

CELEBRATING ALUTIIQ CULTURAL REVITALIZATION:  
PATHWAYS TO HOLISTIC INDIVIDUAL HEALTH AND COMMUNITY WELLNESS

By

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## **Abstract**

It is well understood that disease is a consequence of varied causation. Despite the fact that many health care providers acknowledge the importance of treating patients in a comprehensive manner in order to successfully cure sickness or alleviate symptoms, the contemporary medical system dispenses care in a fragmented and frequently incomplete manner. The essential differences between Indigenous epistemologies and the predominant Western worldview has had a more devastating impact on well-being and infirmity than is often recognized. The intention of this research is to explore the importance of promoting balanced holistic health care at a deeper and more essential level in order to address root causes, accessed through communication with the natural and spiritual realms, versus merely treating the physical expressions of illness.



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## **Chapter 1: Introduction and Rationale**

### **1.1 Overview**

This chapter will explain how this research addresses traditional bonds of place reflecting an Indigenous worldview that relationships with nature and spirit significantly impact individual quality of life and community well-being. This study seeks to identify any potential gaps in the provision of health care for Kodiak Alutiiq people in order to endorse holistic approaches to treating illness and promoting disease prevention. Additionally, these findings will contribute to implementing strategies that promote health for the Kodiak community following traditional Alutiiq cultural paradigms.

In the Indigenous world, healing is always spiritual regardless of what other modalities are used. (Mehl-Madrona, 2011, track 1)

At the beginning of this exploration, I anticipated that I would be searching for supporting evidence to substantiate my assumption that holistic models of treating illness are the most optimal and effective approaches since they naturally consider the needs of specific individual patients or particular community populations. Ideally, holistic health care encompasses the physical, emotional, social, economic, and spiritual consequences of ailments in order to comprehensively address personal needs. Relatedly, I theorized that the spiritual component of holistic care was routinely overlooked or incompletely addressed in contemporary medical practice, and that this deficiency had a significantly unique impact on health outcomes for Indigenous people, namely Alutiit (plural for Alutiiq) of Kodiak Island.

What I have come to realize during this investigation is that the implication of ignoring the spiritual connections between human beings and this universe has a more dramatic impact on health and human welfare than Western science has openly acknowledged, despite glimpses of this realization for at least the last 100 years. In truth, many cultures and individuals have long

understood this to be the case both intuitively and through daily life observations. In fact, it has become apparent that the entire premise of the scientific method, which endorses a precise emphasis on measurable objective information and severely discounts subjective influences on the focus of study, has been a major causative factor itself for the proliferation of illness and the frequently unsuccessful healing interventions being utilized in modern medicine.

As a result, the problem is more precisely defined as the need to rediscover, or in truth to acknowledge, a more realistic worldview, one that was traditionally inherent to ancestors from all cultures at one point in time. This relatively common global Indigenous epistemology was suppressed and then replaced with a worldview demanding that each component of life be considered separately and reduced to its smallest part, rather than understand and celebrate the universal connections that enhance diversity and balance, and ultimately enrich the quality of life for all entities sharing this planet (Chopra & Mlodinow, 2012; Duran, 2013; Ingerman & Wesselman, 2010; Kawagley, 2006; Peat, 2005). The problem will begin to be addressed when human beings re-establish their connection to the land, Mother Earth that sustains us globally, along with re-establishing their connection to the unique locally distinctive territories that Indigenous peoples have protected for eons. The mechanisms that foster these vital links are ones that Indigenous people have kept alive and are available to be embraced if hearts are opened and they are shared freely. Ultimately the restoration of these natural and spiritual connections will enhance individual and community well-being as well as be a means for healing disease and illness. Esteemed Indigenous scholars including Duran (2013), Kawagley (2001, 2006), Kimmerer (2013, 2016), Peat (2005) and Mehl-Madronna (2011), to name a few, have described the historical misunderstanding of Indigenous epistemology as Western civilization came into contact with various Native groups. Indigenous ideas and ontology were labeled folklore or

mythology rather than traditional stories based in reality instead of acknowledging that their perceptions and practices were founded on skillful observation and interpretation of natural phenomenon. In Chapter 2, these ideas and concepts will be described in detail and the relationships these Native epistemologies have to holistic healing will be further illustrated. Of note, traditional practices that would not typically be associated or connected with health and healing according to Western medical approaches will be illuminated, such as the value of relationships and fostering community, narrative methods such as story, and connection to ancestral land that cultivates the restorative powers of nature.

## **1.2 Understanding the Importance of My Own Story in this Process**

It is necessary for me to provide you with my background details and to explain how my role as storyteller has been enhanced by my interest in an Indigenous research paradigm. (Wilson, 2008, p. 32)

An upbringing in the contemporary Western culture of an urban American city in the Lower-48 does not instill a desire to share, nor did it convey the importance of individual introductions and backgrounds in occupational or educational settings. The additional indoctrination received during training as a health care provider also engrained the notion that personal viewpoints were at best superfluous, and at worst a potentially dangerous distraction, from significant information conveyed during professional dialogue. Nevertheless, I have learned through example, the profound value of providing these details at the beginning of any interaction from courses taken in the Indigenous Studies (IS) Program at the University of Alaska Fairbanks (UAF). I now firmly understand why it is essential to know who I am, where I came from, and why this research study is relevant to me, the place where I live, and to the members of this community. In the audiobook *The Spirit of Healing: Stories, Wisdom and Practices from Native America*, Lewis Mehl-Madrona, M.D., Ph.D., a Native American also

trained in traditional healing practices, informs the listener that he begins with his own story, because it follows Indigenous tradition, and because it is important to allow others to “contextualize what it is that I have to say” (Mehl-Madrona, 2011, track 1). Likewise, Shawn Wilson highlights this when he points out “taking the role of storyteller rather than researcher/author” is a more respectful approach and “that it is important for storytellers to impart their own life and experience into the telling” since an Indigenous research paradigm intrinsically “requires the holistic use and transmission of information” (2008, p. 32). Therefore, despite a longstanding discomfort with this personally intimate approach, I will begin in this proper way.

To be entirely appropriate I would provide my lineage, beginning with my parents and then follow my relations back, in order to establish my connections to the land where I live or came from, but my relatives did not provide me with that history or teach me about those origins. I can only say that I was born to second and third generation immigrants to the United States of European descent. My father’s parents arrived in Pittsburgh, Pennsylvania from Croatia, while my mother’s grandparents settled in this same metropolitan area of the Eastern United States from Germany. I have very few memories of any language, traditions, or customs from either background heritage of my parents. I do, however, have some significant recollections of experiences that served to convince me of a genuine connection I share with the land I now call home—Kodiak Island, Alaska. In revealing these select pieces of my own story, I hope to illustrate a substantial premise of this research, explicitly the value of listening to those subjective messages received from the spiritual realm, in order to manifest personal objective realities that contribute to the life of an individual in a meaningful way and guide a person to their purpose. In the book *The Condor and the Eagle: Uniting Heart and Mind in Search of a*

*New Science Paradigm*, Phillip Duran (2013) states “As a Native physicist—a physicist with an Indigenous perspective—I perceive and experience, with feeling, both the spiritual and the physical” (p. xxiii). This statement in part validates the reality and importance of acknowledging these experiences in order to incorporate them into our lives. If not for listening to these intensely inspiring signals, I would not be here in Kodiak, nor have enrolled in the Indigenous Studies Program (UAF IS) pursuing a deeper understanding of holistic healing in an attempt to give back something of value to my community. The idea that it is imperative for research to be centered on providing something of value to the participants, rather than seeking knowledge for the sake of knowledge alone, was the focus of many courses in the UAF IS Program and one that struck a chord for me personally. I have learned that the proper approach and correct methods for conducting research for the Kodiak Alutiiq community should abide by Critical Indigenous Research Methodologies (CIRM) which include that it be “rooted in relationships, responsibility, respect, reciprocity, and accountability” (Brayboy et al., 2012, p. 423). Since the content of Chapter 3 covers research methodologies and issues, that segment will describe in detail how CIRM was incorporated into the design of this qualitative community-based research study, how it was implemented and how it resulted in outcomes from the study that were truly reflective of the Indigenous epistemology by allowing Alutiiq community members to inform the research process.

An additional influencing factor for my deeper exploration of these concepts is my professional background as a nurse who is interested in all facets of promoting and restoring health, not only to individuals, but also to local and global communities, and even critically extending to planet Earth. More particularly, I have personally witnessed the healing power of approaches that are outside the contemporary medical model and can corroborate their efficacy.

While there are historical and current descriptions of specific healing techniques and strategies, and many will be discussed throughout this paper, this review is primarily focused on describing the contrast between Western approaches to science and medicine when compared with Indigenous approaches to health and healing. Specifically, the idea is presented that illness and wellness are also shaped by subjective influences that are derived from cues or messages received from communication with the natural and spiritual realms, rather than strictly identifying an objective factor responsible for disease and achieving a cure through quantifiable measures only.

### **1.3 Connecting to the Land that is Home**

When we come upon a place with the right attitude, we can learn the meaning of sacredness. (Duran, 2013, p. 27)

My connection to Kodiak began in early 1995 before ever stepping foot on this exquisite island. At that time, I was thrilled about the thought of moving to Kodiak with my former husband, Garry Dixon, who was in the United States Coast Guard (USCG). That enthusiasm was threatened one day when I learned that the military recruiting department did not intend to have us transfer after all. I still recall the intensely visceral reaction that information generated. The news literally felt like the reputed “punch to the gut,” and it drained the color from my face and weakened my knees. I remember grabbing hold of the counter to keep from losing my balance. Garry did not typically observe or comment on emotional reactions, but he noticed mine this time, and was concerned enough to ask why I was so distressed about this change of plans. Although it was hard to catch my breath, I managed to convey this deep feeling that we were *supposed* to move to Kodiak. I told him I could not explain why, but I was sure that needed to happen. Fortunately, he was able to switch assignments with another USCG member and we did arrive here from Clearwater, Florida that summer.

Kodiak felt like home from the very moment of arrival. I marveled at the splendor of the land, the water, the animals and plants, the sense of community and even the weather, which is often rainy and foggy. I began working at the Kodiak Area Native Association (KANA) and traveled to the villages in my role with the UAF Rural Human Services (RHS) Program. This position was my introduction to Indigenous perspectives on connections to the land and the strength of relationships. Once during a staff team building exercise, my colleagues and I were instructed to write a compliment about each of our Community Health Department fellows and place them at their desk. Then we were to review the commendations written to us in order to assimilate what others appreciated regarding our own relationship to each of them. At first my Western mind was confused by a few of the sentiments that my teammates related to me, but then I realized they were the highest approvals I could receive. One was “Margie is very grateful,” and the other was truly telling about being accepted into the home where I had immigrated “Margie is welcome here.” I was cautioned that Alutiiq teammates I worked with and among would be displeased if I expressed any disrespect to their homeland, including the characteristic weather, and that I would be alienated if I turned out to be just another transient resident who reaped the benefits of living here without making a contribution to this place. Since I never wanted to leave, that did not appear to pose a problem. However, when my family and I were given orders by the USCG five years later to return to Florida, despite multiple attempts to extend our stay here, I braced myself for the rejection I feared would ensue when I informed my Alutiiq friends and associates. Instead, I received reactions that mirrored these statements from two Elders: “You’ll be back,” and “Margie, just because you’re leaving, doesn’t mean you can’t come back.” These statements soothingly replayed in my mind the entire time I was gone. I clung to those remarks and similar comments, along with the calls and letters from Alutiiq

friends asking when I was coming *home*, and they all sustained me while I was away from Kodiak. Back in Florida, my family and friends were happy to have me there, but I carried around a dull aching emptiness. Eventually a very close friend, who always felt more like a sister, finally proclaimed “Well, you might as well move back to Kodiak, it’s obvious you’re homesick.” Again, I felt a visceral reaction to a comment that sent me an important life changing message—the physical relief at comprehending the cause of my emotional pain and the palliative effect experienced when a solution to ease it was realized. When Garry and I divorced, I began immediate preparations to return to Kodiak and stepped foot on this wondrous soil once again three years later. It brings a chuckle to my husband Greg Mete now in recollection, but I was seriously earnest when I told him on our first date, that we should not even begin to court if he ever meant to leave this place because I did not intend to depart ever again. I hope what I have just shared, signifies that I came here with the right attitude, because Kodiak has indeed taught me the meaning of sacredness, particularly of place. In the next section, I will recount my resonance with Indigenous ontology that offers one explanation for the bond I feel with this land of Kodiak.

#### **1.4 The Alutiiq People of Kodiak Island—Their Story of Healing and Resilience**

If I see a basket that I think was used in the past for berry picking, that’s not enough for me to know. What I do, which heals my spirit and makes my body healthy, is go out and pick berries in a basket, knowing that for maybe ten thousand years my ancestors have been doing this... And for the future, I’m bringing all my little grandchildren along to the berry patch and they’re learning to say thank you to the land after we get our berries and treat the berries with big respect when we go home. Martha Demientieff, 1997 (Crowell et al., 2001)

The Indigenous people of the majestic windswept island of Kodiak, Alaska are exemplary models of resilience and spiritual strength in the face of geographical challenges and historical adversity. They are part of a larger Alutiiq/Sugpiaq regional population that includes the Kodiak Archipelago as well as coastal regions of the Kenai Peninsula, Cook Inlet, Prince William Sound, and the Alaska Peninsula, who have made this area their home for over 7,500 years (Alutiiq Museum and Archaeological Repository, 2019; Crowell et al., 2001). The Alutiiq people have been identified by anthropologists and linguists as part of the Pacific Eskimo Indigenous population, being considered “the southernmost branch of the Alaskan Eskimo groups” and their language is a dialect of Western Alaska Yup’ik (Korsun, 2012, p. ix). In ancient times, those who came from Kodiak Island called themselves *Qik’rtarmiut* meaning “island people” (Drabek, 2013, p. 2). Elders and Culture Bearers with whom I have frequent contact instruct me that many Native people of Kodiak are even more specific about where they come from during introductions, stating either the north or south end of the island, and will typically even more precisely identify a certain village location to stipulate their origin. While Sugpiaq, which means “real person,” is the traditional name of this Indigenous group of people, the name Alutiiq (Alutiit, plural) is commonly used in Kodiak, and will be used throughout this paper for a number of reasons (Alutiiq Museum and Archaeological Repository, 2019; Crowell et al., 2001). First of all, this is the name that is most typically heard in use and seen in print locally by Native individuals living here in both public and private settings. Furthermore, this term is reflective of previous Russian influence which is integral to the current cultural identification of many Native persons on Kodiak Island. This idea is exemplified by a now departed respected Elder Sven Haakanson, Sr., who in 1997 made the comment: “You’ve got to look back and find out the past, and then you look forward,” as quoted in the work *Looking Both*

*Ways: Heritage and Identity of the Alutiiq People* (Crowell et al., 2001, p. 3). Although the historical record contains evidence of an Indigenous nation that comprised “complex social, artistic, and spiritual traditions of classical Alutiiq society,” the inhabitants of Kodiak were consequently subjected to over 200 years of colonization efforts by two groups of outsiders (Crowell et al., 2001, p. 4). While there is no question that many present day Alutiit have absorbed certain aspects of Russian and American cultural influence into their existing philosophies and practices, they are also very diligently recovering, restoring, and revitalizing their ancient beliefs and customs. They do this while fully acknowledging that their history is part of who they are moving forward, and that their descendants will correspondingly learn about their ancestors as part of their own living tradition, because Alutiit understand the cyclical nature of time as opposed to the Western linear perspective of this concept (Crowell et al., 2001). A striking example that further relates how this incorporation of conventions is now an integral part of their way of life was depicted in the documentary *Giant Bears of Kodiak Island* (Bayer, 1994) when residents of Old Harbor on the island’s south end participated in the blessing of the fishing fleet during the annual Independence Day celebrations. Villagers were filmed as they marched in a parade down the street with an American flag accompanied by the Russian Orthodox priest, who then blessed the boats with holy water as they passed by the dock in the harbor. I recall many friends and acquaintances sharing personal recollections of the Old Harbor Fourth of July picnic and festivities, and there is an acknowledged open invitation to all island residents to come share in the village festivities each year. This distinctive demonstration of a rejuvenated communal ritual to mark the beginning of a subsistence food gathering event surely had long standing traditional roots. Even though present-day routines have evolved to include additional symbols and practices from other outside elements, and Alutiiq people have integrated some of

these into their own unique celebrations, this in no way negates or diminishes the magnitude of ongoing efforts to direct intense focus even further into the distant past in order to recover the earliest customs and practices that are solely Alutiiq/Sugpiaq.

Nevertheless, despite the fact that revitalization efforts here and throughout the state are ongoing, vibrant, and are sustaining a powerful momentum, it should not be forgotten that there were dramatic and mostly devastating impacts from two different factions of invaders gripping many Indigenous populations who called this land of Alaska home. The first group made initial contact in the Aleutian Archipelago, working their way up to the Kodiak archipelago two hundred years ago, and culminated in the first Russian settlement located in Three Saints Bay on the south end of Kodiak Island at the site of the previously mentioned Old Harbor village (Bayer, 1994). The implication for Alutiiq people from this primary incursion was a longer exposure to the colonization efforts of those Russians, and then also from the American intruders that took over beginning in 1867 when the United States purchased the right to govern the territory, than the contact timeframe experienced by other Alaska Native peoples.

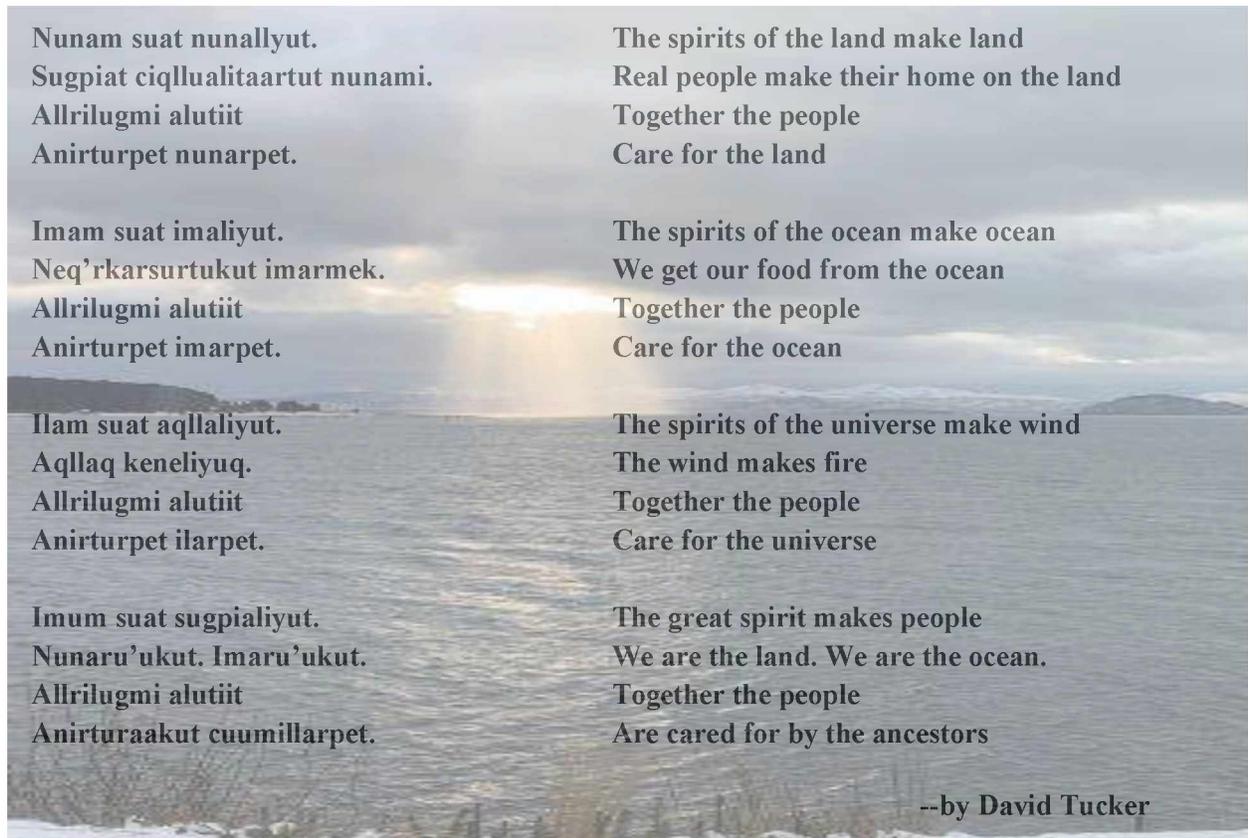
In the disgruntled narratives often heard in present-day human discourse, when many parties feel the need to point fingers at other individuals or groups for their own misfortunes or what is lacking in their own manifest experience, Alutiiq people take quiet responsibility for reclaiming their culture as a means of creating the healing and healthy realities they desire. They do this by visibly recovering the traditions that sustained them before they were interrupted by newcomers to their land. They are actively retrieving their language, their songs, their dances, their artistic expression, their subsistence lifestyle, their community celebrations and embracing their Alutiiq cultural values (Alutiiq Museum and Archaeological Repository, 2019). They, like many Indigenous cultures on this same healing path, understand the importance of remaining

true to their heritage in order to be wholly healthy. Gordon Pullar (1992) provides an overview of the cultural revitalization effort that began in 1984 through the efforts of organizational management and the Board of Directors at Kodiak Area Native Association (KANA) to instill ethnic pride among Alutiiq people of Kodiak with the idea that this would be a means for creating a healthier community as an end result. As a former employee of KANA myself from 1994–1999, I was honored to bear witness to many of the events and celebrations that were part of this movement. The tremendous impact these efforts had for personal healing and societal wellness prompted me to document the success of these approaches when I completed my master’s degree (Dixon, 1999). At that time KANA was involved in the Rural Human Services Program through UAF and the Kodiak village providers who I worked with understood the long-term sequelae of past history and now utilized strategies that were focused on Native approaches to healing as opposed to the contemporary Western medical intervention models. Support was given during sharing activities such as berry picking, beach combing, beading, or taking a steam bath (*maqiwik* in Alutiiq; *banya* in Russian) rather than at designated “counseling” times in an office setting. The natural strength of relationships bonded by friendship and mutual interests was itself the therapy.

Granting that it is not my intention to focus on the traumas of the past, it is important that those stories be shared with new generations, not only for the sake of understanding how present-day realities originated, but also in keeping with the wisdom of Sven Haakanson, Sr., who was quoted previously, because it is the fitting way to also look toward the future. I was able to witness several moving examples of the correctness of this approach during the September 9, 2017, community celebration commemorating the 30<sup>th</sup> anniversary of the revitalization of the Kodiak Alutiiq Dancers. To begin with, the overarching theme of this celebration was: “In

Kodiak, like our ancestors, we are singing, we are dancing, we are having a good time.” It should also be noted that all aspects regarding the importance of dance for Alutiiq people were emphasized and honored this day: the purpose of the songs, how they were created, explanations of the movements and even the masks and regalia worn. At one point, a renowned mask maker, Perry Eaton, emphatically stated, “A mask is a tool of transformation between worlds.” He lamented that “now a mask is Western wall art” instead of being used for what it was originally intended, as a channeling instrument between realms, which was the original “utility” for these beautiful artistic creations (personal communication, September 9, 2017).

Another significant moment of this celebration was when a young active leader of the dance team shared his own story regarding how participation in this group affected him personally. It is very apparent that presently his own contributions to the cultural narrative are truly inspiring. He recounted how he learned about the impact of the Russian and American colonization efforts and explained how this allowed him to understand what he experienced in his family and community growing up—how he looked back. Then he explained how this history motivated him to participate in the renaissance efforts currently in place and create a healthy narrative moving forward—looking ahead. He shared a poem he had written that was inspired by his knowledge of traditional Alutiiq reality and is a current and fresh addition to the collected prayers of Alutiiq people. Shared with permission, these are the words of his breathtaking invocation that will be the basis for a future song and dance that he is creating:



**Figure 1: Suat, by David Tucker** (personal communication, September 9, 2017)

David's words and his intention that they culminate in a dance, is a vivid example of a living culture that inspires us all to emulate Alutiiq wisdom by "looking both ways" as we experience life on this earth.

Similarly, April Laktonen Counciller is the Director of the Alutiiq Museum in Kodiak and is recognized for various accomplished and ongoing leadership efforts in this community. Her doctoral research work with Alutiiq language revitalization is another exemplary model of retrieving historical memory and concurrently keeping a culture vibrant through the infusion of newly constructed words that reflect current daily influences. Guided by Elders, the Kodiak Alutiiq New Words Council was formed in 2007 to develop contemporary terminology that

reflects more recent activities of life on the island but maintains a connection to traditionally established words or phrases (Counciller, 2010). A moving documentary *Niugaa Yugaa (Keep Talking): Language is Life* was produced in 2017 by Kartemquin Films and presented to the community (Weinberg, 2017). The ongoing efforts of many Elders and Culture Bearers to revitalize Alutiiq language and customs was dramatically depicted and provides a testimony to their dedication. In this film, Dr. Counciller's eyes brim with tears as she explains that she keeps a list of current Alutiiq language speakers, but only makes notations of the Elders who pass away rather than remove them from the inventory in order to keep their memory alive.

Language revival and revitalization is so vital because stories cannot be expressed as clearly or as accurately in a non-Native language. Translation loses significant implications and most probably will not reflect lessons as meaningfully, while humor appreciation is surely lost or misunderstood. Literal interpretation will certainly be incapable of reflecting the place from where the story came or situate the words or story to the land connection properly. In her eloquent book *Braiding Sweetgrass: Indigenous Wisdom, Scientific Knowledge, and the Teachings of Plants*, Robin Wall Kimmerer (2013), author, botanist and professor, frequently emphasizes that language is part of the land and as such is living and ever changing. The following three excerpts from this book poignantly illustrate these deficits of translation:

My first taste of the missing language was the word *Puhpowee* on my tongue. I stumbled upon it in a book by the Anishinaabe ethnobotanist Keewaydinoquay, in a treatise on the traditional uses of fungi by our people. *Puhpowee*, she explained, translated as 'the force which causes mushrooms to push up from the earth overnight.' As a biologist I was stunned that such a word existed. In all its technical vocabulary, Western science has no such term, no words to hold this mystery. You'd think that biologists, of all people,

would have words for life. But in scientific language our terminology is used to define the boundaries of our knowing. What lies beyond our grasp remains unnamed.

(Kimmerer, 2013, p. 49)

A great-grandmother from the circle pushes her walker up close to the microphone. 'It's not just the words that will be lost,' she says. 'The language is the heart of our culture; it holds our thoughts, our way of seeing the world. It's too beautiful for English to explain.'

*Puhpowee.* (Kimmerer, 2013, p. 50)

Jim Thunder, at seventy-five the youngest of the speakers, is a round brown man of serious demeanor who spoke only in Potawatomi. He began solemnly, but as he warmed to his subject his voice lifted like a breeze in the birch trees and his hands began to tell the story. He became more and more animated, rising to his feet, holding us rapt and silent although almost no one understood a single word. He paused as if reaching the climax of his story and looked out at the audience with a twinkle of expectation. One of the grandmothers behind him covered her mouth in a giggle and his stern face suddenly broke into a smile as big and sweet as a cracked watermelon. He bent over laughing and grandmas dabbed away tears of laughter, holding their sides, while the rest of us looked on in wonderment. When that laughter subsided, he spoke at last in English: 'What will happen to a joke when no one can hear it anymore? How lonely those words will be, when their power is gone. Where will they go? Off to join the stories that can never be told again.' (Kimmerer, 2013, p. 51)

I have been enormously fortunate to personally witness strikingly similar experiences living in this community and being welcomed to share in many of the revitalization celebrations that frequently occur here. In these public events, and even in private times with several of the Elders who I visit regularly, I have also felt the sense of wonder that Robin Wall Kimmerer describes when they start to explain something in Alutiq, begin to chuckle to themselves, and then try to explain it to me in English. Often, they comment that it is not as funny in English or that the English words don't completely portray what they are trying to express. At these times I feel deprived and I can sense their frustration and regret that the true meaning, beauty, or wit cannot be accurately conveyed in that moment of sharing. At more intense communal happenings such as the annual Dig Afognak Camp, the image depicted by Robin Wall Kimmerer is virtually identical as children and adults encircle a group of Elders having a conversation in Alutiq while those of us watching try to catch a word or phrase we recognize to at least identify the topic of conversation. The explanation of what was discussed following these exchanges never seems to fully capture the entire discourse since it is so very obvious that a few condensed sentences cannot provide the details of a dialogue that spanned many times the timeframe encapsulated in the summary and had none of the humor that was so apparently intertwined by the frequent chuckles and contagious smiles.

In the next section I will discuss why I feel the universe led me to this land and why I felt such strong subjective feelings when I thought I was not coming initially or when I had to leave for a time.

### **1.5 Feeling with an Indigenous Heart and Learning to Think with an Indigenous Mind**

I believe the key is to contemplate the Universe with both mind and heart together.

(Duran, 2013, p. xxiii)

As an immigrant to Kodiak, I often wondered why I felt such a deep connection to a land that was not associated with my own personal origin either through geographical birth or ancestry. Introspective moments have given me insights into the subjective feelings that created those bonds with my heart. I have shared some of them in previously, but I believe these links are tied more firmly to a resonance with the epistemology of the Alutiiq people which goes even further back to childhood recollections. I believe that synchronicity leads you down certain paths or manifests your desires into this life and that this comes from already being connected with the spiritual realm. It has made me wonder why my grandfathers chose to leave Croatia or Germany in the first place. Was it because they longed for something better, or did they feel they had to leave to improve the chances of survival for their family? Were they homesick? Did they ever wish they could return to their homeland? Although these questions are important, I will never know the answer to them. I do know, however, that I would not be who I am if not for their decisions and I truly trust we are all where we are meant to be and are in close connection with those whom we are destined to be joined in this life. I have been searching to identify the truth about how some traditional Western knowledge<sup>1</sup> was suppressed in favor of the “scientific method,” which was frequently used by some individuals in the quest for power and greed pushing the human realm out of balance with the spiritual and natural realm. I know I am by no means the first to investigate this history or discover aspects of this knowledge that was hidden and suppressed, but I hope this project can be a part of exposing and reinvigorating it so that it can be an instrumental healing factor. One of the reasons that could explain why Kodiak resonated with me so profoundly could be supported by the Alutiiq foundational understanding

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<sup>1</sup> Although Western traditional knowledge was ongoing at the local level in all Western societies, the changes that occurred over time caused a shift in focus from those of non-Western knowledge traditions. (M. Koskey, personal communication, October 19, 2021)

of the human connection to the natural and spiritual realms. In her 2013 dissertation *Liitukut Sugpiat'stun (We are learning to be real people): Exploring Kodiak Alutiiq Literature through Core Values*, esteemed Culture Bearer Alisha Drabek makes the point that “their definition of identity categorizes the spiritual understanding that the Sugpiaq had of their world – a world imbued with interconnected spirit worlds inseparable from what Western cultures would call physical reality” (p. 2). There is the deeply ingrained sense of that still in many of the daily interactions I have with friends and associates here on this island home. It is not unusual to speak of these spiritual associations or to marvel at the connections one makes in nature with those entities, and this profoundly contributes to why I feel a sense of belonging to this place and with the people who live here. One specific example that illustrates this point is the frequent comment I hear when I first answer the phone call of another Kodiak Elder/Culture Bearer, Judy Simeonoff, who often starts the conversation with, “The ravens were telling me to give you a call,” because she recognizes my connection to those creatures.

Predictably, I have frequently questioned my place as a non-Indigenous investigator exploring a topic that seeks to identify traditional Indigenous perspectives regarding health and healing when I am not Native and did not grow up here in Kodiak. Although I struggled with an impression that I would be considered an imposter in this position, I have adjusted this interpretation because of encouragement obtained from readings while studying in the UAF IS Program and from conversations with Alutiiq community members. I am often reminded of my own earlier point about being where you are meant to be in life, working alongside those with whom you are meant to interact, during conversations with Alutiiq friends. They have told me that it must be intended for me to write these stories, that this is an important topic, and that it needs to be shared, which provides a great sense of relief and validation. Another influence that

alleviated my concerns about the legitimacy of working on this research despite being a relative newcomer to this island came from reading an additional excerpt from Robin Wall Kimmerer as she related the Turtle Island (North America) origin story. She explains that Skywoman, who created this land with the help of her animal associates, was herself an immigrant and that she did not come empty handed since she scattered her gifts of seeds as she came to earth (Kimmerer, 2013). Although it was not my choice to leave Kodiak in 1999, I felt that the research project begun when I finished my master's degree was not completed because I had not "given back" enough to the community at that time. While I have chastised myself about this in the past, I now have a deeper understanding of another Indigenous concept that was not part of my Western upbringing—specifically that of time and timing. I have again been reminded that I need to trust universal influences and have faith that this is now the right moment for me to share and explore this research at a deeper level.

### **1.6 Purpose and Intention of this Research**

An Indigenous philosophical concept of holism refers to the interrelatedness between the intellectual, spiritual (metaphysical values and beliefs and the Creator), emotional, and physical body (body and behavior/action) realms to form a whole healthy person. The development of holism extends to and is mutually influenced by one's family, community, band, and nation. The image of a circle is used by many First Nations peoples to symbolize wholeness, completeness, and ultimately wellness. The never-ending circle also forms concentric circles to show both the synergistic influence of and our responsibility toward the generations of ancestors, the generations of today, and the generations yet to come. The animal/human kingdoms, the elements of nature/land, and the Spirit World are an integral part of the concentric circles. (Archibald, 2008, p. 11)

Relating this passage to Indigenous holistic healing practices makes the argument that the language, stories, dances, community relationships, and practices that maintain the connection to the land all were, and still are, vital ingredients for creating holistic health for each person and the local and global community. The never-ending circle as described above by Archibald (2008), reinforces the understanding that the interconnectedness of all entities in the universe plays a role in illness or in flourishing on this planet. I have described the intense and vibrant Alutiiq cultural revitalization I have been privileged to witness here in Kodiak. Indeed, I have been welcomed to be an active participant and have even been blessed with an invitation to explore Indigenous holistic healing approaches more deeply in this community. A contribution that this research makes is connecting the holistic healing practices in place locally, as well as those described in other Native communities, to the outcome of individual healing and collective community health. The purpose was to put a focus on established current and historical cultural knowledge in order to fill in the gaps regarding traditional interventions that should be in place to ensure holistic health. More specifically, it was intended to demonstrate a direct association between health and well-being and the relationships the Alutiiq share with the natural and spiritual universe as illuminated by their cultural traditions. Western medical practice does not make that absolute correlation, so it was time to gather the voices of Alutiiq people to establish and document their ways of knowing in this area and ask them how health care could be structured in Kodiak to include traditional therapeutic approaches along with contemporary therapies. In this way, traditional ways of healing could be identified, acknowledged, and then utilized as part of the current health care system on Kodiak Island. This has been done in other Native communities throughout the world and this research is a mechanism for adding this

cultural component to the ongoing Alutiiq revitalization efforts in the area of health care delivery.

### **1.7 Theoretical Framework**

The theoretical framework of this research is that illness is the result of an imbalance between the human, natural, or spiritual realm and must be identified in order for a person to heal holistically. Since these imbalances affect relationships, helping an individual person heal causes healing for families and communities and also impacts global wellness. This framework is grounded and supported by Kawagley's Tetrahedral Model (2006) that was designed "to help illustrate the interrelationship among human nature, nature, and supernature (or spirituality) ... and that there must be constant communication between the three constituent realms to maintain this delicate balance" (pp. 14-15). Ultimately this research question asked if health care provision could be more effective if it included an intentional focus to facilitate the holistic spiritual practices of Indigenous Alutiiq community members.

This research explored the potential value of adding a layer to the cultural revitalization that is already successfully recovering and honoring traditional Alutiiq society on Kodiak Island. History, language, art, songs, dances, stories, and many other aspects of Alutiiq/Sugpiaq legacy are being shared and celebrated and it is having a great impact on the health of this community. It is not only fitting but essential that traditional healing approaches should be identified, revealed, and customarily offered to Indigenous people who need help dealing with an illness or who seek guidance to maintain health. Support should be provided in ways that align with Alutiiq heritage rather than simply promote Western medical interventions exclusively. This is frequently a challenge, since most contemporary medical providers do not share the same worldview or perception of health and illness that is understood by the Indigenous

patients/clients they serve. These differences will be elucidated in greater detail in Chapter 2, while a strategy for augmenting existing service provision to include traditional therapies will be depicted.

A qualitative community-based research study was planned and conducted with these broad initial questions in mind:

- Should Indigenous ways of healing be integrated into current Western medical practices as an adjunctive option for addressing the health concerns of patients/clients with a Native heritage?
- What specific Indigenous healing practices would be sought and utilized if available through existing service provision options?
- Since many Indigenous healers do not advertise their services, would it be practical for Western providers to utilize referrals to these Native practitioners so patients can access traditional healing therapies?
- Are there additional community ceremonies or events that should be planned to promote wellness, balance, and harmony as illness prevention strategies or to celebrate community healing?

This investigation was undertaken to determine initially whether the Elders and other Culture Bearers in the Kodiak Alutiiq community felt there was a need to collect remembered concepts and practices that promoted holistic health for individuals and the community. After consultation with these community experts, it became clear that this research would be valuable and would contribute to existing resident knowledge. Moreover, respected Native consultants had a desire to share their epistemology regarding health and healing and have it archived with the Alutiiq Museum as a resource that can be accessed and utilized for future reference. This

qualitative design followed Critical Indigenous Research Methodologies (CIRM) to ensure the research considered “Indigenous knowledge systems, is anticolonial, and is distinctly focused on the needs of the communities” while being “rooted in relationships, responsibility, respect, reciprocity, and accountability” (Brayboy et al., 2012, p. 423) which will be discussed in detail in Chapter 3.

It seemed that these types of interventions should be part of the “prescription” offered by health care providers and included in the “treatment plan” of those seeking healing in order to recognize and respect the power and efficacy of these strategies for Indigenous Alutiiq on Kodiak. As a community-based research study, Elders and Culture Bearers were asked if they felt it was important to understand if traditional holistic healing approaches should be accessed, what they included, and how they can be utilized when someone is unwell.

It is inspiring and motivating, or more precisely—heartening—to think that identifying and implementing holistic strategies could not only influence our intimate local connections but also could ultimately impact global relations with respect to the indigenous concept of holism (Archibald, 2008).

