

**Traditional First Nations and Métis Healing Methods:
Do They Foster Emotional, Mental and Spiritual Healing?**

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By

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Abstract

Critical Incident Technique (CIT) (Flanagan, 1954) was used to explore the efficacy of traditional First Nations and Métis healing methods in terms of emotional, mental and spiritual healing among self-identified First Nations and Métis students at the University of Saskatchewan. Three participants were interviewed for this study. Data was analyzed using McCormick's (1997) ten themes as well as thematic analysis. Findings correlated with McCormick's (1997) themes, and no new ones were added and none omitted. The themes and data were discussed in relation to Smart's (1998) Seven Dimensions of Religion, in order to anchor the findings in a theoretical framework. Recommendations for future research as well as recommendations for counsellors and psychologists regarding integration of traditional First Nations and Métis healing methods in counselling are included.

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Dedication

I would like to dedicate this thesis to Lucy, George and Louis. Without your stories, this would not have happened. Your willingness to share some private, intimate times in your life with me is something I cannot express my gratitude enough for. Please know that I truly respect and honor you, and am endlessly grateful. You taught me that although this is my academic piece of work, it is not my story – it is not about me or for me. You reminded me why I set out on this journey in the first place. Thank you, many times over.

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Chapter 1: Introduction

Personal and Professional Perspective

As a non-identified First Nations or Métis person, I feel that an explanation of my drive behind this specific research topic is needed. I have always had a connection to the Earth and a deeply rooted need to share this with others. My first experiences with smudging and drumming were extremely spiritual and meaningful to me, and the level of connection to the Earth and self I felt cannot be described. These forms of healing are specific elements of First Nations spirituality that I have actively sought out more recently, coupled with my interests in connecting with nature. Through my gradual exposure to varying First Nations and Métis cultures, I was able to understand and appreciate these practices more in depth. As a result, I deeply want to incorporate them into my future counselling practice, and introduce them as spiritual and emotional avenues to healing.

Religion was always a substantial part of my life, especially during my childhood. My parents are Catholic, and subsequently so are my brothers and I. We attended church every Sunday, prayed before every meal, and were taught to live a Catholic life. It was not until a serious family illness happened that this religion did not seem to have a strong foundation anymore for me. I was able to explore my views, interests, and in the end, belief system.

Growing up, my father worked for a local tribal council in which he had the opportunity to travel to our province's numerous reserves. He then moved on to working at a reserve closer to home, in which he became the housing and infrastructure manager. He formed close connections to many individuals that lived there, which would encourage my own personal spiritual growth in the future.

In February of 2007, my father was diagnosed with a late stage cancer. He sought out numerous Westernized medical treatments such as surgeries, medication and chemotherapy, that caused stress and additional pain. At this time, he also decided to retire from his career, to allow himself the time to focus on healing. It was then that an elder from the reserve in which he had recently retired from gifted him with varying teas and herbs to help him heal naturally. Although I am unsure of what exactly contributed to my father now being 9 years' cancer free, this exposure to traditional First Nations healing methods is what began to fuel my corresponding spiritual change.

Going through this terrifying and emotionally challenging time with my father and family opened many personal avenues I needed to explore more in depth within myself. My belief in the Catholic faith began to crumble and I adopted spiritual ways of thinking that were more aligned with a First Nations spirituality. I was interested in learning more about the First Nations healing methods my father had been offered, and thus began my journey on this path.

Working as a teacher within a school division in the province allowed me to experience first-hand many of the emotional and mental struggles that our provinces' students face daily. Being exposed to different First Nations, predominantly Cree, practices showed me how they could be used to help students deal with their struggles. Weekly smudges and sharing circles with a local Kokum would provide me with some of the most intense and real emotions I had ever felt. I noticed the effects on the students in class immediately, which often translated into increased attention spans, more respectful attitudes and an overall sense of calm. Listening to drumming performances would consistently bring me to tears, as I could feel my spirit, or energy life force, healing to the rhythmic beat of the drum. Many of the students would dance or just sit in silent reflection during these moments; and again, the same immediate after effects were noticed back in the classroom.

This research study is foundationally based on these lived experiences for me, and having seen these practices prove helpful for people's spiritual and emotional growth. My interests and drive behind this research comes from a place of great love and respect for the First Nations and Métis culture in our province. A further inquiry into these First Nations and Métis traditional healing practices, such as smudging, drumming or sharing circles, and how they facilitate healing is the main goal behind this thesis. Additionally, how and if they can be incorporated into future counselling will be explored.

The Present Study

Purpose and Research Question

The purpose of this study was to determine what traditional healing methods (defined later) self-identified First Nations and Métis secondary students at the University of Saskatchewan deem important to their individual and personal emotional, mental and spiritual healing. The study was open to self-identified First Nations who identified as Cree, Saulteaux or Dene, as they are the most populated First Nations in the province (Tribal Chief Felix Thomas, personal communication, October, 2014), as well as Métis individuals. The proposed study will

be guided by the following research questions: 1(a) To what extent do self-identified First Nations and Métis post-secondary students consider traditional First Nations and Métis healing methods as being important to their emotional, mental and spiritual healing 1(b) What, if any, other mediums do self-identified First Nations and Métis post-secondary students deem important to their personal emotional, mental and spiritual healing and, 2. To what extent do self-identified First Nations and Métis post-secondary students want traditional First Nations and Métis healing methods included in the counselling process were they to see a counsellor or psychologist.

Presently, there is a lack of this type of research in our local counselling practices as a whole. This study will attempt to fill that gap in the research literature by identifying different traditional Indigenous healing practices and exploring the efficacy of how they can be included in personal counselling sessions with First Nations and Métis individuals.

According to the 2011 National Household Survey of Saskatchewan by Statistics Canada, the population of self-identified Aboriginals in the province was 157,740, or 15.6% of the total population. Of that 15.6%, the largest groups are the members of First Nations people. The self-identified Métis population was 52,450 or 5.2% of the population, which numbers them as the second largest group. There were 290 individuals who identified as Inuit. Knowing this information, this study will focus on the fore-mentioned First Nations groups and the Métis group.

Rationale

This study is important due to the higher prevalence of mental health problems seen among First Nations people (King, Smith & Gracey, 2009) which is strongly rooted in the ongoing colonialism and racism (explored more in depth later in chapter 2) and a tendency by this group to refrain from seeking mental health services that are provided by the Western-European forms of treatment that are common in North America (Trimble & Fleming, 1990 as cited in McCormick, 1996, p. 3). The First Nations Regional Health Survey (RHS, 2008-2010) reported that 34.4% of First Nations individuals in Canada had depression, and 24.3% individuals had suicidal thoughts. With this in mind, it is important to understand why this is the case, and what can be done to help facilitate healing for First Nations groups. According to McCormick (1997), many traditional First Nations therapeutic approaches do not only include the client, but also relatives and community members. The view is not so much an

individualistic approach to healing, but rather one of interconnectedness, which includes the community, family and elder support. Understanding this, a counsellor who stresses the role of the individual client's responsibility to their healing needs to be aware that this approach may not be appropriate with all clients.

Incorporating First Nations and Métis traditional healing methods (defined later in this chapter) into counselling is important in our province, especially as we see the population of these groups continually growing. According to Statistics Canada (2006) there were 83,230 self-identified First Nations people in the province, which shows an increase in population to present. Eurocentric based North American approaches to counselling individuals from these groups may not be therapeutically beneficial, therefore a more informed understanding of what could benefit their healing is important, which is a goal of this research. By applying these approaches to counselling in our province, we can begin to formulate a decolonized approach to counselling practice which in turn, might help facilitate healing in our First Nations and Métis peoples.

This study hopes to identify specific practices, traditions and experiences that have helped First Nations and Métis individuals in our province heal and grow emotionally, mentally and spiritually. By discovering this information, there is an opportunity to share it with the psychological community to ensure we, as counselling professionals, are respectfully practicing and applying these approaches when counselling First Nations and Métis peoples.

Definition of Terms

For a list of definitions of terms applicable to this study, please see Appendix A.

Chapter 2: Literature Review

The following chapter overviews literature in the fields of First Nations and Métis mental health, colonization in North America and the effects on First Nations and Métis peoples, spiritual beliefs and practices of First Nations communities and Métis people, and the use of spiritual connectedness to healing as a whole.

Mental Health

Although First Nations and Métis peoples suffer from many of the same mental health problems as the rest of the Canadian population, there is a significantly higher percentage of suicide and depression among First Nations and Métis individuals (Nelson & McCoy, 1992 as cited in McCormick, 1996). However, most First Nations and Métis adults reported feeling balanced in the four aspects of their lives: physically, mentally, emotionally and spiritually (Government of Canada, 2006). Three in ten adult First Nations/ Métis individuals (30%) reported feeling sad, blue or depressed for two weeks or more (Government of Canada, 2006).

Depression/Anxiety

The data reflecting higher prevalence of mental disorders is important, but perhaps equally as important are the reasons why. According to Wesley-Esquimaux and Smolewski (2004), much of this depression and anxiety is due to what they call generational grief. The authors define this as “a continuous passing on of *unresolved* and deep-seated emotions, such as grief and chronic sadness, to successive descendants” (p.2).

The First Nations Regional Health Survey by the First Nations Information Governance Centre (FNIGC, 2012) is a First Nations survey in Canada that provides a sharing of data, sampling and culturally appropriate questionnaire content. It includes information and statistics on the health and well-being of First Nation adults, youth and children. In chapter 5 of the document, it reports that First Nations individuals living on reserve were asked about their emotional well-being. According to the data from 2008, 12% of First Nations people living off reserve had suffered from an episode of major depression in 2001, whereas 7% of the rest of the Canadian population had suffered from the same. The document also reported that most adults said they felt in balance in the four aspects of their lives most of the time (71% felt they were physically in balance; 71% emotionally; 75% mentally; and 69% spiritually).

Kleinman and Good (1985) discuss the two contrasting views on depression in First

Nations individuals: clinical and ethnographical. With clinical depression, the authors describe it as a disorder that has common, severe characteristics which are affective, such as sadness; irritability; and joylessness, characteristics that are cognitive, such as difficulty concentrating; and memory disturbance, and vegetative characteristics, such as sleep, appetite, energy disturbance. An ethnographical description of depression states that depression is a “feeling of sadness, hopelessness, and demoralization that may be as fleeting as a momentary nostalgia or as lasting as prolonged grieving” (Kleinman & Good, 1985 as cited in Waldram, p. 168). Kirmayer (2001) emphasizes that in many cultures, disturbances or alterations in mood, as well as affect and anxiety are perceived as social or moral problems, not mental health problems.

The clinical view on depression, however, is more widely accepted by practicing mental health professionals, as seen through the multiple editions of the Diagnostic and Statistical Manual of Mental Disorders (DSM), now on its fifth edition (DSM-V). The DSM-V offers a clinical view on depression, and a clinical approach to diagnosing depressive disorders. In order to be diagnosed with a major depressive disorder, many criteria must be met. Some of these criteria include: depressed mood most of the day, almost every day; diminished pleasure in activities nearly every day; feelings of worthlessness; fatigue or loss of energy almost every day; the depressive states are not attributable to the psychological effects of a substance or other medical condition and; there has never been a manic or hypomanic episode (DSM-V, 2013).

Within the DSM-V diagnostic criteria (not to be confused with the causes) for depressive disorders, culture also plays a role. The DSM-V defines culture as “systems of knowledge, concepts, rules, and practices that are learned and transmitted across generations. Culture includes language, religion and spirituality, family structures, life-cycle stages, ceremonial rituals, and customs, as well as moral and legal systems” (p. 749). DeSilva, Aggarwal and Lewis-Fernández (2015) extend this definition by explaining that culture consists of overlapping systems that are made up of other characteristics which include gender identity and sexual orientation.

DeSilva et al. (2015) discuss four domains that assist and guide clinicians through a cultural evaluation when making a diagnosis. The four domains discussed are: cultural definition of the problem (which looks at incorporating a client’s personal view of language and illness); cultural perceptions of cause, context and support (which looks at the client, as well as the client’s social network, thoughts on the origin of the problem); cultural factors that affect self-

coping and past help seeking (which takes into consideration what the individual has done in the past to cope with the situation); and cultural factors that affect current help seeking (which refers to the individual's preference for care and those in their social network). This article demonstrates that there is increasing awareness, sensitivity and inclusion of cultural practices and beliefs.

It is important to note that there are multiple depressive disorder diagnoses within the DSM-V, including persistent depressive disorder, substance/medication-induced depressive disorder and depressive disorder due to another medical condition (DSM-V, 2013). Each of these entails their own diagnostic criteria. Beaulieu (2011) points out in her master's thesis that mental health in a Western context is defined in relation to disorder, or that an absence of disorder is an indicator that an individual is of good mental health. Beaulieu also says that absent from the definition of mental health in the DSM-IV (the edition used for her thesis) is a consideration of culture, as well as social or historical factors. This is important to the context of this thesis, as culture plays a large part of it, including if discussing the research questions with an individual with a depressive disorder.

This distinction and difference in depression definitions is important, as more attention in the area of First Nation research regarding depression has been paid to the clinical understandings of the problem and that little research has been done on the ethnographical viewpoint (Waldram, 2004). Little research has also been done on depression that is directly related to the culture, especially in the way that cultures have, and continue to, generate their own stresses and that may contribute to depression (Waldram, 2004). To further the ethnographical view on depression, Waldram (2004) goes on to say that depression and suicide did not exist among First Nations peoples prior to colonization, and that depression was a byproduct of the drastic and severe alteration in their lives (Waldram, 2004).

Traditionally, different First Nations cultures had words that described problems related to depression, however not in the psychological way that seems to have come post-colonization. For example, in a study of Navajo healing, the authors Storck, Csordas and Strauss (2000) could not find a term that fully defined or described depression in the Navajo language. There were, however, terms that described a person who was worried or distraught, as well as a term for lonely and sick. The authors also found through interviewing Navajo peoples that there was a term for "something is not right that is giving you a problem making a living and taking care of

yourself” (Storck et al, 2000, p. 589). Waldram (2004) explains the reason for this is because depression in these cultures first came about after contact with the European settlers.

Although it cannot be said for certain that depression did not exist before contact, it is prevalent now, and the question is why. There are more than likely multiple contributing factors as to why First Nations and Métis peoples have higher than average prevalence rates of depression in their communities, but the following section will outline some of the literature’s most germane contributing factors.

Colonization

For the First Nations peoples of Canada, the early years of contact with the Europeans was mutually beneficial, in terms of friendly trade of goods and in the fishing industry (Conrad & Finkel, 2006). However, sustained contact with the Europeans would have a devastating effect on the First Nations people. Over time, the Europeans took the view that First Nations peoples were savages or barbarians (Battiste, 2000). The Europeans took it upon themselves to enforce what would become a cultural genocide on First Nations people, in order to make them more like the Europeans. This was done in countless ways, however, this section will focus on the two forms of assimilation: The Indian Act and residential schools. It will end with an over view of cultural genocide, and a summary of the impacts on First Nations people.

Indian Act

In 1876, the Indian Act was put in place by the Government of Canada as a tool to “deal with” the First Nations people (Steckley & Cummins, 2008, p. 122). Prior to the introduction of the Indian Act, the Indigenous peoples were originally controlled by the military, which allowed them to maintain a fair amount of autonomy (Steckley & Cummins, 2008). However, in 1869 Britain gained full control of all Canada’s Indian matters. This changed marked a transformation in the nature of relationships between First Nations and Europeans (Steckley & Cummins, 2008).

The Indian Act was created in order to “guide Canada’s relations with First Nations peoples by imposing several restrictions on them in order to meet two main goals, to ‘civilize’ the First Nations people and to ‘assimilate’ them into Canadian society” (OTC, 2008, p. 22). It is important to know that the Indian Act was not a new piece of legislation put forth by the Government of Canada, but rather a compilation of various pieces of existing statutes; its purpose was to centralize all legislation and to solidify the position of First Nations peoples as wards of the state (Steckley & Cummins, 2008). The Act reflected the core assumptions and

beliefs that were held by the dominant Euro-Canadian society regarding the Indigenous peoples in the mid to late 19th century (Coates, 2008).

The Indian Act caused poor relations between the First Nations peoples, the Canadian government and the people of Canada. The act essentially governed all aspects of the First Nations people's lives, and included control of defining who 'Indians' were; enfranchisement of First Nations peoples; administering reserve lands; managing sale of time; administering money to the bands; determining the processes of leadership selection (through chief and council elections); regulating alcohol; and prohibitions on certain activities, particularly of a cultural nature; restricting women's involvement in land negotiations and giving First Nations people no power to enforce laws on the reserve (OTC, 2008).

The Indian Act went through numerous amendments over the years. The OTC (2008) focused on the amendments in the years 1884, 1895, 1927 and 1951. In 1884, the ceremonies of Potlatch and Tamanawas Dance were prohibited and those found participating in the activities were sentenced to jail. This prohibition was in place for 75 years, and the ban was lifted in 1959. In 1895, all traditional dances and customs were prohibited; the ban was lifted in 1933. In 1927, all legal assistance for First Nations people was made illegal. The ban was lifted in the amendments of the Indian Act in 1951. In 1951, revisions were made to the act. These revisions included: women of First Nations cultures could take part in land decisions, if a woman married a non-First Nations man she would lose status (as an Indian), restrictions on alcohol were reinforced, as stated previously the legal assistance ban was lifted, and the creation of Section 87 (now Section 88) which allowed provincial laws to cover areas not covered by the Indian Act, for example child welfare matters (OTC, 2008).

