Native song and music would likely support the inherited wisdom passed down since time immemorial within Native communities

that songs are a powerful tool towards healing. The foundations of Music Therapy may also support these ancient assertions.

Charbonneau-Dahlen, Lowe, & Morris (2016), took a closer look at the impacts of storytelling in recovery from trauma, specifically for “[n]ine women from 2 Plains Indians tribes...recruited through snowball sampling”, who are survivors of the boarding school system (p. 598). One of the aims of the study was “to verify the effectiveness of the Dream Catcher-Medicine Wheel (DCMW) model and grounding ceremonies as culturally appropriate tools for the enhancement of storytelling among American Indian mission boarding school survivors” (p. 600). Three major themes emerged from the data, which was analyzed through qualitative methods:

- 1) “each affirmed the rediscovery of Native spirituality as empowering”,
- 2) “all expressed appreciation for traditional methods woven into storytelling sessions, particularly the DCMW”, and
- 3) “they experienced release and healing through telling their stories” (p. 598).

Considering the silencing of Native voices, particularly during the boarding school/reservation school era, this approach to facilitating wellness in Native people seems promising and worthy of further attention. These findings are further supported by the research of Van Der Kolk (2014), who suggested that recovery from trauma is not necessarily found in the ability to merely recite traumatic incidents, but rather in a pendulating process of “trauma resolution”, which involves an ebb-and-flow “between language and body, between remembering the past and feeling alive in the present” (p. 247). The goals of Dance/Movement Therapy, as well as other Expressive Therapies, appear to be potentially supportive to Native

people in a process of restoring wellness within their communities. This will be further explored in the discussion section of this capstone thesis

Attention to Native storytelling in the context of wellness is being explored within Māori communities of what is now known as New Zealand. Rangihuna, Kopua, & Tipene-Leach (2018), assert the “inherent lack of capability, that is, the ability of a Western paradigm psychiatric service to meet the needs of an indigenous community” (p. 79). They discussed the high rates of mental health concerns for the Māori, as well as high rates of under-diagnosis in Mental Health Services. Some positive changes seem to have occurred, including “some promotion of the inclusion of Māori perspectives, and the creation of a cultural base in the provision of the mental health care process”, but overall, they report “little evidence of systematic change” (p. 80).

Following this, they discussed a “Māori approach to primary mental health care called *Mahi a Atua* (tracing the ancestral footsteps of the Gods)”, which “is being offered under the Ministry of Health’s Mental Health and Addictions Project” (p. 80). This approach is rooted in the use of “creation and custom narratives” (p. 80). Through a culturally centered process of storytelling, Māori people have the opportunity to “embrace exploration of their situation” through relating to the characters and story elements. The development of this approach “will be carefully watched...as an example of how to provide culturally appropriate (mental health) services to the least fortunate and most alienated part of [the] modern New Zealand community”, namely, the Native people of their land (p. 81).

As previously mentioned, current literature on recovery from trauma suggested that healing from trauma is not necessarily found in the ability to merely recite traumatic incidents, but rather, “trauma resolution” begins with the body’s ability to reintegrate these traumas into the

narrative of life with a strong grounding in the present (Van Der Kolk, p. 247). Considering this, the research of Mohatt, Fok, Burket, Henry, and Allen (2011), is of interest, as they explored the theme of “[c]onconnectedness as a culturally-based protective factor for Alaska Native youth” (p. 444). Connectedness is defined as “the degree to which a person endorses the concept of interrelatedness between self, family, community, and natural environment” (p. 446). Measures utilized were the “Awareness of Connectedness Scale (ACS)”, the “Alaska Native Cultural Identification (ANCI)” scale, the “Reasons for Life (RFL)” scale, and the “Multicultural Mastery Scale (MMS)” (p. 446-447). Mohatt, Fok, Burket, Henry, and Allen (2011) “argue[d] that assessment of awareness of connectedness is a valuable tool for research and practice, and that the identification and measurement of protective culture-based variables can help clarify the relationship between Native American cultural identification and behavioral health outcomes” (p. 444). Their research suggested that increased concept of awareness of connectedness was measurable and increased the protective factors related to suicide and substance abuse.