Chapter 2 will provide a review of the literature to present the contrast between Western medical interventions and Indigenous approaches to treating illness and maintaining holistic health.

## Chapter 2: Literature Review

### 2.1 Overview

The natural and spiritual realms are accessed through emotions, through the identification of subjective data and experience—through the heart. In contrast, the physical world is grounded by the manifestation of solid materials, acknowledging a reality that can be measured and quantified through objective facts that are devoid of feeling—through the mind. Interpreting and internalizing both types of input significantly influences well-being. Likewise, ignoring or discounting either causes significant imbalances that ultimately impact health. In a time when the majority of human beings recognized and celebrated the relationships they had with other beings that shared an incarnation on this planet, these reciprocal influences were honored. Emotional connections were strengthened through ritual ceremonies, and through many other daily customs, in order to establish and enhance communications with other entities in the natural and spiritual universe. These practices not only nurtured the delicate balance required to be holistically healthy, they also prevented disease and cultivated human potential, while enriching individual and collective experiences of life on Earth. Historically this was the common understanding of worldwide human communities who embraced the concept that their own personal well-being was impacted by their relationships with others. Then something changed in a small part of Europe, and this new attitude spread until only some Indigenous people currently remember these ancient associations. The naissance of contemporary science caused a change in mindset that altered the human approach to living in this world which has now cost many of us our fundamental health. It is time for those of us who live and practice within the confines of current Western ideologies to awaken our awareness once again by remembering these mystical connections to spirit and nature, because this would be the most elementary course of action

needed to induce true healing of individuals and the global population. This understanding was always part of Indigenous cultural knowledge and was understood and passed down for generations until Western thought was widely disseminated. The revitalization of any traditional Indigenous practice that celebrates the interconnectedness of all things is a viable means for promoting or restoring individual and community health.

This literature review identifies and describes the course change that led the predominant scientific community down a path that focused exclusively on the objective manifestation of illness and used only those same functional methods to treat disease. It will also outline traditional Indigenous methods for fostering or restoring health. Acknowledging that subjective approaches to healing are also effective, and are often even more successful, is finally beginning to gain momentum in several medical specialties where it was once only confined to the province of mental health domains (Cichoke, 2001; Mehl-Madrona, 1997, 2003, 2005, 2007, 2010, 2011, 2019; Mehl-Madrona & Mainguy, 2015; Waziyatawin & Yellow Bird, 2012). Modern medical practice however still routinely discounts the importance of the mind/body/spirit connection in an attempt to utilize only objective data that is detectable with our “senses” such as the measurement and alteration of vital signs in determining the therapeutic effect of a medication as an example. Activities that induce positive feelings of connection, such as strengthening relationships with the natural and spiritual realm and those entities that share those domains with us, are valuable Indigenous practices to maintain and even improve health, although that subjective data may not be readily or easily validated during routine medical health care visits. Determining the appropriateness and usefulness of employing these holistic treatment interventions for individuals and communities, specifically Indigenous Alutiiq people of Kodiak Island, was investigated. Critical Indigenous Research Methodologies (CIRM) was utilized to

explore this topic using guided interviews with Alutiiq Elders and other Culture Bearers because this anticolonial approach is based on relationships, responsibility, respect, reciprocity, and accountability with the purpose of recognizing the intrinsic authority they have over this subject matter being examined and how it can be applied in the Kodiak community (Brayboy et al., 2012; Chilisa, 2020; Kirkness & Barnhardt, 1991). Although Indigenous knowledge regarding health and healing was systematically replaced or pushed aside to make room for the application of Western medical advances, this research was designed to be a mechanism for illuminating this robust and durable Alutiiq wisdom. As Linklater (2014) points out: “The resiliency of Indigenous people is often derived from cultural resources that generate strong contributions to community capacity building in relation to healing practices and health research” (p. 25). Alutiiq community members frequently remarked during the initial research preparations that gathering their healing stories was a valuable and important study topic and one they wished to have archived. This collection of participant recordings and transcripts would be another contribution to the already vibrant cultural revitalization efforts that are established and ongoing in Kodiak and was already accepted as a donation to the Alutiiq Museum. The underlying themes for healing interventions were validated by each of the participants and there were additional requests for the excerpts that support those premises to be presented to the community.

We invite others to share in our story and listen to our experience promoting health and well-being of the heart, the mind, the body, and the spirit. In this way we follow the pathway of our ancestors and live and celebrate our cultural heritages and values, radiating outward to the community and beyond. (Topkok & Green, 2016, p. 185)

In order for Western medical providers to effectively meet the health care needs of Indigenous people, there must be a better understanding of the Native American concepts of

well-being and illness. An appreciation of what constitutes health and what defines illness according to the Indigenous worldview was an important foundational step. A comparison of the differences between Indigenous healing practices and allopathic medical treatment modalities was then explored to understand what would facilitate more effective holistic approaches. Additionally, this research is also intended to serve as a mechanism for promoting community activities focused on maintaining wellness by utilizing the traditional cultural health practices of Alutiiq people on Kodiak Island. There is also an underlying motivation for identifying and reestablishing Alutiiq health customs that became less visible following colonization. Namely that, although cultural revitalization is vibrantly being cultivated here in Kodiak, decolonization is a process as well as an event (Waziyatawin & Yellow Bird, 2012). Activities or research that would be seen as furthering the restoration of “lifestyles that contribute to the advancement and empowerment of Indigenous People” (p. 3) is a specific part of that decolonization process and therefore should be an ongoing practice for which this study would be a component (Waziyatawin & Yellow Bird, 2012).

## **2.2 The Healing Influence of Relationship with Spirit and Nature**

When we engage with the compassionate spirits directly, everything – both healing and the assistance we need in life – becomes available to us. Dealing with these transpersonal others is not about worship. It is about relationship. (Ingerman & Wesselman, 2010 p. 19)

Most Native Peoples acknowledge the existence of the natural and spiritual realms, and do not believe humans to be a superior being, designed to control and dominate every animate and inanimate entity for their own individual needs and pleasures, which also feels like an essential truth to me. Significantly, actions that negatively impact a person’s relationship to the natural and spiritual realms can be the basis for the manifestation of a physical illness (Cichoke,

2001; Freeman et al., 2001; Kramer, 2006; Mehl-Madrona, 1997, 2003, 2005, 2007, 2010, 2011, 2019; Mehl-Madrona & Mainguy, 2015).

Reviewing epistemologies of Indigenous cultures reveals that they intrinsically have a representative worldview that describes experiences derived from three interrelated dimensions from which they receive wisdom and that in turn are affected by human interaction (Drabek, 2012; Ermine, 1995; John, 2009; Kawagley, 2006; Meyer, 2011). Oscar Kawagley's holotropic model, developed over a number of publications, has been used to depict the relationships between these elements, and it is important to note that their connections to each other occur as a simultaneous, nonlinear event that requires balance in order to maintain harmony (Drabek, 2012; Ermine, 1995; John, 2009; Kawagley, 2006, n.d.; Meyer, 2011). It is, in fact, the imbalances between these realms that cause disease in humans and damage to the natural environment (Garrett et al., 2011) and this statement will be supported in the results that follow in Chapter 4. To put these concepts more simply—everything is connected and in constant communication with an integrated universe and is what is being referred to when someone speaks about the web of life. An excerpt from Ingerman's and Wesselman's *Awakening to the Spirit World* (2010) explains this so clearly:

All shamans speak of this web or net that connects us to everything, everywhere, as well as to the spirits that live in all things. The idea that we are separate from other life forms is simply an illusion. This is the initial underlying mystical insight of direct revelation, and it provides us with a profound sense of oneness—of unity. Acknowledging this idea that we are all connected, says Sandra Ingerman, is important for our well-being. (p. 56)

Individuals in Indigenous communities regularly access the spiritual realm in the course of their daily lives as it is an essential relationship that makes up their holistic worldview and

influences all of their interactions in an ongoing way (Barnhardt & Kawagley, 2005; DeLoria, 2012; Kawagley, 2006; Meyer, 2011). By the same token, they also continually communicate with the natural realm and constantly receive messages from entities in that sphere as well. The capacity to have this constant connection to personalized subjective knowledge guides their actions and informs their eternally adapting epistemology. Ingerman and Wesselman (2010) quote anthropologist Alberto Villoldo to explain this idea more fully:

It is important that we become conscious of how connected we truly are with Nature.

Every breath we take, every gulp of water we swallow, everything we eat, comes from Nature. It is easy to forget this... For the shaman, the *quality* of your relationship with Nature is of the utmost importance. In the Andes they call this *ayni*, which roughly translates as “right relationship,” or reciprocity. (p. 56)

In contrast, human beings who perceive the world through the lens of Western beliefs have been taught to ignore and overlook information received from subjective sources. This results in a significantly narrower perception of the energies and influences that surround them and make them powerless to control or respond to these forces for their own benefit. It also results in a disregard for the importance of tuning in to intelligence sent from the domain of nature by persons who have assimilated the typical Western worldview.

Discrepancies between the Indigenous ways of living in the integrated physical, spiritual, and natural realm and lifestyles practiced by people of Western descent who primarily function merely in the physical realm are almost startling and polar contrasts. One is compelled to wonder how the predominant society arrived at this modern age of technological advances, so embedded in the current methods for obtaining knowledge and experiencing physical reality, since they are proving unsuccessful at keeping us healthy as individuals or preserving the planet and its other

inhabitants. “This is a situation of knowing *how* without knowing or caring *why*; the previous is objective, the latter subjective” (M. Koskey, personal communication, October 19, 2021). Geral Blanchard (2011) reminds us when he includes this quote from Ken Burns in *Walking with Grandfather*: “The greatest arrogance of the present is to forget the intelligence of the past” (p. 1). The fall 2015 course *Worldview(s) in Indigenous Contexts* taught by Professor Jackie Rahm, presented ideas related to when and why Western ideologies deviated from the Aboriginal and Eastern traditional beliefs that are still currently held today (Barreiro, 2010; Drabek, 2012; Deloria, 2012; Dunbar-Ortiz, 2014; Duran, 2007, 2013; Fixico, 2003; Forbes, 2008; Gustafson, 1997; John, 2009; Kawagley, 2001, 2006, n.d.; Kingsley, 2010; Meyer, 2011; Mohrhoff, 2007; Moore & Demeyer, 2013; Newcomb, 2008; Smoley, 2011; Stannard, 1992; Tuck, 2009; Whelshula, 1999; Williams, 2012). Additionally, class discussions in that course emphasized the importance of individuals looking into their own heritage and background to gain a valuable understanding about promoting personal healing or to enhance personal wellness. A beginning research into my own cultural ethnicity and the history of medicine brought to light a holistic approach that solidly matched the means Indigenous lifeways enlisted the spiritual and natural realms in the ancestry of human beings of European Anglo-Saxon descent as well, and this included all the peoples of Europe at one time, before the Roman Empire, and before the imposition of Christianity (M. Koskey, personal communication, February, 2021). These insights triggered a desire to look at the historical divergences between Western science-based ideology and Indigenous nature and spirit-based epistemologies even further. The opportunity to investigate this past record in greater depth was again offered during the spring 2016 courses *Traditional Ecological Knowledge* taught by Professors John and Koskey and *Indigenous Knowledge(s) and Science in Global Contexts* taught by Professor Leonard. It seems that the

original ancient epistemology of many or all Western European civilizations did indeed resemble the worldviews that still currently exist in Eastern religions, African, Native American, and other enduring Indigenous cultural traditions. The divergence that occurred between Eastern and Western epistemology and how that history impacted the discord we now experience between Western scientific methodologies related to medical care when compared to Indigenous approaches to health and healing will be discussed next. Although the history of how we got here is not the focus of this research, an understanding of the past will help inform us how we should move forward, or simply move on.

### **2.3 Historical Influences that Shaped Western Worldviews**

Initial and unexpected contact with the Great Mysterious power must have come prior to the development of ceremonies and rituals for seeking a relationship with the spirits. We can imagine the surprise of the first person having an unusual, and perhaps prophetic dream and then discovering that it accurately described an event that came to pass in his or her daily life. Surely, here was reliable information, but from an unknown source that could not be summoned at one's pleasure. How eagerly people must have yearned for similar dreams that would guide them in their daily lives! (Deloria, 2006, p. 1)

It is an historical fact that pagan traditions across the world were suppressed, and in some cases eradicated by the monotheistic Judaic, Islamic, and Christian religions brought into dominance by the hands of select individuals who had acquired political and social control (Balan et al., 2015; Eisler, 1988; Rahm, 2014). It should be noted that Judaism is different in that it is an Indigenous tradition, though now with many variations (M. Koskey, personal communication, February 2021). The repression started in the West with pre-Christian European traditions, and moved across the ocean to North America, known as Turtle Island by Native

Americans (Peat, 2005; Williams, 2012). Fortunately, some original Eastern spiritual belief systems remained immune to this influence and attempt at enforced subjugation, while some Indigenous Native cultures preserved their knowledge and beliefs through oral traditions and stories handed down to Elders and other Culture Bearers. Western European pagan beliefs were not as fortunate despite the survival of some spoken accounts and written texts that narrated their own legends, myths, and customs. Most cultural practices, including seeking spiritual interactions apart from Christian traditions, were abolished owing to deliberate and systematic oppression by political powers and due to the genuine fear of persecution if secret or covert practitioners were discovered (Eisler, 1988; Williams, 2012). The calculated historical elimination of ancient worldviews that acknowledged the interconnectedness of humans to the physical, natural, and spiritual realms assured that wealth, power and all material resources of the world would remain in the control of a few select groups of people who then handed this hegemony down to their designees. These men of power recognized the necessity of severing the connection that man had to nature and spirit because if access to subjective knowledge could be acquired by individuals themselves, or even by community effort, the authority structure the warlords created would be weakened or could even crumble. In a parallel historical evolution, Western versions of science came to be accepted as an important functional component of multiple various civilizations across the globe, so that it even now coexists as part of their own cultural domain (Balan et al., 2015). As science came to be developed into a conventional discipline, it existed alongside other belief systems and approaches to accessing or discovering knowledge “such as spirituality or magic—[and] in time it came to be grasped as an autonomous cultural domain, substantiated by its own system of laws, axioms, or theories, viewed as scientific principles and, consequently separated from and independent of the spiritual sphere”

(Balan et al., 2015, p. 7). These cascading events led to the common society of today becoming dependent on the resources provided by relatively small numbers of prominent industry leaders whose motives are often justified through scientific studies. These corporate giants strategically brainwash the populace into believing that there are either no options for living in this world other than to accept and utilize the resources and services these dominant powers control through their exploitation of the world, or that these plundered gifts of nature are highly desirable. So here we are at present—greedily consuming the manifestations of the physical world with no concern about their ongoing availability or how it affects the other entities on this plane of existence. Ironically, the impact this has on the human species of this planet is the ultimate devastation of physical health through pollution and illness, but also consequently on emotional and spiritual well-being. Well aware of this precarious reality, Indigenous Native cultural revitalization and renaissance efforts have been working to utilize their own subjective intuitive knowledge of nature and spirit in order to restore balance in the physical world. These efforts are positioned against the present scientific method that dictates health care delivery, so the contemporary medical system will subsequently be reviewed.

#### **2.4 Current Result from Shifting Focus to Western Scientific Approach on Wellness**

The knowledge and wisdom of the Native peoples of this continent represent a wide gap in the minds of mainstream society. It is little known, for example, that their conception of wholeness applies both to human health in terms of balancing all aspects of the human being—spiritual, emotional, physical, and mental—and to a comprehensive view of the universe. (Duran, 2005, p. xv)

Western medical practice has evolved into an approach that diagnoses and treats patients by routinely utilizing various providers, educated in multiple disciplines, and trained in

numerous specialties (Association of American Medical Colleges [AAMC], n.d.; WebMD, n.d.). This has led to treating specific diseases and parts of the body, rather than treating the patient as a whole, complete person (Wilson, 2008). The result of this method is a health care system in the United States that may have the best technological advances, but is also the most expensive, and is only ranked 37<sup>th</sup> in terms of quality, according to the World Health Organization (WHO) (Cichoke, 2001; World Population Review, 2019). By contrast, Native American healing practitioners consider all aspects of the patient to be inclusive of the body, mind, and spirit, in order to address illness or maintain health (Cichoke, 2001; Mehl-Madrona, 1997, 2003, 2005, 2007, 2010, 2019; Mehl-Madrona & Mainguy, 2015). In fact, well-being and healing are acknowledged to be so intimately connected to feelings and emotions according to Indigenous knowledge systems that health promotion and treatment interventions are based very soundly and primarily on subjective influences in the manifestation of illness (Mehl-Madrona, 1997, 2003, 2005, 2007, 2010, 2011, 2019; Mehl-Madrona & Mainguy, 2015). Fundamentally the differences between approaches arise from contrasting worldviews that also result in vastly different therapeutic strategies for maintaining health, preventing illness, and curing disease. It is no wonder that Indigenous people are turning back to their roots in order to seek health care that more closely aligns with their ideology and their concept of healing since Western medicine does not meet their needs and is failing to keep them well. Western providers must understand what these traditional Native practices entail so they can not only respect, but also facilitate and incorporate, these approaches into their own practice to better serve their Indigenous patients. Dr. Lewis Mehl-Madrona, a credentialed medical doctor and Indigenous healer, further suggests that Indigenous holistic healing strategies and contemporary Western interventions do not have to be mutually exclusive (Mehl-Madrona, 2019). He offers that some symptoms and afflictions would

be best addressed within the current standard medical structure such as traumatic injury or acute life-threatening disease exacerbations for instance. However, he also confirms that many human discomforts can be treated and alleviated through Indigenous healing practices and that these should be offered to those individuals who seek those types of remedies (Mehl-Madrona, 2019). An additional vital consideration posited by Mehl-Madrona (personal communication, July, 2020) and many other Indigenous scientists, is that although intuitive qualitative data is a key component of foundational Indigenous epistemology, empirical quantifiable data is also routinely considered and applied (Duran, 2013; Kawagley, n.d.; Meyer, 2011). Robin Wall Kimmerer warns that while Indigenous knowledge and Western science both have a place in promoting our understanding of this world and enhancing our quality of life, they should not be blended into an amalgamation that no longer resembles either standpoint as that would detract from the particular and unique perspectives of each (Kimmerer, 2016). Dr. Mehl-Madrona concurs with this approach as he also points to a health care model that does not merge these modalities together but instead allows patients to select the treatment most appropriate for their individual condition or health concern, either from allopathic providers or Indigenous practitioners, when they seek healing services (Mehl-Madrona, 2019). If a surgical intervention is required or a physical injury mandates that Western approaches are most appropriate, they should be implemented. However, when the underlying etiology of an illness stems from a subjective causation, an intervention that addresses that spiritual imbalance will elicit holistic healing and be much more effective. To establish the essential understandings that define and describe holistic health, these concepts will be discussed next.

## 2.5 Holistic is Comprehensive but Balance is the Key

A person that demonstrates proactive community participation, embraces connections with their environment, ceremonies and rituals, spirituality, science, survival and prosperity is regarded to have reached balance and harmony in life. (John & Koskey, 2015, p. 2)

From an Indigenous perspective, the source of personal health and overall well-being is having a balance in all aspects of life energy including the body, mind, and spirit (Cichoke, 2001; John & Koskey, 2015; Mehl-Madrona, 2019). Since human beings are simply one component of life in this world, and they are connected to all other elements of animation in the universe, this balance must exist in all of nature including the domain of the spirit world (Duran, 2005; Mehl-Madrona, 1997, 2011). Harmony and balance is not only a health consideration, it is directly related to the Indigenous worldview that focuses on inter-relatedness and relationships (Wilson, 2008). By contrast, Western medicine is crisis-driven and focuses on restoring health once it has been jeopardized by a specific agent such as a genetic imperfection, infection, or injury (Cichoke, 2001; Kavasch & Baar, 1999; Mehl-Madrona, 1997, 2003, 2005, 2007, 2010, 2011, 2019). According to conventional Western medicine dogma, these disease-causing processes can be isolated and treated once diagnosed, but their correlation to other aspects of an individual's well-being are not the primary focus (Cohen, 2006). Because Western science attempts to separate individual parts, rather than consider how each part affects the whole (i.e., their *relationships*), medical practice has developed into endless distinct specialty areas. The Association of American Medical Colleges (AAMC) encourages newly graduated physicians to contemplate more than 120 practice areas when beginning their residency as newly licensed physicians. Likewise, when patients are searching for a doctor to treat them, WebMD helps them

by asking them to confine their search to 60 different medical specialists (AAMC, n.d.; WebMD, n.d.). Family practice physicians are an example of a provider group that sees all types of patients, but a major aspect of the role they play for their patient empanelment is as a gate-keeper by making referrals to the consultants. Naming just a small sampling of these experts includes the following: orthopedics, immunologists, radiologists, cardiologists, neurologists, pulmonologists, and endocrinologists. However, a comprehensive listing would identify all of the other imaginable titles related to body systems, body parts, or body functioning. These medical authorities are considered exclusively qualified to focus on the specific disease, irregularity, or injured somatic area and treat it. It is understandable that medical care in the United States is seen as fragmented, difficult to access, and hard to navigate. Since illness is the result of an imbalance from an Indigenous viewpoint, a Native healer will make connections with spirit through various means such as dreams, meditation, and ceremony, to determine the source of disharmony for the individual (Cajete, 2000; Deloria Jr., 2006; Kavasch & Baar, 1999). The underlying upset may have been precipitated by grief, sadness, personal wrongdoing such as a taboo violation, soul loss, spirit intrusion, leaving the land or way of life, giving away power through word or deed, loss of humility or respect, being irresponsible with gifts of nature, anger, damaged relationships, negative thinking, or unfulfilled dreams (Cajete, 2000; Cichoke, 2001; Kavasch & Baar, 1999). This demonstrates that the basis of disease is identified by Indigenous healers to have an origin resulting from subjective influences, as well as or in addition to objective causes, compared to the medical model that looks for a singular discernible and tangible objective precipitating factor. The Native healer will then create a uniquely distinctive treatment method that allows them, as conduits of the spirit world, to direct the restoring energies to the ill person (Kavasch & Baar, 1999). Healing remedies are effected through elaborately

constructed rituals and ceremonies that can include stories, which are known to “transmit strength and energy” and feed the soul on many levels (Archibald, 2008), songs, dances, chants, sand painting, fasting, smudging, imagery, humor, drumming, counseling, massage, foods, herbs, dream interpretation, and sweat lodges (Cohen, 2006; Mehl-Madrona, 1997, 2003, 2005, 2007, 2010, 2011, 2019; Mehl-Madrona & Mainguy, 2015). Since the healer looks at the person holistically and matches the therapies to their specific needs, it is obvious that this approach would be more effective than the method utilized by Western specialists who examine patients through the microscopic lens of their particular discipline (Cohen, 2006). Kenneth Cohen in *Honoring the Medicine: The Essential Guide to Native American Healing* likens the strict focus of Western specialists to the proverb about the blind men who were able to describe an elephant only from the limitations of the body part they were touching (p. 149). A substantial factor related to Native healing ways that should not be forgotten is the involvement of family, friends, and other community members, the all-important relationships, in these rituals and ceremonies which is vital to reestablishing the harmony and balance of the individual to the universe, much as the necessity of repairing the broken spoke of a wheel in order to effectively stabilize its function (Kavasch & Baar, 1999). A brief commentary is in order to furnish an understanding of designations that have been associated with practitioners of Indigenous healing arts - specifically establishing the difference between a shaman<sup>2</sup> and a traditional healer such as a medicine-man/woman. Ingerman and Wessleman (2010) clarify this distinction by explaining that the “Western world” misinterprets these roles and perpetuates a “blurring of terms” because “every shaman is a medicine person but not all medicine people are shamans” (p. 7). These authors

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<sup>2</sup> The term “shaman” is an Evenki word that describes the sort of spiritual practitioner typical of their culture, and was applied to a very different culture with some similarities in their spiritual behaviors and beliefs (M. Koskey, personal communication, October 19, 2021)

illuminate further by pointing out that these two roles diverge based on the realm where they perform their interventions and offering that a “medicine woman, for example, may perform ceremonies or healing work through her knowledge of medicinal plants, but she does her main work here in the world of things seen” (p. 8). These concepts are supported by the description of “shamans” presented in *Looking Both Ways: Heritage and Identity of the Alutiiq People* (2001). Since the term “shaman” seems to be the one most difficult to understand from a Western scientific perspective, this summary statement should enlighten:

The distinguishing feature of shamanism versus other spiritual practices is that shamans do their main work in the spirit world where they may accomplish various things through their relationships with their helping spirits. Shamanism, correctly understood, is about working with those transpersonal forces we call spirits. Sanctified by their initiations and furnished with their guardian spirits, the shaman alone is empowered to venture into the mysterious geography of 'the world of things hidden.' (Ingerman & Wessleman, 2010 p. 8)

Therefore, although these accepted specialists assume various roles or functions in Native communities, they do share a common awareness in that they serve as an intermediary for the spiritual energy and power that can be harnessed by an individual or community to manifest healing or support well-being (Blanchard, 2011; Cohen, 2006; Fortuine, 1986, 1992; Ingerman & Wesselman, 2010; Kramer, 2006; Mehl-Madrona, 1997, 2003, 2005, 2007, 2010, 2011, 2019; Mehl-Madrona & Mainguy, 2015). Reviewing a 26-item list compiled by Blanchard (2011) of the “essential, active, and interrelated elements that are integral to the healing process” (pp. 5-6) from an Indigenous perspective, the struggle that Western researchers have when trying to

document the roles of traditional healers and their therapeutic intercessions can be realized and is included here:

1. Sacralize (to make sacred) the setting and the healing procedures.
2. Involve a community of supporters.
3. Summon the spirit world.
4. Involve the ancestors whether they are deceased or alive, relatives or strangers.
5. Invite Elder participation, often to lead rituals.
6. Invoke the power of mystery.
7. Infuse the healing process with loving kindness and compassion.
8. Encourage hands-on healing techniques.
9. Facilitate and explore altered states.
10. Use dreams for guidance.
11. Insert a dose or two of humor.
12. Work from clear and noble intentions and provide close attention.
13. Find ways to make Nature the primary office and cathedral.
14. Use intuitive abilities to compliment the analytical.
15. Collaborate with, and involve the patient in, the treatment planning.
16. As a healer, be authoritative yet humble.
17. Employ sacred magic.
18. Emphasize reciprocity, the give-and-take that promotes healing.
19. Utilize storytelling.
20. Employ the patient's belief system, suggestion, and the placebo effect.
21. Re-story (reconceptualize) illness and trauma to interject purpose and meaning.

22. Emphasize panpsychism, interconnectedness, and themes of unity.
23. Utilize rhythm, music, prayers, movement or dance.
24. Follow a heart-driven and heart-focused healing approach.
25. Harmonize the patient with his fellowman, Mother Earth, and the Universe.
26. Continuously look for opportunities to embed recovery in rituals and ceremony.

A brief synopsis of previous researchers includes historical accounts of the traditional healing practices of various Alaskan Native groups including the Alutiiq, often including specific techniques (Fortuine, 1986 & 1992; Kramer, 2006; Langdon, 2014). Robert Fortuine was a United States Public Health Service (USPHS) physician and historian who worked in Alaska and wrote about the history of Alaska Natives prior to European contact (Fortuine, 1992). His seminal work *Chills and Fever: Health and Disease in the Early History of Alaska* documented the “Great Sickness” of 1900 as a “disastrous epidemic of influenza, accompanied by measles, smallpox, and possibly other diseases” that would have devastating consequences on the Native population of the entire state (Fortuine, 1992, p. 215). Indeed, Fortuine also described anthropologic evidence of acute and chronic conditions that plagued Alaska Natives prior to contact with foreign groups, other afflictions that accompanied occupation from outsiders such as tobacco and alcohol use, along with the attempts made by colonizing missionaries and doctors to treat illness in communities throughout the state. An unpublished manuscript written in 1986 by Dr. Fortuine titled *Shamans and Seal Oil* was discovered and disseminated posthumously [2011] in which detailed healing therapies and treatments among various groups of Alaska Natives were catalogued. While the descriptions of these specific remedies are historically important and currently intriguing, it was not the focus of this research, simply because it could be misconstrued as an attempt to develop a “treatment plan” or a “procedure manual” which

would miss the mark of treating an individual holistically. Hopefully, it is already apparent to the reader that differing epistemologies about health and well-being are the underlying reason that modern allopathic methods have been unable to provide holistic health care for Indigenous patients. Until medical systems consider the spiritual and natural influences that can be the basis for causing or relieving symptoms and restoring or maintaining health, and concomitantly welcome the integration of traditional healers and practices, they will not be completely successful. Dr. Fortune (1986) concludes his *Shamans and Seal Oil* manuscript with thoughts that still ring true:

They now have easy access to the best of modern technology, yet many find that all too little attention is being given to the relationship between the healer and the patient, and to the enhancement and mobilization of the patient's own resources for healing.

... Traditional medicine in Alaska or elsewhere is not inherently right or wrong, but a fact of life. It has its strengths and weaknesses, just as Western medicine does. The important point is that the wisdom of generations has molded the healing traditions of a culture, and humanity can ignore such wisdom only at its peril. (p. 105)

There is an ebb and flow, a rhythm, to the natural cycles and the forces of nature that is respected by Indigenous people, so their healers tune in to this and continually work to reinstate balance as necessary (Kavasch & Baar, 1999). Practitioners also construct rituals and ceremonies for people as a means of purification and to prevent illness because they know that when the mind, body, and spirit are strong and pure, individuals are not as susceptible to imbalance (Kavasch & Baar, 1999).

Bearing personal witness to the Alutiiq cultural revitalization efforts taking place on Kodiak, I can attest to the healing energies that emanate to the individual participants who share

in the ceremonies, dance, song, and stories that are such an integral part of these events. The affirmative thoughts and blissful emotions that are elicited during these occasions make it easy to imagine how effective their restorative and health sustaining benefits would be to individuals and the community as a whole when these activities were a central part of daily life. Another directly experienced example of the healing advantages obtained by incorporating the value of relationships into daily life was my attendance at one of the annual Dig Afognak Camps in the summer of 2017. It felt like being transported back in time on Kodiak Island where community members worked together, learned together, played together and harmoniously shared their existence with each other and the other entities of the natural and spiritual universe. It is hard to describe the peace and acceptance that is felt when you step foot on the beach at Afognak. Personally however, I very vividly recall literally falling into the arms of a friend who embraced me to simultaneously prevent me from slipping on the rocks while also warmly welcoming me to this haven. This event provided an enlightened understanding of the profound reality that is possible when there is integration of the mind/body/spirit. Every interaction during that week supported feeling with my heart while my mind learned the practical details of living and working in this setting and thus reinvigorated my spirit.

Modern medicine's inattention to preventing illness through maintaining well-being is evident when a typical visit to a health care provider is witnessed. The time is often seen as perfunctory and described as being consumed by routine or superficial tasks such as the emphasis placed on completing paperwork and forms, and the exchange of monetary compensation (Blanchard, 2011). Time constrained appointments in Western clinics leave very little occasion for providing lifestyle education or implementing wellness initiatives. When illness prevention initiatives are implemented, they take the form of a referral to another new

provider such as a dietician or counselor for example. This consultant is typically a stranger, but it is expected that intimate personal histories will be shared yet again with this recent acquaintance, who will separately address this aspect of health care delivery. How glaringly and distinctly isolating a health promotion intervention in this setting now appears when viewed against the ongoing, inclusive, and routine interactions of being part of a vibrant and loving community who so obviously and genuinely cares for the well-being of each individual in their collective group. As a nurse with 44 years of experience in the medical profession, I can personally attest to these examples and have witnessed them many times throughout my career.

Incorporating subjective knowledge, accessed through communication with nature and spirit, is a true asset to living in the human realm as it provides a valuable mechanism for maintaining all aspects of personal, community and global health. Since Indigenous peoples have retained this knowledge and know how to use it, and because science is actually beginning to validate these understandings of the rules of nature and the universe, Aboriginal societies are being bombarded with researchers who desire to retrieve that intelligence (RurAL CAP, 1994). Larry Mercurieff (1994) made this comment at the *RurAL CAP Alaska Native Traditional Knowledge and Ways of Knowing Conference*: “There is a belief that the time is coming near when the four sacred colors of peoples will come together. They will share their ancient traditions and wisdom for the benefit of all” (p. 3). Phillip Duran also spoke of a prophecy that the culture of the north (who work with the rational mind and intellect; represented by the eagle) and the culture of the south (who work with spiritual intuition and the heart; represented by the condor), would once again fly together wing to wing following a period of destruction, which has been identified to be our current time (Duran, 2013; Mehl-Madrona, 2011). It is important then, that we find ways to enlighten those who do not recognize this intelligence that provides

guidance for living a balanced life, because each individual who takes this opportunity to create harmony in their own life, will also be affecting the universal “web of life” in a beneficial way since we are all connected—to each other and to our planet, Mother Earth. It seems there are many spiritual paths available to point humans in the right direction so that they can re-establish their connection to nature and the benefits this would have on holistic health. The focus of this research study was to find those avenues in my local community of Kodiak and share them as deemed appropriate by the Indigenous people of this island. Additionally, new discussions about treatment interventions that are grounded in ideas that were always understood by Indigenous epistemologies are being generated in Western medical specialties. The basis for these newer techniques is due to the acceptance of the theories of quantum physics. A review of how quantum physics is impacting contemporary science therefore follows next.

## **2.6 Quantum Physics Helps Western Science Accept Subjective Influences on Health**

Think about the way you express yourself. What do you mean, for example, when you say something doesn't matter, or that it is immaterial? You are effectively saying that the thing to which you are referring doesn't contain any matter; but that isn't what you mean. You mean that it isn't important. So somehow your language leads you to think that to be material and to be important are one and the same thing, but that isn't necessarily true. Think of how many things are important in your life that have nothing to do with matter. (Lothär Schäfer, 2013, p. 7)

Indigenous knowledge is based on an understanding of the universe that is not in close alignment with the Western approaches to obtaining information about the world. This instinctive and rational perception is supported by the awareness that Indigenous languages more accurately reflect the reality of the world while they additionally enhance communication and

relationships, previously discussed in Chapter 1, and thus validates the above quote from Lothär Schäfer (2013). We can certainly identify important facets of our life that are not tangible in the physical sense as Schäfer points out. Love is a subjective emotion that is vital to strong, life-enhancing relationships and positively influences our health. Likewise, negative emotions such as stress have been linked to many physical ailments and troubling symptoms. The simple realization that Indigenous languages are verb-based when compared to the noun-based system reflected in the English language represents that Native perspectives put the emphasis on connections and experiences rather than placing a concrete material item or subject as the relevant focus of an expressed idea. Indigenous Elders and other Culture Bearers have made considerable progress proving that traditional knowledge is based on sound scientific principles that actively gathers data not only from empirical observation, but also significantly from subjective sources characteristically ignored or discounted by their counterparts who only use Western models of research. This ideology is supported by local scholar, Dr. April Counciller, who studied the local community philosophy of language revitalization for her doctoral dissertation as she informs the reader:

Many Indigenous epistemologies place an emphasis on holistic integration of knowledge as opposed to categorization and classification. The complex connections between humans and the environment, animals and plants, art, science, and spirituality figure strongly in Indigenous understandings of the world. (Counciller, 2010, p. 77)

Ironically, academic scientists are now starting to acknowledge that quantum physics has been the basis for Indigenous worldviews all along. In the past these perceptions were thought to be irrelevant, or at least less important than, the foundational objective understanding of atoms as the building blocks of matter. We are turning the corner to accepting that it is just as important to

grasp the impact that subjective influences have on reality and our human experiences in this world. Ancient Pagan traditions were also based on obtaining messages by communicating and interacting with the subjective natural and spiritual realms of existence. I can only hint at the jubilation I experienced as I delved into the explanations of quantum physics while reviewing the literature for this thesis. Of course, I was led to explore this topic and how it related to healing because the influential writing of Indigenous scholars pointed me in that direction. *Blackfoot Physics* by F. David Peat (2005), *Original Thinking* by Glenn Aparicio Parry (2015), *The Condor and the Eagle* by Phillip Duran (2013), and *Coyote Medicine, Coyote Healing, and Coyote Wisdom* by Lewis Mehl-Madrona (1997, 2003, 2005) are but a few of the authors whose works summarize the concepts now being discussed in this revolutionary “new Western scientific” concept called quantum physics. These selected quotes from F. David Peat (2005, pp. 6-7) in *Blackfoot Physics* illustrate how Indigenous science and ways of knowing are underlying principles when considering the effects of nature and spirit on health and well-being:

- Quantum theory stresses the irreducible link between observer and observed and the basic holism of all phenomena. Indigenous science also holds that there is no separation between individual and society, between matter and spirit, between each one of us and the whole of nature.
- In modern physics the essential stuff of the universe cannot be reduced to billiard-ball atoms but exists as relationships and fluctuations at the boundary of what we call matter and energy. Indigenous science teaches that all that exists is an expression of relationships, alliances, and balances between what, for lack of better words, we could call energies, powers, or spirits.

- Some physicians question our current medical models and suggest that healing involves the whole person – body, mind and spirit. Native healers have never fragmented their vision of health, for it is regarded as emerging out of the whole of nature and is one with the processes of renewal.

To my surprise and frustration, it turns out that the understanding of how the universe really works has been known for at least the last century by modern Western scientists and for eons by various Indigenous people from many parts of the world (Duran, 2013; Schäfer, 2013). Indigenous wisdom is finally being recognized by academic science as a legitimate source of knowledge for addressing imbalances related to health and restoring the natural environment. Kawagley and Barnhardt (n.d.), in their collective work *Education Indigenous to Place: Western Science Meets Native Reality*, remind us of what the Yupiaq say: “Seggangukut—We are awakening, we are being energized!” because they are drawing energy from the earth and using nature to be their guiding force in the hope that the disruptions in the circle of life can be repaired. Theories of relativity and quantum physics support this Indigenous connection with the energies of earth since they acknowledge that matter is made up of condensed energy with many interacting forces. This new understanding compels academic scientists to make an attempt to understand the interrelatedness of creation rather than steadfastly continuing to look through a narrower lens that focuses solely on isolating and inspecting the minute individual pieces. No wonder the limiting viewpoint mandated by the scientific method requires so many repeat studies and incites arguments about the ultimate answer to a research question. Despite all attempts to control every variable so that objectivity is ensured, the universe is inherently ever-changing due the subjective nature of relationships and there will always be subtle or even blatant differences with each observation. Indigenous knowledge does not discount objective data, but the

understanding that physical manifestations can be affected by ongoing subjective influencing factors is also readily acknowledged. Ultimately, this underscores the essential differences between Western medicine and Indigenous healing since this foundational discrepancy points to why traditional healing methods primarily address subjective emotions in order to manifest objective well-being.