The Indian Act still exists today. Few documents in our country's existence have generated as much debate, anger and sorrow as the Indian Act has (Coates, 2008). Yet in spite of this, the Act still continues as a central element in the management of Aboriginal affairs in the country (Coates, 2008).

Residential Schools

Throughout Canada, many First Nations children attended residential schools between the years 1831-1996 (Legacy of Hope [LOH], 2015). These residential schools were part of a policy of assimilation that was continued for over one hundred years and severed the connection between many Aboriginal people and their ancestral culture (Corrado & Cohen, 2003).

Residential schools ran from the 1800s until the mid 1990s, when the last school closed (Bombay, Matheson & Anisman, 2014). Children were sometimes forcibly removed from their homes and brought to the schools, in which they were housed in large numbers, and kept separated from their families and communities (Corrado & Cohen, 2003). Bombay et al. say that by the 1930s, an estimated 75% of all First Nations children ranging in age from 7 to 15 attended residential schools. Devastatingly, children as young as the age of 3 were being forcibly removed from their homes to live at residential schools which were designed to kill the Indian in the child (Royal Commission on Aboriginal Peoples, 1996). In the context of residential schools, killing the Indian meant disconnecting children physically, emotionally, mentally and spiritually from their language, culture, land and their communities as well as from their own sense of identity as being Indian (Chansonneuve, 2005). In addition to the various forms of abuse, numerous deaths occurred at these residential schools, including children who went “missing”. The term missing is placed within brackets, as the fate of these children is unknown. The Missing Children Research Project was created in 2007 to name as many missing children as possible, as well as to provide documentation of their fates or how they died (MacDonald & Hudson, 2012).

Duncan Campbell Scott, the Deputy Superintendent-General of the Department of Indian Affairs, supported this assimilation with residential schools, and in 1920 said:

“I want to get rid of the Indian problem. I do not think, as a matter of fact, that this country ought to continuously protect a class of people who are able to stand alone ... Our object is to continue until there is not a single Indian in Canada that has not been absorbed into the body politic and there is no Indian question, and no Indian Department” (as cited in Corrado & Cohen, 2004, p. 6).

The residential school system was a way in which the church and the Canadian government alienated First Nations children from their culture, family and spiritual practices (Corrado & Cohen, 2004). This alienation caused four different types of abuse among those who attended residential schools: physical, sexual, psychological and spiritual (Corrado & Cohen, 2004; Kirmayer, Brass & Tait, 2000).

Physical. The physical abuse of children in residential schools was used to enforce school rules; the most common was the use of a strap (Corrado & Cohen, 2004). There are countless stories of physical abuse told by residential school survivors, and many of these can be found on the Where Are The Children website (Legacy of Hope, 2015). On the website, many

residential school survivors share their stories through a video format interview. The stories shared and the experiences endured are heartbreaking to watch. One of the individuals, Harry McGillivray, shares the physical abuse he endured at the Prince Albert residential school in Saskatchewan: “We were underfed, I guess. We were always hungry... we used to go and steal in the farmer’s fields. We used to go and steal carrots or whatever vegetables there were” (LOH, 2015). He also talks about being told to shut up when he tried to speak in Cree, and how he witnessed others getting lickings for trying to speak their language.

David Striped Wolf shared his experiences in a story that was heartbreaking and haunting. He described how it was when he left his family. His parents and grandparents tried to prepare him with candies and oranges (because he always had them at home) to help him feel more comfortable. He explained that the nuns and priests were very kind, however once they left and his parents and grandparents were no longer around, the nuns and priests changed. The nuns slapped him around to stop him from crying, and told him they’d give him something to cry about. David Striped Wolf also shares that he did not return home during the summer months, and his father came to visit about a month after he arrived. He remembers crying and grabbing his dad’s leg. After his father left, the nun slapped him around, made him sit in the corner, and then sent him to bed without supper because he was a bad boy (LOH, 2015).

Sexual. According to Corrado & Cohen (2004), sexual abuse appears to have been a common occurrence in residential schools. Just as with physical abuse, there are countless stories and memories of this horrific form of abuse. Again, Corrado and Cohen outline some of these stories, including that of Billy Diamond, a Cree from the Waskaganish community in Northern Quebec. He describes incidents of sexual abuse at the Kamloops residential school in British Columbia where some male supervisors showed an interest in young Cree boys. These supervisors would entice these boys to their rooms with sugar cubes (Corrado & Cohen, 2004).

Psychological. Just as the residential school system inflicted physical and sexual abuse on children, it also inflicted psychological abuse. The isolation of family, friends and community, suppression of their native tongue, imposition of an unknown religion and belief system, harsh punishments, and inadequate nutrition and clothing are all examples of psychological abuse (Corrado & Cohen, 2004). Loneliness has also been identified as a central aspect to psychological abuse, and many survivors still recall this loneliness as being “emotionally devastating” (Corrado & Cohen, 2004, p. 10).

Spiritual. As Corrado and Cohen (2004) state, First Nations spirituality is foundationally based on the themes of trust, sharing, respect, honor and acceptance. These values did not exist in the residential school setting. In fact, children were forced to adopt a new and foreign system of beliefs and values. They were not allowed to practice their cultural ceremonies, but now instead were forced to adhere to religious rituals. These First Nations belief systems were ridiculed, demeaned and substituted with Catholic rituals (Corrado & Cohen, 2004).

Intergenerational Trauma

Residential schools continue to be a source of intergenerational trauma still felt in First Nations communities (MacDonald & Hudson, 2012; Bombay, Matheson & Anisman, 2014; Menzies, 2008). Not only do the effects of this trauma affect those individuals who were forced to attend, but also their families and children. The RHS (2008-2010) reported that a higher number of “First Nations adults who had attended residential schools reported having been diagnosed with at least one chronic health condition, compared to those who did not attend residential schools (76.1% vs 59.1%) (p. 118). The RHS also provided the following data. 44.2% of all First Nations adults who attended residential schools were defined as having low psychological stress, compared to 50.3% of First Nations adults who did not attend residential schools. 21.5% of the adult First Nations individuals who had attended residential schools reported that they had thought about attempting suicide at some point throughout their lives. The RHS provided data that showed the negative impacts that residential school attendance had on individuals, reported by the First Nations adults who attended them. The highest percentage of individuals who experienced a negative impact was isolation from family (77.6%) followed by verbal or emotional abuse (73.1%). 68.6% reported a loss of cultural identity, 62.6% reported a loss of language, and 62.0% reported a loss of traditional religion/spirituality.

Of the individuals surveyed, 52.7% reported having one or more parent who had attended a residential school, and 46.2% reported that one or more of their grandparents had attended a residential school (RHS, 2008-2010). The RHS classified participants who had either their mother or father or any grandparents attend a residential school as children of residential school attendees. Those children of residential school attendees who reported symptoms of depression differed depending on whether it was a parent or grandparent who attended a residential school: 30.8% who had both parents attend residential school reported symptoms of depression; 31.4% who had one parent, but no grandparents, attend residential schools reported symptoms of

depression; 25.1% who had at least one grandparent, but no parents, attend residential school reported symptoms of depression; and 20.4% who had neither parents or grandparents who attended residential schools reported symptoms of depression. The data from the RHS shows a link between depressive symptoms and familial residential school attendance, suggesting that those who directly attended residential schools are not the only ones affected. In addition to symptoms of depression there is a persistent tendency to abuse alcohol or sedative medication or drugs as a way to suppress negative emotions or deal with these difficulties, often starting at a very young age (Corrado & Cohen, 2003). Bombay et al. discuss that the lack of traditional parental role models of individuals who attended residential schools may contribute to the transmission of negative child-rearing practices with their own children, which may contribute to the data shown by RHS (Bombay et al., 2014; Evans-Campbell, 2008).

Residential schools, together with colonialism and genocide, have not only affected the individuals immediately involved in it, but has also had a negative effect on families and social structures as well (Evans-Campbell, 2008). Evans-Campbell explains that although we see the effects of this, our abilities to fully understand the impacts of these traumatic events and to implement appropriate and effective treatment interventions is limited by our current trauma models. These traumatic events and stressors have been both acute and chronic, resulting in current negative side-effects which felt today, including: symptoms of depression, Post-Traumatic Stress Disorder (PTSD), negative feelings of self-esteem and self-worth, addiction problems and suicidal tendencies, in both residential school survivors and their children (RHS, 2008-2010; Evans-Campbell, 2008; Bombay et al., 2014).

Genocide

The stripping of beliefs, language and self, together with the addition of various forms of abuse has resulted in what Battiste (2000) calls cultural genocide. Battiste says that indigenous peoples worldwide are still experiencing trauma and stress from genocide and the destruction of their lives by colonization. Battiste also talks about free will, and how our spiritual side is what drives us to pursue freedom, and that oppression involves a denial of the individual spirit and its quest for self-expression. Arguably, the word 'cultural' can be stripped from this term, and just be called genocide, as many scholars do (Duran & Duran, 1995).

The forced assimilation denied this freedom and expression of spirit to the First Nations people of Canada. It stripped them of their identity. Battiste (2000) says that colonialism,

slavery, intolerance, discrimination, and war are all cruel experiences that share a common element: the denial of the victims' relevance. This systematic destruction of First Nations culture, language, values, spirituality and lives is still felt in today's society (Duran & Duran, 1995). Duran & Duran explain that First Nations peoples in Canada were, and continue to be, exposed to one of the most "systemic attempts at genocide in the world's history" (p. 28). This forced assimilation and colonization by the federal government has left a legacy of this genocide (Stewart, 2009). Epistemicide is another term used to describe the severing of these knowledge systems, language and spirituality (Grosfoguel, 2013). Not only was there a genocide on First Nations lives, but also on First Nations language, knowledge and spirituality. This epistemicide on ways of knowing and living has severed connections to cultural and spiritual roots for many First Nations individuals, and needs to be considered when discussing healing of First Nations individuals.

Connecting this genocide back to the increased levels of depression and anxiety experienced in First Nations people begins to explain why this is the case. Battiste (2000) states that the most destructive personal experience of colonized people is that of intellectual and spiritual loneliness. This loneliness is the root of low self-confidence, a fear of action and a tendency to believe these pains are deserved; the colonized people start to blame themselves for this pain.

Colonialism and Intersectionality

Duran and Duran (1995) state that psychology is a "coconspirator in the devastation and control of those peoples who are not subsumed under a white, male, heterosexual, Christian subjectivity" (p. 7). Largely due in part to colonialism, we currently live in a society that has been conditioned to be racist, homophobic, sexist, transphobic, and fosters a highly heteronormative patriarchy (Hunt & Holmes, 2015). Decolonization is a concept that has been researched by numerous scholars, however the effects of settler colonialism in terms of queer rights and gender and sexuality have remained on the peripheral of research topics, as can be seen when attempting to find studies on the topic (Hunt & Holmes). The core of this thesis is to approach counselling in a way that supports decolonization of the process; in so doing this, it is important to consider many variables and viewpoints. Hunt & Holmes, two women from British Columbia who identify as queer women, one of whom, Hunt, is a First Nations individual from

the Kwakwaka'wakw nation (called the Kwakiutl band by the Canadian government) explore the effects of colonialism on queer and transgender First Nations peoples.

Hunt & Holmes (2015) explain that the term queer, when used as a verb, is “a deconstructive practice focused on challenging normative knowledges, identities, behaviors, and spaces thereby unsettling power relations and taken-for-granted assumptions” (p. 156). Riggs (2010) extends this definition to include reference to something that challenges “normative forms of naming” (p. 349). Additionally, Riggs explains that the term queer is to resist normalization and domestication. In order to render gender and sexual differences (in relation to the heteronormative society) abnormal, we must name it, make it visible and then in turn challenge it (Hunt & Holmes; Riggs, 2010). Hunt & Holmes discuss that decolonization, or resistance to colonialism, is found in everyday life by First Nations individuals, in terms of honoring the land and the connection to it, as well as to community and other individuals, and living Indigeneity. This is supported with large scale rallies and protests as forms of resistance, taken up by Indigenous families, communities and people. Hunt & Holmes discuss how colonialism was the erasure of Indigenous peoples and culture, and coupled with this erasure was the imposition of a system that suppressed gender and sexual rights.

Many Indigenous peoples who identify as queer or transgender now use the term Two-Spirit, which expresses a complex spectrum of gender and sexual identities which are rooted in a traditional Indigenous worldview (Hunt & Holmes, 2015). The term Two-Spirit also applies to individuals who embody both masculine and feminine spirits and qualities. Two-Spirit individuals not only address homophobia and transphobia in our society, but also colonial power (Hunt & Holmes). The authors discuss that in order to decolonize this community, focus can be put on understanding First Nations gender and sexual identity practices and understanding Two-Spirit historic issues (the authors do not discuss this more in depth, nor do they make recommendations for further information).

Lesbian, gay, bisexual, trans and queer (LGBTQ) psychology is a “branch of psychology concerned with the lives and experiences of LGBTQ people” (Clarke, Ellis, Peel & Riggs, 2010, pg. 3). This branch of psychology was created to address two prominent ideas: first, that homosexuality was once considered a mental illness, and second, that psychology research has primarily focused on the experiences of heterosexual and non-trans people (Clarke et al.). The authors explain that the terms lesbian, gay, bisexual, trans and queer are often terms that are

associated with western cultures, and that non-western cultures use different term to describe sexual and gender identities. The authors also highlight that the field of LGBTQ psychology has primarily focused on the experiences of white, able-bodied, middle-class urban-dwelling gay individuals, with little research on other communities (including First Nations). The authors do not include information or research on Two-Spirit individuals from a First Nations background. The authors point out that there is a gap in the research for LGBTQ individuals who experience social marginalization related to race and culture; although not specifically named, one can make the assumption that this would include Two-Spirit people.

Simply lumping Two-Spirit individuals into the LGBTQ community in terms of psychology and counselling is not enough; we must also consider, understand and respect the individuals culture and spiritual beliefs. A person is a combination of their lived experiences, values, beliefs, culture, not just their gender or sexual identity. Knowing and understanding this goes beyond being respectful and inclusive, it requires a more in depth knowledge of the individual's background and belief system. The next section will look at First Nations spirituality and cosmology, in order to begin to bridge a connection.

First Nations Spirituality

First Nations spirituality embodies a combination of holistic and naturalistic approaches; it is one of connection with the Earth: plants and nature, other humans, and all living sentient beings. It is one of respect, love, thankfulness and no sense of ownership. It is not a belief system that centers around a God or church, but rather around the entire universe. Connecting with nature and the vibrancy of life was, and continues to be, First Nation spirituality.

First Nations cultures adopted a dialogue between mind, body, emotions and spirit (McCabe, 2008). This means that they believe in a balance between all four of these aspects in order to create a healthy person. The medicine wheel is a very prominent symbol in First Nation spirituality; it represents all four of these aspects. The medicine wheel shows four different quadrants: spiritual, mental, physical and emotional, all housing equal parts that make up a larger whole (McCormick, 1996). The medicine wheel reinforces the concept of interconnectedness and the belief that one part cannot be the center but must instead work in harmony with all of the other parts in order to create a healthy individual (McCormick 1996, p. 166). McCabe (2008) says that the medicine wheel is a process (healing), a ceremony (sweats, sharing circles) and teachings (a code for living). This means that it can be a place as well as an action and a

presence at the same time. The medicine wheel, summed up, is a way of understanding and conceptualizing the unexplainable (McCabe, 2008) for First Nations spirituality.

For First Nations people, a mental illness comes from an imbalance in these four quadrants (McCabe, 2008; McCormick, 1996). Wyrostok & Paulson (2000) also say that this imbalance, or illness, is associated with some form of soul loss or an illness of the spirit. In order to heal this imbalance, or illness of the spirit, many traditional First Nations people turn to family, friends or traditional healers for help, rather than mainstream mental health professionals (McCormick, 1997). Many Western cultures have rejected the idea of a mind, body, emotions and spirit dialogue or connectedness, and therefore First Nations peoples have looked to plants, animals and community for understanding and healing (McCabe, 2008).

Cosmology and Epistemology

Like other cultures in the world, First Nations people have stories about creation and how the world and universe came to be. Willie Ermine, an Indigenous Studies professor from Saskatchewan, explains that these creation stories are the core of spiritual foundation, and the events leading to the creation of the universe are the basis for the Cree belief system (The Encyclopedia of Saskatchewan, 2006). In Napoleon's master's thesis from 2014, he explains that Nihiyaw (Cree) cosmology is "not easy to categorize through a western lens and does not clearly fit into the religious categories of monotheistic, polytheistic, and pantheistic" (p. 36) beliefs. Napoleon explains that kihcimanitow (which means great or sacred spirit) differs from gods of monotheistic religions in the way that kihcimanitow acts as a reminder of human weakness and that the spirit's teachings "emphasize humility and de-emphasize self-centeredness" (Napoleon, pg. 37). Napoleon also explains in his thesis that the Nihiyawak (Cree) do not believe that they are dominant over the natural world (animals and plants, for example).