This idea of connectedness aligns with S’Klallam values, and could be considered somewhat synonymous with the idea of integration utilized by many therapeutic institutions in the treatment of trauma. In many S’Klallam stories, animals and landmarks are often referred to as persons in and of themselves, which demonstrates this idea of connectedness. One important S’Klallam Belief, as outlined in the Healing of the Canoe Curriculum published by the S’Klallam Tribe (2013), includes: “Be grateful for nature and what it provides – honor, respect, and nurture it always” (p. 2.c). A sense of connectedness is further exemplified throughout the remaining “S’Klallam Beliefs”, which encourage attention to relationships [connections] with elders, relatives, friends, and Creator (p. 2.c). Mohatt, Fok, Burket, Henry, & Allen (2011) highlighted the impacts of connectedness, or lack thereof, within Native communities, including

a definition of connectedness which seems to be culturally appropriate. This entire team of researchers appears to be entirely NN, which in the opinion of the author of this capstone thesis, is always a cause for concern. However, the team acknowledged the assistance received from community members.

Gray & Cote (in press), also studied the effects of cultural connectedness among Anishinabe young adults. This study specifically “aimed to assess whether cultural connectedness has a specific protective effect on mental health among the descendants of IRS [Indian Residential School] survivors” (p.1). Through a cross-sectional survey involving 147 participants, results demonstrated that “[c]ultural connectedness is associated with mental health among Indigenous people”, especially among descendants of IRS (4). Further, and most importantly, this research “provid[ed] epidemiological support for the notion of ‘culture as treatment.’” (p. 3). The cultural and ethnic background of these researchers is unknown. These findings, as well as the research of Mohatt, Fok, Burket, Henry, & Allen (2011), seem to support the processes of recovery, decolonization, and wellness that Native Peoples find themselves in today.

The themes of connectedness, integration, and cultural centering have emerged in the review of literature related to Native wellness. However, one challenging aspect within this process of cultural connectedness and decolonization is highlighted in the work of Cromer, Gray, Vasquez, & Freyd (2018), who examined how Native people relate to dominant culture, their experience of historical loss, institutional betrayal, and intergenerational trauma (p. 99). This team, of what seems to be all non-native researchers, analyzed data from 59 participants, all of whom who identified at least one Native grandparent. Data was collected utilizing the *Native American Acculturation Scale (NAAS)*, the *Historical Losses Scale (HLS)*, and the *Brief Betrayal*

Trauma Survey (BBTS) via an online portal (p. 105). Cromer, Gray, Vasquez, & Freyd (2018) hypothesized that “historical trauma is related to institutional betrayal, whereas the intergenerational transmission of trauma is related to trauma within family systems” (p. 109). Furthermore, “the more participants identified with the perpetrators of historical losses [through a relationship to acculturation], the less participants would be aware of those losses” (Gray, Vasquez, & Freyd, 2018, p. 109). The data did support both these hypotheses.

Cromer, Gray, Vasquez, & Freyd (2018), described acculturation and enculturation as two ends of a spectrum of Native identity development. Garcia & Ahler (1992), defined enculturation as the “lifelong learning of one’s own culture,” (p. 23, as cited in Cromer, Gray, Vasquez, & Freyd, 2018, p 101). Garrett & Pichette, 2000, further described this as “the degree to which individuals associate with and maintain their ancestors’ values, customs, and beliefs” (as cited in Cromer, Gray, Vasquez, & Freyd, 2018, p 101). Acculturation is defined by Webster’s Dictionary as the “cultural modification of an individual, group, or people by adapting to or borrowing traits from another culture” (2019). Acculturation is described within the context of Native identity by Flynn et al. (2014), “as the transformative effect of being forced to adapt values and characteristics from a predominantly White European American culture” (as cited in Cromer, Gray, Vasquez, & Freyd, 2018, p 102). The research of Cromer, Gray, Vasquez, & Freyd (2018), supported the hypothesis that due to the factor of “betrayal blindness”, the more acculturated a Native person is, or “the more one identified with White culture, the less he or she thought about historical losses” and the less he, she, or they might experience a sense of historical trauma; whereas, the more enculturated a Native person is, or “the more one identified with American Indian culture, the more he or she thought about historical losses” (p. 109).