## **2.7 Traditional Healing Practices Review—A Caution Leads to Deeper Understanding**

The healer may practice one or many of these gifts of healing but is always aware that healing does not come from him or her (or from the herb, for that matter), but from a higher source. The traditional healer is merely a conduit of this restorative energy. (Freeman, Morgan, Farquhar, 2001, p. 7).

When reviewing the literature for studies that outline and describe the types of traditional treatments and practices, Western scientists, myself included initially, would hope to find a written manual or oral record from an Indigenous group that indicates a specific disease or symptom should be treated with a particular method. This is because allopathic medicine focuses on curing a symptom or disease with the most efficacious remedy. As stated previously, my original assumption was that participants interviewed would identify that medical providers were not offering interventions that would address spiritual needs and that if we did begin to address that deficiency, the provision of comprehensive holistic care would be achieved. From my personal experience in medical practice today, guidelines structure our interventions and are described in hospital or medical policies that incorporate appropriate “standards of care.” These generalized procedures are linked to diagnosing or relieving isolated symptoms of disease. As an example, if a patient presents with chest pain, the health care team will first attempt to “rule out” a heart attack since this is the most critically life-threatening potential cause. If the chest pain is

not found to be cardiac related, then additional testing and specific protocols will be followed to determine the source of the discomfort. Once physical causation is eliminated from consideration, the health care provider may then, with some measure of confidence, label the source of distress as emanating from an emotional basis and pronounce a suitable categorization such as “anxiety related to stress.” The *medical* provider can then hand the patient over to the *mental health provider* and rest assured that their connection to that patient, or at least this specific interaction, has been completed. Herein lies the foundational problem – the individual is not being treated in a holistic way that considers all of the relational impacts that led to this presentation. Follow up is not guaranteed and the next time this patient seeks care, if they even bother, the whole procedural ritual will begin from the top to determine the diagnosis for this subsequent encounter. One significant result from this contemporary approach is that these “diagnostic labels” are now contained in the health record of the patient. This can be a good thing when a health care provider needs to know that a patient's history contains heart disease or another chronic condition that is prone to exacerbation so that they can then address it quickly. At other times, the symptoms recorded in a patient record denote emotional or mental health characterizations. In these instances, either true physical causation can be overlooked, or just as critically, this data can define an individual and infuse their personal story (history) so that they now identify with this classification. Indigenous healer Lewis Mehl-Madrona, M.D. (personal communication, July, 2020) often talks about the dangers of imposing these details into the story of those who seek treatment in the structure of Western health care since it takes away the power of an individual to change their health perception and influences their ability to control their own outcome. Considering the mind/body/spirit connections that are now recognized as contributions to holistic health, these impacts are more damaging than commonly recognized and are also less

likely to be regarded or effectively addressed. In fairness however, the idea presented that standards of care, policies, and procedures have been mechanisms that detract from holistic individualized care must be countered with the positive aspects that these methods provide to enhance patient outcomes such as in the example mentioned previously. Moreover, these routines were designed in an attempt to address potential inequity in the delivery of health care in order to ensure that all patients received the same level of care regardless of any personal variables such as financial or social status. They were also meant to safeguard that a particular medical concern does not go undetected since practitioners of various training backgrounds or experience levels see a significant number of patients with whom they often have had limited encounters. These established algorithms provide medical practitioners with structured tools that are intended to lead them to consider any or all possible causes of the presenting malady.

Old habits are hard to break, and ingrained training is hard to suppress, so I must admit that I even approached the first interviews with the thought that I would hear that Alutiiq participants would want to have certain identified cultural interventions provided to manage illness and promote health. I estimated that this would provide an option that could potentially be preferred over allopathic approaches. To state a few examples, I expected to hear that providers should offer the opportunity for a person to have access to a maqiwik (*banya; sauna*), that a walk in the woods or along the beach should be encouraged; or that participation in cultural practices should be promoted. And while I did hear that these examples and others were actual health promotion activities for many participants, the caution was always that what worked for each individual was highly personal and should not be in any way prescriptive. So, it comes down to the basic premise that what “feels” right for each human being is the method that will be effective to treat the particular discomfort that causes the imbalance or is keeping them from

being holistically healthy. Again, the idea of emotions and connecting to the wisdom of the heart is the focus, rather than logically using the mind to label the disorder and link it to a standard treatment. It was important to identify the traditional healing strategies of the Alutiiq people on Kodiak Island since they are currently so keenly involved in a cultural revitalization effort that is moving forward rapidly. This research filled a gap in understanding whether this population believed in the power of the mind/body/spirit connection so that this concept could be included in planning healing interventions that would be accepted and offered in this community. The data collected obtained their input and determined that the individuals interviewed did indeed recognize the connections between the physical objective reality they experience and the subjective emotional responses they feel to the natural and spiritual realms. They emphasized the importance of balance in relation to wellness and identified that an imbalance would result in illness. It also supported the healing benefits generated from the revitalization of cultural traditions including language, songs, dance, storytelling, and connections to the land. Participants pointed out the value of sharing the message that these activities contribute to holistic health for individuals and for the community as a whole. One significant awareness came to light during data analysis and is worth mentioning here as a result of reviewing this insight with committee member Alisha Drabek, who is herself an Alutiiq Culture Bearer (personal communication, January, 2020). Drabek felt it was important to state this connection as part of this literature review although it was not considered or planned prior to collecting data. When considering the themes drawn out from the interviews again, it was clear that each premise regarding holistic health as described by participants, could be directly connected to the Alutiiq Core Values. Although this revelation will be discussed comprehensively when the findings are fully presented in later chapters, The Alutiiq Core Values as obtained from the Alaska Native Knowledge

Network of the University of Alaska Fairbank, are included as an introduction of this association. Following that, a beautiful representation of these values and “the interrelated & valued elements that sustain our well-being” from the dissertation by Alisha Drabek (2020, p. 144) has also been added.

## **2.8 Kodiak Alutiiq Cultural Values**

We are the descendants of the Sugpia[t], the Real People. Understanding our environment and events that have shaped our lives and created the culture of our ancestors is vital for our children's cultural survival. The history of our People and our place in the world is a part of who we are today. Kodiak Alutiit must learn and pass on to younger generations our understanding of our natural world: the sky, land, water, and the animals. As we meet the challenge of living in the 21st century, we must continue to live in honor of those things we value:

## **Our Elders**

Our heritage language

Family and the kinship of our ancestors and living relatives

Ties to our homeland

A subsistence lifestyle, respectful of and sustained by the natural world

Traditional arts, skills and ingenuity

Faith and a spiritual life, from ancestral beliefs to the diverse faiths of today

Sharing: we welcome everyone

Sense of humor

Learning by doing, observing and listening

Stewardship of the animals, land, sky and waters

Trust

Our people: we are responsible for each other and ourselves

Respect for self, others and our environment is inherent in all of these values. (Drabek with

Alutiiq Language Club Elders, 2012, p. 144)

# Qik'rtarmiut Sugpiat'stun Lumacirpet

## A Kodiak Alutiiq Worldview

*the interrelated & valued elements that sustain our wellbeing*



Figure 2: A Kodiak Alutiiq Worldview (Drabek with Alutiiq Language Club Elders, 2012, p. 144)

When considering these values carefully, it is so obvious that the idea of respecting relationships of all kinds is foundational and links directly back to the concept of the Indigenous worldview being closely aligned with quantum physics. Quantum physics is key to understanding the idea that all things are connected and that this knowledge is instrumental in guiding one to living a life that is abundant and holistically healthy (Schäfer, 2013). This concept is spelled out in the Kodiak Alutiiq Core Values, therefore it was important to mention them here as part of the review of literature and I feel disconcerted to have overlooked this connection initially. Had I made that association prior to beginning the interviews, I believe that I would have structured the guided interview questions around these core values. I am consoled that this could be an approach for another project that gathers important insights for supporting Alutiiq cultural traditions in health care. Acknowledging the inherent wisdom of these traditional cultural norms can be an additional contribution to the ongoing revitalization of these customs to facilitate holistic healing in this Kodiak community.

It bears repeating that if, using the aforementioned example of chest pain, the cause is truly a heart attack, the appropriate intervention would be to eliminate the blockage to the coronary arteries and restore oxygen, indicating that using Western knowledge and technology would be the correct approach. Here we see the idea of the condor and eagle flying together so that humanity can benefit from both sets of understanding. The prophecy states that these two birds fly together. It does not state that they are melded into one and create a new species, it suggests that each has different vantages and both can be utilized in harmony (Duran, 2013; Mehl-Madrone, personal communication, July, 2020). However, this does not mean that these two approaches to health care are, or should be, mutually exclusive. I must confess that at many points in this investigation I had the thought that it might be best to simply recommend a shift to

using Indigenous holistic healing strategies exclusively in order to eliminate the cumbersome licensing, certification, or verification processes mandated by Western contemporary regulation (Freeman, Morgan, Farquhar, 2001). Admittedly, this would, of course, be akin to the proverbial “throwing the baby out with the bath water” warning that any rash or drastic change would provoke. An integrative model for delivering both allopathic and traditional healing in Alaska Native communities was suggested by a group of researchers who proposed the idea of the “Circle of Healing” which was designed for “harmoniously blending these differing systems of healing” (Freeman et al., 2001, p. 11). This “Circle of Healing” approach was developed in response to the establishment of the *White House Commission on Complementary and Alternative Medicine Policy (Executive Order 13147)*, which charged them with determining “legislative and administrative recommendations for assuring that public policy maximizes the benefits to Americans of complementary and alternative medicine (CAM)” (Freeman et al., 2001, p. 5). The Mayo Clinic website provides a current definition of CAM as follows:

Complementary and alternative medicine (CAM) is the popular name for health care practices that traditionally have not been part of conventional medicine. In many cases, as evidence of efficacy and safety grows, these therapies are being combined with conventional medicine. Thus, the term alternative has been dropped and replaced with newer terms, such as complementary and integrative medicine, integrative medicine and health, or just integrative medicine. (Mayo Foundation for Medical Education and Research [MFMER], 2021)

The authors of the article “Traditional Peoples and the Circle of Healing” noted that the Commission was examining traditional healing as “one of many areas of CAM” that should be investigated (Freeman et al., 2001, p. 5). Notably, the above Mayo Clinic definition is clear that

CAM, or integrative medicine, is not considered “conventional medicine” and has not had the sanction of “evidence of efficacy and safety”—at least at this time (MFMER, 2021). An issue that I pointed out previously is the caution from Kimmerer (2016) who advises that combining Indigenous knowledge and Western scientific approaches may have the unhappy consequence of undermining one, or alternatively that intermingling them, could have the consequence that the underlying basis of each knowledge is lost in the blended format. Kimmerer’s concerns are born out with this definition of CAM since these approaches include traditional practices as only one example of an “atypical” method that could be combined with conventional medicine rather than utilized exclusively; and if implemented, does not have any “proof” that it will be effective or even “safe” (MFMER, 2021). Freeman, Morgan, and Farquhar (2001) were also concerned about trying to fit Indigenous healing practice into allopathic systems and offered these comparisons of the two different approaches by describing “White man’s medicine” as a square, and traditional methods as a circle:

**Table 1: *Square and Circle***

<b>SQUARE</b>	<b>CIRCLE</b>
The cause of disease is an ‘enemy’ to be conquered	Disease is a natural part of life related to many factors—lifestyle, personality, and body constitution
Mechanical—individual is “repaired” but it does not help them become a better person as a result of this experience	Individual can be healed but also can become a better person from the “gift of sickness”
Treatment plan is strictly controlled by the physician	Control of treatment is in the hands of the patient; family and community are part of the recovery process; also accept other systems of healing
Techniques and treatments are specific to various disorders and based on diagnosis	Purpose is to restore harmony with forces of nature
Requires “proof” of efficacy in form of evidence from research; not used unless “tested”; documentation required	Pass on historically tested healing strategies through oral tradition; idea that treatment is “unacceptable” unless tested is irrational
Acknowledged as highly successful and life saving	Spirit-based; respect illness as a transforming energy
New research in areas of healing through mind-body connections such as prayer, faith, psychoneuroimmunology evolving	Established intuitive understanding of nurturing and damaging health effects from mind-body influences

(Freeman et al., 2001, pp. 8-10)

Finally, these authors acknowledged a solution that was a concept offered by Robert Morgan, Ph.D., wherein the allopathic and traditional healing approaches were combined by putting the square inside the circle to represent that the “technology and treatment processes of contemporary medicine work in partnership with the ancient art of traditional healing” (Freeman et al., 2001, p. 10). Freeman, Morgan, and Farquhar (2001) state that this Circle of Healing approach was implemented in Alaska in 1994 with a process known as Compacting, whereby

allocated federal funding was shifted to tribal control allowing the Alaska Native Medical Center (ANMC) and various clinics throughout the state to determine how to best make use of those monies. Through various community connections, I learned that in Kodiak, a traditional healer was available and referrals could be obtained to utilize her services through a medical provider at Kodiak Area Native Association (KANA); however, this person is now retired. Currently, KANA beneficiaries who would like access to a traditional healer would need to be sent to Anchorage by their local provider. I am aware that there are several Native individuals who are well known and recognized by the Alutiiq community for their healing abilities, but they are not formally acknowledged by KANA and are not actively practicing (A. Drabek & J. Simeonoff, personal communication, January, 2021). Reassessing the use of this Circle of Healing model would be an important follow up to this research so that their services can be promoted as part of the “Circle of Healing” model here in Kodiak. At this point, the data gathered for this research does reinforce that Alutiiq participants connect with the concept that traditional healing approaches are inclusive of the mind/body/spirit, that balance is necessary for holistic health, and that the mechanisms for relieving illness or achieving health are very individual. The supporting documentation for this conclusion will be included in the discussion of the results in Chapter 4.

## **2.9 Evolving Understanding**

Variations of this great circle of life are found in virtually all wisdom traditions; it is an ancient understanding that could potentially unify humankind just as it unifies matter and spirit. This notion of spirit interpenetrating matter, and matter returning to spirit, for instance, is related to the Indigenous idea that one can become the other—and back again. (Parry, 2015, p. 28)

Initially I had the impression that the significant difference between the Western medical model and Indigenous healing methodologies was the absence or limited inclusion of the spiritual component regarding treating illness or maintaining health. I believed that holistic approaches could be more comprehensive, and therefore more therapeutic, if we simply paid more attention to identifying and addressing these spiritual needs. I have come to realize that Indigenous epistemologies understand that subjective influences actually cause the manifestation of objective realities. Therefore, to try to exclude them from any aspect of living in this world is to cause an imbalance that will lead to illness or dis-ease. With that comprehension, Indigenous healers work with the feelings, thoughts, and emotions, together with addressing any physical manifestations of ailments, to assist a person to create a healthier life experience. This is why stories, ceremonies, rituals, dance, and all the other traditional treatment interventions employed are so effective. It is also why cultural revitalization efforts are healing strategies in their own right. These activities alter, modify, and mend beliefs that are distorted or unhealthy and allow the individual to construct a narrative of well-being. Indigenous healing concentrates on the subjective influences of the natural and spiritual realms in order to connect with the heart, and that allows the mind to construct an objective physical reality that is holistically healthy. Another fascinating realization is the emphasis placed on the personal power of the individual to make these connections for themselves. An Indigenous healer can be a facilitator, but ultimately healing is generated by the individual when balance is restored and communication between the physical, natural, and spiritual realms are kept open.

Chapter 3 describes the research methodologies used for prompting input from acknowledged Elders and Culture Bearers among the Alutiiq community in Kodiak in the hope

that this data can be included as one aspect of the story that celebrates the ongoing Alutiiq cultural revitalization underway.



## Chapter 3: Methods

### 3.1 Overview

The most appropriate research methodology for this type of study is the use of the Critical Indigenous Research Methodologies (CIRM) approach that acknowledges an Indigenous worldview and incorporates the principles that are recognized by those communities as an acceptable and valid research process. Input was gathered from Alutiiq community members regarding their perspectives about the traditional cultural healing practices they feel should be available for addressing their health care needs. Indigenous knowledge systems form the basis of CIRM which, in addition to advancing an emancipatory agenda, requires that relationships, responsibility, respect, reciprocity and accountability be included as vital components of any study involving Native people. Since these core concepts of CIRM also parallel the models of health, illness, and traditional therapies according to Indigenous ways of healing, CIRM was, to reiterate, the most valid approach for a study of this kind conducted with Alutiiq participants. Methods included collecting data via guided conversations with those who were recognized as Alutiiq Elders or Culture Bearers during one-on-one and small focus group encounters. Transcripts were reviewed with each of the individual participants and their input regarding the themes that emerged was elicited. The information will be utilized for the Kodiak community as deemed appropriate by the contributors of the study. The theoretical framework of this investigation emanated from the concept that illness is the result of an imbalance between the human, natural, or spiritual realm, and must be identified in order for a person to heal holistically. Given that these imbalances affect relationships and acknowledging that we are all connected in the web of life, facilitating the healing of an individual causes healing for families and communities, ultimately impacting global wellness.

Strangely, there has been very little attention paid to Indian methodologies for gathering data, and, consequently, the movement is primarily an ad hoc, personal preference way of gathering new ideas and attempting to weld them to existing bodies of knowledge.

(Deloria, 1999, as quoted in Kovach, 2009, p. 23)

Chapter 3 will present the methodology utilized for this research study and describes the strategies utilized. My involvement with the medical profession spans 44 years in the capacity of a registered nurse. This necessitated working within a Western scientific research method, which focuses on attempting to discover an objective unequivocal understanding or answer to the question being investigated. Health care studies are predominantly conducted using quantitative measures since data is easily counted and numerical statistics are a mechanism for validating information from this inquiry perspective. Qualitative methods are frequently neglected research modalities in medicine due to the fact that these approaches attempt to consider subjective information which is not only more difficult to measure, but is typically viewed as being incapable of absolute verification by the academic scientific researcher. An additional key characteristic of the quantitative academic scientific method is the reluctance to investigate more than one aspect of an issue at a time in an attempt to prevent confusion regarding influencing factors that might have a bearing on the outcome. Lastly, academic science endeavors to remove the researcher from any influential participation in the study process, advancing a strictly observational role, in the mistaken belief that this will eliminate bias from the findings. Although I have long been required to work within the parameters of the scientific method, I have found this methodology to be contrary to my own epistemology and ontology which views the universe holistically and recognizes that relationships are an integral feature of the way our world operates. This paper will describe the use of Critical Indigenous Research Methods (CIRM) for

this qualitative study and why it was chosen as the most valuable and respectful approach to investigate the Indigenous knowledge that embodies holistic health within the Alutiiq community (Brayboy et al., 2012). This approach has also been described as an “Indigenist” approach to allow that researchers who utilize these methodologies are not necessarily of a Native background (Wilson, 2008).

While some of these traditional practices will likely never again be performed, nor are wished to return, others such as healing practices and weather forecasting may still be relearned, passed on and proved useful in our survival within the Kodiak Archipelago. After just a few generations, the Alutiiq are painfully aware of the rapid transition the culture has undergone. ... The world our Elders grew up in was significantly more mysterious, with life interconnected and intricately balanced in a way that western cultural shifts have diminished. (Drabek, 2012, p. 135)

In order for the firmly established contemporary Western medical system to effectively meet the health care needs of Indigenous Alutiiq people of Kodiak Island, there must be a better understanding of Alaska Native concepts of well-being and illness. An appreciation of what constitutes health and what defines illness according to the Alutiiq worldview is crucial. Additionally, what traditional health care practices do Indigenous people of Kodiak believe should be available to them in their pursuit of holistic health? More fundamentally, the opportunity to celebrate the ongoing cultural revitalization efforts that are leading to improved health outcomes should be recognized, transmitted and promoted. In the above quote from her doctoral dissertation, Dr. Drabek, a respected Alutiiq Culture Bearer recognizes the usefulness of relearning traditional healing practices as one means for restoring the balance that was disrupted due to Western influences (Drabek, 2012). Strategies typical of a descriptive qualitative study

were employed. However, it is essential to acknowledge that CIRM more accurately distinguishes the specific methodology utilized for obtaining input from Alutiiq community members regarding their characterization of what it means to be holistically healthy. Moreover, this research study substantiated their beliefs about the subjective messages that influence individual and community health and the importance of balance when considering these mind/body/spirit connections. This research also supported the importance and effectiveness of traditional cultural healing practices, many already in place, and others that could be reinvigorated and more strategically advanced that would contribute to holistic health for Alutiiq people living on Kodiak Island.

### **3.2 Theoretical Paradigm/Framework**

Many Indigenous epistemologies place an emphasis on holistic integration of knowledge as opposed to categorization and classification. The complex connections between humans and the environment, animals and plants, art, science, and spirituality figure strongly in Indigenous understandings of the world. (Counciller, 2010, p. 77)

Descriptive methodologies “may or may not use a theoretical framework to structure the study design” (Gray, Grove, & Sutherland, 2017). However, the theoretical framework for this inquiry is centered on the concept that illness is the result of an imbalance between the human, natural, or spiritual realm, and that it must be identified in order for a person to heal holistically. It is based on a postcolonial Indigenous research paradigm which is a “framework of belief systems that emanate from the lived experiences, values, and history of those belittled and marginalized by Euro-Western research paradigms” (Chilisa, 2020, p. 23) in order to recognize that local Alutiiq knowledge about health and illness has been silenced or suppressed in favor of allopathic medical interventions that often do not even acknowledge the subjective influences

that can dramatically impact health. Since these imbalances affect relationships, helping an individual become healthy causes healing for families and communities and can also work toward restoring global wellness. As Dr. Counciller describes in the above quotation, and Dr. Drabek notes in the quotation cited previously, Alutiiq Indigenous ontology recognizes and respects the connections human beings have with the “living and the nonliving, with land, with the earth, with animals, and with other beings” (Chilisa, 2020, pp. 23-24). Drabek (2012) points out, “The world our Elders grew up in was significantly more mysterious, with life interconnected and intricately balanced in a way that western cultural shifts have diminished” (p. 135). This mysterious, intricately interconnected, and balanced world described by Drabek is depicted and portrayed by Kawagley’s Tetrahedral Model (2006) and was often discussed in many courses throughout the UAF Indigenous Studies PhD Program.

### **3.3 Research Perspective**

Perhaps because of the interconnectivity of Indigenous knowledge systems, there is an awareness of humans’ place in larger systems. This interconnectivity results in an emphasis on rules and responsibilities related to knowledge. (Counciller, 2010, p. 78)

I was tasked with describing the nature of the phenomena or “social reality” that I wanted to investigate when I took *Field Study Research Methods* with Professor Sean Topkok during the 2016 summer semester. As I reviewed a list of ontological perspectives in an assigned reading, an article allowed me to identify that my intended research focus was “connectedness” (Mason, 2002). The courses that I have taken in the Indigenous Studies PhD Program have allowed me to understand that a fundamental difference between the Western world that most of us live in today, compared to the reality experienced by most Indigenous peoples, is their concept of the role of humans in this world. While there were many readings and class discussions throughout

each course of the UAF Indigenous Studies PhD Program that allowed me to see and begin to recognize this significant difference, two specific articles that had a profound impact on my ability to comprehend it were “Alaska Native Holotropic Mind and Science” by Angayuqaq Oscar Kawagley and “Holographic Epistemology: Native Common Sense” by Manulani Aluli Meyer. Although I was brought up in an Anglo-Western culture and was rigorously educated in the scientific method as a nurse, I have always felt that there was something missing from the experience of reality in those teachings and that worldview. I cannot fully express the feelings of relief and gratitude that I have felt as I have been immersed in the Indigenous beliefs that recognize that the missing piece is the concept that Western cultures in general, and the scientific method specifically, ignore the subjective messages from the natural and spiritual realms. In Chapter 2, I discussed the idea that those of us who come from a Western background did in fact have a cultural historical beginning that similarly embraced the connections between humans and the subjective realms, but those beliefs were systematically obscured over time. This investigation is directed at understanding how those lost connections could be restored for the Alutiiq community in Kodiak because I see that as a mechanism for healing people, both physically and emotionally, as well as mending the devastation that has been inflicted on Mother Earth.

It is my belief that the stories or accounts of Indigenous persons who describe their connections with the natural and spiritual realms would be a representation of this knowledge. Lincoln and Guba (2001) illustrated that there is a role of spirituality in human inquiry (p. 169), so collecting Indigenous ideas and beliefs about this topic would exemplify authentic research. Chilisa (2020) points out that Indigenous methodologies are directed by Indigenous worldviews and emphasizes that according to this ontology and axiology, “people are spiritual beings with

multiple relationships that should be nurtured throughout the research process” (p. 23). While I have read historical records and of course articles that describe these connections, my research was focused on the accounts of Elders and Culture Bearers here in Kodiak since that is where I live and with whom I have established longstanding ongoing relationships. I was specifically interested in their views concerning how people who do not perceive or understand the connections between man, nature and spirit can cultivate those relationships. Consequently, the broad substantive area that the research is concerned with is that question of whether or not human beings who have been brought up with a Western epistemology *can* be motivated to seek out their connections with the natural and spiritual realms, and if so, what activities would promote those connections. Additionally, would the re-establishment of those connections by the humans in this world who currently do not perceive them be a way for those individuals to heal personally, as well as provide a direction for restoring the damage to the earth, since this current detachment has also been the root cause of the destruction of this planet? From an ontological or epistemological perspective, I have mentioned that I am more aligned with the Indigenous worldview that recognizes and celebrates communication between the human, natural, and spiritual realms. Therefore, this research is a combination of a “comparative puzzle” and a “causal/predictive puzzle” as described in the article by Mason (p. 18). I collected data from individuals that explained “differences and similarities” (Mason, 2002, p. 18), albeit mostly differences, between Indigenous and Western epistemologies regarding health practices. I also collected outlooks and ideas about the “influence” (Mason, 2002, p. 18) that providing teaching or instruction to people, both Indigenous and non-Indigenous, of Western cultural upbringing would have on their ability to communicate with nature and spirit, thus having an impact on health.

### 3.4 Methodology Selection

Why are you reading this article in a Global Archaeology text? There is a reason why you found this piece of my mind. Find out what it is and go into it with your passion for science, truth, culture and the needs of our time. *Be of service to that*. Respond with your life to the questions of your heart. Don't make it only about cognitive accumulation of information. (Meyer, 2011, p. 9)

It is a widely understood notion that academia often seeks knowledge for the sake of knowledge, or more pragmatically as a “checkmark” on the way to an advanced educational degree. A decolonizing research process allows Indigenous studies to “name and know from their frame of reference” in order to achieve the “restoration and development of cultural practices, thinking patterns, beliefs, and values that were suppressed but are still relevant and necessary” (Chilisa, 2020, p. 11). As an Indigenous Studies student in the fall 2014 semester of *Documenting Indigenous Knowledge(s)*, it was a privilege to hear *Research Is Ceremony* author, Shawn Wilson, as a guest speaker. Wilson outlined the characteristics of an “Indigenist” researcher and described the attributes of this research approach, which he felt to be vital for conducting a study that involved Indigenous participants. He stated that you did not have to be of a Native background to do Indigenous research, but he did challenge us to be able to define our own epistemology. He alleged that Indigenous people are always being asked to explain their epistemology, but he wondered how many of those asking him that question could actually explain their own. Since research is fundamentally an exercise devoted to the discovery of new knowledge (Walter & Anderson, 2016), Wilson (personal communication, October 7, 2014) was wisely advising us to evaluate our ideological starting point as this would innately direct the course of that personal investigation. Chilisa (2020) clearly emphasizes the role of the researcher

by pointing out, “In qualitative research, the researcher is the measurement tool, and the trustworthiness of the human instrument has to be established” (p. 215). Poignantly I have always inherently challenged my initial way of knowing, or more correctly I have internally disputed the epistemologies of Western cultures and the avenues they utilize to acquire an understanding of the universe. I have distinct childhood memories of lying in bed at night contemplating the science lessons from that day with a sense of frustration and confused indignation. I remember a specific repetitive thought that I believed wholeheartedly in my childhood—“someday the scientists will find out that they have been wrong all along about how the world works.” I could not tell you then where that thought came from, but receiving that recurring message puzzled me at the time. However, I can now confidently declare that my individual epistemology is very closely aligned with Indigenous epistemology and that personal understanding originated from the spiritual realm. In *Original Thinking: A Radical ReVisioning of Time, Humanity, and Nature*, Glenn Aparicio Parry provides a coherent explanation for my childhood self:

Thought is vibration. Thoughts of the past may dissipate, but they never quite disappear. They continue to matter in the present. The web of thought is vast and mysterious, and unfolds at its own pace. ...we once believed our thinking emerged directly from nature. People were understood to be vessels—conduits for thought—not the originators of our thoughts. To think was to receive inspiration from nature. Thoughts emerged from Great Spirit, or the womb of creation—moved through us, and then returned to the Great Mystery. *Thought and Spirit were the same thing.* (Parry, 2015, pp. xxi-xxii)

The idea of a holotropic universe comprised of human, natural and spiritual realms that allows messages to be obtained from any or all of these sources in an ongoing and continuous

manner, is completely in-line with what I will now call a personally intuitive knowing (Drabek, 2012; Ermine, 1995; John, 2009; Kawagley, 2006; Meyer, 2011). For this reason, I have had an intense desire to maintain strong connections to the natural and spiritual realms and refute a Western ontology that does not acknowledge the relationships humans have to entities that communicate from those co-existing domains. CIRM reflects those concepts and honors the Indigenous epistemology of the participants who were involved, as well as the researcher, who cannot be separated from the knowledge generated by this study. The academic scientific method is a strictly objective, rigidly controlled, quantifiable, and reproducible discipline for data collection that doggedly attempts to exclude the researcher's influence from the results in order to ensure experiment replication, with identical results. Contrasting this perspective, Indigenous epistemology considers the study of science to be inclusive of knowledge from multiple origins that is not only subjective, but inherently and appropriately affected by the observers who explore it. Since the CIRM approach was proper and acceptable, the next section will discuss the history I have with the Alutiiq community in Kodiak and the connections that were established prior to beginning this research. These relationships had, and continue to have, a positive effect on the research and was instrumental in ensuring that the outcome of the research would follow the quoted advice above from Meyer. It would motivate me in the right direction and inspire the ultimate outcome as I kept this wisdom firmly in sight at all times during the process. I was honored to "*Be of service to that.*" (Meyer, 2011, p. 9).

### **3.5 Alutiiq Community Connections and Relationships**

Rather it is addressed more specifically to those researchers who work with, alongside and for communities who have chosen to identify themselves as indigenous. A growing number of these researchers define themselves as indigenous, although their training has been primarily within the Western academy and specific disciplinary methodologies. (Smith, 2012)

Understanding the concept that research in Indigenous communities is often viewed as “dirty” from the history of using it to further oppress the “objects” of study (Brayboy et al., 2012) initially caused me to not only be concerned about my role as a researcher in this process, but was also a source of trepidation that I may have unknowingly committed the same offenses in a previous research investigation (Dixon, 1999) when I was employed with Kodiak Area Native Association (KANA). After reviewing the key ideas of Critical Indigenous Research Methodologies (CIRM) presented in the article by Brayboy et al. (2012), I was able to reflect on what was correct about the approach done in the past and what ways the methodology should be improved for this study. I made a determined effort to “honor and amplify indigenous voices” (Brayboy et al., 2012) but felt so much more prepared to ensure that was actually the result due to a focused intention to more consciously consider relationships, responsibility, respect, reciprocity, and accountability (Brayboy et al., 2012) prior to beginning and throughout the whole process. Indeed, these concepts are good strategies for actually maintaining balance in life, which consequently impacts health and well-being. The intended focus of the study in 1999 (under my former name of Dixon) was to illuminate the beneficial impact that cultural revitalization efforts were having on health in the Kodiak community. A responsibility that came out of my position with KANA was to develop an anger management program for perpetrators of

domestic violence. I understood the connection between anger and the origin of this expressed emotion to be the underlying grief that was connected to intergenerational post-traumatic stress disorder (PTSD) as a result of colonization (Dixon, 1999; Napoleon, 1996). Even then, I did realize that the voices that should be represented were those of the Alutiiq service providers who worked in their community villages. Consequently, the title of the thesis that was submitted to UAA, College of Health, Education, and Social Welfare in partial fulfillment of the requirements for the degree of Master of Science, Nursing Science was *An Exploration of Anger Expression among Alutiiq Alaskan Natives as Perceived by Alutiiq Health Providers* (Dixon, 1999). The “Health Providers” that I acknowledged included Community Health Aides (CHAs), Rural Mental Health Providers (RMHPs), and Community Health Representatives (CHRs), who lived and worked in the local town of Kodiak as well as in the villages of Akhiok, Karluk, Larsen Bay, Old Harbor, Ouzinkie, and Port Lions as members of their Village Response Teams (VRTs) at that time (Dixon, 1999). Looking back, I recognize that the title of this thesis appears to come from a perspective that calls attention to a problem within a Native community rather than representing the true point of reference for this study. The original focus was intended to document and highlight that improved health outcomes were becoming evident as a direct result of implementing traditional healing practices over the existing Western interventions that were then in place (Dixon, 1999). I certainly wish it was possible to rename that thesis so that it more genuinely reflected the objective of that study. What I can do now is ensure that this research represents the authentic aim of celebrating traditional holistic healing practices that were described by participants during guided interviews.

Previous work and experience with the Rural Human Services (RHS) program taught me to appreciate Alaska Native worldviews and respect their understanding of appropriate solutions

to rural community needs and service delivery (Brayboy et al., 2012; Johnson, 2013). I was relieved to know that I had put in time to have firm relationships with research participants so that trust was already established (Brayboy et al., 2012; Johnson, 2013). However, now that I comprehend the importance of the relationship process, the deep knowledge that an understanding of this can contain, and its link to the responsibilities that are generated as a result of research (Brayboy et al., 2012), I knew that the follow-up from work done in 1999 was not complete. It may have enriched the work already in place by the RHS program, but there were opportunities to expand on those services in the community as I became more aware that my own personal relationship in the research process was a valid one (Johnson, 2013) and any additional benefits to improve services would allow reciprocity to have its full and intended effect (Brayboy et al., 2012). The gift of the information received in 1999 was not allotted complete gratitude due to incomplete follow up (Brayboy et al., 2012). This time I kept that goal firmly in mind during the whole process and kept track of feedback shared by Alutiiq participants regarding how they felt these results should be utilized to provide a valuable service to the Kodiak Alutiiq community (Brayboy et al., 2012; Johnson, 2013).

My work in the medical field as a nurse is a factor that resonates with me, including the idea that objectivity in research results in blocking the ability to see concepts in their entirety (Wilson, 2008) or to understand how the components work together because of the relationships of the pieces to the whole (Brayboy et al., 2012; Wilson, 2008). The patient is not the “appendix that is ruptured” or the “depression” experienced as a result of the loss of a loved one. Illness, or imbalanced health includes the entire family and their relationships as they deal with those issues and their responses to them. Western research has traditionally tried to dissect pieces of a person’s being to study it without bias (Wilson, 2008) but research done through the lens of

CIRM not only allows the impact of the relationships on what is being studied, it respects it and accepts the effects it will have on its future (Brayboy et al., 2012; Johnson, 2013; Wilson, 2008). I was comfortable participating in this type of research since I entered into it with this knowledge and considered it throughout the research process, as well as when the research was concluded, confirming this concept: “Our ideas matter: how and if we pursue them and what becomes of those ideas after research ends – these things have lasting repercussions for those with whom we are in relationship” (Brayboy et al, 2012, p. 438). I was acutely aware of a previous researcher who left hurtful impressions on Alutiiq members of this community in the mid-1990s through the late-2000s via a series of articles that misrepresented the decolonization efforts at that time as documented by Drabek in 2012 (pp. 35-37). This damaging encounter illustrated that the “trustworthiness of the human instrument” (Chilisa, 2020, p. 215) is vital and served as a warning that ongoing community involvement and guidance from Alutiiq Elders and other Culture Bearers was essential at every step of this research process.

In the section that follows, I will describe my research methods including assurances of utilizing practices that will respect Indigenous knowledge by using acknowledged culturally respectful approaches.

### **3.6 Description of Method**

Indigenous peoples often talk of a “living knowledge”, one that is primarily shared orally through daily interaction rather than through a written record. This is true in cultures with oral, non-written language that requires interpersonal interaction for learning to take place. (Counciller, 2010, p. 75)

A qualitative descriptive research method is one that welcomes subjectivity (thoughts and opinions), multiple perspectives on truth, and attempts to understand the issue examined in a

comprehensive manner without “pre-existing theoretical and philosophical commitments” (Sandelowski, 2000, p. 337), so from a Western academic perspective, this was the method used for this study. It does align with my own beliefs about the importance of relationships and connections, and it is utilized when the goal of research is a means for discovering knowledge that can be used to provide solutions for challenges or improve the quality of life. As previously stated, I was able to identify that my focus included gaining a better understanding of how to receive subjective messages from the natural and spiritual realms and how these communications could ultimately improve well-being. While the academic scientific method of inquiry typically mandates that evidence collected be measurable, this type of information has traditionally been difficult to quantify or validate from that perspective. Fortunately, the article by Lincoln and Guba (2001) described a growing appreciation of subjective knowledge and recognized the value of personal viewpoints and emotional perceptions that could be ascertained by qualitative research methods. I fully recognize that Indigenous stories describing connections with the natural and spiritual realms would represent authentic data collection (John, 2009; Topkok, 2015). I was hopeful that these accounts would be elicited during the research process in order to be given back to the Kodiak community, and this indeed turned out to be the result. Additionally, as a member of the health care profession, I feel that this research contributes further evidence of the beneficial effects of spiritual intercession on healing individuals and communities from all cultural and geographic backgrounds.