Battiste and Barman (1995) discuss Aboriginal epistemology and humanity in relation to the cosmos and the universe. They explain that many philosophers and holy people among Aboriginal people have explored the process of self-actualization, and humanity in relation to the cosmos has provided insight into our existence. In order to find meaning in the outer space, people have turned inwards to seek answers. This inner being, or the soul or spirit, is the universe manifested within and permeates outwards into everything, including the cosmos. This permeating soul or energy interconnects everything, from plants, animals, other humans and the entire universe. Napoleon explains that there is no clear separation or boundary between self, the

environment, society and the cosmos (Napoleon, 2014). This energy is what connects all forms or concepts and is the starting point for Aboriginal epistemology.

In order to understand the mysteries of the universe, one must meet the stream of consciousness shared by the universe. Elders have a familiarity with this life force energy and consciousness, and are capable of tapping into it to channel it into multiple modes, including healing (Battiste & Barman, 1995). The Cree word *mamatowisowin* describes the ability to tap into this consciousness, and demonstrates the ability to travel inwards.

Indigenous language and culture contain the accumulated knowledge of ancestors, and many believe that language itself has a spirit (Battiste & Barman, 1995; Napoleon, 2014). Napoleon explains that *wîsahkîcahk*, a central figure in *nîhiway* cosmology, represents a trickster. This trickster has been used as a metaphor by elders (or Old Ones) to aid young individuals into various realms of knowledge (Battiste & Barman). This figure represents “adventure, creativity, humor, and about our relatedness to all other life forms” (Napoleon, 2014, pg. 54). Participation in cultural ceremonies are also a way to directly experience cosmology (Napoleon, 2014). Cultural ceremonies and spiritual practices encourage inward journeys by the participants and are “sacred acts that give rise to holy manifestations in the metaphysical world” (Battiste & Barman, 1995, pg. 106).

Counselling with First Nations

With the knowledge that First Nations people traditionally seek alternate routes for healing rather than westernized counselling, and more specifically *why* they do, it is important to understand ways in which to offer some of these traditional healing methods, beliefs and views into mainstream counselling practices. Traditional westernized counselling approaches stress the role of the individual client, whereas the First Nations cultures seek out a sense of community for healing purposes. Counsellors who stress the role of individual responsibility need to understand this may not be appropriate with First Nations clients (McCormick, 1997). Since many psychologists lack an understanding of First Nations traditional practices and beliefs, counselling can become another form of colonization (McCabe, 2007; McIntyre, 1996 as cited in McCabe, 2007). By not acknowledging, accepting and encouraging First Nations beliefs in counselling, we are essentially pushing our own westernized psychological beliefs and practices on them, which becomes another form of colonization. How then, do we facilitate a traditionally, holistic,

welcoming approach to counselling with First Nations peoples? We do this by incorporating their traditional beliefs and practices in our counselling sessions.

Traditional Healing Methods

Birds make their nests in circles, for theirs is the same religion as ours” (Chief Hehaka Sapa, Sioux Nation; Friesen, 1998).

Incorporating traditional First Nations healing methods into counselling can be foundationally based on the medicine wheel. By understanding all four quadrants, and what methods of healing are appropriate for each, these healing practices can be powerful. The medicine wheel can help counsellors to hear their own inner dialogue of healing (their beating hearts) which can then in turn help facilitate their hearing the beating of the hearts of others (McCabe, 2008). This can become the healing connection between the healer and the person seeking help (McCabe, 2007; McCabe 2008). However, a more in depth knowledge of the medicine wheel, what it represents and an underlying cosmology related to it is important before making a decision on whether or not to incorporate it into counselling.

The medicine wheel begins simply (but simultaneously not simply at all) with the circle. The circle represents the interconnectedness as well as continuity (Battiste & Barman, 1995). In Johnson’s Ph.D. dissertation (2015), the importance of circular models is also discussed. Johnson explains that a foundational belief in First Nations cultures is that everything in the universe is alive and interconnected, and the importance of maintaining reciprocity with the world can be understood with a holistic circular model. Johnson explains that many processes in the natural world work in cycles (for example the hydrological cycle which describes global moisture), which is important as First Nations cosmology is strongly rooted in the environment and land. The circle, which is the foundation of a medicine wheel, is sacred and it epitomizes Indigenous beliefs. It also represents that the entirety of life is sacred, spiritual and interconnected – humans, plants, animals, the sun, the stars, and everything that exists in the cosmos (Missens, Anderson & Dana, 2014).

Superimposed on the circle are four points which represent the four directions (north, east, south and west) and the power or medicines which each direction represents. The medicine wheel represents a compass for human understanding, and can help individuals contemplate the interconnectedness and continuity of events and their lives (Battiste & Barman). Battiste and Barman discuss how each direction of the medicine wheel corresponds to different aspects. East

is associated with the sun, which represents spring, new beginnings, fire and enlightenment, which brings transformation. South is associated with water and refers to the summer season. West is associated with earth and symbolizes the value of insight. North is associated with air and winter, and the authors note that they have also seen it associated with fire. Additionally, each direction is associated to different phases of human growth and evolution. North is associated with a newborn or an elder, east is associated with child, south is associated with adolescent, and west is associated with adult.

Direction also corresponds to different aspects of humanness: north is associated with the cognitive realm, east is associated with the spiritual realm, south is associated with the emotional, or psychological realm, and west is associated with the physical realm. All of these areas connect in a holistic manner to represent a continuum or a balance. It represents the interconnectedness of all human aspects of growth, all human aspects of self, as well as connectedness with the four directions, seasons, medicines, environment, and cosmos (Battiste & Barman, 1995).

In the past, and still presently, many First Nations people have made sincere attempts to adjust to mainstream society (Brown, 2001). However, Brown (2001) indicated that many First Nations people are now reintegrating the sacred ways of healing traditions into their lives. In fact, many non-First Nations people are turning to similar therapeutic approaches too. Individuals that are longing for a real world of true freedom have turned in every possible direction for alternative answers. Many non-First Nations people are drawn to Native American traditions that express rich spiritual relations (Brown, 2001).

Time is also of relevance to First Nations culture. They view time as cyclical, and often do not have tenses in traditional language for past or present, but rather focus on the present (all that we have) (Brown, 2001). Western cultures, on the other hand, do not typically devote as much time to cultivating relationships with families, our surroundings or the beings with whom we share the land (Brown, 2001). A lot of Western cultures focus on the past, the future, what upcoming plans are being made. This takes away from the present, which is the time in which to cultivate relationships. Traditional healing ceremonies and rituals offer a sense of timelessness, or time outside of ordinary time (Brown, 2001).

There are numerous traditional healing practices, and between each group of First Nations peoples the practices may vary. It would be important to understand the group(s) in

which the healer is working with in order to adapt practices to reflect the appropriate and respectful way of incorporating them into counselling. The following section will explore burning tobacco, the power of story and the sweat lodge, and will conclude with how to incorporate these into counselling sessions.

Tobacco

In many First Nations communities, tobacco has an important meaning. It is used as an unspoken agreement between the giver of the tobacco as they ask for something from the receiver, which is often teachings, or help with a problem (McCabe, 2008). Tobacco is believed to activate powerful healing forces within oneself (McCabe, 2008) which can help unite the four quadrants of a person. Tobacco is a symbol of personal integrity and respect for all sentient beings and all of creation, and therefore is very important to the inner dialogue of healing (McCabe, 2008).

The smoking of tobacco through a pipe may also be important for some First Nations groups. For the Plains Indian, the pipe itself is identified with the human person, for example its bowl being compared to the heart (Brown & Cousins, 2001). Purifying the pipe with sage or sweet grass is analogous with a human's own purification (Brown & Cousins, 2001). When the pipe is full, it is believed that the entire universe is captured in the filled bowl. The fire that is used to light the pipe is understood to be an expression of the Creator that is the ultimate principle of all things (Brown & Cousins, 2001). When a person consumes the smoke, all things become one with the smoke that rises up to the heavens (Brown & Cousins, 2001).

Storytelling

Storytelling has been a part of Indigenous cultures since humans have been on this earth (Lawrence & Paige, 2016). Words have power, and telling myths or stories is a sacred act in First Nations cultures (Brown & Cousins, 2001). Words themselves are thought to have the power to bring forth myth into today. By telling stories, First Nations peoples are able to bring stories from the past into the present. The words are thought to be able to give one the sense of being present in the story (Brown, 2001). While there is diversity among First Nations oral traditions, most groups believe in the creative force behind spoken words, and that the telling of myths has the power to make mythic time present, a part of the now (Brown & Cousins, 2001). Storytelling is also sacred for First Nations people as it embodies one of their most sacred values: relationships. Reading a book is a solitary experience for the individual, in which they can

disengage at any time. However, with storytelling, it is an experience shared with others in the community in which the listeners must participate in a story with whoever is telling it (Brown & Cousins, 2001).

Stories serve a variety of functions for First Nations communities, which include entertainment, the maintaining of cultural traditions and sovereignty, the encoding of knowledge, and to provide a foundation for First Nations identities (Johnson, 2015). They promote communal connectedness, and relay powerful messages about how to treat the earth (Lawrence & Paige, 2016). As discussed earlier in this chapter, the importance of cycles was, and continues to be, important to Indigenous cultures and spirituality. This importance is portrayed through storytelling, and even when stories were told. For example, Indigenous peoples who lived in colder climates told stories in relation to the seasons; they were told between the first and last frost. For Indigenous cultures that lived in warmer climates, and where frost did not occur, storytelling was done when seeds were planted. This was done because of the belief in the power of the stories' words. At the time of seed planting, plant people and animal people were at their most powerful, and telling stories at this time could emit harmful consequences, due to the power in the words. For example, animals who heard the stories could outwit human hunters and stay hidden forever so that humans could not find them (Lawrence & Paige, 2016).

Offerings of sacred herbs, such as tobacco, cedar, sage or sweet grass were given before commencing a story with seasonal intent that had a teachable message. These stories were considered to be an important link to the cycle of life and death, and this reciprocity of herbs was a way of honoring all of creation (Lawrence & Paige, 2016). The stories told are not simply about humans, but also about plants, wildlife, rocks, thunder, water, sun, the moon, creation, wind and nature, which are all considered to be "as alive as the breath that carries them from one person to another" (Lawrence & Paige, 2016, p. 65). Everything has a purpose in the world, therefore everything has a story to reflect this. Telling these stories is a holistic process which connects body, mind, spirit and heart. It also allows for deeper understanding of self, as well as of creation, the universe, and life's great lessons (Lawrence & Paige).

This can be incorporated into counselling through the use of storytelling about one's own life: struggles, triumphs, pain and healing. By sharing stories of pain and suffering as well as of healing, finding self and meaning in life, First Nations people can begin to facilitate healing (McCabe, 2008).

Sweat Lodge

Much like the medicine wheel, the sweat lodge is a place, and a process all at the same time” (McCabe, 2008). The physical set up of a sweat lodge resembles a beaver hut in the fact that it is dome like. When a sweat is in progress, all light is blocked out. It has four symbolic doors that reflect the directions of the medicine wheel (McCabe, 2008). Each shelter represents the universe. The circular edge defines the bounds of the universe (Brown, 2001). In the middle of the sweat lodge is an open fire, which represents the Creator, the center of all existence. The smoke hole at the top of the sweat lodge allows smoke to carry prayers to the spirits (Brown, 2001). The poles of the structure act as a means to draw down the power from above and the tipi’s structure creates an exchange between this world and the heavens (Brown, 2001).

The purpose of the sweat lodge is to help individuals with their personal problems, when there are decisions to be made and where a great event is pending (McCabe, 2008). It assists in the inner dialogue of a person because it creates an atmosphere in which a person is able, and encouraged, to get in touch with self. It allows a person to become fully aware of their thinking, feelings, behaviors and spirit by shutting out visual stimuli and placing an emphasis on letting go of the things that interfere with the flow of healing energy, such as negative thoughts and anxiety (McCabe, p. 148).

Incorporating Traditional Healing Methods into counselling

According to McCabe (2008), many counsellors are trying to respond to the requests for incorporating these methods into counselling with First Nations clients, but many clients are leaving feeling disappointed. Harris, Edlund and Larson (2005) found that First Nations individuals in the United States reported the highest rates of mental health problems, yet they also reported the highest levels of feeling their needs were unmet when discussing their experiences with mental health service providers. This indicates, according to Beaulieu (2011) that there are obvious shortcomings within the Western model of the mental health system when trying to provide support to the Indigenous population. This has led to research being done on this topic, in order to address what can be done to better be able to service the Indigenous population.

As noted in the previous section, there is vast diversity among the Western culture and First Nations cultures. By ignoring some of these key values within the First Nation cultures

(such as the importance of family and community, the interconnectedness of all things and the balance of a human's four aspects) and imposing a Western approach to counselling, this is another form, or continued form, of oppression, according to Duran (2006). According to Duran, it is important to understand and be respectful of Indigenous ways of life, views on the world, healing and spirituality, in order to foster and develop a helping relationship.

Creating this trusting relationship begins with the counselling setting itself: how the room is laid out and decorated, the initial meeting between client and counsellor and even the identity of the healer (Duran, 2006). These elements set the foundation for a therapeutic relationship, and according to Duran (2006) there are specific elements of each dimension that a counsellor can include to strengthen the relationship with First Nations clients.

Duran (2006) talks about the healing container, which is essentially the boundaries in which a therapeutic relationship happens, or rather an office. He says that most Western practitioners talk about these boundaries in terms of the building and the ethics involved in the therapeutic relationship, however an important aspect is usually missing when counselling with First Nations clients – a metaphorical spiritual boundary. This spiritual boundary allows the clients to feel safe as they move through the healing process with the counsellor. Duran explains that First Nations clients pay close attention to this container, and treat it somewhat like a ceremony. With the therapeutic relationship and space being viewed as a ceremony, it makes this experience of critical importance for this client.

Duran (2006) discusses specific objects a counsellor can place within the counselling space. These objects should be visible when entering the space, as the First Nations client may relate to some of these objects as much as they may relate to the counsellor, either subconsciously or consciously. The main object Duran suggests is a small clay burner in which to burn sage, cedar or sweet-grass. Since these herbs play a vital role in traditional First Nations ceremonies, most First Nations client recognize this as an important aspect in their lives. It also may resonate with the client that the counsellor is doing something special to prepare the room in terms of cleansing it. The smoke from these herbs can also act as a boundary between spiritual or psychological forces that are creating suffering for the client and the physical space in which the healing is taking place (Duran, 2006).

According to Duran (2006), the identity of the healer, or counsellor, also plays an important role in the therapeutic relationship. The author notes that when most individuals are

asked the question ‘who are you’, answers such as a Canadian, a man or a woman, or a student are typical answers. Many people do not think to relate the question with spiritual identity, which is important with First Nations culture. Duran explains that the term psychotherapist literally translates into ‘soul healer’, yet few individuals in the field are open to the idea of soul healing. In order to foster a genuine therapeutic relationship with First Nations individuals, it is important that the counsellor be open to soul healing, or the dimension of the soul existing. Not accepting this aspect, or at the least respecting it, will hinder any future progress with First Nations clients.

Finally, Duran (2006) discusses the initial sessions with First Nations clients and how to facilitate a respectful meeting. It begins with the simple act of a handshake and eye contact. According to Duran, many First Nations peoples do not shake hands, but rather make contact with the offered hand. This is an important contact for many First Nations individuals, as it allows them to get a sense of the counsellor’s ego. It must also be understood that some First Nations cultures do not make extended eye contact, as this can be taken out of context and seen as rude by some individuals. Duran also explains the importance of the counsellor introducing himself or herself as an individual. This can include conversations on spirituality, religion and belief systems, which simultaneously brings the spiritual aspect of healing to light. Duran suggests discussing dreams, as they can play an important role in First Nations cultures. He also suggests, after the initial problem that brings the client in is verbalized, that it is not necessarily an indication of pathology, but might be the individual’s soul requiring attention. Essentially, the initial meetings should be open, respectful and inclusive. They should include truth and transparency, as well as conversations on the client’s beliefs, expectations and dreams.

Even though the goals for counselling sessions may be the same for Western and traditional approaches, the beliefs about healing and wellness do not coincide (McCabe, 2008). It will be important for counsellors to accept that beneath the cognitive awareness exists the inner dialogue between body, mind, emotions and spirit; this is difficult for many counsellors as there is a tendency in psychology to rely on the principles of cognitive psychology rather than the insight-based methods (McCabe, 2008). Counsellors will also need to accept that there is a spiritual component to the person, and that it is important in healing (McCabe, 2008).

Another important aspect for counsellors if they accept the inner dialogue and spiritual component of wellness, will be to give up the idea that the counsellor is an expert (McCabe 2008). They will also need to adopt a sense of community into their counselling sessions, and

release the idea that it is always an individualistic approach. Not only is the community considered to be integral to the process of healing, but so are ceremonies, traditions and spiritual integrity (McCabe, 2008; McCabe, 2007). Heilbron and Julius Guttman (2000) also discuss the integration of healing circle ceremonies, which may be particularly appropriate for group therapies.