This data is extremely important, because while “[e]nculturation, when it has a focus on [communal] and traditional practices, is believed to provide a pathway for [Native] resilience and healing”, Cromer, Gray, Vasquez, & Freyd (2018) explained that “as one moves from acculturated to enculturated, one may start to experience the effects of historical trauma as his or her awareness of historical loss increases” (p. 109). If a high level of intergenerational trauma exists, this means that while one is recovering from more acute experiences of trauma within the family system, one may simultaneously experience greater historical loss and grief, which will require induction into a grief process that may last a lifetime. Native people, especially if they are working towards becoming more enculturated, are always aware that their cultural traditions are not as strong as they were in the past, pre-contact. Still, Cromer, Gray, Vasquez, & Freyd (2018), asserted that “[i]ntroducing and healing traditional practices within families could stop the intergenerational transmission of trauma, even while families become more enculturated or become more aware of historical losses” (p. 110). This author agrees wholeheartedly with this assertion.

Formal research regarding the wellness of Native peoples is limited. Challenges exist regarding the ethics of research and construct validity, with consideration to historical anthropological abuses, as well as vast Tribal differences. With that in mind, these articles may provide some valuable data toward understanding both the challenges and means of resiliency amongst Native peoples. Processes of enculturation, including participation in cultural activities, cultural centering, and decolonization seem to support the wellness of Native people as recovery from historical, intergeneration, acute, and complex traumas is pursued. I believe the Port Gamble S’Klallam Tribe will continue to benefit from these pursuits, as well.

Methods

q^wayíyǎš, dance

After dinner, Rachel returned to her loom and sat quietly next to one of her cousins as they weaved. With her hands to the loom, turning, placing, holding, and breathing, she thought of her family. Most of them still lived in Oklahoma, where her grandma was orphaned. Many still struggled with poverty, alcoholism, and substance abuse. When she moved back to their traditional lands, she reconnected with their family on the reservation, some of whom were present in the room.

Today, twelve or so tribal members had spent the day weaving in the longhouse. A master weaver had come in to share teachings with them. The knowledge of weaving, once passed on from generation to generation, had nearly passed away. A Native man called Bruce Miller passed his knowledge onto their teacher, who continually passed it back into the hands of Coast Salish weavers. Those in the room drank up these teachings, allowing their fingers to drip with them as they wove.

*One of Rachel's cousins was a song leader in the tribe. He had shared many of their songs with her, even before she arrived home. His wife taught her many words, and she remembered the first time she recognized a S'Klallam word in a song. **ŋǎqsən**, nose. As a few of them weaved, her cousin picked up his drum. He began to sing a song which had been returned to them a decade before. An elder from a neighboring tribe held onto the song during difficult times. It is a healing, transformative song. Others in the room picked up their drums and sang, too. Some of the young women got up from their places and began to dance. They called Rachel to join and so she did.*

Some weaved, some drummed, some sang, and some danced. Words and gifts had been shared no less than an hour before, to honor the teachings shared in the longhouse that day. One of the leaders of the tribe, who had organized the class and dinner, shared how she knew,

“We make our ancestors proud”.

The gratitude and tenderness in the room seemed tangible, with tears filling eyes. Rachel returned to her weaving, thinking again of her family and her people. Her grandma had died 4 years before, but she recalled a dream she had, just before starting her journey home. In the dream Rachel and her father stood outside the longhouse at sunset. Rachel turned and saw grandma in lines with many others, dancing, smiling, and looking healthier than ever.

Weaving would never bring her grandma back or take away the painful parts of their family’s story. But with each turn of her fingers, she was practicing taking all the love and care passed down to her and making something both old and new.

*Rachel is the author of this capstone thesis paper, as well as a descendant of both Louise and Seya.

In June of 2018, I returned home to live near our reservation and intern with the Wellness Department of the Port Gamble S’Klallam Tribe, of which I am a member. Throughout my time here, I have had access and opportunity to explore multiple cultural activities and have observed the effects of these activities on both myself and other tribal members, several of whom receive services from the Wellness Department, including mental health counseling and/or chemical dependency counseling. As a wellness intern and a youth worker, I have had the opportunity to make cultural avenues of pursuing wellness more available to clients and tribal members,

including singing, dancing, canoeing, weaving, art-making, traditional storytelling, and connecting to the water and land. Through observation, personal journaling, and discussions with tribal members, I was able to observe many of the effects of cultural engagement, which appeared overwhelmingly positive.

In the experience described above, twenty or so tribal members of all ages were involved in what became a very culturally active day. While weaving and dinner was planned, singing and dancing happened spontaneously.

Results

ḥakʷáyaŋ, weave

“How can a story like this, a weaving like this, be put into words?”