Of primary importance, incorporating Critical Indigenous Research Methodologies (CIRM) into this research ensured that my approach recognizes “Indigenous knowledge systems, is anticolonial, and is distinctly focused on the needs of the communities” while also being “rooted in relationships, responsibility, respect, reciprocity, and accountability” (Brayboy et al.,

2012, p. 423). Using a CIRM methodology assures that the effects of emotions and relationships had a welcome effect on the outcomes (Brayboy et al., 2012; Wilson, 2008). It was important to establish the goals of this research before this study was initiated and to confirm that the goals were harmonious with the desires of the participants (Smith, 2012; Wilson, 2008). Therefore, the most significant point to be determined at the onset was if this study should be done at all, and if so, to ensure that the anticipated benefits would contribute to positive health outcomes in the Kodiak community after the results were generated (Brayboy et al., 2012; Johnson, 2013; Smith, 2012; Wilson, 2008). I was initially reassured by Elders and other Culture Bearers that this was a worthwhile topic of study for the Alutiiq community in Kodiak, and indeed, each participant supported that this effort had value as the research progressed. CIRM methodology requires that trust is established with participants (Brayboy et al., 2012; Johnson, 2013), and although I did not have confirmed, long-term connections with potential participants, I continued to rely on Elders and recognized Alutiiq community leaders to guide me through the process. Two members of my graduate advisory committee are recognized Culture Bearers: *Isiik* April G. L. Counciller, PhD, Executive Director of the Alutiiq Museum and former Assistant Professor of Alaska Native Studies at Kodiak College, and Alisha *Agisaq* Drabek, PhD, former Executive Vice President of Afognak Native Corporation and former Executive Director of the Alutiiq Museum. I discussed my research plans with them, my committee chair Theresa *Arevgaq* John, PhD, and also with my other committee members, Michael Koskey, PhD, and Sean *Asiqluq* Topkok, PhD, and they provided input during this process as well. Additionally, I was able to conduct a mini-research project during the course *Field Study Research Methods* as a trial run of the participant interviews prior to beginning. For this mini-research project, at the suggestion of the course faculty Professor Sean Topkok, I was able to interview Alisha *Agisaq* Drabek, an Alutiiq Culture

Bearer who was ineligible to be a research participant herself given that she served on my graduate advisory committee. This was an opportunity to get feedback on the initial questions proposed for the interview process and served to determine that they would elicit responses that would address this research investigation. This allowed to me to assess whether my main research questions had merit, namely if members of the Alutiiq community do feel that their traditional healing practices were derived from a different epistemology than those of the Western or scientific worldviews, and whether they might welcome having their cultural customs and practices available as health care treatment options.

Advice from courses throughout the Indigenous Studies PhD Program offered some pertinent guidance for initiating a discussion when seeking input from Indigenous Elders in order to change the ambiance of an “interview” and create a more respectful milieu during the research process. Advisors suggested that beginning queries with a gentle invitation such as asking “I’m wondering about... (then describe the question or topic)” is a more welcoming opening for them to share their knowledge as opposed to more direct “who, what, why or how” questions. This sets the stage for the dialog to be more conversational and allows the Elder to be in their acknowledged role of counselor to the researcher rather than seeming like a respondent to an interrogation. Therefore, these inquiries were designed as a way to “guide the conversation” rather than structured as “interview questions.” This is also a more natural way to allow the respondent to feel more relaxed and confident which facilitates their willingness to share information (M. Koskey, personal communication, October 19, 2021).

I came to this study being “comfortable with not knowing” (Ormand et al., 2006) because I was convinced that my existing relationships with the individual participants would be a sustainable way of ensuring that I remained aware of, and invested in, meeting the

responsibilities generated as a result of this research (Brayboy et al., 2012). I believe that my own personal relationship in the research process was authentic, and my role as a nursing faculty and prior nurse at the local hospital in this community is common knowledge (Johnson, 2013). I definitely did not want to come across as any sort of expert in the field of Indigenous wellness (Patel, 2014), but if this research was enhanced because of my existing community role, and if the results provide the intended effect and benefit of improving well-being for Kodiak Alutiiq people, then the CIRM principle of reciprocity will hopefully be fulfilled (Brayboy et al., 2012). Using a CIRM approach acknowledges that my role as a researcher and community member has an impact on this study, on how the results are shared with the participants, and how these relationships change as a result of the research (Brayboy et al., 2012; Johnson, 2013; Wilson, 2008). To quote Cheryl Smith (2013): “We are often not only researchers, we are also relations, members of communities, advocates, and sometimes guidance counselors, and facilitators of change (p. 95).” This reinforces that it is the contribution of the relationships that not only impact the research process, but the product of the study (Smith, 2013). It is anticipated that the results of this study, enhanced by using a CIRM framework, will be a mechanism that is utilized to promote an emancipatory agenda so that self-determination and the inherent sovereignty of Indigenous people is recognized (Brayboy et al., 2012).

Although I do not have an Indigenous heritage myself, I have full intention of approaching this study from an “Indigenous/Indigenist” perspective as defined by Shawn Wilson (2008). Wilson considers research itself a ceremony, and he sums up the whole Indigenous research paradigm with the word “relationality” consisting of the ideas of ontology, epistemology, axiology, and methodology (2008, p. 70). Linda Smith (2012) presents some apprehensions about non-Indigenous researchers being culturally safe due to a probability that

their studies would be generated from a Western perspective rather than an Indigenous worldview. Wilson (2008) reinforces Smith's (2012) argument by pointing out that traditional scientific research methods try to exclude subjective data, and also attempt to look at specific individual pieces of data in their studies which is significantly opposed to an Indigenous research paradigm. The following chart highlights Linda Smith's (2012) concerns because it illustrates the differences between using CIRM versus a traditional Western research approach and was created as a PowerPoint slide for a presentation in the Fall 2014 *Documenting Indigenous Knowledge* course to facilitate discussion on the article "Reclaiming Scholarship: Critical Indigenous Research Methodologies" by Brayboy, Gough, Leonard, Roehl, & Solyom, in 2012.

Comparing CIRM to Western research methods


	<ul style="list-style-type: none"> <li>• Primary motivation addresses needs of Indigenous communities &amp; advancing sovereignty</li> <li>• Knowledge gained should be shared with "all of creation"</li> <li>• Knowledge is relational which has important research implications</li> <li>• Defines "social" beyond human realm &amp; includes environmental, plant, animal, &amp; spiritual realms</li> <li>• Certain knowledge is sacred to specific communities &amp; thus not meant to be shared</li> </ul>	<ul style="list-style-type: none"> <li>• Motivation is knowledge for the sake of knowledge only</li> <li>• Knowledge is an individual entity &amp; can be "owned"</li> <li>• Claim objective neutral hypotheses reveal an "ultimate truth"</li> <li>• Finite scientific classifications that excludes those focusing on processes &amp; relationships</li> <li>• Assumes the power to define human, animate, organic, living, natural, rational</li> </ul>
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Figure 3: *Comparing CIRM to Western Research Methods*

While Smith's trepidations are certainly valid, I, however, believed that it would be an easy task to honor Indigenous epistemologies, ontologies, and axiologies, since they match my own personal ideologies. Another specific mechanism that Linda Smith (2012) described as an acceptable method of ensuring that studies performed by non-Indigenous researchers are developed from an Indigenous perspective was to include the input of Elders, and this was certainly maintained throughout this study. I utilized established guidelines for interviewing and accessing Indigenous knowledge from resources such as the "Alaska Federation of Native Guidelines for Research" (1993), the "Assembly of Alaska Native Educators: Guidelines for Respecting Cultural Knowledge" (2000), and the "Commission on Human Rights, United Nations: Principles and Guidelines for the Protection of the Heritage of indigenous Peoples" (1995). One last reflection I would like to include about the suitability of my involvement in this Kodiak Alutiiq Indigenous research comes from a book excerpt by Robin Wall Kimmerer titled *Braiding Sweetgrass: Indigenous Wisdom, Scientific Knowledge, and the Teachings of Plants*. Kimmerer retells the "Skywoman Falling" creation story of her Native ancestors and ponders the fact that although she is Potawatomi, her lineage includes her European relatives as well when she writes this contemplation:

It is good to remember that the original woman was herself an immigrant. She fell a long way from her home in the Skyworld, leaving behind all who knew her and who held her dear. She could never go back. Since 1492, most here are immigrants as well, perhaps arriving on Ellis Island without even knowing Turtle Island rested beneath their feet. Some of my ancestors were the newer kind of immigrants too: a French fur trader, an Irish carpenter, a Welsh farmer. And here we all are, on Turtle Island, trying to make a home. Their stories, of arrivals with empty pockets and nothing but hope, resonate with

Skywoman's. She came here with nothing but a handful of seeds and the slimmest of instructions to "use your gifts and dreams for good," the same instructions we all carry. She accepted the gifts from other beings with open hands and used them honorably. She shared the gifts she brought from Skyworld as she set herself about the business of flourishing, of making a home. (Kimmerer, 2013, p. 8)

I have made a home in Kodiak; I have received many gifts from this land and the people of this place for which I am eternally grateful. It was my intention to return a small portion of what I have received from living and flourishing here in my chosen residence in the form of this investigation and its outcomes.

Finally, I was not interested in a research study that presented data from a "damage-centered perspective," but handled it from a "desire-based" framework (Tuck, 2009; Walters, 2009). While spiritual injuries from historical traumas were undoubtedly discovered, the revitalization of Indigenous healing practices were presented as an action that can "reframe the history" so that regeneration can occur (Owlijoot, 2008). One product of this research is a contribution to reclamation that acknowledges Alutiiq "survivance" by augmenting renewal efforts that are already actively in progress in the Kodiak community (Owlijoot, 2008; Smith, 2013). This research was designed to "honor and amplify Indigenous voices" (Brayboy et al., 2012) since of course, they are the experts in identifying and creating solutions to any inherent problems related to meeting their health care and other needs (Brayboy et al., 2012; Johnson, 2013).

This research was approved by the University of Alaska Fairbanks Institutional Review Board (UAF IRB) and follows their guidelines for "Applied Research Ethics" that includes the following directly quoted and obtained from their website:

Protecting human participants in research involves, first and foremost, adherence to the basic ethical principles for the conduct of research. Everyone engaged in human subjects research is expected to read and understand the Belmont Report (click on the Professional Standards) and apply these principles to every aspect of their work. The three core principles identified in the Belmont Report form the basis for the federal regulations protecting research participants and provides the framework for IRB protocol review.

- Respect for persons (autonomy)
- Beneficence
- Justice

(UAF IRB, 2014)

No ethical concerns were identified, and I had the support and guidance of the University of Alaska Fairbanks Indigenous Studies PhD Program and my graduate advisory committee to navigate this process as well. I am especially grateful to have two esteemed Alutiiq Culture Bearers, Alisha *Agisaq* Drabek and *Isiik* April G. L. Counciller, on my committee, and I was diligent in seeking their input regarding any questions or concerns I had about the proper way to establish and maintain contact with research participants.

This investigation is really just a part of a story—of the ongoing cultural revitalization efforts here in Kodiak. This part being a qualitative CIRM study that determined that local Alutiiq participants felt that their health concerns, currently addressed strictly through the Western medical system, could be improved. The specific methods included this sequence of stages; with a fuller description of each stage to follow:

- Ensuring that I, as the researcher, was “familiar with the setting and phenomenon under study” (Chilisa, 2020, p. 215) as detailed previously in this and previous chapters

- Maintaining an ongoing CIRM approach by including Alutiiq Elders and/or Culture Bearers in every step of the process
- Creating a mechanism for collecting data through the use of previously trialed questions that were minimally modified to “guide the conversation” of participants,
- Identifying participants with oversight and approval of Alutiiq Culture Bearers Alisha Drabek and April Counciller as noted above,
- Gathering data via “minimally to moderately structured or open-ended individual or focus group” (Sandelowski, 2000, p. 338) guided conversations in a comfortable setting of the participants’ choosing,
- Video or audio recordings were obtained based on the preference of the participant; recordings were shared or kept anonymous as directed by each participant,
- Guided conversations were transcribed,
- Themes were identified,
- Themes were reviewed with each participant to verify agreement with those concepts identified in their own individual transcript and will be presented.

These specific methods will now be described more comprehensively including how CIRM was considered during each step in this process.

### ***3.6.1 Familiarity with research topic.***

Substantial detail was established in Chapter 1 regarding my personal and professional relationship to this land where I live and work, and to the people who have the original connection to this place. My interest and dedication to improving health care outcomes for this shared local Kodiak Alutiiq community has also been discussed in depth related to my longstanding residence and time in service in this area as a nurse and educator—I feel accepted

and belong here. It is important to reiterate that my intention in accepting the role of researcher was to document those vital stories, thoughts, and desires communicated by Alutiiq cultural representatives in the hope that these results could impact the health and well-being of others who live here. I also previously mentioned that an “Indigenist approach” (Wilson, 2008) was not only intentional by design, but was natural for me as a researcher. I can point to an inherent foundational alignment I share with Indigenous epistemology and must also credit an expanding knowledge base gained from UAF IS courses, mentoring by UAF IS faculty, and guidance from Alutiiq colleagues and friends as I have lived and worked in my Kodiak home for the greater portion of my adulthood. Chilisa (2020) also credits the work by Wilson (2008) when she mentions that Indigenist researchers must consider the “relational ontology that emphasizes relations with people, with the environment/land, with the cosmos, and with ideas” since “each of these relationships has implications for how research is conducted (p. 102). I feel confident that these relationships were carefully respected broadly and specifically throughout the entire research process. This study also met all obligations mandated and outlined through the approved UAF IRB and there were no issues or concerns identified or reported at any point.

### ***3.6.2 Maintaining an ongoing CIRM approach.***

Having two local acknowledged Alutiiq Culture Bearers on my thesis committee, Alisha Drabek, Ph.D. and April Counciller, Ph.D., ensured that regular discussions and conferences were an established ongoing means for verifying the most appropriate approaches and methods and preventing or mitigating any potential conflicts during this research. In addition, I was also in continual communication with my Committee Chair, Dr. Theresa John, and Committee Member, Dr. Sean Topkok, who were able to guide this process from an Indigenous epistemology, ontology, and axiology since they also share an Alaska Native heritage.

Furthermore, since each of the participants were identified as either an Alutiiq Elder or Culture Bearer, they were uniquely able to provide ongoing input by offering comments that this research felt culturally important to them in relation to the Kodiak community and also mentioning others who would be interested in sharing information with me. I often heard remarks that reflected appreciation for gathering these stories and insights and frequent statements indicated this topic would illicit important data that would be a beneficial contribution to the revitalization of Alutiiq cultural knowledge.

A Consent Form was submitted, revised per UAF IRB recommendations, and then approved for use in this study. It is available to view as Appendix A. This form carefully considered a CIRM approach in order to gather this data by including these statements and/or acknowledgements in this document (Brayboy, et al., 2012; Chilisa, 2020):

- Recognition of participant status as an Elder or Culture Bearer
- Respect for their wisdom and knowledge as an important contribution
- Inviting questions prior to beginning to ensure transparency
- Disclosing that there were no anticipated risks to participation but allowing that conversations or sharing stories can potentially generate uncomfortable feelings or memories
- Providing estimations of time commitment but indicating their control of the time allotment
- Maintaining participant control over recording of information shared, who may have it, and assuring confidentiality per their individual preferences: personal data, audio and/or video-taping recording, written notes; including that the Alutiiq Museum was

interested in storing the recordings and making them available if they granted permission

- Indicating that participation could be withdrawn at any time; sharing preferences could be adjusted during the process
- Expressing the anticipated benefits from gathering this knowledge
- Supplying my background and intentions regarding this research; including indicating that as a professional nurse I am obligated to report information shared about abuse of children, Elders, or vulnerable adults if revealed
- Reassuring that participants could contact me at any time and providing several mechanisms for reaching me
- Listing the contact information for my graduate advisor Theresa John, Ph.D. and the UAF IRB and explaining that this entity has approved this research but is also charged with protecting their rights
- Offering to read the consent aloud or provide a translator if requested

The consents and permissions were verified at several points during this process: initially prior to beginning the guided conversation and in order to determine acceptance or declination of audio and/or video recording, verifying at the end of the meeting that personal decisions had not changed following the interaction, and at a second meeting when transcripts were reviewed to obtain feedback or additional input regarding the accuracy of the themes that emerged.

A total of 22 individuals agreed to participate in this study. Most met with me individually however some elected to have these conversations with other family members or friends which allowed a higher level of comfort for some or because they wanted those persons to also be included in the study. Dr. Sean Topkok had predicted this eventuality and initially

advised that I include the potential for gathering data via small focus groups when submitting the IRB with the thought that this format might be preferred. Since this did indeed become the case, at times unexpectedly, I was grateful for his foresight. Chilisa validates this inclusive method of gathering information when she states that a “postcolonial indigenous research paradigm offers other possible interview methods, which privilege relational ways of knowing that valorize respect for relations people have with one another and with the environment” (2020, p. 251). Chilisa further elaborates on the benefits of this method because it allows the participants to confer with each other, expound on the details provided by another, ask questions, and even include the researcher in the conversation that results in a “collective construction of knowledge and love and respect for the connections and relationships that participants had with one another” (2020, p. 251).

Although all participants agreed to share their ideas and thoughts about this topic, some elected to protect their personal information, and this was strictly respected. Recognizing that it is important for Indigenous voices to be heard and acknowledged for the wisdom they shared, their identity is openly presented when permission was granted and it aligned with their individual wishes (Chilisa, 2020). The Alutiiq Heritage Foundation Board of Directors formally accepted this archive to the Alutiiq Museum’s permanent collection and the acknowledgment letter is presented as Appendix B. When participants requested to remain anonymous to the public, their identity is not included in the findings of this paper since the Alutiiq Museum has also requested that a final copy of this thesis be submitted upon completion to be included with the archived recordings. This detail was also imparted to all participants. Participants who agreed to have their recordings shared with the Alutiiq Museum were again asked to confirm their agreement when transcripts were reviewed and prior to delivering them to that organization. In

the one instance where a recording included one participant who was willing to share with the Museum and one who was not in favor, there was mutual agreement that this required that the recording and transcript would therefore not be shared.

### ***3.6.3 Guiding the conversation in contrast to interviewing participants.***

As previously mentioned, preparation for this step was completed during the course Field Study Research Methods. I was able to test the questions that would guide a conversation intended to collect the participant responses to ensure the design was respectful of Indigenous communication conventions (Chilisa, 2020). Alisha Drabek, Ph.D., an Alutiiq Culture Bearer who personally knew the prospective participants graciously responded to the “interview guide” in order to determine whether they were structured in a culturally appropriate manner prior to using this format (Chilisa, 2020, p. 250). Although this design followed the established academic method of “the semi-structured interview” because it “ensures that the researcher collects similar types of data from all informants” and provides a “focus on the issue to be covered,” adjustments were made as suggested by Chilisa to employ “a postcolonial indigenous research paradigm” (Chilisa, 2020, p. 250-251). Feedback from Dr. Drabek indicated that the questions conceived to guide the conversation were indeed appropriate for Alutiiq participants and designed in a way that data regarding the intended topic would be elicited. This “interview guide” was also submitted to Dr. Topkok for feedback as the faculty for the Field Study Research Methods course. Dr. Topkok became a member of the thesis committee at this time and also approved the structure. Reassurance was always provided that a strict interview format was not required or expected. Participants were reminded frequently that they were not obligated to share any information or discuss any topics that made them uncomfortable. This conversational interview guide follows here and as Appendix C. These questions remained essentially the same as the trial

questions since they captured the intent of the inquiry. In addition, the questions were only envisioned to guide the conversation which allowed the participants to lead the discussion in the direction that felt most relevant to them.

I'm interested in learning ways to help people achieve or maintain holistic (complete or total) health. Specifically, I wonder if and how spirituality affects a person's well-being and the health of their community.

- I'm interested in how you would describe what it means to be holistically healthy?
- Would you like to share your personal spiritual beliefs and practices and how they affect your life and your health?
- I wonder if there is a difference between religious and spiritual practice.
- What are some signs or symptoms that people experience to alert them to a change in their (spiritual) health?
- What spiritual activities would be beneficial for healing or restoring health when someone is unwell?
- I wonder if spiritual distress impacts physical and/or emotional health.
- How did you learn what to do to stay healthy?
- How did you learn about spirituality?
- Do you think most people pay attention to their own health and spiritual needs?
- What are the best ways to share the idea that spirituality is part of being holistically healthy?
- Is there anything you would like to share about being holistically healthy or spirituality that I have not asked you about specifically?

#### ***3.6.4 Identifying participants with oversight and approval of Alutiiq Culture Bearers.***

While I already had personal and professional relationships with potential participants, Dr. Drabek and Dr. Counciller both were instrumental in approving the final list and making recommendations for including others. Specifically, the participant base either knew me personally, or I was introduced to them by trusted family or friends who also supported the rationale for this research, confirming that this study would be of benefit to this community. All participants had several opportunities to ask questions about their role before agreeing to be involved. Often, I was asked what type of information I was seeking and I would offer examples from the guided conversation template. A few times, I complied with a request to provide a copy of the example questions before consent to participate was given. It was not uncommon for a potential participant to state concerns about their knowledge base on this topic. Some believed initially that I was attempting to gather specific traditional healing remedies and expressed a concern that they lacked knowledge about detailed therapeutic treatments. Reminding them that I knew they were experts in this area as they are acknowledged Elders and Culture Bearers relieved that initial concern. In other instances, the referrals by Dr. Drabek or Dr. Counciller were instrumental in assuring participants that they had something to contribute. At other times, individual participants encouraged a friend or family member to become involved. I regularly crossed paths with Susan Malutin, one of the participants who is an active organizer of local Kodiak Alutiiq cultural events and trainings, who frequently commented that she believed this research was important and stated that she was glad I was collecting and preserving this data. Mrs. Malutin is another Kodiak Alutiiq Culture Bearer who also provided informal guidance about participant selection. Finally, another method of identifying participants occurred at the conclusion of a few interviews when a participant mentioned another that they believed would be

a vital contributor to this study. Notably, it was often the case that I had already reached out to that individual, and in other occasions it offered another contact. In those instances, I verified the inclusions of a newly identified participant with Dr. Drabek or Dr. Counciller.

### ***3.6.5 Determining an appropriate setting for data gathering.***

Meetings occurred at the location of choice for each participant. I offered comfortable meeting rooms at Kodiak College or came to homes or places of employment if that was the participant's preference. I met one participant who lived in Anchorage virtually because he was unsure when he would be back in town, however I was able to meet him in person to deliver a copy of his transcript and audio recording at that stage of the process since he was in Kodiak conducting a mask workshop at that point. The great majority took place in Room 106 at Kodiak College through my personal intention when scheduling permitted, since that room that was designed to be welcoming from a local Indigenous perspective. This room is actually named "Katurwik" meaning "a place to gather" or "gathering place" in the Alutiiq language,<sup>3</sup> and the expressly designed wallpaper graphics include Alutiiq art and artifacts. One wall includes extensive counter space for serving food along with a microwave and coffee pot that comes in very handy for potlucks. It also has wool blankets stored in cupboards so that those in attendance can use them to sit on the floor or cushion their seat. Members of the Kodiak community are aware that the design for this room, along with several other classrooms and common areas, were constructed in this way to encourage social exchange and relationship building in the course of teaching or academic activities that occur when in they are in use.

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<sup>3</sup> There are several meeting locations named "the Katurwik room" in Kodiak, such as one in the Kodiak Best Western Inn and one at the Kodiak City Council; most community members know this room at the college when mentioned or listed as the location for an event.

On occasion, participants would ask me to invite another friend or family member to participate and they were always welcomed. As previously discussed, Dr. Sean Topkok had advised me to plan for this when I described the data collection methods for the IRB application since Alaska Native groups frequently prefer a more relaxed, conversational, and inclusive meeting arrangement. Thanking them often and responding with appreciation during the discussions when they shared insights also served to be an appropriate approach according to Chilisa (2020); however, I must confess that I discovered that corroborating suggestion after data collection. I point this out to emphasize that there was a natural dialogue and exchange between myself as the researcher, and the participants that did not need to be cultivated since our relationships were established prior to meetings. To initially set the tone for a comfortable, relaxed environment, refreshment in the form of coffee, tea, or water was offered prior to beginning. Another mechanism for demonstrating appreciation for the time and knowledge shared included gifting a book that acknowledges Indigenous wisdom. A copy of *Braiding Sweetgrass: Indigenous Wisdom, Scientific Knowledge, and the Teachings of Plants* was given at the conclusion of each interview. When a meeting included more than one related individual, a copy of *Original Thinking: A radical ReVisioning of Time, Humanity, and Nature* was also given to acknowledge the contributions of each participant. The data collection process itself turned out to be a form of therapeutic intervention since it enhanced relationships between the researcher and participants. At many points during interactions, they expressed appreciation for the topic of conversation, commented that it was an important subject to consider, and frequently invited me back again to continue the discussion. A common underlying refrain was that community members do not visit with each other as regularly as in times past and our meetings for this research served as a mechanism to initiate social interactions. I can personally attest to the

warmth of emotions shared, the companionship enjoyed, and bonds that were strengthened as a result of these connections. I am confident that anyone who accesses this archive from the Alutiiq Museum will also feel supported and encouraged by the wisdom of the Alutiiq Elders and Culture Bearers who shared their insights. These recordings became a testimony to the inherent awareness and understanding that Alutiiq Cultural Core Values were pathways to holistic health for individuals and the Kodiak community.

### ***3.6.6 Recording the data: Sharing participant information or maintaining anonymity.***

Recordings were obtained as described formerly. Most participants allowed video filming of the interview session, however a few preferred that only audio be recorded. All participants were offered and accepted copies of their individual transcripts and/or recordings in the format of their choice. Some desired hard copies of transcripts only while most wanted the transcript along with either a flash drive or digital file of their recorded interview. Those who agreed to share their recording with the Alutiiq Museum knew that it would eventually be available through that organization. Their identity was either shared or kept confidential per individual preference as previously discussed.

### ***3.6.7 Transcribing the conversations.***

All audio and/or video recordings were transcribed faithfully, accurately, and consistently. At times a strictly verbatim transcription impacted the flow of the expressed ideas as when sounds that are linguistically known as fillers were uttered which included examples such as “um,” “eh,” “yeah,” and “so,” among others. These hesitation markers, or planners, are understood to be expressions that generate a pause allowing a participant to indicate they are thinking and not finished with the intended response and were therefore eliminated for the purposes of this paper. Transcriptions were reviewed with each participant during a follow up

meeting to offer the opportunity to make corrections, add to the responses, and to request input and feedback about the emerging themes. No discrepancies or inaccuracies were identified. On occasion, participants provided additional input to conversations that were initiated with me during the interview process when our paths crossed in the community, but no formal meetings were scheduled since there was consistent participant agreement with the themes identified. Participants did express an interest in reviewing the data shared by other participants when this dissertation was published.

### ***3.6.8 Identifying the themes and reviewing them with participants to verify agreement.***

As themes emerged and were confirmed by participants, it was apparent that no new ideas or concepts were being raised. Consultations with Dr. John, Committee Chair and other Committee Members confirmed that saturation had been established after approximately fifteen interviews. Even so, because other interviews were already scheduled, they were conducted and further verified saturation since themes for these additional participants remained consistent. At this point, no participants were added and further analysis of themes began. It is important to note that, upon the advice of Dr. Topkok, themes were validated by each participant as they developed to ensure that they truly represented the concepts expressed by participants. Participants typically asked if others who had been interviewed conveyed the same impressions. It was rewarding to also receive advice about how this collected data should be shared with the community. One participant suggested that I create a PowerPoint that described each theme and then illustrate those perceptions with quotes by participants that supported them. Finally, this step again provided validation that this research was welcomed by the community as an effective tool to illuminate their ongoing story of health and resiliency.

In conclusion, strategies to ensure appropriate CIRM considerations are evident during each phase of the research process as documented by these comprehensive descriptions in this section. As further testimony to the success of incorporating CIRM, many participants expressed a desire to continue conversations about this topic at future times. The interaction and relationship-building that occurred during these conversations were in fact therapeutic in and of themselves since they generated positive emotions that are an important component of holistic health and well-being.

This process was a mechanism for determining what the existing ideas of wellness included and compared the responses with the concepts of well-being and harmony described in the literature review previously presented in Chapter 2. The participants specifically mentioned the idea that health is the result of being balanced and that illness is a consequence of an imbalance. Areas of possible imbalance can be in the body, mind, or spirit (Cichoke, 2001; Mehl-Madrona, 1997) and having participants identify similar areas was confirming. Alutiiq participants were also able to identify that an underlying cause of mental and emotional imbalance was directly related to the spiritual soul wound that resulted historically from the loss of control of their land and their culture (Walters, 2009).

I hope that this research can be part of the ongoing process and continuation of the work that is already vibrantly restoring Alutiiq heritage. It can be a contribution to bridging the disconnected Western medical approach to illness with treatments that have a more holistic Indigenous focus because they do not exclude the subjective emotional components of health that are typically overlooked at present. I am in agreement with a statement by Cheryl Smith (2012): “To me, research means seeking to make the world a better place.” It is hoped that sharing the information obtained with the Alutiiq Museum and community can be a mechanism

for advocating traditional holistic healing practices which would make a positive contribution to vibrant health, balance, and harmony.

### **3.7 Questions This Method Answers/Strengths and Weaknesses**

The qualitative method not only recognizes the inherent benefit of gathering subjective data to expand the knowledge base of social phenomena, it uses inductive as well as deductive reasoning and encourages a deeper exploration of complex interactions and processes. It is more aligned with the concepts I explored since it is specifically focused on the “the search for holistic meaning, research conducted in natural settings, emergent methodological design, small numbers, non-random sampling strategies, rich qualitative data, inductive analysis, idiographic interpretation, and even the possibility of negotiated outcomes that recognize the need for the researched to be party to a researcher’s constructed meanings” (Lincoln & Guba, 2001). All of these strengths highlight that this was the most appropriate method for this study. I would also like to add that elements of a “constructivism” paradigm position as described by Lincoln and Guba (2001) were included since I felt my role as the researcher was one of a “passionate participant” as facilitator of multivoice reconstruction” (p. 166). However, I also believed there are features of a “participatory” paradigm position that would be evident, such as “living knowledge” that “leads to action to transform the world in the service of human flourishing” (Lincoln & Guba, 2001, p. 170).

Previously, I described some of the components of the quantitative research method that some academic scientists have argued to be the only reliable and valid approach to gaining knowledge. Since qualitative methods do not follow that criteria it is often criticized by those same scientific researchers as not being credible. There are however some strategies that have been identified to increase credibility when conducting a qualitative study and O’Leary (2014)

provides a list that includes saturation, crystallization, prolonged engagement, persistent observation, broad representation and peer review (p. 132). O’Leary also offers “techniques that can be used to obtain confirmation or verification” (p. 132) and identifies those to be “triangulation, member checking and full explication of method” (p. 132). I used crystallization, defined by O’Leary as “building a rich and diverse understanding of one single situation or phenomenon by seeing the world as multi-faceted, and accepting that what we see depends on where we look, where the light is” (p. 132). Since I looked for common themes among the Elders and Culture Bearers that I interviewed, I utilized triangulation as a means to verify the data collected since that involves confirming authenticity by using more than one data source. It is also significant to note that research using explanatory models of illness are often described in the medical literature so that providers may understand specific cultural concerns and individual perceptions of disease in their approach to providing care. This research would align with a community-based participatory research (CBPR) approach if I continue to be actively involved in the process and the implementation of the strategies that were identified as result of data gathering. I understand it is imperative to be cognizant of research concerns and potential problems with data collection or assessment of findings. Being proactively aware of these considerations enabled me to address them if identified, so they do would not negatively impact this investigation. Lincoln and Guba further point out that what is real and meaningful should be defined by communities especially when research is being conducted in order to determine further actions based on the conclusions of the study (Lincoln & Guba, 2001). Since this is the ultimate goal of this exploration, as long as I am diligent about seeking ongoing input and feedback from my committee, the community and participants, I was confident that the outcome would provide a meaningful contribution.

Karina Walters (2009) pointed out in her video presentation *Why Do Research on Unspoken Issues?* that Indigenous people go to Western medical providers to treat their symptoms, but they seek out traditional healers to address underlying spiritual causes of their illness. If that is the case, it seemed certain that the established traditional medical services currently in place for Indigenous people are not completely addressing their health care needs, and as such, are not successful in promoting healing by restoring balance. Furthermore, this system is also not effective at facilitating the necessary harmony to maintain health and wellness. CIRN “recognizes that indigenous peoples think and behave in ways unique to their worldviews and experiences and thus places a heavy emphasis on the role relationships, responsibility, respect, reciprocity, and accountability play in our interactions with the human, physical, and spiritual world around us” (Brayboy et al., 2012, p. 426), which parallels the concepts of health, illness, and therapies according to Indigenous ways of healing, so this was therefore the most valid approach to a study of this kind for the Kodiak Alutiiq community.

### **3.8 Summary**

*Nature can and does communicate to us humans.* Within this communication via omens, signs, and mythic-religious symbols is a definite system of knowledge.... [this book] is simply this: *an opportunity to learn how to speak Nature's language.* It is a rare opportunity for modern people to reestablish and reconnect with their relationship with Nature; to develop a real kinship with Mother Earth, and “all our relations” in the Universe. It doesn't matter what race or nationality you are, or what religious belief you subscribe to; all that is required here is an open mind and a willingness to learn.

(Lake-Thom, 1997)

The mini-research project was a great trial run as preparation for the actual research findings discussed in Chapter 4. I was fortunate to conduct an interview with a committee member and person I knew well and was able to elicit her feedback about the specific interview questions, as well as if or how they should be revised. It was also validating to hear similar themes emerge from the interview that reflected the information uncovered in the literature review process. It was good practice to try to sort the data and do an analysis of the themes. I was able to classify comments that described the need for a holistic focus when treating illness and statements that supported the concept of balance. Dr. Drabek mentioned at the end of the trial interview that she felt this research was “worthy work” and she could envision a “lovely action plan” that could be put into place related to recommendations for community cultural healing activities (A. Drabek, personal communication, August 4, 2016). Many of the participants expressed similar sentiments during the guided interviews when we met again to review the transcripts. In conclusion, an evaluation of this process confirmed that CIRM was the correct approach for this study as were the specific strategies utilized to collect the data.



## Chapter 4: Results

### 4.1 Data Analysis with Two-Eyed Seeing and Looking Both Ways Approaches

The review and analysis of the data was considered from both epistemological lenses—through the Indigenous eye of the Condor who intuitively interprets messages received from the heart; and also from the Western eye of the Eagle who objectively analyzes information—in order to apply a “Two-Eyed Seeing” approach to understanding these insights (Duran, 2013; Institute for Integrative Health, n.d.). The Condor and the Eagle prophecy was discussed in Chapter 2 to acknowledge that both worldviews offer different perspectives that should be considered when attempting to understand a concept or idea (Duran, 2013). Likewise, “Two-Eyed Seeing” is a term coined by Mi’kmaw Elder Albert Marshall that “refers to learning to see from one eye with the strengths of Indigenous knowledges and ways of knowing, and from the other eye with the strengths of Western knowledge and ways of knowing... and learning to use both these eyes together, for the benefit of all.” (Institute for Integrative Health, n.d.)

In keeping with the Alutiiq ideology of “Looking Both Ways” when considering their heritage and identity as posited in the book of the same title (Crowell et al., 2001), it is important not to exclude historical events that contributed to the health consequences currently experienced here in Kodiak from the impact of colonization. This historical background was introduced in Chapter 1 as it related to remembering what came before—looking back. Again, reaffirming that the intent of this research study is to celebrate the resiliency that is evident when witnessing the cultural revitalization on this island, the intergenerational trauma that resulted from colonization along with its longstanding repercussions was acknowledged in the context of this connection to health and well-being for Alutiiq individuals and the community. Participants shared experiences that encompassed looking back at historical incidents that played a key role in their personal

health and the health of their community. Responses also indicated their vision looking forward to their living legacy and the ability of their cultural values to promote healing and maintain wellness. Therefore, “Looking Both Ways” will also be evident in the presentation of these results.

#### **4.2 Overview and Discussion of Themes**

Initially I understood that Western medicine needed to make improvements in the provision of holistic health care for all patients, not just those who have an Indigenous heritage. From my personal professional health care provider perspective, it seemed that the medical system was overlooking the spiritual component when addressing the comprehensive needs of a patient. Since I was also aware that Western and Indigenous epistemology were contrasting worldviews, I additionally considered that this could have a bigger impact on people who valued the connections they shared with the spiritual and natural realms, as I knew was the case with Alutiiq persons here on Kodiak Island. Having a Western upbringing and education myself, I was indoctrinated to find the missing or defective factor and either add it or correct it to solve the identified problem. With this in mind, I anticipated that the information I received from participants would support my early speculation that medical practice could be improved by attending more closely to the neglected spiritual piece of total health. What I learned is that spirituality is actually the cohesive energy force or communication network connecting the relationships that impact holistic health and not just a gap to be filled. From the wisdom shared by Alutiiq participants, I was able to now fully absorb a significant quote by Lewis Mehl-Madrona, M.D., Ph.D., (2011) that I discovered during the literature review phase of this process: “In the Indigenous world, healing is always spiritual regardless of what other modalities are used” (track 1). When reviewing the conversations, it was evident that connection to spirit

was vital because it is the powerful bonding energy that maintains balance among all relationships according to Indigenous epistemology. Participants frequently commented that any physical, mental/emotional, or social/relationship difficulty could also conversely be a mechanism for causing an imbalance aligning with Indigenous epistemology that considers the interconnected relationships and the impact this has on manifesting reality. An analogy that could be used to summarize the themes with a Western model or lens would be the construction of a stool which is at risk for tipping over if unbalanced. The three legs of the stool could be visualized as the required elements of holistic health—body, mind, and spirit. All segments of the stool must not only be present, they must be level and properly placed in relationship to each other, as well as secured in place, in order to establish integrity. Significantly, the example of a stool to represent the balance required for holistic health was also expressed by a participant which will be shown as their comments are presented. Balance was understood to be fluctuating and easily shifted and many examples of physical or emotional manifestations of spiritual distress or imbalance were provided, along with the idea that relationships were integrating influencers of the mind/body connection which also impacted holistic health. The ultimate value and importance of relationships is an inherent Indigenous epistemological thread which underscores spiritual connection—communication between all things.