Integrating these healing methods into counselling is important to the future of our province's work with First Nations and Métis clients. In First Nations traditional healing, accepting the role of one's life narrative, or story, as a component in therapy is vital to the healing process. In First Nations communities, stories about defending family honor, overcoming addiction and dependency, dealing with trauma, residential schools, and loss of language and identity need to be told, heard and accepted, if healing is to truly begin (McCabe, 2008; McCabe 2007).

The Seven Dimensions of Religion

In chapter 5, the use of Smart's (1998) Seven Dimensions of Religion will be utilized in which to ground the data found in chapter 4. This theory is one that explains the reasons behind religion or cultural practices. This theoretical framework offers a way in which to understand religion and culture in a deeper aspect. The framework is composed of seven dimensions, the practical/ritual dimension, the experiential/emotional dimension, the doctrinal/philosophical dimension, the ethical/legal dimension, the social/institutional dimension and the material dimension. Smart (1998) considers the first five dimensions to be abstract, whereas the last two are practical.

In order to understand a culture or religion's worldviews, beliefs and spirituality, it is important to enter the lives of others, and to try to imagine and visualize their beliefs and practices (Smart, 1998). This was an important factor in this study, and simply interviewing the participants and asking them questions was not enough. I wanted to truly emerge myself within their stories, lives and what has helped them become who they are in. In order to do so, this theoretical framework will be utilized in chapter 5 to discuss the stories and events shared by the participants. A more thorough explanation of each dimension will be given then as well.

Chapter 3: Methodology

The following section will provide information about the methodology that was used for this study. First, an explanation as to why qualitative research was chosen will be discussed. Secondly, participant recruitment and data collection will be presented. The section will end with a discussion on ethical considerations.

Qualitative Research

A qualitative approach for this study was chosen in order to connect with the participants on a more holistic level, and to honor the First Nations and Métis importance of storytelling. By choosing a qualitative approach, it also allowed the researcher to be more personally involved with the participants, to create an atmosphere which fostered free flowing conversations and stories to emerge from these interviews. A qualitative approach allowed observations of holistic content, and allowed the participants to explore their answers in a meaningful way (Gall, Gall & Brooks, 2007).

Critical Incident Technique

The methodology that was used for this study was the Critical Incident Technique (CIT) (Flanagan, 1954). CIT is a form of research where the participants of the study provide descriptive accounts of specific events that have assisted or hampered a particular aim (McCormick, 1997). Within CIT exists five major steps: establishing the general aims of the activity being studied; making plans for the study and setting specifications for the study; collecting the data; analyzing the data; interpreting the data (Butterfield, Borgen, Amundson & Maglio, 2005). Within the last step (interpreting the data) exists two more steps: the classification of the critical incidents and making inferences regarding practical procedures for improving performance based on the collected data and observed incidents (Flanagan, 1954).

When beginning to consider a thesis topic, I knew I wanted to research First Nations spirituality, I was unsure in what capacity I would do this however. As I read through numerous articles and books, I found an article by Rod McCormick from 1996. As I read through it, I felt connected to the author through his use of words, his writing style, and the topic he was discussing. I searched for more work by McCormick, and came across his study from 1997. This article seemed to connect the dots for me, and it aligned my interests with a specific topic.

Therefore, this particular study followed the format of McCormick's (1997) research for the majority of the above-mentioned steps. McCormick's (1997) study addressed the question "what has facilitated healing for the First Nations people of British Columbia" (McCormick, 1997, p. 174) and used the CIT approach. Participant recruitment, data collection and data analysis followed as closely as possible to McCormick's study, but with minor changes to suit this particular study (more detail is provided in the participants and procedures section). Following data collection, McCormick's (1997) ten categories were considered. These categories served as a foundational basis for this step, as opposed to being finite. As a result of the data and observed experiences, no new categories were included, and no categories were removed. Typically, these categories are formed during the CIT process following data collection and based on the participant's responses. This study once again used the same process as McCormick (1997), which will be discussed at length further in this chapter.

Participants

This study used individual semi-structured interviews when meeting with participants. This section was set up similar to that of McCormick's (1997), however with minor changes.

In McCormick's (1997) study, participants were recruited through the use of his own personal connections. Since this was not an option for this particular study, participants were recruited using purposeful sampling. Purposeful sampling is selecting participants who are able to provide "information-rich" data (Gall et al., 2007). The reason for this sampling is due to the material being studied; it is imperative that participants either identify as one of the First Nations groups being studied, or as a Métis individual. There were four criteria for inclusion in the study: (a) Identify as a First Nations (Cree, Saulteaux or Dene) or Métis individual (b) Have a basic understanding of and exposure to traditional healing methods of their culture (c) Have an experience (or experiences) of healing as a result from traditional healing methods and (d) be a student, staff or faculty member attending the midwestern university in which this study took place.

Originally, a call to participate (see appendix B for call to participate) was sent out to the students from undergraduate education programs designed for First Nations and Métis students at a midwestern university. Emails were sent to the program administrators and flyers were posted on bulletin boards in the respected areas. Additionally, the call to participate was also posted on the university's online forum, in which all students have access.

However, after 4 months of recruitment and only 1 participant having completed an interview, the decision was made to widen the participant pool. An amendment was submitted to the Research Ethics Office explaining the new participant pool. After 4 months of recruitment, the study was now open to all students, staff and faculty at the university (see appendix C for amended call to participate). Shortly thereafter, 2 more interviews were scheduled. Throughout the 7 months of recruitment, numerous emails were received regarding interest in the study. However, many of the emails were from students or staff outside of the city, and interviews were difficult to arrange. There were also some interviews that were scheduled (approximately 3) in which the participants did not show up. Follow up emails were sent inquiring about rescheduling, however no responses were received.

Whereas McCormick (1997) had 50 participants, this particular study concluded with 3 participants. Although this number will not provide as wide a range of McCormick's (1997) study, it will still provide some experiences and information and required less time.

Data Collection Strategies

Individual semi-structured interviews were utilized in this study. The purpose for this was to obtain information rich, in depth answers from the participants. By providing a series of guiding questions to the participants, it allowed them to explore their answers and provide information that they believed was important to the questions.

I conducted a pilot interview with a colleague and classmate in order to practice the questions, and in order to receive feedback on the process and questions included in the interview. This helped distinguish any potential concerns that could be addressed in order to ensure the study went smoothly with the participants.

During the interview process, with permission of the participants, a digital recorder was used in order to capture all of the information. Using this method of data collection also made the transcribing of data more smoothly during the analysis of data. As First Nations and Métis cultures value storytelling and having the person involved in conversation being present in the moment and being attentive, I did not want to take away from that relationship by constantly jotting down notes. I wanted to honor those values, and by incorporating a digital recorder, it allowed me to focus more on the person rather than the stories being collected.

The participants all signed an agreement to be interviewed and recorded, and were given information regarding their rights as a participant (see appendix D). There were no known risks

associated with this study, and all participants were given the opportunity to ask questions regarding the study. Following the interviews, each participant had a follow up meeting in which they were provided a copy of their transcript (prior to meeting) in order to discuss any concerns or questions regarding it. They were given the opportunity to change, omit or add any information regarding their personal interview at that time. Once they were happy with the finalized product, a transcript release (see appendix E) was signed. Each participant was given their own copy of both the consent form and transcript release form.

Data Analysis

The collected data from the 3 interviews was analyzed in the same manner as McCormick's (1997) study. All audio recorded interviews were transcribed verbatim, with the exception of words such as "um" or "like", which were present as the participants thought out their responses. This decision was made following the first interview, with Lucy, who brought some concerns forward. Initially, her interview had been transcribed verbatim, and included every use of "um" or other similar words. She explained to the researcher that this made her sound dumb. She explained that there needed to be an air of sensitivity, and that the authenticity of the stories could still be captured without the use of these added words. After apologizing for not being aware of that previously, and for thanking Lucy for pointing that out, the remainder of the transcriptions were then edited. Only words such as "um", "like" were omitted; all other words and repetitions made by the participants were kept intact. Each transcript was then carefully examined in order to ensure the full meanings of the statements/answers were understood. These events were then classified by the previously mentioned ten categories, which included: Establishing a social connection and obtaining support from others; anchoring oneself in tradition; involvement in challenging activities and setting goals; expressing oneself; establishing a spiritual connection and participation in ceremony; helping others; gaining an understanding of the problem; learning from a role model; establishing a connection with nature (McCormick, 1997). Among these categories, the use of traditional healing methods, which is the essence of the first research question for this study, is found in the establishing a spiritual connection and participation in ceremony category, theme 6.

With the first research questions being particularly about traditional healing methods, I expected much of the data to fall within the 'establishing a spiritual connection and participation

in ceremony' category. This is the primary aim for the research however, I felt it important to open the possibility to other avenues the participants have found beneficial in their healing.

The collected data produced both stories and eventually categories. The data itself was in the form of the participant's stories, which were then later analyzed for events in order to manage the existing categories by McCormick (1997) or to create new categories.

The second research question was not placed into categories. It was instead reported and discussed in chapter 4. It acted as a complimentary aspect to the first research question, rather than as a core question.

Delimitations and Limitations

Delimitations

One of the original main delimitations of this study prior to opening the participant pool was that by only using participants who were self-identified First Nations and Métis students from specific undergraduate education programs at a midwestern university, it omitted others who are not in post-secondary education. Although the age range and backgrounds may vary, all of the participants are educated individuals. It would not have opened the possibility for individuals with no formal education, elders or children. Studies with these demographics could yield different results. Once the participant pool was widened to include the whole university, it allowed for a wider range of experiences to be heard.

Limitations

One of the limitations with CIT is that it does not pair well with other forms of research design or methodology. It is an approach better suited to be on its own rather than paired with another approach (Butterfield, Borgen, Amundson & Maglio, 2005). With this in mind, this study did not necessarily have the freedom to pull in other pieces from other methodological approaches to strengthen the study. Doing so may have compromised the research design of CIT.

Trustworthiness

Butterfield, Borgen, Amundson & Maglio (2005) outline nine credibility/trustworthiness checks that can be completed in a CIT research study. For this particular study, one of these checks was originally planned to be carried out. A second interview was originally going to be planned with each participant after the data had been collected and placed into categories. This would have given the participants the opportunity to confirm that the categories made sense and

that their events and stories were accurately reflected through the categories. This is known as participant crosschecking. However, due to time constraints, this was not able to be done.

Ethical Considerations

To ensure that this study was done as ethically as possible, there were a few points considered with the research. First and foremost, informed consent was obtained from all the participants. As this research is of a sensitive nature, there was a need to ensure that the consent form, questions and interview process were non-intrusive and respectful at all times. With a recording device being used to record the interviews, consent to do so was added into the consent form, so it was not a breach of privacy. Special attention was paid to ensure all protocols were met for research involving First Nations and Métis individuals, including the gift of tobacco when needed (this was brought up to the researcher by one of the participants, George, that tobacco should be given to all individuals, not just elders, as the researcher had previously thought). Finally, a transcript release was done so as to ensure each participant was happy with the way their stories were recorded and transcribed.

Informed Consent

Informed consent was an important aspect of this study, as it is with all research studies. The consent process was two-tiered, in the way that it required consent both for the interview itself, along with the recording of the interview, as well as consent to release the transcript for the use of the study. Throughout the study, I wanted to ensure that the participants had the option to ask questions, understand the aspects of the study and why it was being done, and the opportunity to withdraw if they felt the need to do so.

Prior to having the participants sign the consent form, I introduced myself, my background and why I was doing this particular research. I explained that I wanted to maintain transparency throughout the process, to show that this came from a place of respect. I explained the reasons for why I believed this research was important, and the potential impact it could have in some professional settings.

The initial consent was straightforward, and none of the participants had any questions or concerns. As we moved into the transcript release consent, the participants had some questions, more information to share about their experiences as well as friendly conversation. Two of the

participants also offered to stay in contact to help guide me through future works with this thesis, in terms of protocol and explaining different ceremonies they had reported.

I believe the transparency of the researcher when doing research of this nature is important. It is also important to understand that although this is the researcher's study, it is formed by using individuals' stories and recollections of their lived experiences to which you are forming connections. These individuals are inviting you into their world, and sometimes it is necessary to reciprocate that so they can better understand where the researcher is coming from. By setting this foundation, and having ongoing conversations about consent with the participants, I believe that it led to authentic, safe and powerful stories being shared by the participants.

Researcher's Cultural Background

Linda Tuhiwai Smith (2008) explains that from a vantage point of the colonized, research (more often than not done by a white person) is linked to European imperialism and colonialism. Smith explains that the term "research" carries a negative connotation to Indigenous peoples, and stirs up past negative memories and ideas. With an understanding of this, it was extremely important to me that I not only proceeded with this study in a respectful manner, but additionally that I was aware of this fact, and kept it in my immediate awareness throughout. To maintain this, I ensured transparent communication and explanation of myself as a researcher, the purpose of the study, and the process of the study, throughout, with participants, contacts and colleagues. The position of a white researcher is explored more in depth in chapter 5.

Chapter 4: Results

This chapter will report the findings of this study. First, information on the participants will be shared. All participants in this study were given pseudonyms in order to protect their privacy. Any direct quotations in this study are verbatim, with the exception of filler words such as “um” or “like”. Then a discussion on McCormick’s (1997) themes is provided and how they were created. Following this, a discussion on this study’s thematic analysis and the number of corresponding incidents reported. Finally, a summary of the data will conclude this chapter.

The Participants

The purpose of this study was to understand the role traditional First Nations and Métis healing methods play in the healing of individuals. It is important to understand that the information, stories and experiences shared by the participants is more than just data – it is their lived experiences and experiences of their family, friends and community members, their lives, their healing journeys. They chose, very graciously, to share these experiences and stories with me in order to help others in the future understand the importance that culture plays in healing.

There were three participants involved in the study, two males and one female, who were given the pseudonyms Lucy, George and Louis. All three individuals were students at the midwestern university in varying programs and with different plans for their post-university life. Lucy was an education student in the undergraduate program designed for Métis students, with aspirations of teaching in a Northern community in her near future. She discussed how this program had been a point in her life where she was able to start finding out more about herself. George was an Indigenous Studies student with plans on applying to Law school. He was passionate about current events, provincial issues and equality. Louis was a sociology major who had just applied to the faculty of Social Work. He was excited to start this next chapter of his life, and expressed his enthusiasm for this study as it was similar to his field of interest. Of the three individuals, ranging in age from mid-twenties to mid-fifties, two self-identified as Métis (Lucy and Louis) and one self-identified as First Nations, specifically Cree (George). All of the participants had prior knowledge and experience with traditional First Nations and Métis healing

methods, and all were open and willing to discuss these experiences in the interviews. All three of the participants participated in a semi-structured interview followed by a transcript release meeting at later dates.

The interviews took place during November of 2015 to February of 2016. Recruitment began in August of 2015 and ended in February of 2016. The participants all seemed happy and eager to share their stories, experiences and thoughts on this study. This was demonstrated through their pre and post conversations surrounding the interviews and the study itself, as well as their offers to continue to offer guidance and support throughout (for example, Lucy offered additional explanations and literature at the follow-up meeting). They were all open and transparent, and all asked to be kept up to date with the thesis itself, and to be informed when it was released. All three of the participants appeared to be forthcoming, allowing for authentic and often very emotional conversations. The stories they shared were raw, unedited and inspirational. Quite often throughout this process, it often felt as though I was listening to a friend speak. This speaks volumes to their authenticity when sharing their experiences with me.

Findings

Research Question One: McCormick's Themes

In order to answer the first research question that guided this study, which were 1(a). To what extent do self-identified First Nations and Métis post-secondary students consider traditional First Nations and Métis healing methods important to emotional, mental and spiritual healing? and 1(b). What, if any, other mediums do self-identified First Nations and Métis post-secondary students deem important to their personal emotional, mental and spiritual healing? the three interviews obtained were transcribed and then placed within McCormick's (1997) pre-existing themes. McCormick used a CIT approach to his study, in which he interviewed 50 participants. These interviews involved two parts, an orientation and an "elicitation of incidents" (McCormick, 1997, pg.175). The interviews were all transcribed, then examined by the researcher and the research supervisor. The interviews were examined based on the following criteria: 1. Was there a source for the event? 2. Can the story be stated with reasonable completeness? and 3. Was there an outcome bearing on the aim? (McCormick, 1997). Each of the incidents were then classified into three groups: source, action taken and outcome. This information facilitated the organization of incidents into themes. For McCormick's study, and therefore this Master's thesis, the emphasis was put on the action taken category because it

“contained the essence of the healing experience” (McCormick, 1997, pg. 176). The themes that were created, ranging from exercise and self-care to participation in ceremony, were created based on the author’s 50 participant’s incidents, which yielded 437 incidents. The same ten themes were used to analyze the data from this study. Below is an outline of each theme, including direct quotes from the participants. From the three interviews, there was a total of 46 incidents extracted from the stories shared.