Perfect or not, our weavings, like our stories, keep us warm. With all their flaws and perfections.

Perfect or not, we keep going, we restart, and we begin. We carry on, until the end.

And our weavings, like our stories, keep us warm” (Journal entry. Nov. 12th, 2018).

Each of what expressive therapists might call the “modalities” and “intermodal transfers” involved in the highlighted evening, were very therapeutic for me and contributed to my wellness as a S’Klallam woman in multiple ways. As a person who has trained in modern and ballet dance for most of her life and who is completing her education as a dance/movement therapist, I noted the movement involved throughout the day. I considered the therapeutic impacts found within the small movements and breath involved in the mindful act of weaving, as well as in the larger movements of our dancing and unified expression of singing. My very busy mind and anxious feelings experienced relief while weaving, listening, singing, and dancing.

Likely, these practices, enacted in a group, stimulated my parasympathetic nervous system, allowing for a feeling of safety and social connection. Each of our cultural activities has intricacies and inherently therapeutic elements found within the here-and-now, which merit further study and exemplification beyond the scope of this capstone thesis.

The movement, the weaving, the sharing, and the sound of the singers beating their drums, singing as one, combined into an evening that brought a sense of peace and joy to those in the room; however, this sense of peace and joy extends beyond the here-and-now experience. Later, it was discussed amongst participants how the benefits found in this single evening will extend to S'Klallam people for generations to come, as the knowledge, weavings, songs, and dances enacted that night were practiced, preserved, and consequently passed on. This allowed me, as well as others, to feel at least a temporary sense of historical trauma resolution. Grief at all we have lost turned into joy at receiving at least a portion of it back. In practicing these teachings and cultural arts in a tangible way, we knew we honored both our ancestors and our future generations to come.

The author of this capstone thesis believes these cultural activities and pursuits, or “modalities”, grounded in S'Klallam culture, contribute to both short-term and long-term wellness goals held by the S'Klallam people. Engagement in cultural activities and in a culturally centered lifestyle enables S'Klallam people to access wellness and resilience in the face of historical, intergenerational, acute, and complex traumas. I was able to remember my grandmothers, both Louise and Seya. I was able to consider my future generations. I was able to weave together some of the fragments of our story into something which locates me in the midst of it. In this way, I am empowered to continue living and walking in a good way, into my future.



Discussion

Engagement in cultural arts (including dancing, singing, weaving, carving, etc.) and cultural activities (including food sovereignty, canoeing, and other activities which connect people to place and space) contributes to the wellness of S'Klallam people by addressing historical, intergenerational, acute, and complex traumas, while also empowering S'Klallam people to move forward as a Sovereign Nation. As identity and existence have been continually threatened and demeaned through genocide and individual, institutional, and cultural racism, these arts and activities can generate healing and growth. This is verified by ancestral wisdom and supported by current research and academic literature. With this assertion, a few questions remain worthy of address. First, what are the roles of Expressive Therapies, particularly Dance/Movement Therapy, within this process of wellness, and how can an organization founded largely by those of Anglo-European descent ethically partner with a people group whom they have, at the very least, implicitly oppressed?

In searching for arts-based research with Native populations, several challenges were present. Overall, there is a lack of formal arts-based research with Native populations, which may be attributable to ethical and cultural considerations. As highlighted in the research of Gray & Cote (2019), connectedness is a foundational aspect to the way Native people interact with

life, and this includes their experience with culture, spirituality, and arts which were once not compartmentalized expressions, but which traditionally were expressed with integration and connectedness. Each Nation has felt the impacts of colonization in different ways, but generally, an experience in fragmentation occurred and was perpetuated systemically through policy and procedure in the United States. This fragmentation continues to occur due to the demands placed on Native peoples to walk in two worlds. When conducting arts-based research with Native people, it is vital to be aware of what world the researcher is requiring the people to walk in. The researcher must also consider the impacts of that experience on the individuals and the community he/she/they hopes to serve.

Considering the focus on integration and personal/community growth highlighted in both the mission statements of the American Dance Therapy Association as well as the International Expressive Arts Therapy Association, partnerships amongst Native communities and these associations ought to be beneficial, supporting Native people in a process of healing from this fragmentation. However, as noted in this author's review of Basto, Warson, & Barbour's (2012) literature on Art Therapy with Native people, many expressive arts therapists utilize their own Western/European styles of art therapy with little consideration for the requests of tribal members who desire culturally centered expressive therapies. The author of this literature review wonders, to what extent do these actions harm the individuals/communities that expressive therapists hope to serve? Are expressive therapists perpetuating the ideology that Native culture and expression of identity has less value than that of the dominant culture by prioritizing Western academic modes and mindsets? If expressive arts therapy associations and academic institutions desire to do good in these culturally diverse communities, then why are they operating in oppressive ways?