Based on this summary analysis of participant contributions to the concept of holistic health, the main themes that will be presented include: (a) Balance, (b) Imbalance, and (c) Relationships. These themes can more appropriately be represented culturally by a visualization that replaces a stool to illustrate the concepts of holistic health from an Indigenous Alutiiq outlook. I was encouraged by both Dr. Theresa John, Committee Chair, as well as by Dr. Alisha Drabek, Committee member and Alutiiq Culture Bearer, to create a diagram that depicts the

concepts that were shared by participants during data collection. The holistic health model that emanated from this research is included below and the features are explained as follows:

- The form is fluid and ever-changing and is represented as a moving energy similar to a whirlwind or whirlpool allowing the elements to be in constant communication with each other internally—it can also draw in external elements or radiate internal elements outward; Indigenous epistemology underscores the importance of cyclic movement in relation to time and life experiences; spherical design is also in alignment with Alutiiq petroglyphs (looking back) and other images found in creative expressions by contemporary Alutiiq artists (looking forward) supporting this Indigenous perspective.
- The facets of holistic health are featured: body, mind, and spirit; body and mind can reflect health or illness; spirit is intermingled in all aspects of existence.
  - Spirit is the cohesive energy force of our being and is infused in all components as the communication network that promotes integration; disruption in the flow or vigor of spiritual energy causes imbalance that can be manifested as physical or mental/emotional discomfort or ailments.
  - Body is the structure and composition of our physical human form.
  - Mind is composed of thoughts and emotions which may initiate behavioral responses.
- The circular core represents that balance is present when all aspects of holistic health – body, mind, and spirit, are whole and intact and spiritual energy is freely flowing; the conical shape is also easily shifted as depicted by this form resting on a point that can tip in any direction; despite being precarious, balance can also be restored by removing obstacles that impede the free flow of spiritual energy or by generating or restoring health

in any of the components since they communicate and interact continuously both internally and externally.

- All relationships are capable of influencing the health of the body, mind, or spirit in any direction: they can be a mechanism for maintaining or restoring holistic health, or cause an imbalance that results in physical or emotional manifestations of illness; relationships are connections with the (a) Human Realm (self, family, community); (b) the Natural Realm (animals, land, sky, waters); and (c) the Spiritual Realm (Creator, Ancestors) as depicted in Kawagley's Tetrahedral Model representing an Indigenous Worldview - therefore, this model was also provided to illustrate that schematic (Kawagley, 2006, p. 15). Relationships can also influence balance in other realms in a stabilizing or disruptive manner.
- Ultimately, the summary conclusion of this research pointed to the realization that Alutiiq Core Values could be envisioned as a roadmap or guide to achieving holistic health because they are pathways to achieving balance in the human realm of existence resulting in holistic health; they provide structure to the form that generates and reinforces balance for individuals, thus creating harmony that impacts the other realms of existence which demonstrates a true understanding of holistic health in all domains.

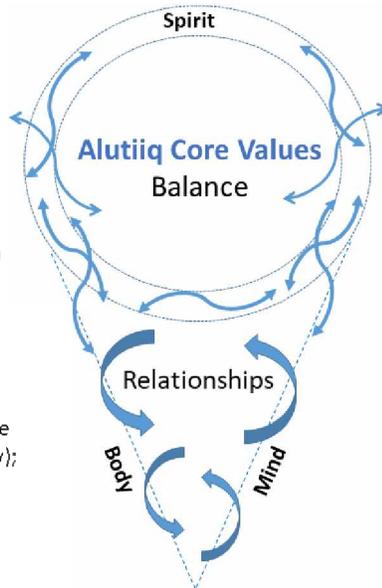
## HUMAN HOLISTIC HEALTH MODEL

**Spirit** is the cohesive energy force of our being and is infused in all components as the communication network that promotes integration; spirit communicates both internally and externally

**Body** is the structure and composition of our physical human form

**Mind** is composed of thoughts and emotions and may initiate behavioral responses

**Relationships** are connections with the Human Realm (self, family, community); the Natural Realm (animals, land, sky, waters); and Spiritual Realm (Creator, Ancestors) as depicted in Kawagley's Tetrahedral Model



### Alutiiq Core Values

Pathways to Human Holistic Health that maintain or restore **Balance**

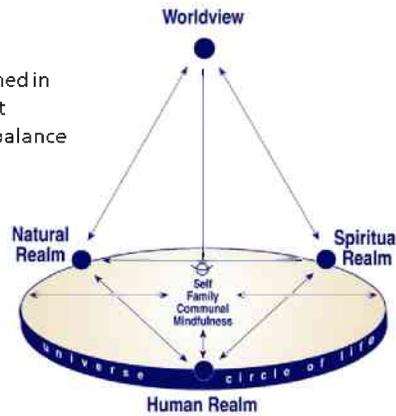
Respect for self, others and our environment is inherent in all of these values  
 Our Elders  
 Family and the kinship of our ancestors and living relatives  
 Sharing: we welcome everyone  
 Trust  
 Our people: we are responsible for each other and ourselves  
 Learning by doing, observing and listening  
 Sense of humor  
 Our heritage language  
 Ties to our homeland  
 A subsistence lifestyle, respectful of and sustained by the natural world  
 Traditional arts, skills and ingenuity  
 Stewardship of the animals, land, sky and waters  
 Faith and a spiritual life, from ancestral beliefs to the diverse faiths of today

Figure 4: *Human Holistic Health Model (Mete, 2021)*

## Integrating Kawagley's Tetrahedral Model into the Human Holistic Health Model

Since each individual person is contained in the human realm, someone who is not holistically healthy would impact the balance of all realms

Every individual who is holistically healthy maintains or helps restore balance in the human realm acting to stabilize the balance in all realms



**Alutiiq Core Values** are based on an understanding of these interrelated connections so they provide a guide or pathway to maintaining or restoring the Balance needed for Holistic Health in the Human Realm which naturally impacts the other domains

Figure 5: *Integrating Kawagley's Tetrahedral Model into the Human Holistic Health Model*

(Kawagley, 2006)

The themes are also represented in a table format below that classifies them from a typical Western academic perspective to provide the other aspect of a “Two-Eyed” viewpoint. The table also further defines the elements included in each theme. These themes will be discussed more comprehensively as the astute comments of the participants are narratively presented in further detail to support these themes.

**Table 2: Concepts of Holistic Health: Western Academic Table**

<b>Balance: open and intact emanation of spirit</b>	
Whole strong unified connections with all relationships; awareness of spiritual messages that maintain health or facilitate restoration, connections are established and maintained in ways unique to each individual and all are valid	
<b>Imbalance: manifestations of spiritual distress</b>	
<ul style="list-style-type: none"> <li>• Somatic symptoms</li> <li>• Mental Health Symptoms</li> <li>• Soul Wound</li> </ul>	<ul style="list-style-type: none"> <li>• Physical manifestations of spiritual distress such as pain or illness</li> <li>• Emotional or behavioral manifestations of spiritual distress such as depression or substance abuse</li> <li>• Impacts of colonization; Intergenerational PTSD</li> </ul>
<b>Relationships</b>	
<ul style="list-style-type: none"> <li>• Human Realm</li> <li>• Spiritual Realm</li> <li>• Natural Realm</li> </ul>	<ul style="list-style-type: none"> <li>• Self, family, friends, Elders, mentors, community</li> <li>• Creator; Ancestors; Spiritual influences and experiences with the cohesive energy force or communication network that provides integration</li> <li>• Connection to land, animals, sky, and waters</li> </ul>

It was not unusual for an excerpt to contain corroborating evidence of more than one theme, however for the sake of clarity and to eliminate redundancy, each was grouped in the area that best reflected the underlying concluding impression of that entry. The fact that it was often

possible to categorize a participant's insight into more than one category also supports the interrelated nature of the concept of holistic health and that this exchange and flow of spiritual energy impacts wellness in all directions. Additionally, the overlap of themes illustrates that Alutiiq individuals are aware of, and have experienced, these interrelated connections.

The essential purpose of this study was to illuminate Indigenous Alutiiq voices. It is important that their message is shared as a mechanism for healing that contributes to the existing and ongoing cultural revitalization efforts in this community. Many participants expressed that they wanted their stories recorded and that this was a worthwhile endeavor to explore and document this crucial information. Their perceptions are expressed clearly and motivates anyone exposed to their insights and understanding of this concept. As the researcher, I have been inspired and moved each time I heard, read or re-read any of these passages and I believe they should be available to be shared freely in this venue as intended by the participants. It would be a disservice to reword or reconstruct any of these passages and would ultimately have a detrimental effect on the purpose of this investigation. A participant's desire to remain anonymous was of course respected, so any word or phrase that could lead to their identification was necessarily removed when requested. Lastly, the volume of comments that support each category further demonstrates saturation of these concepts as the data was collected. However, for the purposes of substantiating the results in this particular section of the paper, I have selected representative participant input to support each theme from the complete sets of each category.

The data from the participants that supports the classification of the themes will follow. Each category will begin with a description and overview of what that theme represents regarding the ideas and concepts that were captured by the participant comments. Next, the

actual statements will be provided. As a researcher I recognize that there are substantial quotes included and this was done intentionally to honor and amplify the powerful Indigenous voices who shared these illuminating messages as is proper for Indigenous research methodology (Chilisa, 2020). As the reader absorbs their insights, their words can be a means for facilitating personal reflection and understanding, and this also aligns with Indigenous epistemology regarding the purpose of sharing knowledge and stories to celebrate relationships (Archibald, 2008; Brayboy et al., 2012; Chilisa, 2020; Mehl-Madrona, 2005, 2007, 2010, 2012, 2015). A summary analysis of each theme will follow the participant data. This format will be repeated for each theme so that this dissertation allows each participant to speak for themselves while also including the perceptions and interpretation of the researcher throughout. A general summary of the results will conclude this chapter. Chapter 5 will further expand the concepts of some key findings, while Chapter 6 will document the conclusions.

#### **4.3 General Overview of all Themes**

Participants pointedly emphasized the theme that balance was a key aspect of being holistically healthy. However, a mutually supporting, or reciprocally conjoined theme, was the idea that spirituality was the operating force that sustained this balance. Spirituality or spiritual practice is the way to tap into the dynamic communication network that unifies connections. In keeping with the stool analogy, which is a concrete picture with well-defined separate components, spirituality could be seen as the glue holding each piece of the stool together in relation to one another to maintain its' shape. Using a representation of a stool facilitates a visual that has very distinct parts with strict boundaries and limiting functions or purposes which aligns with a Western Academic depiction. From an Indigenous lens, Alutiiq participants stressed that spirituality was highly individualized and therefore not rigid, highlighting that it does not have

finite boundaries and that all spiritual practices could lead to this balance. A key point that needs to be made as these themes are presented is that the fluid and interconnected nature of these concepts resulted in significant overlap when reviewing participant comments. As mentioned previously, quite often a participant observation could be categorized as reinforcing more than one theme. Reviewing the data from the conversations led to the creation of the Human Holistic Health Model which depicts the interconnected nature of these ideas and underscores the notion that finite boundaries undermines Indigenous epistemology. As the participant remarks are presented, it is apparent that they overlap and frequently support the other themes identified. Alutiiq Core Values also illustrate intersecting concepts. Not only is the interrelated nature of the Alutiiq Core Values evident, they are central to the form as they represent a structure or pathway that facilitates balance. When each of the specific Alutiiq Core Values are considered below, it is clear that they speak to the theme of balance as it relates to open and intact emanation of spirit and how relationships can impact balance:

- Respect for self, others and our environment is inherent in all of these values
- Our Elders
- Family and the kinship of our ancestors and living relatives
- Sharing: we welcome everyone
- Trust
- Our people: we are responsible for each other and ourselves
- Learning by doing, observing and listening
- Sense of humor
- Our heritage language
- Ties to our homeland

- A subsistence lifestyle, respectful of and sustained by the natural world
- Traditional arts, skills and ingenuity
- Stewardship of the animals, land, sky, and waters
- Faith and a spiritual life, from ancestral beliefs to the diverse faiths of today

(Alaska Native Knowledge Network University of Alaska Fairbanks, 2021)

#### **4.4 Balance**

##### ***4.4.1 Overview of the theme of balance—Open and intact emanation of spirit.***

Participant comments that support the theme of balance and the impact of spiritual connections are provided as follows. Since each observation is pertinent and applicable, their order is not consequential. Balance is reinforced with open and intact emanation of spirit. Balance is defined as whole, strong, unified connections with all relationships; awareness of spiritual messages that maintain health or facilitate restoration; connections are established and maintained in ways unique to each individual and all are valid. To underscore, the idea that the experience of holistic health is individually defined was very clearly emphasized.

The following participants provide insight that balance is not simply finding what is missing in life or filling a void. As depicted and described in the Human Holistic Health Model, it can easily be shifted off its central axis. An underlying thread cautions against looking at physical health as separate from emotional health or failing to recognize the inherent spiritual component of our being. They identify mechanisms that personally help them address an imbalance and their comments validate that it is important to recognize and restore balance because of the spiritual connection humans have with each other and with entities in the natural and spiritual realms. Looking again at the Human Holistic Health Model, there is constant interaction between our physical condition and our emotional well-being, while our spiritual

energy is also integrated and in constant communication within our individual body, as well as sharing energy outside of our own being.

#### ***4.4.2 Collected observations that support the theme of balance.***

- Well for me I think it's home, work, relationship, physical and mental. So there'll be all the different quadrants of your life and making sure that there's balance in there. So it also means being positively present in your current situation versus thinking of the future and thinking of the past—being present in the situation and not carrying burdens that we've had in our past. And if we do have burdens, somehow or other figuring out, either using meditation or prayer, or talking to another Alutiiq female that's how I do it, and how to release those and then change your behavior patterns in the future so that you don't have that. So it's basically just not carrying things of our past with us into the present. ... And then learning more about the connection that we have. So there's a spiritual belief but then there's also a spiritual practice. And my belief is that everything is connected like spirit is in all things and we are spiritual beings having a human experience. **Gwen Sargent**
- I think that in order for, like health means that your body, mind and spirit are in tune and hopefully healthy. But I think that if one of them is out of whack that they kind of all are affected so I think that they all have to be dealt with kind of at the same time. And as you treat something it has to be treated at all of those levels. ... And I think, I know that for me spiritual and emotional health are directly connected and if I were to try to separate them I would probably be in trouble. So I can see that, like the cycle, or the circle, the interconnectedness... it's hard for me to pinpoint the spiritual distress and the physical

impact but if we go through emotional then it's totally obvious. ... I think teaching people about the interconnectedness of health, like we're trying to keep a balance and that if one of them is out of balance then we have to kind of work at all of them to really get back into that steady rhythm that we want to be in. ... And people don't realize the things that they do that are spiritual, that do feed their spirituality. **Anonymous Participant**

- Yeah, you have to learn to balance your physical health, your mental health and your spiritual health. Whatever it takes—meditation, Alutiiq dance and that can be also physical and spiritual and mental. You just got to find whatever works for you. Try to find your balance. ... spiritual belief. Everything is made of the same material. It vibrates at a different level so it appears differently. So that's what creates the world around us. ... Plus our thoughts that help interact with the world around us. I use that idea, or thought, or belief to help myself learn things and know how to plan kind of in an intuitive way. So we all have access to this connectivity and that way we can get the knowledge that's already out there into us, through us. And so you can, like if you're trying to do something that you feel like you want to be in line with what maybe they have done before or what people have done before, you just kind of hope that you're doing it and that faith and then you connect with that moment and that spiritual area. Knowing that I'm connected with everything else, I calm myself. And so I feel like a calming feeling in my chest all the time because of that belief I have. That feels good all the time and it helps me be in the moment. And that way I can, that's kind of like my meditation cause I'm feeling the moment as I'm in it. Cause that's why we have our bodies so we can experience the things that require hands and what are we going to learn from this stuff.

Use the mind to try and triangulate the message or the signal to your body so it can act out that spiritual understanding. ... Being in the moment and that moment becomes greater instead of being in your mind. Just let your mind kind of be in between the spiritual knowledge that's available to you and let it come to your body. Don't let it run your life, just let it run through. If you want to use your brain, use your heart brain which is made of neurons too. Use your heart brain and that'll help guide you. This brain can kind of get in the way sometimes. So kind of just do your life and be there and it'll help, also help with your spirituality as well. So being there and preparing food. Or knowing that you'll be OK. Get rid of those traps, thoughts that'll put you down. Your body will feed off of whatever you give it. Your mind doesn't know any difference between what's real and not real. So like envision something that's real for you like I see myself healthy or I'm eating all good food so I should be getting better now. Or I'm taking these pills now, I did the right things, so all these positive pushes and then be aware that there's going to be set backs. Don't let those stop you cause that's the negativity trying to pull you right back into there. So it's how you, it's like you said earlier, perception, it's how you feel about it as intentions you give to the world and the things around you and it'll all, we're like the planets, it's going to gravitate towards you. It's whatever you put out, it's going to come back. **David Tucker**

- Well, completely healthy meaning body, mind, spirit, emotions—completely healthy because I think that you know they are all tied into each other. That you know it's kind of like legs of a stool where you can't just operate on two, three's good, four, you know it all adds to the stability of the whole. ... And it made me realize, it's like yeah, I've

been dealing with this too and I knew what to do, I just didn't. So I think for holistic healing, figure out—are you ready to heal? And if not, why? ...but also part of not wanting to heal was not being willing to put a lot of effort into figuring out why. It's a vicious cycle. ...when you really get into it, you can track things on so many levels it's mind boggling. ...It's never, it's never over. It's never done. You're never done. I'm never done. And there's always more. There's always another layer to the onion. But that is life. That is the beauty of life. Just like the trees continually growing those concentric rings. You know, we're the same, there's always a deeper layer. And I don't know what happens in the end. I know what I think. I know what I've heard and I know what I sometimes believe but I don't really know. Is there a core? I don't know anybody that's ever gotten to the end. I don't even know what the end is but it's never over as long as you're walking and talking, living and breathing. There's always more work to be done. And once you become OK with that and really, really own that, half the work is done. You know when you get there and knowing that it's OK. ... Yeah, and well you know it's hard because humans are so complex. We really are little weirdos with all of these nooks and crannies, cracks and crevices. And it is really hard to look, you know to look at the whole thing as a whole. It's, it's almost too much for the human brain to comprehend. And that's where acceptance comes in. **Gayla Pedersen**

- Look at it like a doctor would look at a disease or an infection. You have a person, you have the spirituality. The spirituality is a combination of these three things right here. So a doctor wants to treat the disease, this person thinks he'll kill the disease. First he has to treat the person emotionally, mentally and physically in distress because of the disease.

But if you treat the person spiritually, you have all the needs, you take care of all the needs in one way. Understand the patient has emotional needs, mental distress because of the disease, physical distress because of the disease. Treat the person spiritually and not only is the person going to become more healthy quicker but the disease will go away much faster as well. So I don't know the kind of doctor who's willing to say "before we get started can we pray?" Most doctors I know are scientific doctors and totally misses the part of the person's spiritual being because a lot of times they don't believe it. But you don't have to be a believer to help, to say to a patient "I don't know how to pray but I'll say something, a pray for you." It would mean a lot to the patient emotionally, mentally and physically. Because the doctor is taking the spiritual and already that person is better inside and combatting the disease will be much easier cause the person is feeling good about going to see the doctor. Cause a lot of times people don't want to see their doctor cause, you know, how would you say it, disconnect, disconnection they feel from the doctor taking over and going straight to the disease, treat the disease and totally miss the person as a whole. ... I have to say I was given all the tools that I need to stay healthy but I'm still learning how to use them. I don't think you ever fully learn what to do to stay healthy. **Teacon Simeonoff**

- Well I would think taking into consideration the heart, body and mind you know as far as if all three of those things are in sync then theoretically you're healthy. That's the way I would describe it. ... You know spiritual is such an interesting word for people because they equate spirituality with religion oftentimes. I don't always look at it that way. I'm not an overly religious person. So I was raised Christian. I believe in the afterlife and all

of that but to me spirituality is more a connection with who we are, the land, our family, how we take care of ourselves you know. It's a, it's a layered thing. **Melissa Borton**

- Yeah, oh yeah absolutely because it, you can see, it becomes so entwined, you know all three parts of us, it makes that whole. And you know I remember them always saying in the beginning when I was little, about it being an egg. You know cause you got the shell and you got the white and you got the yolk but yet it's still an egg right? Well, I look at, you know we're three parts but we're still one you know. **Teresa Carlson**

#### ***4.4.3 Summary review of participant comments on balance***

These participant comments also link to the idea that, for Alutiiq persons, their connection to land and the cultural revitalization efforts that are in place have been mechanisms for maintaining or restoring balance. The guidance offered by the Alutiiq Core Values provides direction and acknowledges how important these principles are regarding holistic individual health as well as community wellness. While I cannot explore every individual example that participants used to restore or maintain balance, an underlying thread was the vital connection to land that was discussed at length in Chapter 1 and is expressed throughout the Alutiiq Core Values. Since the interviews highlighted this concept in great detail, I was often reminded of the historical perspective presented by F. David Peat in *Blackfoot Physics* (2005) as he described the Indigenous approaches to living in harmony with the environment rather than trying to control it. Peat (2005) also describes the manifestation of diseases as the traditional ways of living were suppressed by colonizing influences. These interviews also reflect the wisdom of cultural revitalization as a core mechanism for addressing balance in relation to holistic health. Thinking

about the connection to land from a Two-Eyed Seeing Approach caused me to investigate the newly emerging trend that Western academic scientists are now proposing to encourage humans to reconnect with nature as a mechanism for positively influencing health. A few example book titles include *The Outdoor Adventurer's Guide to Forest Bathing: Using Shinrin-Yoku to Hike, Bike, Paddle, and Climb Your Way to Health and Happiness* by Suzanne Bartlett Hackenmiller, M. D.; *The Nature Fix: Why Nature Makes Us Happier, Healthier, and More Creative* by Florence Williams; *Into the Forest: How Trees Can Help You Find Health and Happiness* by Dr. Qing Li, who identifies as an immunologist and forest medicine expert. Many additional books, articles, and other information sharing resources such as YouTube, all point to the rising resurgence of what was always known in Indigenous societies. Peat (2005) reminds us again that Indigenous ways of knowing already understood these connections when he discusses a “much wider reality that includes the various animating spirits within the world” and explains “Here it is possible to make connections between Indigenous science and some recent ideas in Western science” (p.140). In conclusion, balance can be foundationally addressed through cultural revitalization and adhering to the Alutiiq Core Values that represent this wisdom.

## **4.5 Imbalance**

### ***4.5.1 Overview of the theme of imbalance—Manifestations of spiritual distress***

This category contained participant feedback about the effects of imbalance on holistic health. Balance was envisioned as a fluid, ever-changing reality for human individuals and was easily shifted. Since there is constant communication and connection between all areas of health—the body, mind, and spirit; disruption in one area could potentially and actually manifest in another area. Physical symptoms such as fatigue, pain, or gastrointestinal distress could be exhibited when someone is depressed or anxious. Conversely, somatic complaints can precipitate grief or emotional upset. Spiritual distress is ultimately expressed as illness or disease in the

body or mind as well. Diametrically, efforts to restore health in any area—the body, mind, or spirit, contributes to holistic health. Therefore, all interventions that impact any aspect of health influences the restoration of balance. It makes perfect sense that it can at times be restricting to label a comment to fit into one category since they will expectedly add weight to any and all areas of imbalance. The idea that specific interventions designed to restore or promote health are inherently widely individual was of paramount significance. In other words, there is no procedure manual, algorithm, or standardized treatment plan that can be accessed or referred to when someone is unbalanced or not holistically healthy. Many talked about experimenting with various healing strategies or spiritual practices to address the imbalance they felt. Some talked about experiencing some aspect of loss or grief that was a driving force in motivating them to seek restoration of health or to balance an area that was unstable in their life. The realization that going through trials and tribulations can influence spiritual ideas as well as contribute to individual strength while various practices are discovered and shared was also mentioned frequently. Lastly, to better understand a unique contributing factor regarding imbalance for Alutiiq individuals, acknowledgement of the impacts of colonization and the resulting Soul Wound deserves special attention, reflection, and respect. This consideration also aligns with the ongoing intent of Looking Both Ways. Historical trauma and its effects are acknowledged, but participants also point the way forward to future solutions and remedies. Since this intergenerational injury has special significance for Alutiiq individuals on Kodiak Island, the impact of trauma and Soul Wound was a unique theme for this group of participants. For the sake of clearly demonstrating these associated themes, this overall theme of Imbalance is broken down into Somatic Symptoms, Mental Health Symptoms, and Soul Wound. Excerpts are

provided to support each area as validation of how they respectively contribute to a disruption of balance in any area having an impact on holistic health.

#### ***4.5.2 Collected observations that support the theme of imbalance.***

##### ***Somatic Symptoms: Physical Manifestations of Spiritual Distress Such as Pain or Illness.***

- Absolutely. It takes the stress off of what your body has to deal with. You know if your mind is at peace, if your inner core is at peace, your whole well-being is going to be at peace. But if it has to go and take care of all that stress, then it takes away from an illness that might be beginning. And it's not going to be focused there and that's going to manifest itself. I mean that's how I feel so. And to help them understand you know. Help them understand. Explain to them. Because that's what they need is the understanding. ...But then physical things, I'm at the gym all the time, or walking, or reading you know the books like that, just the "ah-ha books" you know that, and I don't have to agree with everything. But there are moments that are going to be, that'll impact me from things that I've read. But those things belong to me. I don't have to, to analyze them because when you analyze so much then you agonize. Yeah, and that's something that is not good for me to do. So those are things, for me, that work, that have worked. ...I think people, to me, take too many pills and that confuses that inner core, that soul. They do, they, it's a falsehood and it's a cover and it doesn't allow them to hear that voice, to hear it or to feel it or to have to be accountable to it. Because there's a false cover there that they clearly can't see what would truly help them. And I think the medical field is at fault for it you know, that they are so quick to cover up that pain, to cover the pain and not the symptom

at all. And that's a disservice to each person that they see. Each person themselves, can heal themselves. If you leave, let your body take its time, I really feel that for the majority of illnesses, some certainly are more severe, it will heal itself. But we don't give our, its' time that it needs. Your time might be shorter than mine but if I leave something alone, it ultimately, it will heal itself. Cause I just don't believe in the pills at all. I just don't think that we were meant to take them. I just don't feel that our bodies handle those chemicals cause they're not made to absorb those things and to have any imminent result, positive result from them. So I think that the majority of us are prescribed too many pills or attempted to. And you have to know when to say "no, let me, let my body work on it for 5 days." And do healthy things during that 5 days you know. So what prompted that? Another thing I do, is I need you to tell me "what is that pain, you know what is that pain?" Let's say for the shoulder. I need you to show me that muscle you know in a book or picture so that I can focus on that muscle. So I can see that and see what it's doing. Does that make sense? So I can know. And then those 5 days, I can work with it you know. And that helps me. ...I think that is, you know the project that you have here could have a real strong impact on this, this sentence or this idea here to help understand health and spiritual needs. How they can work together without opioids you know. That they, you know your body can, you know it's equal. I don't know if they can have classes on that you know eliminating pills but just working with your body. You know and that the mind is so powerful. **Susan Malutin**

- I went to the one doctor, an endocrinologist in Anchorage at ANMC. She told me these things that I found out to not be true from my own personal experience. And so I

immediately obviously didn't trust her. And so like if I'd listened to her I would have been sad. I might've felt better but I would've been sad. ... So I think people are aware of their pain but I think it's already too late because of maybe bad habits have caused these, spiritual habits have manifested into a physical ailment. And so they go and it's already too late. So a lot of times they get the wrong information from somebody that probably wanted to help but wouldn't help them as well as something more holistic would have. People expect something to happen right away when you got yourself, it took a while for you to get to that point. It's probably going to take you a little bit of time to get out of it. You can't just mask it with something. ... We have an amazing system, our body, and then the doctor wants to take a part of you out. Why would you want to do that? There's something else going on cause your body wasn't designed to be taken apart like that. It's designed to work together. Take a pill for the rest of my life? Oh no. Like what if something happened and they couldn't make the pill anymore? And they're just going to take the thyroid? I'm just going to find another way cause my body was fine before so let's figure out a way to bring it back to where it was. ... But I did have something. It's like I knew something was in me still. Even before I got sick. I'm not completely clean. It's a process. I think people should take what comes to them as not like "oh man why is this happening to me?" Well maybe this is what you need to grow and so use it. So this must be something for me to grow. I have to figure out what it is that I need to grow on. Maybe it's my speaking ability cause it's the fifth chakra you know. Maybe I speak too much about something or maybe I don't speak up enough myself about things. Or I don't stand up for myself. Maybe it has something to do with that and maybe it has nothing to do with that. So I have to figure it out. **David Tucker**

- As far as the body, the body gives signs too you know. My pets—I get a lot of information from my pets—how they’re responding to me. What they’re going through. You know I feel like they’re a very close extension to me, that they’re a part of my life, you know as helpers and so yeah. Pretty much everything is a sign in some way or another. But like as far as physical indications, you know disharmony in the body can often be relieved through spiritual practices combined with proper care you know. And I’m not really familiar with the Bible but one of the things that I’ve heard you know as far as healing is that yes, Jesus or God can heal you. But you’re also given figs to create a poultice to apply you know. It all goes hand in hand. Any one thing out of whack I believe will have a ripple effect... **Gayla Pederson**

- So for me, balance and you know if there’s any kinds of discord in your body usually if you don’t deal with them they manifest themselves in some type of a physical, you know you get sick, you have a heart attack, or you know things like that. So staying on that path, that holistic path is really important. ...I don’t know how many people have that direct correlational, or knowledge that there’s a direct correlation between whether you’ve got discord and you know what that means but yeah. ...Or if they’re offered different like meditation or relaxation, massage. I know KANA has two or three massage therapists right now. And so that’s really important to kind of integrate that into Western medicine. ...It could be you know stress or a serious medical issue. So I think that the lack of a spiritual base can you know can cause, can cause physical. **Gwen Sargent**

- I think about when I was doing healing work on a child in the hospital at one time. Just being able to tell that child why they have an IV and a nasal cannula and why they are being cupped for pneumonia. Just to be able to tell them why they're, why that's happening and do it in the relationship terms that they understand. ... So just giving them that understanding. And the holistic part of it and just being able to listen to them if they have questions. And you know I do healing work with my hands and so I asked her if I could do some healing work on her and while I was doing her front and I had her turn over and I started to do her back and you know she was in the hospital since 12 o'clock that night and here it is 11 o'clock in the morning and she hasn't slept all night long cause of all the screaming and crying and everything of other people that are sick in the hospital, she was afraid. ... And work with them through that, the whole process and that healing. While I was doing the healing work with her, she fell asleep. And when everybody came back in the room she was asleep. And when the nurse came back in, I asked her, I said "did you do healing work with her" and she said "no." I said "well if you did healing work with her she probably would've went to sleep a lot earlier." Because I know the nurses at ANMC hospital know how to do healing work with their hands. Cause we all have natural healing in our hands – you just need to learn how to use it. **Judy Simeonoff**

- Only from my experience, when I feel a disconnect from that spirituality, when life is too busy, when I am too busy, and I get that disconnect from that deeper meaning. When I don't have the time or the world's too noisy to connect, then things start to suffer. My

nutrition will start to suffer, my ability to be a member of my community starts to suffer, my skin changes. It's really interesting those things that I've come to notice about that. You know chapped lips, something wrong. ... Absolutely. I think that when we're not taking care of, you know when we're not realizing what a gift we are and our, our place on this earth, when we're not cognizant of that, we take less care with our bodies and with ourselves. **Marya Halvorsen**

- Who knows what that will be though? Yeah, it could be different for different people. I think understanding what the person's lifestyle is in order to understand what to look for in physical. Cause I think when you're having spiritual unwellness and it shows up in the physical, then I think it will show up as the exact opposite of your lifestyle. I look at myself. For a long time I was unwell spiritually, I was a weak person. As a young person I was very active, I was very, I was skinny for a reason cause I didn't stay still. And then gradually as time went on and depression came then I became un-active. I stayed indoors a lot, not busy. And once depression took real hold, I gained weight, wasn't very healthy physically you know. ... Yeah, that's physical and emotional as well cause you don't have to the feeling to be active any more. **Teacon Simeonoff**

- I get more tense. If I'm not getting some, giving myself some time for prayer or for relaxation. A lot of the times I'll go to the beach or into the woods cause I feel closer to God out in the wilderness than I do in a building. So, there's that connection there. I tend to get muscle cramps and stress and back pain or neck pain or headaches. So I know if I go and pray and relax and bring myself back into balance and relieve some of that tension

it helps. ... They live like, their lives are different, everybody's lives are different and I don't know what's going on in their head but you see a lot of stress, you see a lot of illness and if you pay attention to it. And if you talk to someone about it and if someone's coming to you cause their shoulder is always hurting, or their back is always hurting. You know, "have you prayed about it, have you—what's bothering you, your lower back is hurting—what's wrong, what can't you stand?" Cause that's what my Grandma and my Mom used to say, "your lower back is hurting, you can't stand something." Because it affects your legs. So if you're out of balance with your emotions and your spirituality it's going to affect your physical form too. Problems with peoples' throats my Mom used to say, "they're having trouble saying what they mean" so they'll end up having physical manifestations of not being able to clear their mind and their body and their spirit. Those are just the ones, headaches, stress—they're thinking too much, they're not letting their thoughts be clear and so they're getting stuck. Yeah. A lot of times stress will give you a headache—or lack of sleep. Yeah, that's right. Upper back, you're carrying too much if your upper back is hurting. Your lower back, you can't stand something. Your throat and your neck is, or your upper neck here is you got something to say, but you can't, you're not getting it out. ... When I did my biology class it was really interesting. You've heard of heart strings? And you've heard of, you know, you break somebody's heart or somebody's heart is broken—it physically happens in their body that when the emotions get too hard, they start breaking the strings that are attaching different valves and whatnot inside their heart. And it can break to a point where their heart has to, where their heart can no longer function correctly. And it was a real eye opener to find out you literally can break someone's heart just with emotions, or sad emotions. Grief. Like the saying,

“you’re pulling on my heart strings”—you’re literally pulling on heart strings. And that’s what they’re called, they’re heart strings. Strings inside the heart chambers. You think about little kids when they’re scared—their tummy hurts. Or they’re upset about something, their tummy hurts. It’s a physical manifestation of the emotions that they’re feeling. Sometimes it can’t be put into words but they have a tummy ache. **Julie Kaiser**

- Well another thing that I think, it can be real beneficial in helping people to get well or better, I mean cause sometimes it’s out of our control about our health condition. You know if we develop like cancer or something like that. I think one of the things that can be real beneficial and real healing is music. I’m a firm believer in music and I’ve used it a lot for myself in my recovery from the addiction to alcohol. It’s been a huge part of my life. ...And then there’s like the cultural dancing too. I think we could use, there’s a lot of different ways we can become more healthy other than just going to the doctor or eating right or whatever. I think we can, there’s a lot we can do. **Lydia Olsen**
- One of my brothers had been treated for cancer, very severe, pretty advanced colorectal cancer, and while he was going through his treatment, I talked to him a lot about the power that I feel that we have over ourselves by putting our brain, you know putting the energy into not “if I beat this, but when I get through this, this is how it’s going to be.” And he is also a nonbeliever like my Mom was and he doesn’t sort of have that sense of a higher power and he didn’t really buy into it. He actually turned out, he’s cancer free and this is like 8 years later but he’s really struggled with his health. And I had a condition which is different than his condition. I had a noncancerous tumor in my head. I had to

have brain surgery a few years ago and have it cut out and my thing was “it’s not if I get through this, it’s when I get through this.” And none of that is really up to me as far as the treatment that I received and you know you’re kind of rolling the dice. But I think that my recovery. I mean you wouldn’t be able to tell by looking at me that I had brain surgery a few years ago. And I think that that has a lot to do with how you feel about, how you feel about your place and how you feel about how much control you have over your health. I mean it’s not directly, I mean I don’t think there’s a direct correlation but I think it affects it. I think it has an influence on how, how healthy you are. You know your overall sort of feeling about your capacity to heal. I feel like my capacity to heal is really, really strong. And whereas compared to my brother, his is very sort of clinical and if these medications work then I will have this result or if this surgical procedure works then I’m going to have this result. And that it’s completely out of his hands. Yeah and he, which is really interesting to me cause he is extremely smart and I feel like the power of his mind. I mean he’s practically like an X-man smart, he has this power of his head and his brain and he’s ill and he doesn’t see a connection between that and his brain and his overall physical well-being and I think it’s completely connected. **Natasha Hayden**

- I think we have to learn to listen to our bodies. We are not taught to listen to our bodies. “Oh I’ve got an ache there, I’m going to ignore it, I’m going to ignore it, ignore it, ignore it.” Pretty soon you can’t ignore it anymore and pretty soon it’s your life. One of the things I’ve had a hard time with is like when I have a gut feeling about something, a lot of times I doubt myself. And I turn around and I think about “wait a minute, I had a gut feeling about that and I was right.” And you know trusting your body’s reaction, not just

your mind. If something is not right, your body is going to tell you something is not right. It's a fight or flight situation. Our bodies are pretty instinctual to survive, not just our minds. And so if you have a gut reaction to something or a gut feeling of something doesn't seem right, check it. But also listen to your body too. I mean you know if you start to put on too much weight, you know you're going to be more tired, you know you're going to be slower, check your body. Your body is telling you something. We have to learn to listen to our bodies and we don't. **Sven Haakanson, Jr.**

***Mental Health Symptoms: Emotional or Behavioral Manifestations of Spiritual Distress such as Depression or Substance Abuse***

- Absolutely. I think that when we're not taking care of, you know when we're not realizing what a gift we are and our, our place on this earth, when we're not cognizant of that, we take less care with our bodies and with ourselves. There's a lot of that negative self-talk that begins to happen or, or maybe not even negative self-talk but not positive self-talk, just no self-talk. You're not even really aware you really exist. And then your body, if you're not treating it like a temple, you're feeding it things that aren't good for it, you're maybe grabbing something quick because your energy is low and you're not treating it like the gift that it is. So yeah, I think there's an opportunity for that to definitely affect physical and emotional health. You have to be cognizant and I try to do it with both emotions and with food. Is what I'm feeding myself nourishing me? Is this, is this something real I'm feeding myself? Are my interactions with people real interactions or are they pen pal conversation? Are my interactions with food, is this something that's going to meet my nutritional needs or is this just something that I'm putting in my mouth

because I'm hungry? ... A lot of trial and error—mostly error. But I think a lot of it comes with, with years too, and experience. It wasn't anything that anybody taught me. It's something that I had to try different things and see how my body felt. And try different things and see how my heart felt. And try on different beliefs and see which one resonated. And it's still a moving, you know it's a moving target. I'm still learning what things I need to indulge in and what things to stay away from and where that line is. And sometimes it moves. You know if I am not doing things that are great for me then sometimes that has to be OK if it's the very best I can do in that moment because that also takes care of my spiritual health. It keeps me from that negative self-talk. ... And I say that because, you know fast food is a thriving business. Drugs are a thriving business. Alcohol is a thriving business. And these things are likely not going to go away anytime soon because they are thriving businesses. I think people are becoming more conscientious but I'm not sure they always know what that looks like. ... And then people are also always looking for ways to fill the silence in their lives. They're attached to their cell phones, they have 50 things in their television cue that they're watching, they're reading articles on the internet, and getting on Facebook. Not taking that time to sit with themselves in silence and be still and hear what's going on in the background of their own minds. Not paying attention to what their body is doing with what they're giving it. ... Because a person has to choose to engage with them. And if you can give somebody a prescription for an antidepressant or a, you know an Advil for their pain, or you know this other thing that makes it, people are looking for the easy thing. Not realizing that the sustainable thing is that, that deeper understanding of how those things are connected.