Description of Themes and Classification of Current Study’s Incidents

Theme One. McCormick’s (1997) first theme was *establishing a social connection and obtaining help/support from others*. McCormick states in his article that this category involved moving beyond one’s own personal world and life and connecting with others in the community. Some examples McCormick gives is going to a social event, such as a dance. This theme also includes receiving help or support from others, for example through encouragement or acceptance. For this study, this specific theme had nine incidents All of the participants shared stories that fell into this category, and the number of stories made up for 20% of all stories shared.

Lucy discussed a social connection to a group that seemed to be at the core of this theme:

I am connected to a few Northern Dene communities and I do go up twice a year to go visit; they consider me their family and I consider them my family. They’re my Northern family as I call them. They’re not a blood relation but they care of me and they treat me like their own.

Lucy continued on to explain how she had come to know this community, and how she had come to call them family. Being in this Northern community offered her experiences and relationships that she spoke about with pride.

It’s easier to be spiritual with healing with others too. You’re not alone when a person smudges, people smudge by themselves and that’s great, but there’s a power when you’re healing together. Even if you’re healing your own stuff, you’re not really, you don’t even have to talk in a sweat lodge, you don’t even have to talk. You know there’s a sweat leader for a reason, and his message can touch people in a different way depending on who’s in there, and it depends who’s in there how powerful the healing will be.

George also discussed the importance of social connections when he said that:

Community is not just people. Your community is the place where you live, we have to live with others; as a child you right away associate with your siblings, your parents, your grandparents, uncles, and then the clan, and then the tribe.

To George, these social connections and receiving help and support from others extended outwards from just the immediate family or friends. He depicted an image of multiple social connections that provide a foundation and healing space for an individual.

They always teach to our people how to raise a child. How to be a mother. How to teach... the grandmother taught the grandchild, the grandfather taught the grandchild. They were very close, the circle as a child. The grandparents and then the parents, man on the outside, they were the protection providers. That's how it was in a community. Children were raised, taught, and they learned from the elders.

The image that was depicted took on the form of a circle with the individual at the center, and the social connections extending outwards, providing a protective factor around the individual. George said that an individual's social connections, or community, helped form the foundation and backbone of an individual. It was where they learnt who they were, about the world, about the Creator, and about nature and healing.

Louis also discussed the importance of social connections with family and friends when participating in cultural activities. He stated that one of the sole reasons he participates in ceremonies is for the connection he feels with others while doing so.

I've been involved in sweat lodges since I was a little guy, actually. I used to join my cousins. It was a part of a kinship, and it still is for me. I join the group home where I work right now; the kids invite me to sweat lodges. So it's more of a comradery versus a traditional, cultural practice. However, I do find healing within it.

...

Like I was saying before, it's more of a comradery of doing it. Since I was a little kid, the only reason I would go [to sweat lodges] is because I wanted to be with my cousins. I never understood the healing as a child. As an adult, it's still about the relationship more than... I wouldn't go by myself.

Theme Two. The second theme was *anchoring oneself in tradition* and referred to the individual participating in First Nations and Métis cultural traditions, such as Pow Wows or

traditional crafts such as bead work (McCormick, 1997). This theme had seven incidents from the three participants.

Lucy emphasized the importance of the circle to First Nations and Métis culture. She discussed how important the circle was, and how it was the foundation of First Nations and Métis spiritual beliefs.

Balance to me, it's a circle. Everything's a circle. First Nations culture is a circle, life is a circle, everything's a circle, k? And that's what I was always taught. And I was always taught that when one is not balanced [a person's mental, physical, emotional or spiritual self], the other ones will suffer too. And, there's going to be times in a person's life that a balance is not possible, depending on the problem's that are arising in a person's life or tribulations or stress. And the only thing I think a person can do is try their best every day. So I wake up every day saying I'm going to be the best person I can, from what I was yesterday. That's all; everything's a circle though. Life is a circle, the way you treat someone is a circle, everything's a circle.

Lucy also talked about the importance for her of staying involved in traditional activities. She talked about the beauty and excitement that she found in it.

I go to pow-wows. I like... the drumming is so soothing at a pow wow, I could sit for 3 hours just watching people having fun and dancing, their colors and their regalia, and the drumming is amazing. [...] It's pretty awesome. They honor all their elders in those dances, give blankets and it's a sense of community.

George emphasized traditional cultural beliefs and practices in his interview. The majority of the interview was focused on traditional ways of doing things and stories told from his grandparents and family. George brought forth an authentic look into beliefs that are deeply rooted in tradition. He shared the following about anchoring oneself in tradition.

Back then, a long time ago, there was teachings of how a mother could respect herself. During her cycle, she had to go to a place where nobody could bother her; she became a woman. And that woman, during her cycle, she couldn't touch medicines. The woman, during her cycles, her job... well, before her job was to go and pick medicines, because it requires a feminine touch, of combining. But during the cycle they couldn't be around medicines; can't touch anything. Can't be around men, can't be around medicines because it takes the power away from the medicine.[...] And women were treated with the upmost respect, you couldn't abuse a woman in any way. Period. Physically, mentally, you had equal say in everything. Strongest decision making ever.

George gave another example of anchoring oneself in tradition: visiting a medicine woman and the use of natural medicine to cure varying forms of ailments.

My grandmother was a medicine woman. But I remember when I was a kid... actually I don't remember this part, but people used to come there to see her because she knew the medicines before her retirement days... but she knew where to go to the community to get these medicines. And you combine these medicines. Not just one, two, three or four – there's quite a bit. And depending...there was no list, there was no "ok this is where this goes", no, it was all up here (points to head). It was all oral right? Oral teachings and hands on, and observing. You don't write things down; you know today they do. But what these medicines are for, plants, herbs. So I'll need this and this and this to cure this individual. Ok, once you're done that, everything is done in 4, there's a spiritual component, you pray, you pray to this medicine, the creator and all the surroundings, the Creator's helpers – to bless this medicine and make it work and be powerful and cure this individual. One in particular is this story; people come from, I think it was down South, they had this horse and wagon, travelled for 3 or 4 days, and they came to see my grandmother and gave her a bunch of tobacco, gifts, blankets, you name it, food, piled wagon high gifts. They are giving thanks.

...

So there's different teachings for everything. Even little things like acne. I was given that medicine – I know that medicine. I had to deal with acne. So, my grandmother went and did that, she accepted that ok, I'm going to pray to it. Women had little pipes, men had big long pipes, women had these ceremonial pipes.

George reiterated what Lucy spoke about previously – the importance of balance. Lucy discussed keeping this balance in the form of a circle. George discussed balance in relation to cultural tradition:

So what is a balance? A balance is... keep in tune and in line with spirituality, mother nature, mother Earth, community, respect. Not only... because everything is alive in our community. Rocks, trees [you] have to respect them. They'll respect you. They'll take care of you when you need them.

Theme Three. The third theme was *exercise and self-care* and included activities such as running, cycling, taking a hot bath or getting a haircut (McCormick, 1997). This category had five incidents. Essentially, anything that fell into the category of doing something for oneself to promote healing and balance was placed in this theme. Lucy spoke to the activities that she partakes in which help her to feel balanced or that help her deal with stress.

You could throw hobbies in there [forms of healing that are not traditional], you know, depends on a person's hobbies. I personally do traditional beadwork ... hobbies is what keeps people sane, right?

Lucy also spoke about music and dance as personal interests that help her to feel connected to others or that help her in a personal capacity:

Another way for traditional healing is I like to jig. I like fiddle music, I like to listen to Aboriginal rap, it's very popular in the North, and a lot of it has relative... has themes and words that anybody could relate to if they lived in that kind of area or predicament. Like a lot of the rap is about you know, struggling or trying to get away from people dying beside them, suicide rates and stuff. So it's another healing method for me is listening to Aboriginal rap, so I'm quite diverse in what I like to listen to. I mean I like country and pop and you know hipsters and stuff, but, Aboriginal rap is pretty good too.

George also discussed self-care and the importance of finding a balance for one's personal life:

How do you keep a balance in life? Well like I said, follow the protocols. But if you have to go and entertain yourself, like go to the bingo, it's not a sin. If you need a break from raising your children, and you go to the casino and spend 200 dollars, 300 dollars, that's not a sin! You need a break from raising all your children from over Christmas, go have a few drinks, it's not a sin! But Christians will condone you right away, oh you're a bad evil person. No, you're not. Number 1, you don't talk about people. Christians do that, there's lateral violence, gossip. That's what they do – they look down at people.

George spoke to taking care of oneself in a different way as well; as opposed to activities or hobbies, he discussed the importance of taking care of yourself by removing yourself from negative situations, and ensuring that your life is positive and supports a healthy lifestyle:

Balance is... stay happy. You know, I had to separate from my wife because she was abusing alcohol. And we were fighting lots, I didn't want to abuse her. I didn't want to verbally or physically (I never did that) but instead of doing that, I walked out, I backed out. I tried it for many years. I tried with her, I told her... please quick, something is going to happen, please. We're going to end up separating or pretty soon I'm going to drink. And I use to tell her that, "quick, please" but she wouldn't. I can't be with a person I'm not happy with. A person that I don't trust. She has her demons too.

Finally, Louis expressed how important sports and the involvement in them was therapeutic for himself, and promoted healing:

I do physical activity to help myself. Bicycling mostly, go to the gym as often as possible. There's a lot of connection to being a child and playing sports and kind of as an adult and coming back to that is very important.

Louis touched on the idea of participating in child-like activities, which he believes to be important to one's sense of healing. Throughout his interview, he referenced numerous childhood experiences, always with a smile on his face. By connecting to that innocence and purity of heart and soul through sports, hobbies or activities, one may be able to find healing through joy.

Theme Four. The fourth theme was *involvement in challenging activities and setting goals*. This category had one incident between the three participants. Included in this category were elements such as setting specific goals for oneself or exposing oneself to challenging activities, such as public speaking. George spoke about a personal goal that he wanted to pursue regarding our society and the world we live in. It was something he referred back to a few times throughout his interview, and a topic he was very passionate about:

Instead of that, why don't you empower our woman. Free university tuition to all the women in Saskatchewan. Not only to universities, but trades, SIAST, SIIT, because women are the caregivers. They're the ones with the children, right, they have to raise them. But if that woman lives in poverty, the children are going to live in poverty. Poverty equals crime, jail, rape, hunger and so forth, drugs. And it has to start at the top. I want to talk to Brad Wall, and write him a letter – look, we need to empower women. How? Well, it has to start at the top. We should have equal women in legislation, in the legislative building. MLA's, CEO's should be half women or even more. Employees should be half, everywhere. We look at these women, and sometimes they have more education than men, but they're pushing brooms. I believe in empowering our women. And that's how we have a healthy lifestyle. That's healing. Everything we do is healing.

Theme Five. The fifth theme is *expressing oneself* and includes elements such as crying, laughing and screaming (McCormick, 1997). This category had one incident. Lucy spoke about an experience she had, a modern spirit quest as she called it. While living in a group home, she, along with others who lived there, were taken to the middle of a forest and dropped off individually. Each were given a backpack containing different objects which would help them get through the night alone. Lucy explained about the anger she felt initially, but then she took the time to settle in and look through the backpack. Finally, she said that during this modern day spirit quest, she:

[I] spent the evening writing. Just by the fire and just writing my feelings, things and guilt's and thoughts, and it was very neat.

Theme Six. The sixth theme, *establishing a spiritual connection and participation in ceremony*, included elements of prayer, connection and communication with the Creator, and participation in First Nations and Métis ceremonies, such as a Sweat Lodge Ceremony or a Pipe Ceremony. This category had 10 incidents between the three participants. This theme included the most incidents, and this could be due to the questions asked during the semi-structured interview. This specific theme could be considered the heart of the study, and so guided the interview questions. It also made up, content wise, the majority of the individual interviews. The participants also spoke a lot to this theme throughout their interviews, and some of the stories and experiences they shared were emotional and beautiful.

Lucy discussed quite in depth throughout her interview the effects that connecting to these ceremonies had on her.

I do smudge when I'm there and I feel amazing when I'm done. I do partake in sweats and I love it. There's a lot of drumming in sweats so that is a part of it as well, and the prayer to our grandfathers and our creator. So it's all interconnected and it's quite a spiritual journey for me.

Lucy also described the physical and spiritual feelings she gets from participating in ceremonies:

[...] sometimes I don't even talk at all, and you go in the sweat lodge feeling so heavy, just your burdens are on your shoulders, and sometimes you're thinking, you know this has been a rough long time and you come out and you're so light. You feel so light; you feel like you're 10 pounds lighter. It's an actual physical feeling when you come out of a sweat lodge. You feel those burdens off your shoulders and you feel so therapeutic, and the drumming soothes your soul and your heart.

[...]

And when I first went into a sweat lodge I didn't know anything of a sweat lodge. I, I knew the concept of it, I didn't know how powerful and spiritual it would be to me. I didn't know, you know, simple things - you don't know how many rounds there are, like all this stuff that you have to experience when you're there. That was the first time that I felt I was moving forward in a long time, was my first experience with a sweat. That's when I felt like I was moving forward, I was not stuck. I was never going backwards in my life, because I wouldn't allow myself that, I feel like my parents wanted me to fall because of how they left me. So I always said to myself I will never allow myself to fall. And, so yah, the sweat lodge was probably the spiritual breaking point of my life that has pushed me forward. I've been kind of fortunate in some of the people I've met over the years

George also discussed the connection to spirituality that he personally felt during ceremonies. He openly shared numerous stories of his experiences in certain ceremonies, and the effects they had on others that he witnessed.

I've been involved in this more than once. It's called a Shaking Tent, aw-sa-pa-tami, a really power traditional outfit where it's about this big, we construct it and put flags all around it. I went to – call them a healing lodge, but call them aw-sa-pa-tami, or shaking tent... when I was in these ceremonies, I went to lots, we'd put bells there and we'd sing songs, and when you hear a bell rings it means grandfather came, spirits came. These spirits, they're not human. Period. The creator is not human. Achak. Our elders tell us they are not human; the creator is not human. They are spirits or whatever you want to call them. But there's also a different entities surrounding.

George also explained how the spiritual connection to these ceremonies is how he knew how to treat clinical disorders, such as schizophrenia. He began by explaining that in his Cree culture, schizophrenia is not viewed as a clinical disorder, but rather as an individual possessing two or more spirits – the individuals own, and another (or more) spirits that have entered the individuals body without their desire for it. It is important to highlight and distinguish that this explanation provided by George differs from the term “two-spirited” as discussed in chapter 2, which refers to queer Indigenous peoples. The following excerpts of George's interview are the story of when he was able to witness a young girl being cured, as well as a family member's cure of what a Westernized culture would call schizophrenia:

So I went to the ceremony without being explained it. There was a little girl who has more than one spirit. Okay, so we sat down and we shut the lights off, the soul, or entity, that was in her, was so powerful. She would have seizures and blackout. You know, epilepsy. And she was... we were told a-pakamakot, that grandfather is going to beat her out of that; and at that time I didn't understand how this concept works. But what happened, is he said, “this bad spirit, or omen, is so powerful we going to have to use rawhide – I don't know if you've ever heard of rawhide? – so instead of cloth, we put rawhide there. So we shut the lights off and we started singing. We had to, there's two of us 300 pound guys holding this little 12 year old girl, and her legs are spread out like this. We're all sitting on the ground in a basement. Shut the lights off, and I start singing. Grandfather's come in, and all of a sudden (makes loud noise) it was like a real big wild cat or something. Make you shiver. Grandfather's come in and they started talking and all of a sudden there's like a big fight. We use rattles in there – you know what rattles are? – like a baby rattle, but they're made out of rawhide; shake them up when you sing, sometimes they go flying around, spirits

carry them around to bless people, or whatever to heal people. There was a big fight – it took about 10, 15 minutes. And no children are allowed in there, because they can leave one body and go to the next. No babies, no kids. They have to leave. So we tend to leave it until the end when everyone is done their healing process. And sure enough, it worked. That night, we put the lights on, and we saw a big, giant paw print, or hand print – it wasn't there before. Geez, what the hell is this, you know? Open the lights, and that was it. The girl was healed.

[...]

All of our ceremonies are Cree, and a lot of them are Ojibway, Saulteaux, Sioux, Assiniboine, whatever, Dakota, Nakota, Lakota, Dene. The ceremonies are the doors that open, they go South. They open south. Sundance, you name it, all of them. [...] These are our beliefs. So, when a child is born, when a child is sick – I have an example of my nephew. Roger was 18 months old, or a year old – he fell off a swing, a homemade swing at his house, that's where he grew up, fell off and cracked his skull; he had a steel plate here but he just about died. So what happens is that Ahcâhk –, Ahcâhk is your spirit, anumsipwaytale, it's leaving, he left. Something then comes in there; a spirit that can't leave this world. Whether it be human, animal, snake – you name it. What I learned, with Roger, I don't know, something else came in there, because they roam; they can't leave, so they roam this earth, whether it's evil; could be bad, could be just a lost soul, but sometimes they have two. So it goes in there, and the other spirit, the real spirit, it comes back, so it has two spirits now. Could have three, could have four. And depends how long they've been sick. When they asked my nephew, "what happens when you have a seizure or blackouts?" That's what we're told, that the other spirit is trying to take over, when they have a seizure. I took him to the ceremony, he was taking 25 pills a day, or 30 pills... schizophrenia and multiple personality – whatever. But after the ceremony, it was all gone, and he never had to take any more pills, never had a seizure, ever since.