During the 19th century, particularly during the years of President Grant, the United States adopted policies and practices which sought to suppress and destroy Native religions and ways of life. These policies and practices reflected the racist paradigms of Anglo-European settlers and are foundational elements to the historical, intergenerational, acute, and complex traumas which have been devastating to Native peoples. These paradigms were foundational to the educational philosophies previously discussed, i.e.: “Kill the Indian, save the man”. In a pervasive enactment of cultural genocide, the Native tapestry of life (comprised of teachings, songs, dances, traditions, and ceremonies) was cut apart. Many pieces of this tapestry were destroyed, some were buried, and some were hidden to be stewarded by a few brave Native women and men who broke the law and risked their wellbeing by doing so.

As evidenced by the high rates of poverty, substance abuse, and intergenerational traumas, the devastation experienced by having religious and cultural freedom continually undermined has been severe. In 1978, the American Indian Religious Freedom Act was signed into place, granting Native people the right to practice their spirituality and ceremonies again. Many Native people believe this change in policy was at least somewhat attributable to the rise in popularity that Native spirituality had among Anglo-European descendants who desired freedom to practice Native spirituality as a fad in the spirit of cultural appropriation. Each Tribe has a different relationship to their traditional spirituality, but each has undoubtedly experienced (and experiences) spiritual, and therefore, cultural and artistic oppression.

The S’Klallam Nation (including all three tribes) traditionally practiced a form of spirituality which I will not discuss, although various missionaries and anthropologists have published detailed accounts of our ceremonies and spiritual practices. Without revealing explicit details, it should be understood that song, dance, traditional gathering of medicines and foods,

carving, weaving, and many more culturally centered expressions play fundamental roles in our spiritual traditions. As the S'Klallam Nation recovers its' practices and traditions, a sense of self-actualization, which Corey (2017) describes “[as] a directional process of striving toward realization, fulfillment, autonomy, and self-determination” (p. 170), is evident. To appropriately support the wellness of the S'Klallam people, Dance/Movement Therapy (DMT), as well as all the Expressive Therapies, must be attuned to this process of self-actualization and self-determination, which is moving in the direction of enculturation. These organizations, and the institutions which partner with them, must also seek a fuller understanding of the roles they have played in the narrative of Native trauma. As noted in the research of Minthorn and Marsh (2016), Native students at University may experience (re-)traumatization through institutional racism, which is often perpetuated by an ignorance toward the Native experience of both physical and cultural genocide.

Pursuing an education in what the American Dance Therapy Association (ADTA) defines as Dance/Movement Therapy (DMT), requires study of what are called the “foundations” of DMT, as laid out by the “early pioneers” of the field. Levy (2005) writes that “dance therapy emerged in the 1940s and 1950s”; however, as previously mentioned, the American Indian Religious Freedom Act wasn't signed into effect until 1978 (p. 1). So, while early DMT “pioneers” were “pioneering” DMT, Native peoples were not allowed to fully express or access their own healing/therapeutic dance and movement, which had previously existed for thousands of years. An obvious parallel between the “pioneers” of America and the “pioneers of DMT” exists. Much of the literature around DMT gives credit to the “primitive” and shamanistic principles which it was founded upon yet, the ADTA and its' affiliate institutions have done little to validate and support the process Native peoples find themselves in today. “Primitive” cultures

are recognized as entities of the past, and their wisdom is taken and utilized to benefit the ADTA.

Levy (2005) describes,

In many primitive societies, dance was as essential as eating and sleeping. It provided a means of expression, to communicate feelings to others and to commune with nature. Dance rituals frequently accompanied major life changes, thus serving to promote personal integration as well as the fundamental integration of the individual with society. (p.1)

The author of this capstone thesis wonders what Levy defines as “primitive societies”, as Native peoples both in the Americas and throughout the world often find their identities to be synonymous with terms such as “primitive”, “savage”, “underdeveloped”, or as the Declaration of Independence reads “merciless Indian Savages”. In Levy’s statement, cultural expressions of integrated ritual and artistic dance are acknowledged as activities of the past, yet presently, hundreds of tribes in the United States are working to reinstate their cultural rituals, which so often include dance/movement. This is especially true for the S’Klallam people, who’s expressions of dance/movement are intimately connected to culture and spirituality. It seems that the educational philosophies which devalue Native ways of being and relating in the world and which fail to acknowledge our existence are still prevalent in academia today. Associations and institutions fail to regularly acknowledge the roles they’ve played in continuing a legacy of cultural genocide against Native peoples through appropriation and ignorance.