And so I think maybe the best way to share that is to like give an entry idea that this even exists. That these things are connected. **Marya Halvorsen**

- I have my own, something that works for me when I'm feeling anxious, when I can't sleep, when my mind, and my stomach is, good old hot water with half a teaspoon of sugar. Yeah. Just lay, lay down, lay back down, pray. I pray every night the same prayer, ask for God's guidance and peace. And He'll take care of us, whoever's in the house. That's it, that's my Mom's remedy. She had a nervous stomach. A couple of times when I was alone here I did have a bad bout of diarrhea. All by myself, I didn't know what to do. So I did that and I calmed myself down. See I've never lived alone in my whole life and now I have to sometimes. I'm not afraid, it's just that anxiousness but I'm not going to take a sleeping pill. ... Well, depression sets in. I had severe depression, this was just when Valium was being known here. I would not take it—stubborn nature. Even then I didn't know that it, that kind of medication can be addictive, you know, addictive in a way that, “ok I don't feel good I'm going to pop a pill,” even if you don't really need it. Anyway, Valium and I, we didn't connect. ... I believe in helping. At least ask them if there's something you can do to help. My friend, she used to see me walking to my work and my head was down and I didn't know it was down. And she'd say “what's wrong with you, it's a beautiful day?” And we just don't know what we look like to others sometimes cause some people can smile through everything and I never asked her that. Well tears are healing too, they are. **Florence Pestrikoff**

- Oh, yeah. Well again, just for me, when, when things are going internally not so good, I mean not physically, but I know when I've done something or not said the right thing, or said the wrong thing, and I truly have to regroup. So, and there are things that I'll do you know, or amends that I'll make. And making the amends is part of the spiritual healing as well for me. It's not easy, it's humbling and I don't like doing it but I know just from experience that that will make me feel better and alert me, alert me next time certainly. Otherwise physical things do happen to me. They're just, yeah, they will. So that's my awareness there. ... Well, you know if they're having the depression and the anxieties and the temperaments, then they don't have the spirituality at all. And that's where they're lost. You know that's I think where the inability to get their lives back together. But when they are given the tools or, or they're, they're not necessarily taught but they are experienced through others, in talking with others and interacting with others, I think that then they will recognize that there are other avenues besides the alcohol or the pills or the depression. But that's a choice that they would have to make. They have to get down I believe far enough to know that what they're doing isn't working or to remove themselves from the situation that's causing that. But they have to be around, like Florence says, positive people and that's part of their spiritual recovery or spiritual renewal. And then that gives them that element of hope. That's the first thing I feel that they really have to get, which is a big part of the spirituality. I mean it'll say it in any book, in any documentary, anything, that hope is one of the first things, that if they could recognize that. ... As you know we're all growing older. There's no way to avoid that, and that's OK, but we don't have to grow old. Old is different. Old is when you do get grumpy, when you do get selfish, when you do get disagreeable, but older, that's

something we all will do. But to do that gracefully, with commitment, being willing to share, and so otherwise you will be old. **Susan Malutin**

- Oh definitely. I absolutely believe that if we hold things inside you know that then we're not releasing those—whether it's a counselor or hiking a mountain or you know processing through something that it more time, you know it comes out some way physically or emotionally. ... And I also think that with many cultures you know that addictions have a lot to do with being out of balance or in discord. So having that, the ability to kind of get back with nature or to get centered and to be in the present. Addictions are I think, people use addictions, you know alcohol and things like that to hide something that's hurting them, or traumas that they've had in their life or generational traumas. So I think being out in nature and doing spiritual things, you know like sage and sweet grass, and things like that is important. **Gwen Sargent**

- And when I find a way that, when I find things that I have done in my life and notice that it's not right I try to fix it. I try to go back and say "I'm sorry, I didn't mean it, I didn't mean what I said, I didn't mean to say it that way, this is what I was thinking when I said it." Because a lot of times when you're talking to people about different things, you say things that you don't really mean to say and you don't even know that you even said it. And then even when you said it, it might not be what you want to hear. So when I said it, it might be offending instead of accepting. So always remember you know when you go to bed at night or first thing in the morning you have that, ugh, that moment of, I did something yesterday and this doesn't feel right today and you try to fix it. You try to

undo a negativity and put the positive back in there and a whole bunch of love. ... When I, when I was drinking I didn't have any, I think that's part of the depression too is cause I was drinking. And then when I sobered up I, like I said I was seeking sobriety so I stayed around people that were sober. I went to AA meetings. I listened to all the stuff that people said and some of it was good stuff and some of it wasn't. And so I took what I wanted and threw out what I didn't. And I think we, you know as we go along in our world we have to look at you know one minute it looks fine and then it doesn't so you got to get rid of it. ... So I had to deal with that in my, and I went into a deep depression over it and I didn't know at the time that I was depressed. Nobody, back then nobody tells you that you're depressed and how to deal with it. And I can remember, I can remember a description of that depression was having to look out the window and the window was so dirty that you couldn't see past the window even if the window was clean, you couldn't see past that window and that's how depression was. And as I started to see things around me, the depression started to go away. The window started to clear up and I started to see things. And by the time I was done with that writing class, he said that my depression was over. Because all it took was for me to realize that it was there, that it was consuming me. And if I had continued to let it consume me and miss out on the world, I wouldn't be here today. I'm sure of it. ... I was just thinking, I was thinking that one of the things is just to be aware that it's there and be aware when it's taking over so that you have the control that you don't let it run rampant.     **Judy Simeonoff**

- I was telling Lydia that I read an article and I don't think I could say it like it said but spiritual women, this article was in a women's magazine, they seem to have less headaches and whatever. **Julia Naughton**
- Depression I think. That's the biggest sign or symptom – because they're fighting spiritually. And they don't think they have what it takes to fight that spiritually cause they're down. They feel they're not fighting strong enough. A lot of what happens in depression is they feel they're not fighting strong enough and they put their self down. So it's not that you're feeling put down by others, it's you yourself putting yourself down. That's what true depression is. It doesn't matter what anybody thinks, it's you yourself, your greatest enemy. ...Now that I've done some work with my depression, I lost a lot of weight, became more active. So you know it's not called winning over depression cause you'll never get rid of it but managing it better I guess is spiritually understanding that it's you and not anybody else in the world that's truly your greatest enemy. And depression, especially in depression it's not what you think other people think of you, it's what you think of yourself, what you believe is what you think. So understanding that and getting more, well getting it under control for me and then gradually I kept thinking the person I used to be where I could was more physical? As a child I went through counseling and as a young adult I went through counseling, as an adult I would do counseling and that never really helped. In fact sometimes counseling made it worse. Depression is kind of, I don't know, one of the most difficult things to treat as an illness because you don't know how to treat it. Well an outside person will never understand how to treat it but the person that overcomes it will become understanding how to treat it

within themselves. That person has to come through it on his own. ... So your mind doesn't get used to one way of thinking in depression, it changes so it makes it deeper, deeper feeling, it's what makes it, certain depression more severe at other times. So looking at the whole picture in depression and understanding the types of themes that might go on through the year helped me understand how to combat it spiritually within myself. Like the depression now, this time of year it's much different than depression in springtime. Those are two different kinds, two different themes going on there. That's how I sort of came to the understanding of how to control it myself—understanding it spiritually and physically. **Teacon Simeonoff**

- When my Mom passed away I felt myself closing down and I was closing down. And I had to go out and find ways to relieve that tension, and relieve that stress, and relieve that pain. And it was, that's how I figured out that the best place for me is out in the wilderness, and being alone in it, being able to talk to God, pray or just meditate. ... I don't think necessarily it takes a crisis but for me it was and that's what it took for me to figure it out. ... I live the life. And if someone asks me about it then I'll explain it but I don't just say, "you know you should be doing this or have you thought about this." I wait for them to notice it to say, "what are you doing different?" Yeah. Somebody said that they're not willing to hear it if they don't see it first. And by seeing it, it opens up their mind and their spirit to be able to accept what you're going to say. Some people do. In the Substance Abuse portion of it where people have to come through court systems to get their classes in order to satisfy the court system, you get to give them all the information but if people aren't ready to accept it, it's just information that they're

logging in, “yeah, I know it all, I got it, this is fine.” But until they say, “OK this is probably causing a problem with my wife, this is causing a physical problem in my body,” they’re not going to be willing to make changes, you know to make things different. Yeah, it’s just information. **Julie Kaiser**

- Well I see people that are looking for peace and want to be without all the stress that’s confronting them, that life is bringing them. I’ve always, I mean my senior year at college, my roommate started smoking marijuana and they were getting stressed out. It was time to graduate and I just noticed, to me, they were being weakened by the stress and by the concerns, maybe things they didn’t share with me. But they would always grab me and they called me “Marvy” and they’d say “you know, you’re happier than we are and you won’t smoke with us, you know you won’t take any of this marijuana but you’re as happy as we are if not more.” And they couldn’t understand that. So I’ve always looked at the Bud Light and the Coors Beer and the marijuana as a crutch. And I felt bad that my roommates, cause they were on athletic scholarships at the university. And I wasn’t that good of an athlete. I wasn’t in their league, let’s just say it that way. But here I was and they just couldn’t believe, they would use this term “you just got it all together Marvin.” And I didn’t understand that. We can all, you know I feel through faith, cause I have to get strength from somewhere too, you know if my finances are getting tight or my son is in jail because of something with drugs, you know got arrested, DWI was one thing he got arrested. So we were able to work through all the confrontations, you want to call them the battles of life, challenges. ... Yeah I feel that they, well like ulcers is something I guess I could use as an example. Cause I would feel

bad, I would see people, I would think they were going to lose their cigarette the way they were inhaling they were just sucking on it so hard. My God, I hope they don't take the whole thing in and, but they would be so nervous. And yeah, so I think that goes hand in hand. Your stress level, you know if there is no peace in your life, no hope, you have no hope for tomorrow. This is why I tell people faith is become very real to me. It's carried me through all of life's storms. And I mean I don't want to brag and boast but yet I will blow my horn and say I feel like I'm on top of the world. You know, things are that well. And yet I don't have no million dollars in the bank you know but all is well with Marvin and Pamela and our 3 little poochies. ... You can be maybe, well I don't know I guess I just see the, groups of people, they, cause sometimes I'm always in the car when my wife's gone into the store, and boy I see an awful lot of people going into the liquor store and coming out with bags of stuff. And that to me, they're out to get something that'll calm them down or bring maybe some peace in their day or deal with some of life's challenges. So I put a lot on the mental part in myself that I am at peace with everything in my life. And but I'm one of these extremists that tell people "I believe I'm the happiest person here in Kodiak." And I say this at church you know that that's what I believe. But I am that blessed in my life with my health, with my family, my children. I'm just beside myself with how I'm loved, how I'm received. And so I tell people that obviously forgiveness is a really big thing cause I wasn't the perfect father, I'm not the perfect husband but yet, my family loves the stuffings out of me. And I'm, so when you put your physical health, your mental health, your, how you feel about everyday life and how everything is going. And I mean even my gaw dong dogs are over me and so full of love. I feel like I'm really on top of the world because of how blessed I really am. I mean

it's real what I'm walking in and I get to share it with others. You know when they "how could you be so happy, how could you walk in what you're walking when I know you're confronted with, you know your son was into drugs." Yeah but you know he got out of drugs you know. We loved him out of his drugs. And so that's really a big pill I think that I take is all the love I get from my own pastor at the church and my own friends, they're good to me. That is a good pill. **Marvin Frost**

- And it all kind of comes together with—so holistically healthy I think for me has to start with being sober and an unaltered state of mind but it also comes along with the mental health. Mental health to me has also been something that's been a focus of my life because of not being able to, having lived in, being somebody who consumed alcohol. I had an alcohol problem. Instead of being able to overcome that until being in my late 20's discovering that I had all these sort of really negative and anxious feelings that I had to seek medical treatment for. And so it wasn't just a substance abuse issue or it was something that was probably a form of self-medication. And so this is my long round about story. ... And I think that just having sadness and despair. I think sadness and despair kind of comes along with that as well. I think that there's a lot of it in our Indigenous peoples who are suffering from alcohol and drug addiction and child abuse and sexual abuse and not having the realization that there's hope. That there's a better way to live. You know I really feel like if you, I mean it took me like a decade to start to understand the sort of control that I had over my own life by controlling what I put into my body and who I spent time with and how I spend my time. I don't know very many people that have gone from being really healthy to not healthy. Mostly the people that I

know that have had this experience are people that have been raised either being abused or child abuse or they are children of people who have drug and alcohol addicted and dependent and don't really have an understanding of a different way of life. And then they kind of emerge from it later when they start to realize there's a different way to be or a different way to live. I think that people that do, have something that happens to them, usually I mean I think it's something that happens to them. I mean I don't know. It would seem it would be sadness and despair, something. ... And also, you know you can tell if somebody, you gain a lot of weight and you know they've never really been like that. Or you know they stop taking care of themselves, usually that's a pretty good symptom that something's going on. **Natasha Hayden**

- You know I've read all of your questions and your overviews and things and what you're asking is really difficult. Holistically healthy is you're happy and comfortable with who you are and there's not a lot of people that way whether it's in the villages or in the communities, or in the urban centers, or New York, or Paris, or wherever. Knowing who you are, where you fit, and where you are in relationship to others is really mental health. And when you talk about mental health, Western society gets all spooky and you end up in a silo. And mental health is as important to physical health, or what we know as medicine in Western society, as anything else but it's often separated out. You know "I can fix the guys' broken arm but he's a kook." And they separate the two. And you know it's not "they," "we," we separate the two. And that is our culture because that is our worldview and it is the way we live. And so the concept of mental health as a piece of physical health is often overlooked. And when a person comes to a Western medical

center, it's because they have a specific problem. And that specific problem is what's treated and not in "it's a broken arm," and the individual happens to be the one that has the broken arm. So that individual, as individuals are, are overlooked. And not deliberately, it's the way it is, it's just the way it is. **Perry Eaton**

- Yes, it does. I believe in that. It is, when your faith is undermined, it completely disrupts your world. You know whether it's your faith in another person, your faith in your country, your faith in how you see the world, when that's undermined it completely affects you, and we don't acknowledge that either. And we don't say "wait a minute, this really is, this has shaken me to my core, this has affected me to my core." And we should acknowledge that so that it's part of the healing you know. And take into consideration that your faith, your belief, your worldview needs to be, you need to readjust it in a way that allows you to believe in the world around you again. So yes, I think, I think it does.  
...I made a choice when I was 10 years old. I've told this story before but I made a choice when I was 10 years old when I was out picking berries that I didn't want to drink. I'm no better than anybody else. I never consider myself that ever. I never will. But I made a choice when I was 10 to not drink because of watching my family, watching my friends' family, and suffering the abuses of it. And I made a choice to say "if I ever have children I never ever want them to experience what I did." And after that it put me on a very different path and in life. I just didn't want to have that in my life. I don't know why but, you know I mean I remember the day, it was like I was picking salmonberries for my Mom and I just decided I didn't want to drink. And I was like "I am not going to drink anymore." Not that I had ever drank. I was like, I had never drank, I was 10 years old.

I'm not going to drink. And after that, the decision, I'd made that decision. I never changed. Yeah, I've tried alcohol. I've been forced to drink. I've had to deal with those issues but I don't want, and didn't want that in my life because I saw what it had done and what it was doing. And I just made a choice at that age you know. And after that it snowballed into I didn't want to smoke. And so that made me even more of a weirdo with all my friends because everybody else was doing that and I wasn't. I was spending most of my time building models, reading. And you know I'm 50 years, 51 years old now and still don't drink or smoke. I think that has had a huge impact on my health. Cause I mean I look at my friends who are the same age as me and they look, no offense to them, but they look like they're in their 60's. You know it's like the alcohol and the abuse of your body catches up. **Sven Haakanson, Jr.**

- Sometimes you know trauma happens, loss, even just like joy happens. We tend to just acknowledge it either on a mental level you know or either if trauma has happened you know generational trauma, trauma from say a fire, accident, or even an attack, whether it's an abuse, but sometimes we also forget the words that are spoken, you know. And those tend to be the last that we deal with because it could be like a record, just like how you're recording, you know we can hear those. A situation and we can hear that, it's a memory that happens. Cause you don't even, they say that the physical body has memory you know. So also our brain, you know it has those memories and you can be put in a situation you know, life, our path, our journey, we tend to, it's like "how come I'm in the same place again?" You know so we forget those need to be healed, you know those memories. And that has to do a lot with that and it's so tied in, intricately tied in, to our

spiritual you know. And those need to be healed on that level. And sometimes it only takes through counseling, spiritual counseling definitely. So and then when it's constant neglect that has happened it'll manifest in your natural. You know because after a while when that same wound keeps happening, you know it'll show up in your body. Your temple can only take so much and then after a while it starts to show the wounds. ... Out of the way I've learned through time and experience that I could've said it, you know the same thing a hundred times but until they come to the place where they hear you know. And I know that sometimes when I'm talking and I can tell the difference, that I'll speak to the spiritual person. I'm not talking to the physical body. I'm not talking to their mind. And I kind of separate all three because, for me, it has to happen in the spirit realm before it can manifest in the natural. ... Cause just like for me I think addiction and generational stuff you know and curses and things like that people are on. The only way to help that person is being able to deal with the spirit realm. Knowing then the right words to bring healing and to bring deliverance to bring them out of bondage. So it's like dealing, talking to that spirit. So then you as a person need to be in that place when you're dealing on that level of spirituality. And it could be just you know people coming across in your path. You know and I can tell when they're listening and when they're not. They're aware just like our connections. We really made that connection and I knew then that I was not just dealing with you know just your spirit, that you were totally physically present. Your mindset was there, your spirit was there you know, and you were well physically. You were well, you were present with me. And I knew then that where we are sitting down today, I knew it was going to come. I said there's going to come a time. You're going to have, I says you're going to have that you know and it'll happen. And I

just was like “ok Lord, it’s time.” This is something for our people to have and you brought the right tools you know so that this healing. Cause one of the things I know too that sometimes men, not just saying men in general, male you know, people want to keep things secret. And that’s why I think a lot of our healing has gone by the wayside. Because we kept secret. If it’s in secret then it’s in darkness. And when we come to spirituality we’re going towards light. How is light? Light is, you know light is understanding. Light is knowledge right. Light sets us free. And I think that our people you know have had darkness that we’ve lost so much. We need to bring it to light. We need to bring that understanding. We need to bring that teaching you know. **Teresa Carlson**

***Soul Wound: Impacts of Colonization; Intergenerational PTSD***

- Let’s see, so also, I think there’s a generational piece in it too and I haven’t really, a generational trauma piece in it as far as when the Russians came and with Refuge Rock and all of that. And a lot of us haven’t really looked into what that is and we haven’t really, you know the leaders that are in the Alutiiq re-awakening culture and that kind of thing. So I think that there is some type of healing that needs to happen that will heal future generations with the Refuge Rock situation and Orthodox and all of that so. You might not have even gone through it but generationally somehow it’s in your DNA.

**Gwen Sargent**

- I think it happens when your beliefs are challenged and you accept the challenge. And not necessarily the change, but you accept the challenge. And the challenge always comes in

the form of someone or something or some force forcing you to change that belief system. And during that state of change it's chaotic. If you take the change in Europe between Catholicism and Protestantism, I mean a lot of people died over that issue. And when you take colonization and you come in and you disrupt that belief system, what you're doing is you're interrupting the person's harmony. You're creating the situation where the person is in doubt, the person is challenged, and to the point of unstableness. The conversion, on Kodiak, the conversion from Orthodoxy, well you can start in the beginning with the Russian conversion to Orthodoxy interestingly must have been pretty smooth. When we think about the old belief systems, you know the Shamans. And he was responsible for your health and he was responsible for predicting the future. Two of the biggest, scariest things in the human existence. He was demonized at one point by Christianity and he became a devil worshiper and he became the scapegoat. But he was really the village psychologist. He was the one who kept you in balance. And he was replaced by a new belief system that when we take a look at it, you've got a Shaman and he's got ritual, and he's got magic words, and he has magic things. How is that any different than an Orthodox priest? Pretty parallel when you really think about it. Plus the Orthodox priests had political power. So converting there, and you know there's no stories on the islands about the conversion. There's no nasty stories that have followed through. Now the conversion from Orthodoxy to Protestant or Catholicism is full of ugly stories. So we know that had there been these terrible things with the conversion, they would have followed through the stories. And today you can get all kinds of stories about the Americanization period. People like to look at the Russian period as brutal and terrible and killed people and it was probably true. But then you look at the

psychological attack of the Americanization period and it probably left bigger scars on the living. So when you upset that balance and belief, that's when you go into a collective unhealthy moment. That's when chaos, that's when uncertainty, that's when the balance is lost. When the balance is lost, it's terrible. And you look at some of the Pentecostal conversions on the island that have really tore up families. And many belief systems are fundamentally based on the assumption that everybody else is wrong. And that's not healthy in my opinion. I think everybody else is right as long as they're comfortable with their belief system. Yeah, the Russian period was all about physical labor and the American period is all about the domination of humans. ... Well I think that spiritual belief, no I don't think everybody knows they have a spiritual belief. Do they need to recognize it? I think that the need to be a second party or third party to that individual that's struggling. You know if you ask somebody what their belief system is, I don't believe you'll ever get a straight answer. Because I don't think people rationalize it every day in the form of "if I'm asked that question, this is the answer." It's not something you walk around with thinking "did I cross the line, is that what I don't believe in?" I mean that isn't the way we work. So if you're working with somebody that's, and I think the symptoms are when a person is struggling with identity. Cause I've watched the Native community of Kodiak Island re-emerge. And I'm an artist. And art is an integral part of culture. You cannot have a culture without art whatever. And so if you examine history and you bring out the art of the moment, oftentimes it will tell you a lot about what was going on. Art history is fascinating when you work through the, and most art historians are interested in "that painting was this piece" but actually what the real question is "why was that painting painted in that manner on that date?" What's going on? Is there a

revolution going on? What have we got? Narcissism? What's going on here? What is happening in that moment? It's like when we go to the museum and we look at what we would today term as artifacts and where does an artifact become art? Is there a difference between an artifact and art? I often find that artifacts are the other peoples' cultures stuff. So artifacts of early America are really interesting to Europeans. We see them as totally different. So if you go to a museum, and you're looking at a thing, the first question I always ask is "what's its utility, why was this made?" And when we look at the masks, there's an example. We look at the old masks from Kodiak Island and ask, "why were they made?" Well, they're tools for transformation. They're ritualistic tools that were used to allow us to go between worlds and place and object. So they have a utility. And once you determine what that utility is then you can fit it into the moment and oftentimes it reflects on the belief system. When we look at Shaker furniture of the 1800's, what do we see? We see fundamental design, simplistic back to earth functionality which practically, it describes the Shakers. So I'm always, I'm always looking for the utility. And the utility more often than not is tied to the belief system. You go and you see all the stuff and "boy that's really neat wow, gee whiz, that's really artistic." But what was the utility? Why was that grass woven stitch used in that particular basket? Well maybe they needed a watertight basket. Or maybe they needed a basket that actually acted like a string. So there's this utility function. To me it's everything. **Perry Eaton**

- Ok. So I mean there's so many different layers to what you're asking so I would think about it in terms of how do we peel away the levels, the layers so that we can understand how to move forward holistically. You know, we're dealing with a lot of issues that have

been bundled up and hidden away and not fully understood. People talk about trauma, the trauma of what happened in the past, “oh, that’s in the past, it’s in the past.” Well we’re carrying it forward. And we carry it forward in ways we don’t realize and the reason that I can say that personally is carrying forward the fact that we’ve been told we were stupid Natives from the time we were born to the time we graduate, has an impact on our mental state. When you beat somebody down, when you abuse somebody that way, you cower. You cower in not challenging yourself. You cower in knowing, knowing you can’t do it, by knowing by thinking it and therefore you follow through with that failure. “Oh, I’m a failure, I’m going to fall, I’m going to fall behind.” ... During the Russian period the men were stripped of any authority to protect their families. The women were raped at will. I don’t care what anybody else says, I mean that’s in the history books. And when you have, and the men could not do a thing about it, the fathers, the sons, the husbands, the brothers. And you take that and you inculcate it into their behavior. If they don’t say anything, they’ll be ok. So they don’t say anything and they think that kind of behavior is ok. And so you have all of these things. And the same thing for the women where the women are “ok that’s normal, that’s what’s going to happen.” They accept it. Until we decide “wait a minute this is not healthy because it affects generations, because it affects how we raise our children, it affects our communities.” And once we start to acknowledge these things it’s like “ok, we understand that ugly side, but how do we change it?” One of the ways I felt, and I still feel, the way we can change that is not, we can start with ourselves but we can start with our children. When I had the privilege to work in Kodiak for the time I was there, to work in the villages, I would make it my priority to spend a week in each of the villages because one, every village matters, every

community member matters to our future and if we don't invest in them, and if I'm not willing to invest in them myself, then I'm not holding myself accountable. And investing in them was looking at their history, our history, showing them how powerful our collections, our objects, our language, our stories were to them. And not preaching about it but showing, living it, laughing it, sharing it and celebrating it. And in a way that says "this is yours." I didn't have the privilege of having it but you have it, this is yours. This is your history, your knowledge. Yes, we have the ugly side but we also have this amazing beauty of ingenuity and ways of living and ways of being in a place that's extreme but yet we thrived there. We were thriving prior to European contact. And I think our communities are going that direction again. And they're thriving in a place where we haven't had that opportunity for a century or more. We're able to start thriving again as a community. So coming back to how a person is, or can be holistic, is empowering them to know our history, to not only decide what they want to do in terms of how they want to live their life but what they want to celebrate. And how they want to have their children be and who they want them to become. They don't have to be doctors or lawyers or scientists or anything like that. But if we have a healthy community then we'll get that. But we have to start with our children. To say look, we have this stuff we're passing on, we need to break that cycle, we need to break that cycle that has made us not whole. Understanding our history, understanding our community, understanding our family, understanding ourselves are all embodied in that and yes it takes a lifetime. It's not going to happen like that [*snaps fingers*]. We have too much, too much shit to deal with but we can change it. And to me, when I was working in the museum, working with our children was one way we can empower and make that change without

preaching. Without saying “you have to do this.” Give them the choice to decide what they do. Give them the knowledge to do and make these changes so they can be healthier. They make the decisions and then from there, their children make healthier decisions. You know we start with one healthy choice of understanding our histories. We’ve got to get through the anger of it and say “ok, we want to make sure we don’t forget our histories so we don’t repeat it,” but move onto the next level of celebrating who they are from their family level, cultural, to whatever religion they celebrate. And if you look at religion itself, at the core of all religions is kindness, being healthy in a way that doesn’t, doesn’t say be cruel to other people and don’t be judgmental. And so those are things that I think about in terms of what does it mean to be whole. And be honest. I mean we are all human. We all make mistakes. How do we move forward and learn from those mistakes so we don’t repeat them? **Sven Haakanson, Jr.**

- I think part of it is just understanding the generational aspect of where you come from. If you’re able to be aware of it, you know, or even just do some understanding and research because I think it’s important that we grasp the concept of our roots you know. That oh not just, I don’t like just to think like we’re robots cause each human being is unique, you know each one is important, you’re valued, you’re needed. You’re a viable human being. You know, it separates us from others. Everyone is important, you know and you’re unique. There’s not another one of you. And to me it doesn’t matter what path or what’s your genealogy, you know, it’s important that you understand that because it’ll enrich you. It’ll make you feel more whole. It gives something to you, you know, understanding that, that story. Cause there’s a story there and that story is part of who you are you

know. And you have value, you have worth, and that is important. And I like that. Each person that comes across, they have a story. There's something I need to learn from you, you know. You're going to enrich my path. And the more you're aware of who you are, the more you can deposit, you know, into my life, yeah. And I see it where we're giving to each other you know, and we're helping each other. We're all on a journey. We're all on a path in this world, you know, and I look out there and I see there's a lot you know. I can only tell what's on this planet, you know. But I could see what's out there. And obviously it's going to take a different type of energy to reach that you know but while I'm on this planet, this is where I am and it's beautiful. I love it. It's what's sustaining me you know and this temple that's on this planet. But there's this other part of me that's going to go on that other journey. And I want to be able to take. I can only see this side. You can see the other side. I need to see what you're seeing. So it's important that, it helps them to give you know. And the more they understand their culture, their roots, you know, where they come from. Cause your planet where you live on that side over there I don't know. I could only, when I go over there then I can see but still I'm not blood of that you know. And only you from your blood can you give to me, you know. And then I can better walk so maybe. **Teresa Carlson**

#### ***4.5.3 Summary review of participant comments on imbalance.***

These comments again reflect and stress the interrelated nature of somatic and mental/emotional manifestations of illness as well as the ability to reestablish balance when attention is given to the messages these symptoms represent since spiritual energy flows and communicates through an individual human being and between the human, natural, and spiritual

realms. As mentioned in Chapter 1, my previous work experience at KANA allowed me to witness the power of the early cultural revitalization movement here on Kodiak and the impact it had on healing for individuals and the community. At that time, I investigated the Soul Wound in great detail as my master's thesis (Dixon, 1999) was centered on the trauma of colonization and I was keenly aware that the implementation of traditional mechanisms of healing were more effective than contemporary medical health care and counseling techniques. It was obvious back in the 1990s, and it is even more evident now, that the reestablishment of Alutiiq Core Values and the accompanying cultural revitalization is an essential means for healing the historical trauma of the Soul Wound and validates the Indigenous approach to holistic health. In keeping with reflecting on these findings through Two-Eyed Seeing, I now reviewed the Western academic approach to recognizing the impact of trauma on health. I was intrigued and frustrated to learn that allopathic and contemporary mental health care had also made strides in connecting the influence of trauma on holistic health. Yet again, Indigenous ways of knowing and healing allowed them to be receptive to these relationships while Western academia was making much slower progress recognizing these connections. Please see Chapter 5 Looking Both Ways with Two-Eyed Seeing on Selected Findings for a deeper discussion of this topic.

## **4.6 Relationships**

### ***4.6.1 Overview of the theme of relationships.***

The Relationships theme was strong and it could be argued that virtually all of the input provided by the participants could fall into this broad category since it encompasses the Indigenous epistemology of an interconnected universe and the concept that there is free flowing communication between all realms. In order to present the data that validates this theme and consider this idea in greater detail, excerpts were selected to provide examples of Relationships in the Human Realm, Spiritual Realm, and Natural Realm. Relationships in all realms can impact

holistic health and great support for this understanding was provided by the participants. Again, the reader will notice a merging of thoughts that could justify placement into themes already presented or into multiple relationship realms. An initial attempt was made to separate the comments into the area that best represented the concluding intention of their perceptions. However, that effort commonly resulted in breaking up the stream of thought which diminished the impact of the participant statement. This exercise actually reinforced the realization that these Alutiiq Elders and Culture Bearers envisioned the interaction between all realms as ongoing, ever-changing, and influenced by the association between them. Therefore, these entries are not broken apart into the specific elements in the Relationship theme as the experiences shared about the interrelated communication between the realms is more powerful when this blending is able to be fully appreciated. The supporting data that follows includes comments that fit into these descriptions of Relationships.

#### ***4.6.2 Collected observations relationships in all realms: The Human Realm, the Spiritual Realm, the Natural Realm.***

These Relationships were described in the Human Holistic Health Model and are defined again here as follows: The Human Realm includes the self, family, friends, elders, mentors, and community; The Spiritual Realm includes the Creator, the Ancestors, spiritual influences and experiences with the cohesive energy force or communication network that provides integration; The Natural Realm includes connection to land, animals, sky, and waters of Kodiak Island.

- ...I wanted to add to that, the difference between religion and spirituality. I was kind of going on track of we've lost our spiritual and healing people and I think that along with that we lost the relationship to those people. You know we used to live in a very small

community and a few of them in the community would be spiritual healers and they knew you. They knew your daily activities and your struggles and your relationships and who you were and could use all of that to inform their treatment or their recommendations or their rituals that they led. And today we go in for a 15-minute meeting with someone we may have seen before or we may not have, and we get to tell them in about 5 minutes everything they need to know about our physical symptoms in order to treat us very quickly and get us back to work. And before we see them, we see someone else who takes our vitals, whether that's important to that visit or not. It's just very disconnected from who we are and from the way I think people should be treated in a health care setting or a healthy setting. ...I would suggest helping others. There's just something about being of service that connects you to your humanity and to other people and if you're open to it, the greater spirit. Whether that means just reaching out and calling a friend and saying "hey, how are you today?" or helping an elderly person around the house. Maybe you help someone out of Safeway with their groceries. Just like, or maybe someone you know is really struggling and you offer to help them. And for some reason it just makes a huge difference in terms of a perspective change. You know how bad is my situation really and where do I fit into the whole world? Am I just another person with another story? It, for some reason, is just very helpful. It's humbling but it also gives you a reason to have self-esteem. And doing things that are good for other people helps me feel good about myself. So that's what I like to recommend. ...One of them is that we have lost many of our healers in our community and we've lost them for hundreds of years now. So that we have a very small percentage of what we used to know. Right, our healing knowledge is really minimal. We know some properties of some plants. And we

know some ways to use some plants. But a lot of the ritual practices, the spiritual practices, the prevention, that seems like it's gone. And there isn't really a healer role in our community at this point. There's not even a spiritual leader role in our community at this point I don't believe outside of the church. ... And I had, it's funny I had a, there was an Alutiiq [*removed to preserve anonymity*] that changed my mind about how I was going to live my life... And so it just all came full circle and I don't want to let it go. ... Cause I think that that's really important. Growing our understanding of what it is to be Alutiiq people and encouraging people to like make your own songs and make sure you're singing the words right. It matters. And know what they mean. And know what they mean. Yeah and so all of that is important to me as a community leader but also just to teach kids about like what it is to be Alutiiq cause that is related to spiritual and emotional well-being. And I think that that's where I started on my path toward living this life and getting healthy. I didn't turn to Alutiiq ways of healing when I had, when I realized that I had problems but I've definitely come to Alutiiq spirituality and identity in terms of getting better you know eventually. Like if that first day that I needed I had to use what was around but now I'm here and have access to lots of Alutiiq things I get to see that as my connection. **Anonymous Participant**

- [*Responding to another participant*] Well that's where it's important like you said to, to surround yourself with healthy people, people who make you feel good, in a good spiritual sense. ... People always do things I mean different but again I have to remember that I am not responsible for them. That, that there is a God who made them and I'll just turn them over. He can take care of them you know. And usually He does and it's

because I let them go. And I don't try to fix it or don't try to make it better cause that's just not my responsibility you know. To love them and, like Florence said to pray for them, and to hope that they make good decisions, but again that's up to them. And those are things that have helped me stay healthy. ... Well, I feel for one too, if there is someone, don't give up on them. Don't give up. Everyone is valuable. Whether they've made numerous mistakes or mostly bad choices, our responsibility because we might be healthier and more spiritually tuned, our responsibility is not to give up cause the God of my understanding didn't give up on any of us. And we're a lot worse you know than some others. And so that's part of what we'll have to answer for initially, is how did we take care of others when we had the opportunity. So embrace them in that. Bring them to functions that are healthy functions. Bring them to Native activities if they're Native to instill that pride, that self-confidence. Especially our young people. Let them know how valuable they are, you know what they can contribute and that they do have qualities that are so good. That I see, that you see, that they haven't had the opportunity to see because maybe their environment hasn't been positive. So that's important, that's our, part of what we are responsible for. **Susan Malutin**

- That is one of the things that I do firmly believe, yes. That it's probably more of the basic, baseline, basis, whatever you want to call it—the bottom line. And you know spirituality, I kind of want to tie it more to the day to day than the mystical at times you know. Of course it's both. But one of the things that I've, and the reason I'm thinking of this today is because I shared with you the phone calls that I've been receiving today and like women don't have their support system anymore. The family unit has broken down.