George summed up the powerful stories he shared by saying that "we've lost our culture, we're losing the ceremonies, we're losing the teachings, doctoring methods that are part of healing. And we also believe in the pipe, the power of prayer".

Theme Seven. The seventh theme, *helping others*, included any form of help that the participant gave to another individual, for example volunteering or helping someone get home safe (McCormick, 1997). This category had three incidents. Lucy shared how she had come to call her Northern family a family – it started by volunteering her time to individuals who recognized this compassion, and one individual invited her to visit him in his community. This specific event stuck out in the interview as a pivotal moment in Lucy's life, as it became the backbone of her stories – her time with her Northern family:

I went up North because I had a friend that was from there. I met them, they were actually at a medical appointment and I used to do medical transportation for them with Health Canada. So they were my client actually. And he, we became a friendship over the years because I saw him all the time! He was sick with cancer, I saw him all the time. He said, “you know what you need a break from the city, you come visit me up North and my family, and just see how we live up here, just entertain the idea and maybe you’ll find yourself”.

When asked if there were any other things that Lucy believed to be helpful in her own personal healing and growth, she specifically pointed out helping others and giving back:

Giving back. A lot of people are very much into themselves, and for myself I get spiritual healing when I help people. And maybe not in a way like, it’s not about doing something to receive something, it’s just to be helpful. I feel happy within myself if I can help someone. So like up North, for instance, I’ll give you an example, there’s a few kids up North that I know their family situations aren’t very good. So I will do my best to spend time with them individually because they know who I am. So, I will spend time with them individually and you know, if they want to share with me they’ll share or ask me questions, but if they don’t then we just have a good time

Louis also discussed the importance of giving back and helping others. As an individual on the pathway to becoming a social worker, he believed this aspect was rather important to one’s own healing:

And then a lot of it is really at work for me. I really enjoy what I do at work and getting better at what I do is very empowering for myself and gives me time to reflect on my own relationships. How do I – nobody wants to deal with a social worker that doesn’t have their own life together, to a certain degree, right. Everybody wants a real social worker but, or a real person within social work. So, my work provides me a lot of benefit, I suppose.

Theme Eight. The eighth theme, *gaining an understanding of the problem*, included the individual gaining an understanding or insight into a problem. There were four incidents in this theme. Lucy, who explained she started to find out who she was in the current program she was in at a midwestern university, discussed the importance of understanding the issues in our lives:

A person can choose to look at their problems, or they can choose to just sit there and mope, pout; but it also gives you the power to decide what you want to do for yourself, I mean I was ... a lot of those kids that are in those group homes are forgotten, you know, at least the ones I was with. It wasn’t because their parents were bad people, it was because their parents were struggling, and that was the safest place for them to be, and they felt the guilt of their parents not doing well, and they blamed themselves. Or for me, it was... I blamed myself

that my parent's didn't want me. I went year, 10 years probably, or more, I was an angry person. I'm not anymore, but it took a lot of work... like a lot of work.

George shared a personal story of a close friend of his, and how he was able to understand the underlying causes of a specific problem he had endured for years. George talked about his friend who had survived his childhood in a residential school in Saskatchewan. This man's parents and grandparents had all gone to residential school, and it was a multi-generational trauma that George spoke about. George recounted stories of a brutal rape his friend had committed as an adult, and how he had multiple wives and many children, and was unsure of how to love them. He had alcohol and drug problems throughout his life. It wasn't until he quit drugs and alcohol that he turned to therapy to deal with his problems. George shared the following about his friend's experience (with "I" referring to his friend's voice):

So what happened is, first of all, I went to therapy, they called it "inner child". I was told, kind of like a hypnotist, or therapist, they take you back to when you were a kid. I guess I was rolling around on the floor, vomiting, black stuff, and that's the abuse coming out. I pissed myself. I remember going back and seeing this four year old, white t-shirt, wet, the white t-shirt was wet – that was me. And I was told that you left yourself back there. Your inner child, you grew, because of that abuse you endured at 4 years old. Your inner child didn't grow up, but you did. So you have to make peace with your inner child, you have to take it with you. And he did, he went and hugged him and said I love you, I'll never leave you again. All that wet t-shirt was from crying, and had sores all over his eyes from all that crying. And that's how I discovered myself. I had to go back, and understand why this happened.

[...]

And then, there is also different forms of methods, called psycho drama body work, we have Cree terms, he's Saulteaux actually and there's Saulteaux terms as well, and they discovered this healing methods and its 7 ways of healing. What it is, kind of like a therapy work. Your abuser will sit here, and I'll sit here, and there's handkerchiefs, how many kids you have, say you have 10, I'll put 10 here. You want your ex-wives to be there, put 5, whatever. Your parents, your children, your brothers and sisters over here, or your best friends. You can have up to 50 handkerchiefs representing who you really love, and that person you explain to him, what he did to you to damage your life. You had an unhealthy life, and you yell at that guy, or her or whatever, and you swear at that person, and yell as hard as you can, what he did to you. And there's a punching bag right here, if you get angry. Punch this. You have to yell from here and swear from here. You're giving it to this guy for all the damage that he did. You have to

release that abuse psychologically. You're releasing all the steam you've been carrying, all the anger, all the hate. All that stuff that's been in you, because right here that's where all that abuse exists. And you have to keep doing that, and you go outside and you yell as loud as you can, yell all that pain and misery and hurt and cry all you want. Cry, cry, cry. Because your spirit has to heal too.

George's story about his friend portrays the power of gaining an understanding of the problem. In order to heal, one must come to terms with what they wish to heal. Although it is not a story about himself, George seemed to feel strongly about it, and it was important to him to share it.

Louis discussed how his participation in different ceremonies often provided an understanding to current problems in his life that he was dealing with:

[...] within the sweat lodge it provides time for self-reflection. When I was a kid it was simplistic problems of course, however when you're a child, those problems are still the problems you have as an adult, they're just different, right. As an adult, it really is based around current friendships. If there's a spat between myself and a friend it's time for self-reflection and time to think about what is my role in this? And then also the kids, it's a tremendous time because we sit within there with an elder, and the elder addresses them first, which I think is very important because they are our client, and not only our client, but the future. All those nice words we can use about kids. But they are all true. And then the way they speak to the elder is different than how they speak to us because we do deal with them 12 hours of the day. So, if they're upset with us, the feeling is different, however an elder is slightly different. So, the way they speak to them gives us the moment, or myself the moment to self-reflect and think about my position in that relationship and how can I change to better our relationship, better they're healing, and progress as a worker myself.

Louis explained how a sweat lodge is beneficial to him in terms of having the time to sit quietly with his problems. This allows him to get a new understanding of the problems. The quiet of the sweat lodge allows time for reflection, which allows a person to gain a better understanding of what is bothering them.

Theme Nine. The ninth theme was *learning from a role model*. In this theme, participants obtained guidance or instruction from someone they connected with and viewed as a role model. There were three incidents in this theme. Lucy and George both spoke about individuals who had been influential on lessons they had learnt about life, or things they believed about themselves or their personal lives. Lucy said:

Even though I've been on my own at a very young age, I've had mentors in my life that have helped me, not make decisions for me, but helped me think them through. I could have very well ended up, you know, in a lot of places I shouldn't

have been. I could have been on the wrong side of the tracks easily, and I could have probably ended up in, I could have been dead by now. So I mean, or prostitution or jail or gang or drugs, you know, but I was very fortunate enough that I had people helping me along the way.

For Lucy, these mentors seemed to help change the trajectory of her life path. Without them, she was worried what could have happened to her. By having individuals who acted as guides and role models, she was able to navigate difficult times and emotions, and become who she is today.

George spoke about his grandfather, who taught him many important lessons in life. He shared one in particular:

My grandfather told me that ‘I used to be a bouncer. I used to fight a lot, I used to womanize a lot’. When you hurt somebody physically, mentally, verbally, sexually – it comes back to you 10 times more. Try living like this grandson – be kind - this is all in Cree – be generous, be helpful, caring, loving, everything. It comes back to you 10 times more. These lessons are how I live my life, like that. Good things come. These are our teachings.

George’s grandfather provided him with teachings about life, and how to treat others. This ties in with the idea of karma that George spoke about throughout his interview, and the importance of treating others with respect.

Theme Ten. Finally, the tenth theme, *establishing a connection with nature*, included being in or around nature and using nature as a form of self-healing (McCormick, 1997). There were three incidents in this category. Lucy explained her experience with nature as being both peaceful yet frightening:

[...] just listening to all the sounds around you, and they’re amplified because there’s nobody around you. It’s peaceful, but, at the same time it’s scary because you’re looking within yourself, you don’t have anybody else to blame, you have to look at yourself

One of the first things George spoke about during his interview was the interconnectedness of humans with nature – plants, animals and all living and non-living things.

A community is always also the plants and the animals. We are taught to respect every living thing; everything is alive. Everything that grows – grass, trees, animals, we have to respect them. When we go hunting, you have to place tobacco. We ask for your life to feed our family; we need the trees and when you chop down trees – put down tobacco. Plants and medicines. We have to go there and pick all these medicines, so we have to respect that, we can’t just go ahead and start doing stuff. We have to respect each other, and you respect us too. And sometimes the reality, is that people say that “oh, the plants and animals don’t

need us, but we need them”. Without them we wouldn’t survive. But sometimes they need us too. We don’t harvest the animals, there’s going to be an over population. With the plants, there’s going to be an over population; that’s when diseases occur. So, they get sick too. Animals get sick too. So we have to... we also have to take care of Mother Earth.

[...]

In the winter time, they would teach all the teachings about life and so forth, and how to treat everything. It’s called biophilia – how to integrate and work with nature, basically. These are the things that we were taught.

It makes sense that nature would be an important factor in which George and Lucy found healing as it is the epitome of interconnectedness. George discussed that with nature, the individual gets something from nature, but nature benefits from the person as well. It is all interconnected and dependent on one another.

Summary of Research Question One

Through these interviews, I was able to begin to understand the role that traditional First Nations and Métis healing methods play in the balance between mental, emotional, spiritual and physical health. I was able to hear stories about how people have found and continue to find healing and self-growth within traditional First Nations and Métis healing methods and ceremonies, but also through different personal methods, i.e., participation in sports.

Below is a table outlining how many incidents were found in each theme. The majority of the incidents were found within themes 1 and 6, although this may be attributed to the fact that the interview questions aligned with those two themes. Nevertheless, those specific themes seemed to also be integral parts to each participant in this study. They made up the bulk of what each participant chose to discuss throughout their personal interview.

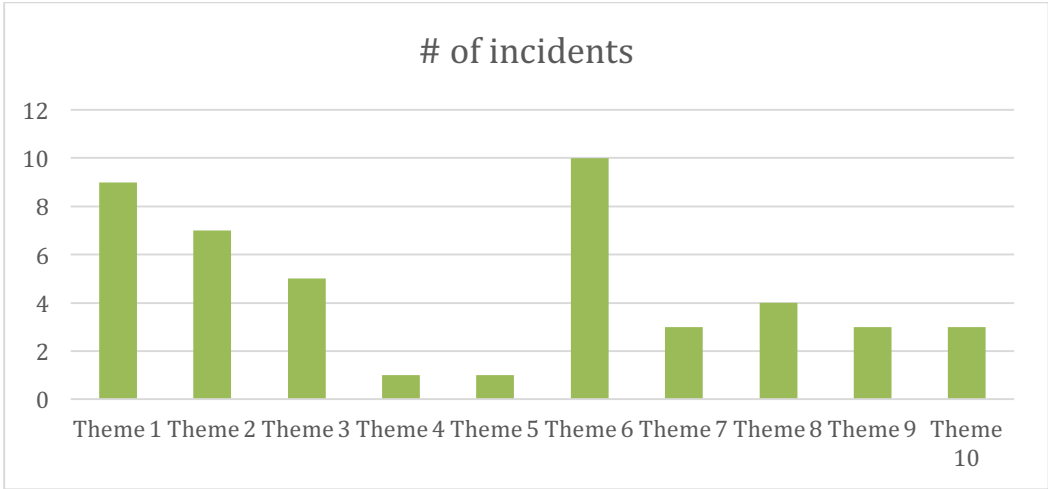
Table 1

McCormick's (1997) 10 themes

1. Establishing a social connection and obtaining help/support from others	2. Anchoring oneself in tradition	3. Exercise and self-care	4. Involvement in challenging activities and setting goals
5. Expressing oneself	6. Establishing a spiritual connection and participation in ceremony	Helping others	Gaining an understanding of the problem
	Learning from a role model	Establishing a connection with nature	

Table 2

Number of Critical Incidences Reported According to Thematic Analysis



Research Question Two

The second research question of this study was: To what extent do self-identified First Nations and Métis post-secondary students want traditional First Nations and Métis healing methods included in the counselling process were they to see a counsellor or psychologist.

Prior to beginning the data collection portion of this study, I hypothesized that the answer to this question would be met with a resounding yes. However, the responses were more complex than I would have anticipated.

Each participant was truly honest, up front and authentic with their responses to the questions regarding this area of interest. The information shared from the participants will be important moving forward (discussed in chapter five), as it sheds light onto how best to, if at all, incorporate these traditional healing methods with clients. When Lucy was asked the question on whether or not she thought inclusion of traditional First Nations and Métis healing methods in counselling sessions would be beneficial and/or appropriate, she took a long pause to think before sharing her response:

It's a hard question. Actually, that's a, quite (sighs) loaded question. In my opinion, traditional methods in counselling sessions would be okay, but the person who you're counselling with, needs to be First Nations or Métis. There's a special bond between us. I can't explain. And yes another person might be trained in that, but it's a sense of respect. Like, for instance, a white person can gain the respect, and it's earned, and it's a rapport that you have to gain, but you're never going to have as much of respect as if it was a First Nations or Métis person. You're just not. And, for example, I'll give you an example, for myself, I've built rapport with communities in the North, I'm not from there, I'm a Métis person, and they're Dene people, and I accept them, most of them accept me, but there a few that, that'll say you're not Dene. You'll never be one of us. And I'm like I don't want to be you. I respect your culture, I embrace your culture, I want to learn your language. I want to participate in your activities. But I have to... there's a fine line to know, that if you're not going to be one of them. So, for that question, I think it'd be okay if the counsellor was a First Nations or Métis person, or if the person participating is ok with it, but sometimes people say they're ok with it and they're not.

Lucy went on to further discuss the cultural boundaries that one needs to be aware of when considering this type of thing. She compared it to her relationships with the Dene community in a Northern location. As a Métis individual, she knows she is not Dene, and needs to be respectful of unspoken boundaries and to not overstep them. She did not elaborate on what the boundaries were.

When George was asked the same question, he brought up a topic in his response that was not expected:

You know what I'd be afraid of? Right now I'd never go to a counsellor, because they take everything note by note, everything. All your details, your childhood,

what's bothering you, blah blah blah, why are you here, blah blah blah. And those records are there for, and I know even though they say these are private, no. The government wants to know what you're there for, because they're paying them, the counsellors, and they can become accessible. So I would be afraid. Let's say I went through divorce or if I was fighting for kids, I'm not saying I'm going to right now, I'm passed that stage already. But if for somebody else, they can use those records on you! But say for a psychiatrist, they take everything down. Counselling, to give you better understanding, better needs. But if you go to a ceremony, you don't even have to tell your name! They don't keep records; you don't have to tell your problems to anybody. But how can a counsellor help you? There's many ways they can help you. But to integrate that knowledge, that I've given you right now, absolutely. Absolutely. But I'd be careful, don't take anything down. Don't write anything down. Why? Why? Because to hurt somebody in the future? That's why I would be reluctant to speak out. I'd be afraid to be hurt by those records.

This is an aspect of when counselling some First Nations and Métis individuals that also needs to be taken into account. The field of psychology is rooted in a scientific line of thought, and keeping records of counselling sessions goes hand in hand with this conceptualization of therapeutic interventions. However, one needs to be mindful that First Nations and Métis cultures value the importance of language and storytelling, and passing knowledge down using this oral tradition without a direct need for a written record.

Louis, who was in the process of beginning a Bachelor's of Social Work, offered yet another perspective to the question. He discussed both the setup of the counselling room as well as actually bringing up the idea of incorporating those healing methods with clients:

Hmm. That's a very interesting thought to think about, because if you think about going to a clinician, you think about being with them a very standardized setting, a very interesting space much like we're in right now. Brick wall, echoy, situation and not so much a healing circle or anything like that. I suppose if it was done in the most honorable way, right. I think I'd be a little bit weary if somebody who didn't identify with being Aboriginal started, you know, came in and offered me the smudge, that'd be a little bit awkward for myself. And again, it would make me think about colonization, like what kind of progress are we making here. However, I believe there's just a time and place for everything, and there's multiple ways of healing. Sometimes I need to go see a clinical counsellor, sometimes I need to go for a canoe.