In order to best serve Native and culturally diverse populations, the ADTA and all expressive arts therapy institutions must cultivate an awareness of the role they play(ed) in a

system founded on racism and white supremacy. Following awareness remains the question, how can expressive arts therapists ethically partner with Native people? Culturally specific tribal training may be vital in improving services offered, yet Fryberg, Markus, Oyserman, and Stone (2008) discuss how the lack of representation of Native peoples in mainstream society is detrimental for youth. Would it be more beneficial for academic institutions to open pathways of education and training for Native people to offer expressive arts therapies?

The author of this capstone thesis began learning S'Klallam culture, including our dances and songs, later in life. However, an elder once said that we are not learning, we are remembering (B. Hale, personal communication, December 3, 2018). In line with elements of humanistic and client-centered therapy, a foundational principle to the wellness of a whole person (including the mind, body, and spirit of that person) is self-actualization. For Native people, who traditionally pursue wellness with a collectivist and interdependent perspective, this self-actualization becomes an expression of tribal sovereignty and self-determination. This author found that academic institutions provided the ability to articulate the interplay experienced by power, privilege, and oppression. However, the very associations and academic institutions which taught these principles were found to be implicated, as well.

Cromer, Gray, Vasquez, & Freyd (2018) explained that “as one moves from acculturated to enculturated, one may start to experience the effects of historical trauma as his or her awareness of historical loss increases” (p. 109). The author of this capstone thesis found that as enculturation was pursued, an awareness of historical trauma and sensitivity to power differentials became acute. Alongside a process of personal enculturation was a process of western education. These parallel processes brought some validation to Native cultural arts and expressions through Western education. Specifically, within Dance/Movement Therapy (DMT),

many of the foundations and principles taught in academia have correlations to tribal cultural and artistic expressions, as many of the foundations and principles also come directly from Native cultures. However, the “pioneers” themselves were largely Anglo-European women, and DMT is undeniably rooted in Western paradigms. Can the expressive arts therapies, their associations, and their academic associates support processes of healing, growth, and enculturation for S’Klallam, as well as other culturally diverse people?

Current literature on regarding Native trauma and Native wellness supports the idea that the activities and expressions found in Native culture support the wellness of Native people. With this in mind, as a process of enculturation is continually pursued, this author must posit the question: Considering the wellness benefits already found within Native culture, including Native arts, is it worth it for Native people to put aside culturally centered experiences of learning, expression, healing, and existence in order to adopt yet another Eurocentrically organized mode of operating in the world? Is there a way for Native people to partner with Western academic institutions and expressive arts therapy associations that benefits their process of self-actualization?

hiyá? st túkʷ, we're going home

“my elder says she sees I’m heavy with grief
tells me not to apologize for my tears
that come flooding out

this river inside me needs releasing
the ancestors inside me need ceremony
the memory of land inside me needs remembering

(it is time to return home)”

(@oceanriverraindrop, 2018).

I remember the first time I tasted the salt in the air, standing on the same shores my ancestors landed on generations before. I could see Louise in my mind, sitting tall and strong, landing on this beach that became home. I was finally home.

*I always dreamed of coming to this here with my **seya**, my grandmother. Who had described it to me, in detail. We have a way of remembering those things which we lost, which were taken from us. We remember in smell, in taste, in touch, in feeling. Home was taken from her, when she was taken from home. It called to her and she called to it, always. No matter how far I was from her, in all my wandering, she always called me. I could almost hear her laugh then, as the waves on our beach pushed and pulled.*

A cousin once said he goes to our beach when he is in need. When he hears the water, he knows he is hearing the same sounds that our ancestors have heard for generations. Something about that sound calls to us, calms us. They survived then, we will survive now, and the water will always carry us home.

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In the judgment of the following signatory this thesis meets the academic standards that have been established for the above degree.

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