Girls don't have their mothers, or their sisters, or their cousins close at hand. And I think something as simple as family support is a type of spiritual help. And things like that are missing. And it's something so simple. And it was just something that I've read, I don't know, I couldn't cite it but as little as 60 years ago there was very little postpartum depression. Girls had their families. Women had their families. And you know, one of the things that I really identify with that was my Mom has a twin sister. And there's four kids in my family, three or four kids at that point in her family and when one of them had enough, they'd say "everybody out—go to your Auntie's house." And we would all go, you know we're like little kids, we're not thinking anything of it, we were like "la la la la la." And looking back it's like "oh Mom was going to freak out." And there were other times when we'd be, and it's like "hey, here comes the cousins." And the whole troop of them, you know cause we lived within a stone, literally a stone throw of each other, and here they would all come and now she could have the house to herself, do whatever she'd want, take a nap, clean it up, whatever. And people just don't have that anymore. So and I think spiritual health can be as simple as those, some of those types of things. It's definitely a facet. ... That's kind of where it all started and then, you know just coming across different people in my life. You know I had, I mentioned an employer, and my, the manager in one of the places I worked, you know she was in her 50's and she'd been through it all and you know she just had a lot of wisdom to share. And a lot of it was based on spirituality. And then growing up in a Native community and learning of the different beliefs that the Native community have, has. And then going to school in Hawaii. They are still so deeply rooted in their spirituality and their cultural life is, is there day to day. That was a large part of it as well. That kind of spring-boarded me into

broadening my horizons with what I believe and actually formulating some beliefs that are kind of you know the baseline of where it all started. ... Yeah, you know I'm 37 years and I still hang out at my Mom's house every, every day, five times a week you know, all the time. And we argue and sometimes we don't get along but I don't look at that as a reason to leave you know. There's just more work to be done. And so, you know so many people have gotten into getting away from their family as far as possible, and that right there, you know that's capping off the root. Right there, you know there's so much growth and healing that can come from spending time with your family and they don't always have to be 100% on board with it. You know you can do it for yourself with them. And when you shift yourself, everything else shifts along with it. And you know they don't even necessarily have to be aware of what you're doing. But people are so willing to abandon their families. Yeah, it's heartbreaking. ... It's epidemic. **Gayla Pedersen**

- ... part of that is spirituality and it's having God in your life. And sometimes if you're Native American, I'm always teaching when I was working with clients, I was always teaching them that it was OK to have your spirituality come from being out on the land and just listening to the animals and the birds and whatever's around you and meditation you know because if you do all those things, you feel, you feel grounded and you feel better. And as a healer we need to be grounded. We need to have that because the whole part of us to be a whole person and if we're not grounded then we're just kind of unbalanced in all of our emotions—physical, mental, emotional, spiritual you know. So we need to keep that in thought when we're thinking about spirituality. Spirituality doesn't have to be religion. It can be can be the land, it can be the sky, in can be the

water—wherever you get it from. Like I, in the summertime I have this huge beautiful gift of wanting to be out on the water halibut fishing in the summertime. And it doesn't matter if I catch anything or if I don't catch anything. The purpose of being out there is that spirituality—the one with the water, the one with the halibut. Sometimes it's you know having that one and saying your prayer at the same time and asking God to provide for you. And sometimes He answers you and sometimes you know He doesn't but you still go home with a feeling of accomplishment from just being out on the water and the spiritual company. ...I think it's nice to be able to have somebody that you can trust enough that you can tell something to that you know it's not going to be gossiped down the road. And just being able to, when that special somebody, you know ask them if they can keep your confidence and you know I have, I really like working with KANA people for a long time because they all have to keep confidence over their jobs so I would release things to them periodically because I'd let them carry a little piece of me over the years. I think that's how come I have so many friends now—just gave them a little piece of me. Kind of like the other day, kind of like seemed like an example of way you did that with those young women at the museum when we were doing the craft. You were giving them a piece of you by sharing your stories with them. One of them was asking me to share some of the stories she remembered hearing from me about the raven, not the raven but the crow, when I was, when I was in the Rural Human Services and I was walking up from my house to the clinic cause they were going to tear the clinic down the next week and I wanted to get some pictures of the old clinic before they tore it down. And it was like 9 o'clock in the morning and it was Sunday morning and you could kind of know, it was just really quiet and the sun was shining and nobody's out and everybody

still sleeping or whatever. And I decided I'd go up there and take a picture and I heard, I heard these wings you know, swoosh, swoosh, swoosh, and I turned around and looked and this crow was flying towards me and I was looking at the crow and it was flying low and it was like flying over me like this and as it went over top of me it flipped itself over like this and it looked me straight in the eye and kept on going. And I thought "wow that was a beautiful moment" and then I wondered about it but never told anybody about it cause I kept it to myself. And then I went up to RHS and there was this Elder man that came in out of one of the villages from way up north and walked in the room and said now "I have a story to tell and only one of you will understand it." And he told the story about the raven, I mean the crow, I mean the crow flying over you and when they do that they dump their jewels on you and it's not like gold and silver and money and stuff. The jewels that they're dumping on you are the jewels that Native people carry, they, the stories, the life, the moments of precious interventions that you have with other people, and you know that feeling when sometimes you've met somebody and you know you met somewhere before but you never did, but you always have that feeling. I always think, always think about those moments and that, those are the kind of moments that you have that are precious. You don't even know you have them, you just wonder, you know you wonder for the rest of your life. Sometime it could've been someone that you met in heaven and that came down and was looking for them all this time and you know you finally found them. And you never know. **Judy Simeonoff**

- I spent a lot of time bouncing back and forth between my Mom's house and my Grandmother's house so there were things that I learned from my Grandmother about

drinking tea and sitting down just having time in the evening just to settle ourselves and to pray. And with my Mom, my Mom would take us out in the wilderness and show the different plants, and pick different plants, go berry picking or show us different things to help us, help our bodies to heal. Get a mosquito bite, there's plants out there to stop the itching and the burning and swelling that you got to know, somebody's got to teach you. My Mom didn't have a husband most of the time when we were growing up so she taught us when she would go out and kill deer or kill rabbits that you say a prayer and you're thankful and you give something back whenever you have to take from the environment. That you give something back and keep it balanced. So there were always moments. They weren't big teaching moments but they were small teaching moments that you look back and you culminate and you made a whole lifestyle that we're taught to be that way. Right, if an animal gives their life for you to sustain yourself then you have to give thanks and give back to it to keep that balance as well. ...It was all integrated. It was just all a part of our lives. And my Grandmother and my Mother, and we were raised in the Russian Orthodox Church and so there was always the religious aspect of it, of going to church and learning the rituals and patterns of being in the church. But it was also the daily, saying prayers, thanking the Lord for meals, and thanking the Lord for animals that have given themselves, thanking the Lord and thanking the Creator for the plants and all that He's given us, for everything, the fish, everything. Yeah. Saying a prayer at night when you go to bed to make sure your house is protected. It was just every part of us was connected that way. ...People will discount and they'll say, "well, I believe in God but you don't see that in our daily lives." You don't see Him when they go out berry picking to leave some berries on the bush because God created other animals that have to provide

and sustain themselves off of those bushes and plants. Leave a few berries cause you don't strip the whole thing. And you see people doing that. Or taking all the fish that are in the creek instead of just taking what you need. Leave some for someone else and leave something behind for, to give back. Say a prayer. ... Yeah, and the more they're used to speaking their traditional language, the more you'll find that. If they've already integrated into, like a lot of people on Kodiak Island, have been integrated into speaking English, a lot of the language is disappearing, or the traditional language is disappearing. You'll, even then, you'll go, "I don't know how to say it." I think people are remembering where they came from. You see a lot of commercials on TV about finding out about your DNA and where you're from. If people knew where their culture was and where their traditions came from they wouldn't be having to go through searching about their DNA because they already have that traditional spiritual connection with who they are rather than just ... a verbal connection. And that, I've had people come in or talked to people that have lived outside the state of Alaska and have come back and started to immerse themselves back into the traditional culture that have never, have stated that they've never felt as alive before. They found themselves in their family and their connections. I probably could keep on going, but I won't. I know it's fascinating. **Julie Kaiser**

- I think involvement, being a part of. So, so a spiritual activity for me is being a member of a community. It's how I fit into, into my community. I had this, I was dealing with ... the ending of a relationship earlier this year and feeling really like I was isolating, like I was exercising manically filling time. But really feeling an inability, a block and all sorts of things were starting to suffer for that. And I spent some time within my Native

community and, and kind of had a sense of this connectedness that, here I was surrounded by women who have influenced me in my life trajectory, people who I've known my whole life that have mentored me and been role models for me and guides for me. Then I'm at this camp with this younger generation of young women and men and, and had an opportunity to see what these women had done for me, I was now doing for their children and their grandchildren. And they would be able to do that for you know my relatives and just see how that all fits together and it connects and that deeper sense of purpose. And so I think that for somebody like me that's a good opportunity to, to see where you fit and that fixes a lot of things. So guidance into community activities with people that you're comfortable with, I think that matters, but also people that are good for you. ... I think that something that I was thinking about is like how you, so when I think about how I feed myself and how I'm connected to this place, for me that looks like it's important to eat foods from this place. So I feel best like when I'm eating like a high fish diet with some, you know a lot of, I don't eat a lot of local plants but, but eating plants and the things that I might naturally find in this environment. Because that feeds not only my sense of who I am in this place and who I am in my community but it also nourishes my body. And so there is a push for local foods. ... Knowing that, it might be a little easier, knowing that my ancestors have lived in a place for thousands of years and have found a way to connect to this land for thousands of years, that helps. That lets me know that there's something right there. And something that is truly home in a way that home isn't, you know it's not a house. It's a connectedness and an ability to thrive in a place.

**Marya Halvorsen**

- ...You know I think the best way to do that is while you're doing something. You know for me it's while you're, while you're going for a walk to have a talk, to have a conversation with somebody. For me I like to, I guess I think about stuff in terms of like my kids where you're out at camp where you have an opportunity you know to teach people stuff. Get them to engage in something that they wouldn't normally engage in. To me it's a spiritual thing to be able to go out on the water and harvest something and bring it back and to process it. I mean it's the whole process. It's not just going out and catching a fish. What do you do after you catch a fish? You have to clean it and you have to prepare it and then you have to cook it and then you have to eat it. To me sort of just drawing attention to how that is part of my spiritual connection with the world and you know keeps me grounded. I think that sharing that is really important. I don't know about sharing it. You know I think that we have, I think that in a lot of society has sort of brought people apart. You know like there, like when I was growing up we didn't have potlucks that I went to, hardly ever. There was like one a year and it was the New Year's Eve, the Proznak. And I think that because there's this sort of "this is my family, we're doing this," it makes it harder for people to have those sort of connections with other people that is really important. Like my kids are growing up and we go to potlucks, we go to meetings, anytime there's any sort of event in our Native community which is quite a lot, we go. And those kids, my kids are like "these are my people." **Natasha Hayden**
- That's a good question. My life has taken many, many, many turns. I've had many mentors. I've had about a dozen significant mentors and that's kind of unusual. And I grew up in two worlds. I grew up in the Native world and I also grew up in the non-native

world. I spent all of my summers on the same boats with men when I was very, very, very young. But I did K through 12 in Seattle. So there were things I did in the summer that I couldn't do in the winter and vice versa. And I just figured out how to get along. And it wasn't until I was in college and I took a cultural anthropology class from a Rabbi. And it was one of those "ah ha" moments. Because they were studying enclaves and what not. And I was the only one in the class going "well yeah that makes perfect sense, yeah that's what I do in the summer, and yeah this is what I do in the winter." And I was a cross cultural person and functioning in both and that kind of made me unique. And then I had a number of life experiences. I worked in a factory for four years. I worked in Boeing. I spent time in finance and banking and then I was exposed to Boards of Directors. I've sat on over 60 Boards of Directors and commissions. So I had a worldview that developed substantially beyond what the average person in America, not just Alaska, but America, would be exposed to. So I had a chance to visit a lot of pools and I think that really helped ground me. And it allowed me to see to some degree how spiritualism is applied in multi-cultural situations. And I, I've come to loathe hypocrisy and organized religion is full of it. I mean sometimes you draw the conclusion that the only function of religion is to justify the unjustifiable and explain the unexplainable. And boy isn't that going to be good? And it can change from Monday to Friday. ...I've done a lot of stupid things in my life also. And I learned from a few of them, probably not as much as I should. I like to hunt alone. That's stupid. But it's very spiritual, very spiritual. And it teaches you a lot about yourself. Where the boundaries are, where they're not. I can say I learned to be spiritual on the beaches. I mean I love to pukuk<sup>4</sup>, I'm a born and

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<sup>4</sup> Pukuk – Alutiiq word for salvage (Steffian & Counciller, 2012).

raised scrounger and I love to beach comb. And there is a solitude that comes with that.

And there's "ah ha" moments. **Perry Eaton**

- At the core to me, what we call spirituality, belief, religion, how you see the world. At the core of who you are is how do you see the world. Is it good, is it bad, is it just there? How do you live your life? And we make those decisions when we're kids because we've been taught by our parents and our community how we live. If our community is unhealthy, if our family is unhealthy, and it's not everybody, but we are going to make unhealthy choices because we don't know any better. That's the norm. ... We all get lazy and some of us let it go too far. Some of us don't pay attention to it. And I think also our society allows it to be ok to not take care of ourselves. And also I mean yes there are the other issues I talked about at the beginning where you have the stuff that we're carrying forward. I think the more we acknowledge these issues, and we have to get through the anger. Get through the anger of us losing our own, losing ancestors, losing our land, losing control of our space, losing our own control of who we are as people. We have to get through that anger and we have to be able to turn around and say "ok, accept that, yes, don't forget it, don't ever forget it, understand it, and then use that energy you're putting into being angry, change that energy and using it to make changes for the better." You know for the better in terms of the community. Because each one of us contributes to the health of the community. It's not just one person, it's all of us. If one person is unhealthy, we have an unhealthy community. It's, we're all interdependent. Whether you're living in a village, whether you're living in the town of Kodiak, or living in the city here. Think about how one person goes out and kills people. It affects everybody. And we think "oh

no, it's not my problem." Yes it is your problem because it's affecting you. Those actions of the unhealthy person affects you whether you're in a city or a village. And understanding that and saying "ok how do we make and help each other all stay healthy." Can you imagine what we can do with that? You know it's like "ok great, we know you're unhealthy, we know you have these issues." How do we get individuals who have chosen to be unhealthy to change their minds to be healthy? That's the harder question and that comes back to what I was talking about with our children. We start raising them with the ability to make healthy choices from the start and giving them the responsibility to make those choices. I can, like my daughters and with Balika, I mean she guided them to say "look this is your decision." Even from the time they were two years old, there's consequences to your decisions. You choose this, this is what's going to happen. You choose this, this is what's going to happen. You decide what you want to do. And then teaching them the responsibility of those decisions. And so I mean if we start to teach our children that and then when they get older they make healthier choices when we're not there to make it for them. And they do the same thing for their children and so on and so forth. ...It's community. Yeah. I mean it all ties down to, or all comes back to our community. And to me it's not whether you're Native or not Native, or Hispanic or Filipino or whatever. If you have a healthy community, you're going to have healthy children. And if we have communities that are at each other's throats because they all look different, have different skin colors, and "oh they eat different foods and they do this differently." Yes, but that's part of humanity. If we accept people for who they are and say "great, that's the part of the beauty of our planet, it's the diversity." Nobody's better. It doesn't matter who you are, you're not better than anybody else, you're equal. If we

keep that philosophy and you keep that way of looking at the world, it'll avoid the issues of racism. And to me the issues of racism comes down to lack of knowledge, lack of awareness of others, lack of wanting to respect others, but mainly yourself. Because when you start treating other people with disrespect, you're treating yourself with disrespect, cause it comes back. And I mean the whole idea of karma is that. . . . Same thing goes back to our traditional beliefs "oh animals don't have spirits." I'm sorry but animals have spirits. Everything has life and if we can't respect life then we are not respecting ourselves. It's as simple as that. When I go hunting one of the things I've tried to teach my daughters is to honor that animal for itself giving it to you. The animal didn't just die, it gave itself to you. And celebrating by not being wasteful of what they've taken.

Whether it's a fish, whether it's an animal, or even a plant, I mean it all has life. And if we don't have that kind of philosophy or even if we don't, you can believe whatever you want but I, that's what I believe in. And it's important because we have a planet that we've poisoned. We humans have poisoned it and we have not wanted to acknowledge that. More and more of us are. More and more of us are seeing it but the ones that are, that can have the change and help make the change have not. And we have to find a way to change that so that our children's children will have what we had, what we take for granted. **Sven Haakanson, Jr.**

- For myself spiritually? One of the things that I missed, growing up I remember the different things, whether my people remembered or whatever, I remember the tea times, the talking, having someone to share, your confidante, the Elder, the banya time, the maqiwik you know, they would have, get together and they would sit and they would

talk. And then the practices that were done in the maqiwik also. Those were healing times you know not just, you could see all parts of it, it's like I don't know, going into a womb or a sacred place you know cause it's that time when you got your heat, you've got your medicine that they collected from the earth and then just the, your friends that are there, you know those that you share. So you're dealing with all three parts of the person when you look at that. That's one of the things that was, I remember that was very special. You know and I remember sometimes when we were little, I would hear the women, you know you go by the maqiwik and you could hear them whether they were laughing or crying you know. You could hear sometimes the words, sometimes they were really mad, you could hear you know another woman would be, and they'd be talking their language, and you knew that there was upset. You know they were expressing. And then you go by again a short time later and then you could hear them laughing. Those are healing, you know that's a healing time. That was a practice that I remember growing up and seeing that. And then I know up North when I went to the seminary, I had that time you know with my students in my class. We were all students together. I had that time with them you know. And we would, hours, we could be in there for like 3, 4 hours, sometimes even longer. And they shared, you know, that they would have all-nighters of just that time. And they would go in, they'd get it, splash it really hot you know, and you couldn't even hardly take it, and they would wainiik<sup>5</sup> themselves. You know it was time to come back out and all gather, sit on the floor you know and it was just a time of sharing. And take time go in, come back out, go in, come back out, it was just you could feel it, the cleansing yeah. So those are important times. You know and I think culturally that was a

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<sup>5</sup> Wainiik - Alutiiq word for steam bath switch (Steffian & Counciller, 2012).

practice that our people had had you know. And I don't see that like it used to be, you know. So I miss that for myself personally. ... Yeah and you know and it was interesting because it was my Mom, she would take me to, on her visits you know. She'd say, I need to go visit so and so, I need to go to this house you know. And she'd take me and I'd be little you know, just 2 years old or so. But like I said my first memory is when I was one so I remember those things and having that time. And Mom would have tea with them. You know and I would sit right by her on the floor with whatever toys she gave me you know and I would listen. And they'd be talking in our language you know. So I understood what they were saying. It was something I grew up with and hearing and my just looking you know. And I would ask "why?" you know. And I remember the time growing up you know in Karluk, my primary years in Karluk and the sounds of us walking on the beach you know and along the spit you know and I remember. And Mom talking to me, you know and telling me one of the, and I brought it up to her and she says she don't remember. I told her exactly where we were, what we were doing, you know what the weather was like, and she was explaining to me something about walking in someone else's shoes. And she says "it's important to walk in someone else's shoes in order to understand why that person do what they do." And she says "you don't." It was her lesson about you know gossip. It was her lesson about sharing wisdom, life lessons. And she says you don't want to you know talk about the people. And it was interesting because I could see where my Mom got it because my Grandma with me. Taking care of my Gram, she also would say "unless I see with my own eyes, you don't listen to what other people try to say about other people." She says "we don't do that." She says "unless you see with your own eyes." And that was a valuable lesson about gossip you know and

understanding and to walk in someone else's shoes before you even think, put yourself "why would they do that?" How come their life is that way you know. And I always remember walking on the spit and those things, learning and just listening. And then walking with the older ladies you know and you learn a lot that way if you have an ear to hear you know so. Hopefully I answered that one. **Teresa Carlson**

#### ***4.6.3 Summary review of participant comments on relationships.***

As with the other themes, the participant comments regarding the impact of relationships on holistic health supported the Human Holistic Health Model in that the energy could flow in either direction. Relationships could be a factor in causing a health imbalance, or they could often offer a positive, healing influence on the health of specific individuals and on the wellness of the entire community. As mentioned previously, Western academic science is now acknowledging the connections and relationships that influence health in a balancing or unbalancing way. Indigenous ways of knowing incorporated that knowledge into their traditions and culture. A perfect example of a strategy that was long utilized and frequently mentioned by the participants that were interviewed was the maqiwik (steam bath, *banya* in Russian) that encouraged and facilitated the restorative power of relationships at the same time that physical benefits were received. Anyone who lives in Kodiak, or in any other part of Alaska, cannot help but be aware of this customary health intervention. Sweat therapy is a health focus of Indigenous people here in this state as well as in other Indigenous cultures world-wide and can also be considered from a Two-Eyed Seeing approach to understand the contemporary science that supports this practice as well as the traditional knowledge that has kept it invigorated over time. Please see Chapter 5 Looking Both Ways with Two-Eyed Seeing on Selected Findings for a deeper discussion of this topic.

#### **4.7 Overall Summary of Findings**

A review of these selected insights, so graciously shared by all participants, indicated that the mind/body/spirit connection was an integral and vital foundation to establishing, maintaining, or restoring holistic health. Rather than recommending better medical management of physical symptoms or improved approaches to treating mental/emotional health issues, the key focus was on recognition and integration of any spiritual practice that could contribute to the holistic health of the person, their family, or the community. Ultimately, useful guidance could be found in the direction provided by following the established Alutiiq Core Values and participating in the cultural revitalization efforts already underway and strengthening in momentum in Kodiak. Alutiiq Core Values provide a framework that allows individuals to seek personal solutions to maintain or restore balance of their holistic health and facilitates control over their own respective outcomes which was a key conclusion. Furthermore, the health of an individual person contributed to the overall health of the community. As a consequence, all personal efforts would also meaningfully impact the stability of relationships in all realms—Human, Natural, and Spiritual, according to Indigenous epistemology which was also supported in these findings. Participant comments during and after recording was stopped typically indicated their appreciation for the opportunity to discuss this topic. As mentioned in the Methods Chapter 3, several participants were initially concerned that they did not possess the required knowledge base to meaningfully contribute to the information they believed this study was seeking. In fact, it was commonly expressed that they were pleasantly surprised that the discussion allowed them to share their thoughts on these concepts and that there should be more conversations of this kind since the interaction itself proved inspiring and healing on its own merit. I was often invited back “anytime” to continue exploration of these ideas, and I have maintained ongoing involvement

with several participants even though data collection has concluded. These later connections will be discussed in detail in Chapter 6 Conclusions.

These results clearly demonstrate the difference in epistemological approaches to holistic health. Western medical approaches strive to isolate specific causation of health disorders while also separating the components of mind, body, and spirit when providing treatment for those seeking intervention to relieve symptoms. Physical symptoms are treated by medical practitioners who are typically very specialized in their expertise resulting in fragmented care. Emotional concerns and symptoms related to the mind are referred to mental health practitioners who cannot address somatic manifestations. Treating underlying spiritual distress to restore the balance required for holistic health is now an acknowledged Indigenous approach to healing the whole person. To reiterate from prior sections of this dissertation, it bears repeating that participants were not suggesting that contemporary health care practices should be eliminated and in fact they are often the best solution for many urgent health conditions. However, these findings emphasize that spiritual influences are frequently a central core to the manifestation of dis-ease. Finding ways to alleviate spiritual distress could therefore often foundationally address many somatic and emotional/mental health symptoms. These results also underscore and confirm that participants understand the interrelated workings of the universe which aligns with Indigenous epistemology and the concepts of quantum physics as presented in the Chapter 2 Literature Review. Utilizing a Two-Eyed Seeing approach was demonstrated to be the most effective way to address holistic health for Alutiiq persons and the Kodiak community as validated by this research. In conclusion, simple solutions that follow Alutiiq Core Values and promote cultural revitalization can be instrumental in maintaining or restoring holistic health. A discussion of how this research can be, and is being, shared with the Alutiiq community to

facilitate a positive impact in the delivery of health care services for the Kodiak community will be presented in Chapter 6 when the implications of this research are described in detail.



## **Chapter 5: Looking Both Ways with Two-Eyed Seeing on Selected Findings**

### **5.1 Acknowledging Historical Trauma to Move Forward**

To begin with, an appraisal of the Western medical judgement regarding the impact of trauma on health will be detailed, followed by currently recognized solutions to address these ailments. Then this concept will be discussed from an Indigenous perspective and will expound upon a remedy that incorporates the inherent wisdom of their own Alutiiq epistemology—looking forward. This holistic time-honored traditional approach to maintaining health and alleviating infirmity is as simple as living in a way that honors the Alutiiq Core Values as elicited from the guided interviews. Participants shared experiences that encompassed looking back at historical incidents that play a key role in their personal health and the health of their community. Responses also indicated their vision looking forward to their living legacy and the ability of their cultural values to promote healing and maintain well-being.

#### ***5.1.1 Understanding trauma—A devastating consequence of colonization***

Colonization has resulted in significant trauma that is passed down through generations for many Indigenous populations including the Alutiit of Kodiak. It was also a significant aspect of the theme of Imbalance that emerged during data gathering. It is important to understand and recognize the impact that colonization has on holistic health which has been profound even across generations. There is finally a shift taking place in Western medicine that acknowledges the connection between trauma and holistic health, where it once was limited to assessment only if an individual sought help with mental health issues. Even then, it has been only recently that specialists in this field have begun to assess and provide interventions for those with a history of trauma. An historical overview will be provided from a Western academic perspective and then the Indigenous perspective of how colonization has resulted in a Soul Wound that has been

understood by Native persons for a lot longer. Relevantly, cultural revitalization has also been known to be a way to heal that injury and has been utilized as a remedy by many Native groups, which again makes Alutiiq Core Values an important piece of that prescriptive approach.

## **5.2 Gaining Awareness of Trauma and Stressor Related Disorders**

Contemporary medicine is gradually beginning a significant transitional shift to acknowledge the mind/body connection by accepting that previous traumatic experiences can have a strong bearing on the holistic health of an individual (Bath, 2008; Doncliff, 2020; Evans & Coccoma, 2014; Gerber, 2019; Reeves, 2015; Wilson et al., 2013). Mental, emotional, behavioral, and physical complaints stemming from a perceived intensely distressing life event or chronic exposure to aggression and hostility have been causally linked since World War I (WWI) servicemen were first diagnosed with “shellshock”, though greater understanding emerged when health care professionals were increasingly tasked with assisting veterans following the Vietnam War (Wilson et al., 2013). The commonly observed symptoms of this condition came to be known by many terms including combat or battle fatigue, war or hysterical neurosis, and complete or operational exhaustion, with the designation finally evolving into the more universally recognized label of Post-Traumatic Stress Disorder (PTSD) now customarily in use. Ultimately, with the most recent publication of their Diagnostic and Statistical Manual of Mental Disorders (DSM-5) in 2013, the American Psychiatric Association (APA) settled on including PTSD in the broad diagnostic category of Trauma and Stressor Related Disorders. This conclusion followed deliberation that spanned several previous publications and revisions since it was first included in the 1980 third edition, along with consideration of emerging clinical research on this condition since the 1970s (APA, 2013; Substance Abuse and Mental Health Services Administration [SAMHSA], 2014; Townsend, 2021). A traumatic event is defined as a

distressing incident that is outside the usual boundary of human experience, and although it is estimated that over half of all individuals will have at least one such encounter, less than 1 in 10 will suffer from PTSD as a sequela (Townsend, 2021). Since a person who experiences such an event faces the potential for physical, psychological/emotional, or spiritual harm, this perception of threat induces fear that can linger long past the conclusion of the occurrence.

It should be noted that historical descriptions of stress related symptoms have been documented for centuries, yet it is also important to realize that clinicians have consistently argued over terminology, diagnosis, and management even to present day (Bell et al., 2013; Boehnlein, 2016; Jones et al., 2003; Townsend, 2021). As previously mentioned however, the concern over providing care to those returning from combat, specifically the Vietnam War, triggered more extensive research into the most appropriate way to recognize these disabling symptoms so that many in the medical community now have a basic understanding of how to assess PTSD and provide interventions (Townsend, 2021). To highlight the evolving attention the medical community is now paying to this mental health concern, the last prior iteration of the DSM, published in 2000, grouped PTSD into the category of anxiety disorders until ongoing investigations prompted the APA to concede that a reclassification was necessary in order to indicate the impact of trauma as a principal causation (Townsend, 2021). To clarify, the DSM-5 directs that Acute Stress Disorder is the correct diagnosis when a traumatic event generates troubling patient reactions that resolve within one month and stipulates that the diagnosis of PTSD would be determined when symptoms persist for a longer duration (Townsend, 2021). According to the DSM-5 (APA, 2013, p. 271), characteristic symptoms of PTSD must be associated with the traumatic event(s) and must include one or more of the following:

- Recurrent, involuntary and intrusive distressing memories of the traumatic event(s).
- Recurrent distressing dreams in which the content and/or affect of the dream is related to the traumatic event(s).
- Dissociative reactions (e.g., flashbacks) in which the individual feels or acts as if the traumatic event(s) were recurring.
- Intense or prolonged psychological distress at exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event(s).
- Marked physiological reactions to internal or external cues that symbolize or resemble an aspect of the traumatic event(s).

Reviewing these diagnostic criteria from this acknowledged professional psychiatric resource makes it obvious that general health care practitioners might lack the ability or opportunity to elicit these manifestations during regular or even acute patient encounters. More profoundly, health care providers may not connect indicators of emotional distress to a traumatic event in which case they may pursue lengthy investigations into a multitude of potential sources before they finally make the discovery that there is a traumatic basis. A description of common presentations that are more easily recognized during a routine patient assessment can be found in a basic nursing textbook such as Townsend (2021, p. 580):

- Re-experiencing the traumatic event
- A sustained high level of anxiety or arousal
- A general numbing of responsiveness
- Intrusive recollections or nightmares
- Amnesia to certain aspects of the trauma

- Depression
- Survivor’s guilt if involved in an event when others lost their life
- Substance abuse
- Anger and aggression
- Relationship problems

Realistically, psychiatric/mental health clinicians would unquestionably understand and utilize the DSM-5 as the foundational instrument for determining and supporting a diagnosis of PTSD, while medical practitioners would document subjective and objective signs that are more aligned with typical patient chief complaints<sup>6</sup> such as those contained in the second listing. Both were included here to illustrate again that, not only is there a separation of various specialties within the health care system, these disciplines utilize evaluation mechanisms unique to their discipline and treat patients exclusively within the realm of their area of expertise. As described in Chapter 2, patients are often “referred out” to mental health consultants for emotional and behavioral issues, and “referred back” to medical professionals for somatic expressions of illness, even when there is a shared interrelated underlying causation. Additionally, a diagnosis of PTSD would be further complicated when a clinician is unaware that the source of trauma needs to be uncovered, such as one that is the result of a historical event that has been handed down within a family known as intergenerational PTSD. This particular type of inherited suffering is known to Indigenous scientists and scholars as the Soul Wound and has been written about extensively by those scholars. One recent publication by Indigenous scholar Eduardo Duran even guides mental health practitioners to develop their understanding of the historical

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<sup>6</sup> A chief complaint is a standard statement documented in medical records to communicate the reason a patient sought care from a health care provider or clinic; often abbreviated as “cc” in the patient history.

trauma of colonization and is called *Healing the Soul Wound: Trauma-informed Counseling for Indigenous Communities* (2019).

There is a current push to institute an approach in health care that would quickly identify a life event that could be a causative source of emotional or physical symptoms in patient presentations. This will be posed next along with a mention of other models that have been advanced to address the therapeutic gap that exists in health care related to addressing the needs of victims of trauma.

### ***5.2.1 Western health care models that recognize and treat PTSD***

At present, medical personnel and organizations are being familiarized with the concept that trauma has a significant impact on the well-being of individuals in an effort to bring awareness to the need for change in the practice of health care delivery. This framework, known as “Trauma-informed Care” or a “Trauma-informed Approach” is “grounded in a set of four assumptions and six key principles” as described by SAMHSA (2014, pp. 9-10):

- **Assumptions—A program, organization, or system that is trauma-informed:**
  - realizes the widespread impact of trauma and understands potential paths for recovery;
  - recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system;
  - and responds by fully integrating knowledge about trauma into policies, procedures, and practices;
  - and seeks to actively resist re-traumatization.

- **Six Key Principles of a Trauma-informed approach**

1. Safety
2. Trustworthiness and Transparency
3. Peer Support
4. Collaboration and Mutuality
5. Empowerment, Voice and Choice
6. Cultural, Historical, and Gender Issues

The Center for Health Care Strategies (CHCS) website includes a Trauma-Informed Care Implementation webpage (2021) that provides a succinct conception for medical practitioners to consider during health care encounters with this summary statement: Trauma-informed care shifts the focus from “What’s wrong with you?” to “What happened to you?” (CHCS, 2021). Simply changing the way clinicians determine the chief complaint would initiate a trauma-informed approach which would be a big first step in determining the true underlying cause of somatic, emotional, or behavioral issues. Here it is extremely enlightening to reflect upon the Indigenous perspective on the value of individual and collective story in facilitating relationships. Not only does this impact personal introductions as discussed in Chapter 1, but it is a significant component of healing as will be presented next. Moving toward a universal Trauma-informed Care approach is definitely a step in the right direction for the contemporary medical system. It would enhance the ability of clinicians to more effectively address the intersected physical and emotional/behavioral expressions of trauma while also gaining a deeper understanding of the mind/body connection for all disorders. In addition, Trauma-informed Care could have a dramatic positive impact on the enduring effects of colonization for Indigenous individuals and communities by acknowledging the history of trauma to initiate healing,

recognizing the current intergenerational impacts and providing appropriate interventions, and preventing future re-traumatization.

The Centers for Disease Control and Prevention (CDC) and the American Academy of Pediatrics (AAP) are both professional organizations dedicated to assisting health care professionals and organizations identify the incidence of Adverse Childhood Experiences (ACEs) in their patients and communities in order to provide interventions that mitigate the long-term consequences of these occurrences of trauma (AAP, 2014, 2021; CDC, 2021). These groups promote the standard use of screening questionnaires to identify children who have been previously exposed to trauma or who are currently under this duress, as well as adults who faced those events in their childhood, as a direct assessment intervention of a Trauma-informed Care approach (AAP, 2021; CDC, 2021; Oral et al., 2016). The CDC and the AAP base their stance on the findings of an original 1998 study by the CDC and Kaiser Permanente of more than 17,000 “middle-class Americans” in which the presence of ACEs could be directly linked to adverse physical and mental health outcomes in more than 60% of adults with the added claim that these results “continue to be reaffirmed with more recent studies” (AAP, 2014, p. 1). Significantly, the AAP paper “Adverse Childhood Experiences and the Lifelong Consequences of Trauma” is one of the resources provided on this association’s website as part of a *Trauma Toolbox for Primary Care* in an effort to bring more attention to the need for expanded understanding of the correlation between somatic symptoms of illness and emotional discomfort for clinicians in general practice (AAP, 2021). In fact, this paper begins with words that make the mind/body connection undeniable and also call into question routine assessment practices in the current medical model:

Many people can identify a person in their lives who struggles with a chronic illness like heart disease, diabetes, or hypertension. Most people also know someone who struggles with mental illness, substance abuse, or relationships in general. Traditionally, the health care system would point to high-risk behaviors such as poor diet, drug use, or a sedentary lifestyle as the primary causal factors. Questions for patients have focused on “What’s wrong with you?” rather than “What happened to you?” (p. 1)

This paper goes on to assert:

Never before in the history of medicine have we had better insight into the factors that determine the health of an individual from infancy to adulthood, which is part of the life course perspective—a way of looking at life not as disconnected stages but as integrated across time. What happens in different stages of life is influenced by the events and experiences that precede it and can influence health over the lifespan. An expanding body of convergent knowledge generated from distinct disciplines (neuroscience, behavioral science, sociology, medicine) provides child health care professionals the opportunity to reevaluate what care is needed to maximize the effect on a child’s lifelong health.

Importantly, an extensive body of research now exists demonstrating the effect of traumatic stress on brain development. Health brain development can be disrupted or impaired by prolonged, pathologic stress response with significant and lifelong implications for learning, behavior, health, and adult functioning. (p. 2)

Although this paper is easily accessible on the AAP website as just mentioned, it calls into question how many health care providers who are not pediatricians would randomly or customarily peruse this site to learn about this approach for delivering health care. Granted, general practitioners, or any medical clinician who seeks information about current practice

standards for children, would utilize this resource. However, they would be seeking advice on specific health concerns that would be within their purview to treat. Once it appeared the issue exceeded the boundaries of their own expertise, the child would be referred to the specialist deemed most appropriate. Certainly, although this paper clearly connects ACEs to adult illness manifestations, health care providers are not normally inclined to seek information from the AAP or the SAMHSA. This leads to the conclusion that, at present, a majority of patients who filter through the medical system will never be assessed for the potentially significant impact of trauma on their holistic health. As a health care professional myself, I can attest that efforts to inform the Kodiak community about the move to implement Trauma-informed Care approaches included a presentation by Dr. Matthew Hirschfeld, M.D., Ph.D., Board Chair of the All Alaska Pediatric Partnership during the *Healthy Kodiak Community Health Summit and Forum* sponsored by KANA in September of 2019. A community showing of the film *Resilience: The Biology of Stress and the Science of Hope*<sup>7</sup> (Redford et al., 2016) was then offered at the Kodiak High School on November 12, 2019 with a panel discussion that followed about the importance of implementing ACEs scoring when providing care to children. I joined both of these events and advised the current nursing students to also attend. I present these details in order to shed some insight regarding the relatively new dissemination of these concepts in the local health care community. To this end, I informally queried professional colleagues about the timing of their own introduction to the concept of Trauma-informed Care approaches since this delay seemed disturbing. I found agreement among a range of health care professionals that this topic has been gaining substantial traction only within the last 4-6 years from their perspective, despite the fact

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<sup>7</sup> This documentary was produced by James Redford and Karen Pritzker to promote the use of ACEs to identify childhood stress in order to improve pediatric health outcomes. It was marketed for interested audiences such as parents and health care providers and promoted via personal networks rather than public broadcasting at that time.

that the foundational research occurred with the aforementioned study in 1998 by Drs. Robert Anda and Vincent Felitti through the CDC and Kaiser Permanente (Anda et al., 2006; Stevens, 2012). I must also add that another professional associate employed in a Child Advocacy Center, who was incidentally a participating panel member for the discussion that followed the Kodiak community film presentation of *Resilience*, reported being aware of ACEs and Trauma-informed Care for a longer timeframe which supports that medical knowledge is often contained in silos according to practice specialty. A Blog titled “The Adverse Childhood Experiences Study – the largest, most important public health study you never heard of – began in an obesity clinic” was posted in the *ACEs Too High News* on October 3, 2012, by Jane Ellen Stevens and also indicated that this information had begun to be disseminated more urgently. So, while it does seem that there is now considerable momentum for the utilization of a Trauma-informed Care approach in Western health care systems, it is not an established norm as of yet and it is also apparent that there is still more traction that needs to be gained before it is offered consistently for all patient encounters. Chapter 6 includes an overview and discussion of some initial steps that have been taken recently and are being developed locally in Kodiak.

However, while Western medicine is making endeavors to address the psychological and emotional distress that results from traumatic experiences, it is again evident that the lines of demarcation between health care disciplines cannot be viewed as fulfilling the desired requisite holistic approach. This exemplifies the recurrent theme that currently, contemporary allopathic delivery is seen as fragmented, and holistic approaches are not routinely in place. Consequently, it must be restated that Indigenous approaches to maintaining health and treating illness have been in place for much longer historically and have inherently considered the interconnected nature of illness expression. Therefore, a brief discussion of colonization including the

suppression of Alutiiq Core Values will illustrate a clear correlation to historical negative health outcomes for Alutiiq people on Kodiak. However, it will also establish that present-day ongoing cultural revitalization efforts can directly, vibrantly, and effectively reinvigorate these values in order to holistically improve the health and well-being of the community.