Louis expanded this by discussing the workplace the individual is in, as unfortunately, employers dictate quite a bit what a counsellor can do. An example of this would be smudging – not all facilities are open to or have the ventilation system they deem necessary to be able to smudge inside. Louis also furthered the issue on bringing it up with clients:

Looking how I currently work within the group home I invite a lot of people in to perform such ceremonies, a lot of it is one the request of the children. Or I encourage the children to make those requests, or think about those possibilities. Because once they realize that those possibilities are available, they're endless right?

Interestingly, as a Métis individual, Louis said he would not be comfortable facilitating spiritual ceremonies and/or practices with his future clients. He would opt for bringing in someone who was well versed and educated in such matters, such as an elder. When asked if he thought non-Indigenous counsellors or Psychologists could do the same (invite in elders or other community members) he quickly responded with:

Yup. I think it's... I think it would be very beneficial. I mean it's really up to the client. The client... for me, it's client centered therapy. The client... offering or having the client realize it's available is important. And then, as soon as they request that, then I think it's very important to offer those kinds of services.

Louis also discussed the importance of empathy of ensuring the client felt heard and respected in counselling sessions. He reiterated that in the end, it's up to the client and what they are comfortable with. Some individuals may be okay with incorporating traditional healing methods into the counselling practice, whereas others may not. This emphasizes the importance of communication and transparency, and understanding what is the most beneficial for any specific client.

Summary of Research Question Two

All of the participants agreed that integrating traditional First Nations and Métis healing methods into counselling would be beneficial, however they all had their own personal reservations or concerns regarding it.

Lucy felt that this would be best if done by a First Nations or Métis counsellor, as it requires a cultural bond. She indicated that if a counsellor was White, respect could be achieved over time, but would probably not be the same as with a First Nations or Métis counsellor. She also touched on the point that it is up to the individual client, and what they are comfortable with.

George was concerned about the privacy of what is discussed in an individual's counselling session, and the mandatory note keeping that counsellors, psychologists and psychiatrists do. He cautioned on this, explaining that these notes could be used to hurt the client. George discussed that when healing is done in traditional ceremonies, such as a sweat lodge, there is no written documentation of the experience, and many times it is anonymous. He agreed,

however, that integrating healing methods into these sessions would be a positive, but he reiterated caution regarding keeping notes.

Louis discussed his own personal hesitance to facilitate traditional healing methods in future sessions with his clients. Although he thought it was a good idea to incorporate them into counselling, he believed it would be best to invite elders or other community members in to facilitate.

The common thread throughout the three participant's interviews was that it was up to the client, and what they felt comfortable with. They all agreed that traditional healing methods are important to healing, and that they could be integrated into counselling, however each participant brought up their own reasons for moving forward in a cautious manner.

Chapter 5: Discussion

The purpose of this chapter is to discuss the findings of the current study. This chapter will discuss the research questions that were specifically asked in this study. It will use Smart's (1998) framework as an anchor for the results found in chapter 4. Next, strengths and limitations of this study will be discussed. Finally, implications for further research, as well as the implications this current study has on counsellors and psychologists, will be addressed.

Summary of Findings

The first research question for this study was two part: 1(a) To what extent do self-identified First Nations and Métis post-secondary students consider traditional First Nations and Métis healing methods as being important to their emotional, mental and spiritual healing? and 1(b) What, if any, other mediums do self-identified First Nations and Métis post-secondary students deem important to their personal emotional, mental and spiritual healing. As discussed above, the responses to the interview questions given by the participants confirmed that traditional healing methods are important and do foster personal growth, healing and balance.

This study produced many important aspects to the healing of individuals, as seen by First Nations and Métis students at this university. Each of McCormick's (1997) themes included at least one event, with the majority of events falling in theme 1 (establishing a social connection and obtaining help/support from others) and theme 6 (establishing a spiritual connection and participation in ceremony). The amount of events present in the themes is a recognition of the fact that not everyone finds healing in the same manner, although many of the common threads of healing among these three specific participants can be linked to their cultural and traditional beliefs and practices.

The high prevalence of events found in theme one can be anchored in the importance of community to First Nations and Métis cultures. Maintaining this connection to the community and receiving support from it, is important to an individual's healing (McCormick, 1996). It is not surprising that this was one of the most prevalent themes in this research, as the community is considered to be integral to the healing process by First Nations and Métis cultures (McCabe, 2008). This interconnectedness with the community is viewed as one's connection to the world outside from the individual – friends, family, community and culture (McCormick, 1996). As George discussed in his interview, and as McCormick (1996) reiterates in his article, community

starts with the family, but extends beyond that, to include friends, colleagues, acquaintances, nature, and essentially all that is in the universe.

Interestingly, Heilbron & Guttman (2000) found in their study that long term goals for healing involved an individual's community wellness. The women in their study were interested in their individual healing, as well as the healing of the communities in which they live. This demonstrates the collective mind frame of healing for First Nations and Métis communities – healing happens with an individual, but in order to be truly healed or balanced, their community needs to be healed as well. The importance of community wellness is strengthened by Wilson (2004) who found that the women in her study strongly believed that community wellbeing starts in their home and within their relationships with friends and family. Women in this study also expressed that they believed the most relevant contribution they felt they could provide to community wellness was to raise children who were healthy and independent thinkers (Wilson, 2004). Duran (2006) discusses the importance of community healing in his book as well. He discusses the concept of multi-generational trauma, and how different communities have experienced severe traumas such as insults to their land, genocide and the effects of residential school. Duran outlines many criteria for beginning to heal an entire community, including raising awareness, suggesting that the community must become aware of its history and how it came to arrive in the present-day situation. Duran also says that devising a plan to continue the healing process, raising community awareness, and healing the land will help heal a community.

This theme of interconnectedness is foundational to healing for First Nations and Métis individuals, and the healing process extends beyond the individual. Understanding the importance of this is imperative for psychologists and counsellors when working with First Nations and Métis clients. Honoring those connections to the community, treating the client as an individual but also a member of a larger collective, and being open to accepting others into the process, are all important moving forward.

With 10 incidents, theme six (establishing a spiritual connection and participation in ceremony) was the most populated theme, and was essentially the bulk of this study, and what the interview questions were targeted towards. The number of events seen in this theme correlates with what exists in literature regarding the importance of spirituality in First Nations and Métis cultures when it comes to healing and balance. A connection to spirituality seems to

be foundational to the healing of First Nations and Métis cultures, which is also evidenced by the Medicine Wheel.

All other themes had at least 1 event, which speaks more to the individuality of healing to each participant rather than a collective cultural view. Each participant found healing in both non-traditional and cultural practices that were unique to them. For example, Louis found healing in sports and physical activity such as biking. Lucy found music beneficial for her own personal balance. George discussed his involvement in current events, such as being a publisher of newspapers and cultural practices such as lighting his sweet grass in his kitchen and praying for good health for everybody, to be healing for him.

The collective of these three interviews produced both cultural and traditional methods of finding healing, which were a common thread throughout, as well as personal ways of finding balance, which were more individualistic amongst each participant. It is also important to point out that the experiences, events and teachings shared in the interviews are the participant's personal understandings and experience with different cultural and spiritual practices. This information should be seen as that: an individual's personal experiences, and not representative of an entire culture's view, approach and steps to participating in cultural activities. Teachings may be passed on differently among different First Nations and Métis cultures, as well as the significance or importance of certain materialistic objects (i.e. the size of a pipe or the use of tobacco). With this in mind, it is important to get to know an individual, their stories, their collective experiences and knowledge, and how they interpret teachings and knowledge.

The second research question, (to what extent do self-identified First Nations and Métis post-secondary students want traditional First Nations and Métis healing methods included in the counselling process were they to see a counsellor or psychologist) yielded responses that were encouraging yet encouraged caution of integrating healing methods into counselling. All participants believed that these traditional methods and ceremonies were important to maintaining balance and promoting healing, but had different cautionary thoughts of how it could be done. One of these cautions, or concerns, was the race and culture of the counsellor or psychologist. Although this thought and idea had crossed my mind a few times throughout this process, the participant's comments brought this thought to the forefront. Not only did I begin to research therapeutic relationships between white counsellors and First Nations clients, but I began to think of myself in the process.

I am a 30 something white female, whose ancestors came from Germany, Ukraine and France. I grew up in a pre-dominantly white neighborhood, went to affluent schools, and my only friend growing up who was not white was from Brazil. I did not experience racism first hand, and I also did not think or see color. Everyone was equal in my mind, and this is largely due to how I was raised. I was taught that everyone mattered, and to be kind and respectful to all. This has been a prevalent factor in my life ever since; I have never believed myself to be more important, more deserving, or more worthy than anyone, nor do I believe anyone else to be more than I. I strongly believe and *know* that all humans are equally deserving and worthy, regardless of class, age, race and sexual or gender preference. I tended to not see in color for my entire life, and have treated everyone with the same respect. In the first month of my master's program, a friend and colleague who was born in China made a comment in class that shifted this entirely: by not seeing color, by not acknowledging that someone is a different color or race than you, you simultaneously disregard their culture, beliefs, values and differences. By believing that everyone is the exact same, you do not respect or understand the very underpinnings which makes them who they are, and what makes them different than you.

This comment has drastically shifted the way I approach relationships, friendships, clients and others in my life. My entire life I have shunned the idea of any type of "ism" (racism, sexism, ageism, etc) and have actively fought against it by discussing it with my classes as a high school teacher and arguing with individuals who tell "ism" jokes. It is something I have no patience for and do not tolerate. While reading through Todd Sojonky's Doctoral Dissertation about white privilege and working with First Nations peoples, I also realized something else: I have experienced white privilege my entire life. Sojonky describes white privilege as a white individual being rarely aware of their skin-color (Sojonky, 2009). I am aware that I have pale skin and blue eyes, but I have never realized the privilege in which this entails. As I mentioned earlier, I have never experienced racism. I have never been a minority in any situation. I have been given jobs and experiences that may, now looking back, be due to this white privilege. I have never felt unwanted, unimportant or belittled. Sojonky explains that in order for white privilege to exist, other cultural or racial groups must be undermined. This white privilege is the root of colonialism, and the genocide felt by First Nations people. It has been used to justify unthinkable events over a long history of time. Knowing this, and understanding this, does not make me feel privileged to be white; it angers and saddens me.

With this knowledge, how do authentic relationships between white counsellors or psychologists and First Nations clients form? It is not enough to respect and understand the beliefs, values and cultures of clients who are First Nations, we must also understand our white privilege and the true history of our country. Counselling with First Nations clients should include a combination of cultural and spiritual approaches and current models of psychology (Blue, Darou, Ruano, 2015). However, as found in this study, in order to incorporate these traditional cultural and spiritual practices into counselling, the race or culture of the counsellor is important as well. This makes sense, considering the history of oppression, genocide and trauma done to First Nations individuals by white cultures. The importance of the counsellor or psychologist's skin color and cultural background is understandable. Much of the research on therapeutic relationships between white counsellors and First Nations clients seems to be done by white researchers. These studies, which may be done with good intentions and include stories by First Nations individuals, are still written from the perspective and cultural roots of a white person (yes, I am aware of the irony of this, considering the same can, and will be, said about this thesis). Sojonky explains in his thesis that even though he has been accepted into the reservation community in which he works as a psychologist, and has been invited into many homes of clients, has been entrusted with numerous personal stories and details, and has been to over forty sweat lodges, he is still, and will always be an outsider (Sojonky, 2009). This is something that white counsellors and psychologists may need to come to terms with: even with good intentions, an unwavering disagreement with all forms of "ism's", thorough knowledge and understanding of First Nations practices, culture and protocol, and perceived acceptance and respect from First Nations communities, we may be considered outsiders. Again, this is understandable when taking into account the history surrounding the topic.

More research and understanding is needed in this area, especially as told from a First Nations perspective. For those counsellors and psychologists who are white that find themselves working with First Nations or Métis clients, it begins with awareness. As Louis explained, it really comes down to the client and what they are comfortable with, and what they want. Understanding not only proper protocol and cosmology of First Nations and Métis spirituality, but also insight into your own life and experiences, are important foundational factors in which to begin to create a solid, respectful, trustworthy and authentic therapeutic relationship.

Seven Dimensions of Religion

Overview

This chapter will use Smart's (1998) Seven Dimensions of Religion to ground the discussion for this study. It is important to point out that First Nations and Métis spirituality is not a religion, but a cultural way of life and is more aligned with spiritual beliefs than a religion. Keeping this in mind while moving forward, the term religion will be used to discuss this theory simply because it is the word used within the framework itself, not because it represents the beliefs of First Nations or Métis individuals. For the purpose of this study, Smart's Seven Dimensions of Religion are being considered through an alternative cultural lens, rather than the intended religious one. This framework was used to ground the chapter even though First Nations and Métis spirituality only parallels some of the dimensions found within this framework. In doing so, this approach could be viewed as an attempt to bridge a cultural divide by finding commonalities in ways of thinking or viewing spirituality rather than highlighting known differences.

Smart (1998) describes these Seven Dimensions, yet also discusses that not all religions or cultural practices will include all seven. Some may be so insignificant that they do not exist within the religion or culture. That being said, others may have a stronger significance within a culture or religion.

The Practical/Ritual Dimension

According to Smart (1998), every tradition has practices to which it adheres in terms of spiritual rituals or practices. Rituals often include external visual components, such as candles, temples, statues or icons (Smart, 1983). Some religious examples of this include yoga for the Buddhist and Hindu traditions, and the Liturgy within the Christian tradition (Smart, 1998).

Rituals exist within First Nations and Métis cultures. Steltenkamp (1982) speaks of the experience of being in a sweat lodge, and the rituals that are followed upon entering. He explains that a sprig of sage is placed behind the right ear, which identifies individuals to spirits, and they then enter the lodge in a clockwise direction. Steltenkamp (1982) also speaks about the use of the sacred pipe in a sweat lodge, and refers to it as a "recognized instrument of ritual overarching the North American continent" (Steltemkap, 1982, p. 25). He compares the use of the pipe in First Nations and Métis ceremonies to that of the Christian's breaking of the bread, and explains that it is a centuries old ritual.

Irwin (2000) discusses the Apsaalooke/Crow ritual of the Sun Dance, or Ashkisshe. He explains that this ritualistic dance is an important community event for the Apsaalooke. Irwin (2000) also touches on other Apsaalooke rituals such as the use of Tobacco, the sweat lodge and medicine bundles. He explains that the term ritual is used to describe these events not because they happen at a set time and in a set place, but rather because it follows a span of time and is specified by the sequence of events that occur (Irwin, 2000).

Brown and Cousins (2001) explain that rituals connect people to sacred places, but rituals also play a role in architectural constructions. The authors explain that the use of these rituals when constructing architectural objects, such as the Lakota sweat lodge, help place the inhabitants in relation to the center. When a tipi is first erected, an elder will often be asked to pray over the structure and to ask the Creator for blessings on the structure and all those that inhabit it. When the Lakota erect their sweat lodge, they will align the frame of the structure with the four directions, with the door facing to the east to allow the light of wisdom to permeate the structure. Within the structure, the Lakota will place a stick at the center of the lodge and draw a circle around it and then offer a prayer in order to create the central alter (Brown & Cousins, 2001).

These events are aligned with McCormick's (1997) 6th theme of establishing a spiritual connection and participation in ceremony. These ceremonies themselves are ritualistic, and the connection to them facilitate the healing found within. All of the participants in this study discussed their involvement in such ceremonies, and explained the importance of them to the overall sense of peace, calm and healing found from them. Rituals, in their many forms, are clearly a vital component to First Nations and Métis spirituality.

The Experiential/Emotional Dimension

This dimension refers to the emotional aspect of religious or cultural practices, and the experiences one feels as being involved in them. Traditions and practices are cold without the involvement of the individual's emotions regarding it. Smart (1998) discussed that sacred awe that one often feels when participating in religious or cultural activities, such as meditation, prayer or smudging. The calm peace, outpouring of love, sensations of hope and a sense of gratefulness for what is that accompanies the practices (Smart, 1998). Smart (1983) also discusses that not everyone has these major internal emotions when participating in religious or cultural practices, but the majority of people do experience emotions which reflect positivity.

These emotions (love, peace and gratefulness) are what could contribute to an individual's overall sense of spiritual, mental and emotional healing. Therefore, it could be argued, that by participating in healing rituals which produce emotions and experiences of peace and love, one finds healing.

The emotional aspect of being involved in cultural activities and ceremonies is what makes the experience human. McCabe (2008) explains that the sweat lodge ceremony assists in the individual's ability to become fully aware of their own "thoughts, feelings, behaviors and spirit by shutting out visual stimuli and placing an emphasis on letting go of the things that interfere with the flow of healing energy, such as negative thoughts and anxiety" (p. 148). By disconnecting from the outside world, a sweat lodge allows a person to explore their emotions and experiences at a deeper level, one which is not influenced by external visual stimuli. This is important especially since we live in a stimulated world with computers, cellphones, videogames and other external distractions that constantly bombard our senses. The participation in ritualized ceremonies allows an individual to disconnect and regain connection with their inner self and their deep emotions.