### **5.3 Soul Wound in the Kodiak Alutiiq Community**

During my employment with the Kodiak Area Native Association (KANA) from 1994-1999, I was privileged to witness the beginnings of the Alutiiq cultural revitalization effort here on Kodiak Island. The thesis I wrote for the Master of Science in Nursing Science degree in May 1999 was intended to acknowledge and document the successful health outcomes that were being realized as Alutiiq language, songs, dance, and vast Indigenous knowledge was being recovered, recognized, and celebrated (Dixon, 1999). An overview of the specific historical trauma of colonization on the local Alutiiq population was covered extensively in that work. It was based on my understanding that my Alutiiq colleagues were all involved with providing individual interventions and organizing establishing community programs that addressed the focused expressions of anger in their respective communities. Indeed, in my role as the Community Mental Health Coordinator at KANA, I was tasked with developing an Anger Management Program and supervising members of the Village Response Teams (VRT) as they responded to these behavioral crises and delivered interventions designed to follow up or prevent them in the future. The emotion of anger is based in the grief response. So, it made sense that this anguish would be expressed in both inwardly and outwardly directed behavioral responses and these were documented in that thesis from the perspective of the Alutiiq Rural Mental Health Providers (RMHPs) and other village responders themselves. The idea of Trauma-Informed Care was thus already established in this community during the 1990s since their cultural

revitalization was the means for healing grief and fostering recovery from the Soul Wound of intergenerational PTSD precipitated by colonization. Looking back, I was already witnessing the healing impact of the cultural revitalization efforts in the 1990s and the Alutiiq RMHPs were already providing those healing interventions. Western medical providers and mental health clinicians were not adequately addressing the Soul Wound from colonization effectively, and this should be a priority now that Trauma-informed Care is moving into the forefront and becoming part of active and ongoing considerations in the medical community. Finally, I will draw further conclusions and implications in the final chapter of this dissertation to make connections with the current research findings.

#### **5.4 Maqiwik—A Traditional Indigenous Approach to Holistic Health**

Western therapeutic techniques have limited effectiveness in alleviating the health problems of Native peoples because they are not holistic, and as such, are not culturally appropriate. To improve these health outcomes, traditional Native ways of healing should be incorporated into Western treatment plans so that they embrace the holistic needs of the Indigenous patient, their family members, and the community. Colmant and Merta (1999) consider the integration of culture into professional practice an ethical responsibility and cite the challenge of the American Indian/Alaska Native Suicide Task Force Report of 1996 calling “for validation of traditional healing and cultural diversity” along with the Task Force recommendation: “Traditional healing methods and those of mainstream culture must be treated with equal respect. More often than not, the two systems are highly compatible and complementary” (p. 56).

This section will explore an almost universal traditional healing practice, steam baths or the Sweat Lodge Ceremony, in order to document the established benefits. Supporting evidence

validates the health impacts of this treatment modality, confirming it to be a useful practice for maintaining wellness or alleviating some ailments (Simon, 2011). Indigenous patients should be empowered to seek out traditional healing methods and this will ultimately be a mechanism that facilitates the re-establishment of other cultural traditions and fosters community-wide, and even universal healing.

#### ***5.4.1 Health benefits of the Maqiwik or Sweat Lodge.***

Many Indigenous cultures throughout history have utilized sweat therapy as a mechanism for promoting wellness and have additionally incorporated this therapeutic technique into ritual ceremonies as a means of treating illness. Almost every known culture has employed a way of using heat for relaxation and therapy (Simon, 2011). Some of the civilizations that have been proven to use steam baths include the Mayan, Turkish, Roman, North American Indian, Islamic, Scandinavian, and Russian (Bunderson, 2005; Colmant & Merta, 1999, 2000; Crinnion, 2011; Eason, Colmant, & Winterowd, 2009; Simon, 2011). Among North American Indians, it is felt that “sweat bath procedures reached their highest development” (Colmant & Merta, 1999, p. 57) and evidence of this being an almost universal practice among Native tribes has been dated to 400 BC (Colmant & Merta, 2000). Native Americans used the benefits of the sweat lodge for various purposes ranging from simple basic bathing and providing warmth; along with more significant purposes such as social interaction and celebration; to more profound formal intentions such as cleansing of body and mind, preparation for war or hunting, childbirth, and rites of passage like marriage or initiation into adulthood (Colmant & Merta, 1999, 2000). Considering the combination of beneficial physiologic and psychological qualities that have been attributed to this restorative intervention, it is no wonder it played a part in each of those various activities.

Due to the physical as well as mental exertion involved in sweating, this treatment modality is effective for ailments of the body, mind, and spirit (Eason et al., 2009). The positive physiologic value of increasing body temperature is closely related to the effect that heat has on the heart and circulatory system which causes an increase of the pulse rate by 30% and results in almost doubling the amount of blood pumped through the body every minute (Simon, 2011). This improved blood circulation leads to the removal of toxins, the regulation of metabolism, the stimulation of the endocrine system, and most likely improves healing time (Bunderson, 2005). Specific physical ailments that have been relieved by sweat therapy include joint pain, colds, allergies, sleep disorders, skin diseases, certain heart conditions, and weight management (Bunderson, 2005; Crinnion, 2007, 2011; Eason et al., 2009). Affirmative psychological consequences include alleviation of stress, anxiety, seasonal affective disorder (SAD), hyperactivity, depression, and chronic fatigue (Crinnion, 2011; Eason et al., 2009). It should also be noted that sweating has long been associated with spiritual enhancements such as introducing an altered state of consciousness, stimulating introspection, and facilitating social connections and interpersonal interaction (Eason et al., 2009). Coyne (2005) discusses the importance of spirituality and the patient's belief system on the ability of treatment interventions to be successful. These psychic effects are considered fundamental dimensions of spiritual intelligence, which is the ability to accelerate fulfillment of goals along with attaining solutions to the problems of day-to-day life (Eason et al., 2009). Contraindications have been found to using sweat therapy during pregnancy, during episodes of fever, and for some specific cardiovascular and skin conditions (Crinnion, 2011). There have only been rare adverse effects to the use of heat to induce sweating, and most of those events have been linked to alcohol ingestion prior to beginning the therapy session (Crinnion, 2011). Despite significant beneficial

applications for using sweat therapy in treating various somatic and psychosomatic complaints, it remains an underutilized remedy in Western medical practice.

The use of the traditional maqiwik practices, similar to the Native American Sweat Lodge Ceremony has been an instrumental approach to improving emotional, physical, cognitive, and spiritual health for thousands of years by Indigenous people (Schiff & Moore, 2006). Because many of the physical and related psychological illnesses of Native Americans and Alaska Natives are the result of trauma related to experiencing the loss of their culture, it makes sense that reclaiming this sacred ritual would also heal the deep emotional pain associated with this source of grief. I have been in Kodiak for 24 years and worked with Alutiiq colleagues to treat the Soul Wounds manifesting as depression, substance abuse, domestic relationship problems, and risk-taking behavior that results in traumatic injury (Dixon, 1999). While working for Kodiak Area Native Association (KANA), I was privileged to be involved in the implementation of many efforts to recover their cultural identity, and with it, begin the healing process to recover from the impacts of colonization. Multiple efforts on the part of many individuals and groups achieved significant victories such as the revival of the Alutiiq Dance Group, a language preservation program, archeological digs to document their rich heritage, and founding a museum as a central location to celebrate these achievements, and are only just a few examples of the initiatives I witnessed. All of these activities provided opportunities for individual healing and that translated to the dissemination of community healing. My position at KANA introduced me to the value of implementing traditional methods of counseling strategies since I worked with the Rural Human Services Program (RHSP) through the University of Alaska Fairbanks (UAF). The counselors in the rural villages recounted the progress they made with their clients by having therapy sessions while berry picking, sewing, beach combing, and “doing *banya*.” *Banya* is a

Russian term for a steam bath and all Alutiiq communities had these structures and used them regularly. Of note, I have also witnessed the transition of using the Russian term *banya*, back to the traditional term “maqiwik” over the years I have lived in this community. Archeological digs on Kodiak Island also documented the use of steam baths being a major historical part of community life for Alutiiq people. I heard this custom discussed so often and listened intently to the many proclamations of its helpful properties that I felt I understood the importance of this convention to the Alutiiq culture. It was easy to imagine the support that could be provided to a person in need by their family and friends while taking a maqiwik together. Socialization, friendship, and positive effects of laughter, were recognized by American Indians for their healing qualities (Schiff & Moore, 2006), and were all attributes of taking a maqiwik with family and friends. I was able to experience a steam bath here on Kodiak first-hand after a long camping trip which allowed me to personally appreciate the rejuvenating physical effects of this traditional approach to wellness. I have also attended “hot yoga” classes here in Kodiak and there again was able to realize the physical relief of aches and pains after a session of sweating. However, during a visit to Afognak Camp several summers ago, I was able to experience the soothing relief first-hand at the conclusion of a long, full day of work and social activities and was also privileged to be invited to take the maqiwik with an Elder, thereby benefitting from her counsel and company as she shared personal experiences and wisdom during this interaction.

This maqiwik finally felt like those I have heard about so often and were repeatedly described during the participant conversations—this maqiwik not only relieved my body, it calmed my mind, and inspired my soul. Through the research of reviewing this health intervention, I have learned that the psychological impact of participating in maqiwik sessions was a major focus of this Native healing method, at least during this post colonization period.

Indigenous epistemology is concerned with connections and the importance of maintaining balance and harmony with their relationships in all of creation. Health is realized when this balance is achieved and illness occurs when there is some aspect of disharmony in the universe (Cichoke, 2001).

For comparative purposes, the Native American Sweat Lodge Ceremony specifically addresses the health concerns with the probability of a successful outcome because it is so profoundly based on the Indigenous worldview. In the article *Crying for a Vision: The Native American Sweat Lodge Ceremony as Therapeutic Intention* (2011), the authors quote Sun Bear, Anishinaabe Nation, who gives us a profound description of how this custom is a reflection of the Indigenous outlook on honoring relationships:

The most important thing to remember about it is that it is a way for humans to give back to Creation some of the energy that they are always receiving. The Earth Mother constantly gives us two-leggeds a surface on which to place our two feet; Father Sun warms us, and Grandmother Moon brings dreams. The element of Earth gives us a place to grow food and the ability to make homes and tools. The water keeps us alive. The fire warms our homes and cooks our food. The air gives us the sacred breath of life. Through ceremony, we learn how to give back. (p. 1)

Garrett et al., (2011) also presents that the ultimate purpose of healing ceremonies from a Native perspective is to “offer thanks in order to create and maintain a strong sense of connection through harmony and balance of mind, body, and spirit with the natural environment” (p. 1). Further evidence of the merits of the sweat lodge are revealed in these quotes that were derived from various sources and included in the article *Using the Sweat Lodge Ceremony as Group Therapy for Navajo Youth* by Colmant & Merta (1999, pp. 57-58):

In addition to the therapeutic value of an evening in a wilderness setting – sweating and cleansing – there was camaraderie, nourishing food and drink. In the dark heat of the sweat lodge, the ritual eased the worries of some and enhanced the self-esteem of others. During the process people shared their worries, they testified about their difficulties, and they expressed their appreciation for the good things of life. The blessings of human relationships were especially acknowledged. (as cited in Ross & Ross, 1992, p. 297)

All of us who had done this together seemed to be of one mind (as cited in Boyd, 1974, p. 137).

The sweat lodge becomes a type of counseling center and place for group therapy; marriage and family problems are analyzed and remedied, personal problems discussed, inter-family conflicts are resolved, and problems involving fears, anxieties, and depressions are dealt with in a group way. (as cited in Lake, 1987 p. 8)

Certainly, these reflections reveal an Indigenous epistemology that identifies the positive influences of the sweat lodge as a meaningful practice for maintaining balance in personal and community relationships. It should be noted that many Indigenous cultures are in transition as they revitalize their traditional practices and that simply because a person has a Native American background, does not mean they incorporate traditional cultural elements in their life (Buehler, 1992). Still, the use of the sweat lodge has also been promoted for therapies that serve non-Native persons, such as in adventure education programs, who have also found them to improve the cohesiveness of the group and facilitate interpersonal bonding (Colmant & Merta, 1999).

Because the Sweat Lodge Ceremony is considered a sacred ritual for Native Americans, it is recommended that psychotherapeutic counseling that includes sweat therapy for people who are not of an Indigenous heritage exclude the ritual ceremonial aspects of the session (Colmant & Merta, 2000).

#### ***5.4.2 Applying this traditional health strategy to this research.***

Shroff (2011) states, “The concept of holism is international and ancient” (p. 6) and this leads me to wonder what caused the current medical treatment approach to shift so far from that perspective to insist on isolating causative factors of disease and denying the impact of relationships on healing and recovery. Fortunately, there is a global interest in restoring holistic thinking and practices which is very aligned with First Nation philosophies (Shroff, 2011). The nursing profession has always prided itself in being the members of the health care team to holistically consider the individual needs of the patient and family. A patient cannot be treated holistically if their cultural health beliefs are not respected and included in the treatment plan. Developing a background knowledge and regard for the Native American and Alaska Native worldview is a mechanism for enhancing cultural sensitivity (Shroff, 2011). It is my goal to be involved in the education and training of nurses and other Western health care providers so that traditional Native ways of healing, such as the maqiwik, or Sweat Lodge Ceremony can be better understood as an integral part of establishing a holistic care approach that incorporates Indigenous epistemology into therapeutic practice.

Provided below is *An Origin Story: How the Sweat Lodge Became a Sacred Healing Tool for All Peoples* – adapted from many tribal nations. Presented in and directly quoted from *Crying for a Vision: The Native American Sweat Lodge Ceremony as Therapeutic Intention* (Garrett et al., 2011)

In the beginning, a long, long, time ago, a sickness came to the First People. It was decided that a council should be held to discuss the problem. From every direction, all living beings came together in a great council to discuss the situation. For four days, they fasted, prayed, meditated, and sought visions and guidance together seeking Medicine to help in some way.

Eagle and Hummingbird were the first to come into the Circle from east, bringing a spark from the Sun to light the sacred fire. Trees and Beaver were next to come in from the south, offering some wood for the fire, rocks from the Earth to surround it, and bringing their little sister tobacco to make offerings. Bear came next from the west, bringing a basket filled with water from the rushing river to help contain the fire. From the north, Hawk and Deer came into the Circle bringing the quietness of wind to give breath of life to the sacred fire.

As the many clans of living beings talked and prayed together, no one noticed that the fire had become quite large. In a panic, Raven hustled over to the edge of the fire trying to help contain it, but as he got close, the fire singed his feathers black. Startled, he tripped over some of the rocks trying to get away from the heat and knocked over Bear's basket of full water onto the fire. As it began to steam, Raven started squawking for help, Bear urged all the animals to hurry and cover Raven with their hides. As all the animals covered Raven, he continued to sing and began to sweat. In this way, the entire community had offered their support to Raven in his time of need.

When it was over, Raven exclaimed that he had a great vision that this was to be called a Sweat Lodge that would be used for prayer and for healing. That is how the

Sweat Lodge came to be, and that is how Raven became known as a great doctor. But he never was a good singer. And so, it is good.

From this ancient story, one may connect to the seamless bond between nature, healing, and humankind, together represented in the cultural symbolism of the sweat lodge. (pp. 3-4)

Since so many of the Alutiiq participants acknowledged the healing benefits and strengthening of emotional connections of a similar healing practice, which were so connected to their understanding of holistic health, this deeper reflection on this traditional health intervention was provided as an example of one simple way to look at a health strategy from a Two-Eyed Seeing Approach.

## Chapter 6: Conclusions

### 6.1 Looking Back

It is now very evident that the simple acknowledgement of the healing power of the cultural revitalization effort on Kodiak can very directly facilitate holistic health for Alutiiq individuals and the community. I was fortunate to experience many of the beginning efforts of this renaissance in the early 1990s during my employment with the Kodiak Area Native Association (KANA) and made an initial attempt to document the powerful effect those endeavors were cultivating on this island. Since that time, a great deal of language has been restored, many artifacts, songs, and dances have been recovered, and the history has been more openly appreciated, respected, and shared. I now realize that at that time, I was observing the “Looking Back” phase of this cultural regeneration. Currently I am also privileged to be a witness to the “Looking Forward” stage that celebrates this rejuvenation with new art, songs, and dances, as well as words that express the present and future reality of these vibrant and resilient keepers of this majestic land. The purpose of this research was to gain insight into what constitutes holistic health from the perception of Alutiiq Elders and Culture Bearers. It has now been identified that contemporary health care services are not aligned with Alutiiq cultural epistemology, so recognizing those disparities can hopefully lead to proposals for implementing healing strategies that are more in synch with their worldview in order to contribute to this renewal. The results of this study fulfilled that stated purpose since holistic health was defined from an Alutiiq perspective. Medical services currently in place were described as fragmented and therefore incongruent with an Alutiiq understanding of appropriate holistic approaches that would more effectively meet their health care needs. Input was obtained that will positively

influence the provision of health interventions to more closely reflect Alutiiq culture and their worldview and be of more value in this Kodiak community.

## **6.2 Revisiting the Initial Questions Planned for the Study**

Looking back at the broad initial questions speculated when this study began reminds me that change in the scientific community, and specifically the medical profession, can sometimes be a slow turning wheel. Even advances that seem to be breakthroughs, or interventions that appear to be pushing new boundaries, have backgrounds that include extensive time and effort commonly on the part of many individuals or teams. I believe that this study can contribute to the shift that is occurring regarding the acceptance of new understandings about holistic health and the connection between all facets of illness and wellness as this review of the initial questions will demonstrate.

*Should Indigenous ways of healing be integrated into current Western medical practices as an adjunctive option for addressing the health concerns of patients/clients with a Native heritage?*

As described in Chapter 2, Indigenous healers were incorporated into health care clinics throughout the state including KANA. These Indigenous healers were, and are, utilized by Native patients when they are available. However, it is important that access is open and offered on a continuing basis and that they are included in care team planning as well as organizational processes. If they are only considered when a patient specifically requests them or if patients are unaware that they are available, these vital resources will be limited which has an impact on individual holistic health and community wellness. From working with Dr. Lewis-Mehl Madrona since our first meeting and being involved in his regular seminars that share the examples of best practices in other Indigenous communities around the world, it is evident that this can be

implemented better or enhanced in Kodiak. Fortunately, conversations about holistic health and openness to improving health care practice have begun with the Trauma-informed Care meetings and community team building that has recently been triggered as discussed in Chapter 5. Big changes will occur when Indigenous Elders and other Culture Bearers are included in the planning and implementation of healthcare services and I look forward to seeing progress in this area now that a movement does seem to be taking shape.

*What specific Indigenous healing practices would be sought and utilized if available through existing service provision options?*

Since the respondents were so emphatic about the importance of individual approaches being respected when it comes to the interventions that are best for each person, this would be an area for further exploration. Often, healing interventions can be as simple as being exposed to the cultural revitalization efforts already in existence in Kodiak. Any application of the Alutiiq Core Values can be a mechanism for healing or maintaining wellness. It is my hope that the basic message contained in this document will itself be an instrument of healing since it validates of the efficacy of those practices. Although validation was not necessary from the perspective of Alutiiq Elders, other Culture Bearers, and other Alutiiq individuals, it can be a resource the Western medical practitioners can use to begin to understand this cultural approach to holistic health. I once asked Dr. Mehl-Madrona how these changes in allopathic medicine could be facilitated or triggered and he told me to get this research published. It is his belief that contemporary medical providers need to see these ideas in official publication sources in order to not only be exposed to these concepts, but to accept them as worthy of their examination and

consideration. There are many providers in Kodiak who have already asked to read this completed dissertation. It is now up to me to share it and generate discussion among them.

*Since many Indigenous healers do not advertise their services, would it be practical for Western providers to utilize referrals to these Native practitioners so patients can access traditional healing therapies?*

This is yet again another area that will require further investigation and collaborative work between identified healers and organizations such as KANA, along with other local health care clinics. This question generates many others that cannot be answered at this time, or from the data that was collected with this investigation. For example, who are the acknowledged healers and are they even willing to provide interventions? As I stated in Chapter 2, some participants were concerned that I wanted to gather recollections of specific remedies or practices and they expressed concern that they could not recall details. In truth, the holistic health strategies that they ended up recommending are those that can be found by living in harmony with the Alutiiq Core Values. If Indigenous Elders and other Culture Bearers are invited to participate in the planning of health care services as I suggested in answer to the previous initial questions, this can be a mechanism for exploring this further.

*Are there additional community ceremonies or events that should be planned to promote wellness, balance, and harmony as illness prevention strategies or to celebrate community healing?*

It is my belief that the Cultural Revitalization effort on Kodiak Island at present is vibrant and continues to gain momentum. It is my humble hope that sharing the information gathered during this research will be a contribution to it. Specific application efforts will be discussed in the section that follows.

### **6.3 Application—Looking Forward**

Working from an understanding that any research study including Indigenous participants requires that it provide a beneficial contribution to that community has allowed me to consider ways to promote that end result along the way with input from Alutiiq Culture Bearer and Committee Member Alisha Drabek, Ph.D. At this point I have also established a connection with Lewis Mehl-Madrona, M.D., Ph.D., an Indigenous healer who is also a physician trained in Western medicine and is a prolific author and international speaker on the topic of Indigenous healing practices. Dr. Mehl-Madrona actively promotes the Two-Eyed Seeing approach to healing, and since attending one of his workshops in March 2018, I have been actively involved with his mission to that end. Ongoing encouragement from Dr. Drabek has been solicited to ensure that these efforts are fitting for this Kodiak Alutiiq community. In March of 2019, I arranged for Dr. Mehl-Madrona to provide a week-long series of presentations and a workshop here in Kodiak regarding Indigenous Healing practices which were well attended. Hour-long “Lunch and Learn” talks were arranged for Kodiak Area Native Association (KANA), Providence Kodiak Island Medical Center (PKIMC), and Providence Kodiak Island Counseling Center (PKICC). He also spoke with staff and faculty at Kodiak College which is the local UAA campus and then did a presentation sponsored by the college for the public. Finally, he held a complete weekend workshop which was attended by those who provide health care services here in Kodiak and interested others including some who traveled from Kodiak villages to participate.

All participants were welcome to the workshops and presentations. To encourage attendance from health care professionals, continuing education credits were awarded for each event except the large public presentation. Dr. Mehl-Madrona planned to return to Kodiak in August 2021; however, restrictions regarding public meetings due to COVID-19 necessitated that this event be postponed. It will be rescheduled when those constraints are lifted. I have already received requests for him to speak with staff at PKIMC and PKICC again and additional invitations have been received from Native Village of Afognak for their staff and from local Kodiak Law Enforcement. This last request is in direct response from an interagency Trauma-informed Care workshop held in Kodiak this June 2021 to help these responders increase their knowledge base regarding cultural considerations for those they contact here on the island. Personally, I continue to plan and participate in spreading the word about Two-Eyed Seeing working alongside Dr. Mehl-Madrona and independently. Dr. Mehl-Madrona has conducted three online seminars since he visited Kodiak entitled “*Two-Eyed Seeing: Towards a New Vision of Wellness through Indigenous Wisdom*” which is a nine-week series of talks with an international audience. Each week in this offering consists of presenters from a geographic area that look at healing in their location from both a contemporary scientific and a traditional Indigenous lens. Typically, a Western academically trained health care provider and an Indigenous healer speak about the work being done in their setting to integrate healing strategies from both perspectives for the people they serve. Dr. Drabek and/or Judy Simeonoff represent as Alutiiq Culture Bearers and I speak for allopathic approaches as we discuss our efforts to integrate Indigenous wisdom and healing practices in Kodiak. During the second iteration of this online seminar in December 2020, Dr. Mehl-Madrona was scheduled to be physically present in Kodiak on the date of the Alutiiq session but his trip was postponed, also due to the COVID-19

pandemic. Dr. Mehl-Madrona had also intended to introduce the vigorous Alutiiq resiliency he had already witnessed to a group of University of New England (UNE) medical residents he was supervising during that cancelled Kodiak visit as part of a cultural immersion experience. I was able to coordinate a two-day workshop that was delivered virtually to meet that objective, along with the instrumental help of Libby Eufemio, a Kodiak College colleague who directs the local Alutiiq Studies Program. This two-day workshop was well attended by local, state-wide, and international participants and was the illuminating impetus for changing the name of this research study from *Exploring Indigenous Holistic Healing Practices: Identifying Connections with Nature and Spirit to Enable Providers to Meet the Healthcare Needs of Indigenous People* to a title more descriptive and better aligned with the outcomes of this investigation, namely *Celebrating Alutiiq Cultural Revitalization: Pathways to Individual Holistic Health and Community Wellness*. As the findings were analyzed, it was evident that the traditional Alutiiq Core Values could be linked to the input I received from the Elders and other Culture Bearers who participated. It was apparent that the data gathered reflected wisdom that they could utilize and share independent of contemporary medical providers and so this workshop served as another healing mechanism and could be repeated, along with additional events offered. In fact, the speakers were recorded and their presentations are available on the Kodiak College website. The links have been requested and shared both locally and throughout the state since this event and are available for anyone who seeks to understand traditional Indigenous healing strategies.

Additionally, KANA has requested that Dr. Drabek consider creating a more holistic orientation program for newly hired employees and she has invited me to join her in creating and presenting this potential educational offering. Since these findings have been organized, developed, and presented in this dissertation, I am increasingly discovering ways to share these

results in the community and will remain open to future ongoing opportunities. The Alutiiq Museum is expecting a copy of this final dissertation to go along with the recorded interviews that were already shared and archived with them as was previously mentioned. I will also offer to present these findings during one of their frequent public community educational events. I anticipate that acknowledging the inherent wisdom of using the Alutiiq Core Values as a Pathway to maintaining or restoring holistic health will be a healing event in and of itself.

#### **6.4 Suggestions and Recommendations—Looking Forward**

I believe that continuing to look for venues to share a Two-Eyed Seeing Approach regarding health care services should be actively pursued. As presented in Chapter 2, an Alaska Native Traditional Healer was once available locally through KANA but was not replaced when she retired from the organization. There are other Alutiiq Healers available here in Kodiak and their skills should be recognized and referrals made to them. Alternatively, KANA could implement these traditional healing interventions into the treatment plans of those they serve, and employ traditional healers as part of their health delivery team. This is actually being done in other Native health care agencies in other parts of the United States and the world as confirmed by those presenting at the Two-Eyed Seeing Seminars sponsored by Lewis Mehl-Madrona, M.D., Ph.D. I believe the data from this research supports reinstating access to traditional Alutiiq healers and traditional practices on Kodiak Island.

At the very least, it appears that Western academically trained medical and mental health providers are making attempts to incorporate a Trauma-informed Care approach in Kodiak. Validating the need for this approach due to the cultural implications of local historical trauma would also enhance that understanding and any planned interventions for the future. Sharing the results of this research can contribute to that corroboration. As previously pointed out however, it

seems that a concerted effort to stay on track is imperative since simply losing one individual in a key service position here in Kodiak could result in minimal forward progress or momentum could be stalled if important agencies do not remain engaged.

It is important to take personal responsibility to move this knowledge forward. To that end, I try to be aware of opportunities to spread the word. Recently, I suggested that the PKIMC Hospital Auxiliary schedule an information session about the local burgeoning effort being made by service agencies to consider a Trauma-informed Care approach. This resulted in a presentation by a teacher who provided an overview of the concept of Trauma-informed Care and how this would be applied in the educational setting of the grade schools and high school. I have offered to provide a follow-up session about the impacts of historical trauma related to colonization and intergenerational PTSD which is scheduled for this November, 2021. In summary, when more light is shed on these topics, it will generate greater knowledge and understanding of what needs healing attention. It also brings awareness to what Indigenous ways of knowing have always understood – that we are all connected and our relationships can be strengthened to spread positive healing energy.

### **6.5 Implications for Future Research—Looking Forward**

Distinctively, Alutiiq Core Values can be embraced as a guide for channeling spiritual energy that ultimately results in maintaining or restoring the balance necessary for physical and emotional/mental health. Participants emphasized the importance of these spiritual connections and the ongoing communication between the Human, Natural, and Spiritual Realms. Important considerations include the concepts that therapeutic practices are highly personalized and that the individual must take an active role in their own health and healing. Alutiiq Core Values provide a key pathway that facilitates balance for persons in the Human Realm which consequently

promotes harmony in all realms of existence. Ultimately this ensures that our collective human impact is integrative rather than disruptive to the other beings that share this universe. Ongoing cultural revitalization activities naturally promote Alutiiq Core Values thus impacting the holistic health of individuals and the community. However, this study did in fact determine that there is work to be done in this area and that this input from Alutiiq Elders and other Culture Bearers can be the impetus for positive changes in the delivery of professional health care services as well. As I organized the data and frequently reviewed the Alutiiq Core Values, I realized that participant comments could also have been organized by their support of each of those Core Value elements. I believe it would be nice to do that in the future and share it as appropriate in presentations or gatherings. Any or all of the individual approaches to incorporating traditional mechanisms for maintaining health or promoting healing could be investigated further. Dr. Drabek connected the collection of Alutiiq stories to Alutiiq Core Values in her 2012 dissertation *Liitukut Sugpiat'stun (We are learning how to be real people): Exploring Kodiak Alutiiq Literature Through Core Values*. Dr. Counciller documented the power of language revitalization in the healing of the Alutiiq community in her *Niugnelyukut (We are Making New Words): A Community Philosophy of Language Revitalization* dissertation published in 2010. This research supports the explicit impact of *Celebrating Alutiiq Cultural Revitalization: Pathways to Individual Holistic Health and Community Wellness* to connect the constructive influence of Alutiiq Core Values on health and healing. Stories of the healing power of Alutiiq art and dance could be other examples of data that could be collected to support the Indigenous approach to health and healing. These collected personal stories were already established as a mechanism for healing as mentioned repeatedly. Gathering additional stories from Alutiiq Elders and other Culture Bearers should be encouraged, documented, and they need to be recorded. To

give an example that was very clear to me as I collated and organized the findings of the participant interviews, the simple act of sharing stories, enjoying their company during the meetings, and being inspired by these relationships was an act of healing and rejuvenation itself.

It was really hard for me to eliminate any of the wise thoughts and ideas that were shared. I now understand the importance of story on the health of Native individuals and communities. Every time they are told, the unique message that is needed will be imparted for each specific person. That is how it was for me each time I replayed these interviews. Although it was necessary to streamline the content into the themes, I believe the excerpts are true to their intended meaning, and any passage reviewed by the reader will deliver what is most significant for that individual. A story, or in this case a recorded conversation, might have a specific message one day, and on another day it may provide a new perspective that makes it relevant in a different way. Some inspire the reader with big insights, some cause reflection and introspection - all are therapeutic in their own right. These participants gave me these gifts and it is up to me to pass them along so that they can help all who encounter them. I will look for all opportunities to share these healing stories. Judy Simeonoff, one of the participants told me early on, long before we even scheduled a meeting to record her thoughts and impressions, that she believed I was “meant to record their stories.” Now that I have witnessed their healing power, I am grateful that they have been preserved. Participants commented often that these discussions need to be ongoing. Conversations that provide a venue for Indigenous people to share their wisdom and Indigenous knowledge moves the prophecy of the Condor and the Eagle closer to being fulfilled. Working together from a Two-Eyed Seeing approach provides deeper perspective and brings clearer focus to any problem searching for resolution, which benefits every entity in every realm.



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## Appendix A: IRB Approval



(907) 474-7800  
(907) 474-5444 fax  
uaf-irb@alaska.edu  
www.uaf.edu/irb

### Institutional Review Board

909 N Koyukuk Dr. Suite 212, P.O. Box 757270, Fairbanks, Alaska 99775-7270

October 10, 2016

To: Theresa John, PhD  
Principal Investigator  
From: University of Alaska Fairbanks IRB  
Re: [951775-2] Exploring Indigenous Holistic Healing Practices

Thank you for submitting the Amendment/Modification referenced below. The submission was handled by Expedited Review under the requirements of 45 CFR 46.110, which identifies the categories of research eligible for expedited review.

Title:	Exploring Indigenous Holistic Healing Practices
Received:	October 7, 2016
Expedited Category:	5, 6 and 7
Action:	APPROVED
Effective Date:	October 10, 2016
Expiration Date:	October 10, 2017

#### Required Information:

The PI mention that the Alutiiq museum is drafting a letter of agreement for the research data. A copy of that letter should be submitted to the IRB when the letter is finished and before any materials are deposited there. If a template is needed the researchers are encouraged to contact Rasmuson Library Oral History Department for sample "oral history gift" agreement (fairly straightforward and easily modified).

This action is included on the November 2, 2016 IRB Agenda.

*No changes may be made to this project without the prior review and approval of the IRB. This includes, but is not limited to, changes in research scope, research tools, consent documents, personnel, or record storage location.*

## Appendix B: Informed Consent Form

### Exploring Indigenous Holistic Healing Practices

IRB # 951775-1

Date Approved: 10/10/2016

**Description of the Study:** You are being asked to take part in a research study about Indigenous Holistic Healing Practices because you are an Elder or Culture Bearer with this wisdom and knowledge. Please read this form carefully. Feel free to ask questions before you decide to participate. The discussion usually takes about an hour. It will take more or less time depending on how much you want to share. It would be helpful if you allow the conversation to be recorded.

**Risks and Benefits of Being in the Study:**

If you take part in this study, your personal risk is limited to possible emotional discomfort. This may be caused by remembering past medical experiences that caused distress. You may stop the research process at any time if it causes unacceptable feelings or upsets you.

**Benefit Statement:** There will be no direct benefit to you. Knowledge gathered from this study may help spread Indigenous wisdom about healing practices.

**Confidentiality:** Please determine how your comments should be shared. Please circle **YES** or **NO** for each of the options below. Information gathered about you personally from the research will be kept confidential if you request. The researcher is a nurse. She is required to report information about the abuse of children, Elders or vulnerable adults. Do not share information of this nature if you do not want it to be reported. The Alutiiq Museum would also like to preserve a copy of your comments. The Alutiiq Museum would store the recordings indefinitely, and make them available upon request, if you agree to these uses.

- Information you provide may be shared with the Alutiiq Museum:       **YES**   **NO**
- Information you provide may be shared with the public: **YES**   **NO**
- Information you provide should only be shared with specific persons or groups: **YES**   **NO**

If only specific persons may have access to the information shared, please list them on the back of this form.

- Personal information about you may be shared. **YES**   **NO**
- Do you agree to allow this conversation to be recorded? **YES**   **NO**
- Please circle the type of recording you allow.       **AUDIO**   **VIDEO**   **WRITTEN NOTES**

**Voluntary Nature of the Study:**

You are free to choose whether to take part in the study or not. If you do take part in the study, you can stop at any time. You can also change your mind and ask to be removed from the study.

**Contacts and Questions:** Feel free to ask any questions you have now. You can contact me, Margaret (Margie) Mete, if you have questions later. I can be reached by email at [msdraskovich.alaska.edu](mailto:msdraskovich.alaska.edu). You can call me at 907-539-8148. This cell phone number is a local call in the city of Kodiak. My graduate advisor is Theresa Arevgaq John, Ph.D. You can also contact her at [tjohn@alaska.edu](mailto:tjohn@alaska.edu) with questions or concerns.

The University of Alaska Fairbanks (UAF) Institutional Review Board (IRB) examines research projects that involve people. This board protects the rights and welfare of people who participate in research. You can call the UAF IRB if you have questions or concerns about your rights as a research participant. This board can be reached by calling the UAF Office of Research Integrity at 474-7800 (Fairbanks area) or 1-866-876-7800 (toll-free outside the Fairbanks area). You can email the UAF IRB at [uaf-irb@alaska.edu](mailto:uaf-irb@alaska.edu).

**Statement of Consent:** I understand the process described above. My questions have been answered to my satisfaction. I agree to participate in this study. I am 18 years old or older. I have been provided a copy of this form. This consent was read to me if requested. A language translator that I chose has been provided if requested.

---

Signature of Participant & Date

---

Signature of Translator if Applicable & Date

---

Signature of Person Obtaining Consent & Date

**Appendix C: Alutiiq Museum Archive Letter**



December 10, 2019

Margaret Mete  
117 Benny Benson Dr.  
School of Nursing, Room 114  
Kodiak, AK. 99615

Dear Ms. Mete,

It is my pleasure to inform you that the Alutiiq Heritage Foundation Board of Directors has formally accepted your donation of an exceptional archive of oral histories to the Alutiiq Museum's permanent collection. We are most grateful for your generous gift and for your willingness to share it with the Kodiak community through our Museum.

The archive will be stored in the Museum's secure, climate-controlled collections room under accession number AM890. Anytime the oral histories are incorporated into a museum display or use in a publication, we will acknowledge you.

We thank you for helping the Alutiiq Museum enhance its holdings. Collections are the foundation of our work. They provide invaluable information on Alutiiq traditions for our displays, programs, and publications, and they insure that Kodiak's history will be available to many future generations of islanders. Your gift will help others learn for years to come.

Sincerely,

Amanda Lancaster  
Collections & Facilities Manager

## **Appendix D: Guided Conversation Prompts for Interviews**

Exploring Indigenous Holistic Healing Practices: Identifying Connections with Nature and Spirit to Enable Providers to Meet the Healthcare Needs of Indigenous People

Following data collection, the title of this dissertation was changed to: Celebrating Alutiiq Cultural Revitalization: Pathways to Holistic Individual Health and Community Wellness

### **Guided Conversation Prompts**

*I'm interested in learning ways to help people achieve or maintain holistic (complete or total) health. Specifically, I wonder if and how spirituality affects a person's wellbeing and the health of their community.*

I'm interested in how you would describe what it means to be holistically healthy?

Would you like to share your personal spiritual beliefs and practices and how they affect your life and your health?

I wonder if there is a difference between religious and spiritual practice.

What are some signs or symptoms that people experience to alert them to a change in their (spiritual) health?

What spiritual activities would be beneficial for healing or restoring health when someone is unwell?

I wonder if spiritual distress impacts physical and/or emotional health.

How did you learn what to do to stay healthy?

How did you learn about spirituality?

Do you think most people pay attention to their own health and spiritual needs?

What are the best ways to share the idea that spirituality is part of being holistically healthy?

Is there anything you would like to share about being holistically healthy or spirituality that I have not asked you about specifically?