Lucy explained her physical and emotional reactions to participating in a sweat lodge, saying that she felt lighter coming out of a sweat lodge, as if she had shed 10 pounds. She explained the release of the burdens she had upon entering was therapeutic to her healing, and that the drumming found within the sweat lodge helps heal her soul and heart. She summed it up by saying if a person has an open heart, a person can heal. She also explained that by participating in a sweat lodge was the first time that she experienced forward movement in her life in a long time.

Lucy also discussed the emotions that she felt during another cultural activity, which she referred to as a modern day spirit quest. Her initial emotions were of anger and frustration, but as she settled in and quieted her mind, she found healing from the experience. She said she was able to let go of those negative emotions and to come to terms with being alone in that moment. She explained that it taught her to be okay on her own, and to learn to walk strong by herself. She explained that during that time, she had no choice but to stop blaming others, and to look within herself, and what she found was peace.

George shared a story about his friend, who found healing from a form of psycho-drama body work. The emotions of release, peace and acceptance happened when he was able to let go

of the negative emotions that he held within. He explained that it is also the spirit that has to heal, in conjunction with the mind and emotions.

Louis also spoke to the emotions involved in ceremonies. He explained that when one is involved in a sweat lodge, for example, it allows time for self-reflection. It allows the individual the time to sit with their problems and work through them, and essentially initiate healing.

The Emotional Dimension is the aspect of Smart's framework that captures the human experience at its core. Finding balance among the four dimensions of self is important to First Nations and Métis cultures, and this includes dealing with emotions, both negative and positive. All three of the participants spoke to emotional experiences during ceremonies, which solidifies the importance of this specific Dimension to understanding First Nations and Métis spirituality more in depth.

The Narrative/Mythic Dimension

"Often experience is channeled and expressed not only by ritual but also by sacred narrative or myth" (Smart, 1998, pg. 15). This third dimension reflects the story of one's religion or cultural practices/beliefs. Smart (1998) discusses that it is common for cultures and religions to hand down traditions of beliefs through story, or narrative. These include stories of creation, how suffering came to be, and other religious stories, including historical events, specific to that culture or religion.

For First Nations and Métis cultures, oral tradition is paramount to the foundation of their spiritual beliefs. From sharing creation stories to passing on medicinal cures, the narrative aspect is how teachings are passed along. It is through the use of storytelling that First Nations and Métis cultures are able to preserve the important teachings of their culture, including language, traditions and identity (McKeough, Bird, Tourigny, Romaine, Graham, Ottmann & Jeary, 2008). The idea of storytelling was also touched on in chapter 2, and outlines the importance of this dimension to First Nations and Métis cultures.

Brown and Cousins (2001) explain that the use of storytelling and the oral transmission of traditional stories, myths and laws are still a reality today. The use of storytelling offers a humanistic and authentic alternative to today's dehumanizing modes of communication such as computers, texting and emails (Brown & Cousins, 2001). These authors discuss that by participating in storytelling, the process involves "personal, interactive dimensions of communication that reach beyond the spoken word and certainly beyond the written word"

(Brown & Cousin, 2001, p. 49). They go on to explain that these oral stories are “carried by the breath, or for the trees and grass by the breath of the wind, and this breath proceeds from the inner area of the heart” (p. 49). Once it leaves the mouth, it is shared with everything in which it touches, from animals to mountains to rocks and rivers (Brown & Cousins, 2001). It is in this way, that the power of story and oral traditions is sacred to First Nations and Métis peoples.

In his interview for this study, George often referred to the use of storytelling. He relayed many stories in his interview himself, showing the power that they hold. He also discussed the importance of oral tradition when he talked about his grandmother’s healing power and all that she knew, which had been handed down to her through oral tradition. He also discussed the teachings his grandfather had given him, those of respect and forgiveness.

This dimension is also vital to First Nations and Métis spirituality and culture. The power of story is paramount as evidenced in ethical teachings, creation stories, myths, healing traditions and cultural practices.

The Doctrinal/Philosophical Dimension

This dimension deals with the doctrines that are associated with a ritual. It looks at the underlying philosophy of why a ritual is done. In other words, the meaning behind a specific ritual (Smart, 1998). For example, Buddhism is summed up by three doctrines: everything is impermanent, everything is without self, and everything is full of suffering (Smart, 1983). Doctrines have different functions within religion, including the role of bringing order into what is given by revelation and story form. It also safeguards reference myths within a religion to what lies beyond the cosmos. Finally, doctrines allow a religion or practice to relate their teachings and claims to the current knowledge of the era in which it exists (Smart, 1983).

In an article by Castellano (2004), the author uses the symbol of a tree to represent the interconnectedness of First Nations customs, protocol, ethics, values, behavior and world view. Below the surface of the earth is found two components: at the deepest portion of the tree’s roots is The Earth that Supports Us (the unseen world of spirit); In the shallower roots is found the World View (conception of reality). These two deeply rooted components can be interpreted as the underlying meaning behind and beneath the other components of the tree (above the surface) which include: Values, Deeply Held Beliefs (about good and evil, found in the trunk of the tree); Ethics and Rules (governing relationships, represented by the large branches of the tree);

Protocols and Customs (represented by small branches); and Individual Behaviors (represented by the leaves of the tree) (Castellano, 2004).

First Nations cosmology, which was discussed in chapter 2, can also be included as an underlying philosophy of why certain traditions or rituals are done, or the meaning behind them. Additionally, the philosophical or doctrinal pillars of First Nations and Métis culture and spirituality seem to be respect, interconnectedness, thankfulness and love (McCabe, 2008; Brown & Cousins, 2001; McCormick, 1996). Although these represent the values of the culture, they also represent the philosophical pillars. All that is done, in terms of ceremony, healing, prayer and worship is done to honor these values; it is because of this that First Nations and Métis spirituality is just that, spirituality, as opposed to a religion.

The Ethical/Legal Dimension

You follow protocol, and you're to live a long life. You're going to live a long life.
-George

This dimension deals with the law which a religion or cultural practices brings into its belief system. For example, within Buddhism exists 5 universally binding regulations, which controls the lives of monks and other religious peoples (Smart, 1998). Other examples include the 10 Commandments in which Christians live by. There are some religions or traditions that are not bound by these legal ties, but still portray an ethical component. An example that Smart (1998) gives is the idea of love within the Christian faith, which is tied to many of the Christian teachings – God's love for all, love within the holy trinity, etc.

First Nations and Métis cultures place the emphasis in the Dimension on Ethical responsibilities rather than law. As a holistic spiritual framework, it makes more sense for this to be the case. The ethics are interwoven into different aspects, including proper protocol when working with an elder, offering tobacco or something else (as George indicates in his interview, this could be gifts of blankets) as reciprocity, and proper protocol during ceremonies. According to Brown and Cousins (2001), First Nations elders represent models of ethical behavior in First Nations and Métis cultures. Their wisdom and breadth of knowledge combined with their age and experience are respected, unlike the Western view of the elderly, which often places them on the fringe of society. The way Brown and Cousins discuss elders and the roles they play within

the community, is comparable to them acting as the heartbeat of the community. They have roles which include passing on knowledge and facilitating ceremonies and healing among the community members.

The ethics surrounding gifting is discussed by Irwin (2000), in which it is said that gifting bonds the receiver and the giver. An example is the offering of Tobacco when asking someone for their knowledge on a topic. George also discussed this topic of gifting in his interview, on numerous occasions.

[...] people come from, I think it was down South, they had this horse and wagon, travelled 3 or 4 days, and they came to see my grandmother and gave her a bunch of tobacco, gifts, blankets, you name it, food, piled wagon high gifts. They are giving thanks.

This story that George shared was in relation to his grandmother, who was a healer and medicine woman. Those that were coming to see her for healing purposes had an ethical responsibility of endowing her with gifts, as thanks for her helping them to heal. George also shared:

When we go hunting, you have to place tobacco. We ask for your life to feed our family; we need the trees and when you chop down trees, put down tobacco. Plants and medicines. We have to go there and pick all these medicines, so we have to respect that, we can't just go ahead and start doing stuff. We have to respect each other, and you respect us too.

George discusses that the ethical aspect of gifting goes beyond human gifting; the placing of tobacco when taking a life of an animal for food or picking plants for medicine represent thanks.

Owen (2008) discusses protocol, or ethics, as being integral to First Nations ceremonies, as it relates to both action and intent. It is said to govern all aspects of ceremony, and refers to more than just proper etiquette. Owen discusses that those that fail to follow proper protocol or ethics are warned that harm or misfortune could befall them. By following proper protocol or ethics is a sign of respect. George said in his interview that following protocols in the key to maintaining balance in life.

The ethics followed by First Nations and Métis cultures is not done because it is the law, or because it is what must be done. It is done because it is morally driven, and the belief that

there are repercussions if not done is important. George explained to me, after our interview, that gifting is a way to say thank you, but it is also about karma. When someone or something is giving you something that does not belong to you, you need to be thankful for that, otherwise there could be negative consequences. The process of gifting, and other ethical procedures followed, are essentially done out of respect and thankfulness.

The Social/Institutional Dimension

*When "I" is replaced with "we" even illness becomes wellness
- Malcom X*

The next two dimensions, according to Smart (1998), are seen as the incarnation of religion. Where the prior dimensions are more abstract in terms of not being portrayed through an external form, the Social and Material dimensions are external. Smart states that every religious movement is grounded within an organized social construct, such as a Church. This dimension looks at the social aspect of a religion or cultural practice and how one is integrated into the community. This dimension may also begin to answer research question 2 of this study, and the applicability of healing methods into other social or institutional groups, such as counselling.

Community is an imperative Dimension to First Nations and Métis cultures. All three participants in this study discussed the importance of community to them and the role the community plays in healing. Irwin (2000) traces the connection to community to the resilience of First Nations and Métis individuals as a result of the genocidal assault that they endured, and continue to endure. The interconnectedness found among First Nations and Métis cultures is considered to be integral to the healing process of both individuals and the community as a whole (Duran, 2006; McCabe, 2008). In order to heal an individual, the community must endure healing as well (Duran, 2006). Healing comes from the ability to heal the individual, the family and the community (Morgan & Freeman, 2009).

The idea of community relates back the idea of interconnectedness, or the medicine wheel – everything is connected and works together to find and maintain balance. When looking at the idea of healing, community is integrated into that process and the focus is on the community healing as a whole rather than the individual (Duran, 2006; Garrett & Garrett, 1994). Garrett and Garrett (1994) explain that the survival and wellbeing of the individual is synonymous with the survival and wellbeing of the family and community. This relationship

with the community support the world view that emphasizes the collective (the individual, community, plants, animals, the cosmos) rather than the individualistic view.

A generous portion of Lucy's interview surrounded her involvement with her Northern family, and the connection she felt to them. She found healing by spending time there, and helping the other community members, such as the children she spent time with fishing or talking with. George began his interview, before any questions were even asked, about the importance of community, and the interconnectedness of everything. He discussed that community extends beyond family and includes everything from plants to rocks as well. Louis explained how his involvement in ceremonies is generally done so for the comradery, or the connection to his cousins (community) that he gets to experience when participating.

This Dimension is vital to understand First Nation and Métis cultures. To not be able to understand and accept the important of community, one cannot truly understand the culture. This Dimension also ties into research question 2 of this study, and whether or not traditional healing methods could be incorporated into counselling. If it were to be done, the inclusion of community would be paramount, whether that was to include one individual or many in the process.

The Material Dimension

According to Smart (1998), the Social/Institutional Dimension is almost always incarnate into material form, such as art or buildings. Beyond physical features, this dimension can include natural earthly features that hold special sacred meaning, such as the river Ganges or sacred mountains in China. Although not mentioned in Smart's book, the argument can be made that this dimension could include other materialistic objects, such as the sacred pipe, tipi's or drum within the First Nations and Métis cultures.

Tobacco has a deep meaning within First Nations communities, and is used as an agreement between a giver and receiver when sharing teachings (McCabe, 2008). The use of tobacco also coincides with the use of the sacred pipe. With Plains Indian sacred rites, the pipe is identified with the human body; the bowl of the pipe acts as the heart, for example (Brown & Cousins, 2001). Brown & Cousins discuss that the pipe is purified by sage or sweet grass before being used in a ceremony, and that this is metaphoric to the cleansing of the human body. The straight stem of the pipe is meant to represent the fact that the human mind should be straight and pure. The leader of the ceremony will fill the pipe with tobacco, and then points it in the six

directions of space, and says a prayer: “This is for all the wings of the air, this is for all the four-legged peoples of this earth, this is for all the growing peoples of this earth” (Brown & Cousins, 2001, p. 112). This may be repeated a few more times, with extra pinches of Tobacco being added to the pipe followed by accompanying prayers. When the pipe is filled and the prayers have been said, the entire universe is said to exist in the bowl of the pipe. Tobacco is seen as a key symbol to personal integrity, respect for all that exists and all of creation, and is important to the healing of individuals (McCabe, 2008). This represents one perspective on the meaning of the sacred pipes; this may change among cultures.

The Medicine Wheel is another symbol that is important to many First Nations and Métis cultures. Its four quadrants represent many things: the four aspects of the human self: physical, mental, spiritual and emotional and the four directions: North, East, South and West (McCabe, 2008). This visual symbol and its importance to healing is important in the counselling world, as it offers a foundational base on which to work from when working with clients. Lucy discussed her views on balance, and how it was related to a circle. That balance existed when all aspects of that circle were within balance.

Throughout the interviews, the participants brought up different materials that are used in ceremonies or cultural practices. George discussed many of them, including the sacred pipe, tobacco and herbal medicines. He briefly spoke about the pipes, but did not elaborate in his interview what the pipes were used for, however. He discussed tobacco at different times throughout his interview. He discussed tobacco as a gifting, as mentioned in the Ethical Dimension, and placing it as a thank you when picking medicines or taking an animal’s life for food. Finally, he discussed herbs and medicine, and how he witnessed the powerful benefits of them. He talked about how his grandmother used her knowledge of medicine to help cure people. George also said that he used sweet grass when he would pray to the Creator at home, asking for blessings on his family and friends, and everyone he knew.

Lucy also spoke about the use of sweet grass, an herb that is considered symbolic to First Nations and Métis communities. She explained that she would smudge with sweet grass at home when she needed to, but discussed that it didn’t feel the same as when she was up North with her family.

Different material objects and symbols are important to First Nations and Métis cultural and spiritual beliefs. They represent varying values including respect, thankfulness, and

interconnectedness. They act as sacred objects that are used in ceremony, daily practice, gifting, as well as objects that are used as frameworks and foundations to a belief system is greatly anchored in respect and interconnectedness.

Summary

Ninian Smart's (1998) Seven Dimensions of Religion were chosen to ground the findings of this study in. This was done in order to understand the underlying factors of what makes certain aspects important to First Nations and Métis culture and spirituality. As noted in the introduction to this section, First Nations and Métis spirituality is not being viewed through a religious lens in this study. It does however, include many similarities to how Smart explains religions and their values and beliefs.

This study, coupled with existing literature, found that the majority of the Dimensions are important to First Nations and Métis spirituality. The Ritual Dimension is important to how certain sacred constructions are erected, such as the sweat lodge and to how ceremonies are carried out, including the length of time and order of events. The Emotional Dimension is important in terms of the emotional and physical sensations one experiences, and how that connects the individual to the culture, the community, the ceremony and their self. The Narrative Dimension is important as it allows for the transfer of cultural knowledge, teachings, myths and medicinal teachings. It also connects community through the power of word. The Ethical Dimension is important as it emphasizes the protocol that is followed not only during ceremonies, but also life, as George explained in his interview. The Social Dimension is important as it encompasses the ideas of community and interconnectedness, which are all of high importance to First Nations and Métis cultures. The Material Dimension is important as it includes symbolic objects for First Nations and Métis individuals, such as the pipe and tobacco. All of these Dimensions seem to hold equal significance when considering First Nations and Métis spirituality. The only Dimension in Smart's framework that does not seem to hold as high of an importance is the Doctrinal Dimension, as First Nations and Métis spirituality is more based on ethical values and a holistic approach.

All of these Dimensions can be said to contribute to healing amongst First Nations and Métis individuals. There are certain objects, emotions, experiences, protocols and connections that all work together to begin the process of healing. By understanding the importance of these different Dimensions are the roles they play in First Nations and Métis spirituality and views on

healing and balance, we can then begin to understand how better to incorporate them into counselling, or order to help facilitate that healing in a culturally respective manner.

Strengths of the Current Study

The main strength of this study is that it connected two pieces found in the literature – the effects that traditional healing methods have on healing, as well as how and if those healing methods could be incorporated into counselling. Previous research has discussed the importance of traditional healing methods (McCormick, 1996; McCormick 1997) and counselling with First Nations individuals (Duran, 2006; Heilbron & Guttman, 2000). However, there seemed to be an uncertainty between knowing if integrating these healing methods into formal counselling sessions was appropriate, as well as how and when. This study aimed at investigating both aspects, and marrying the two.

In addition, my personal experience and background with traditional healing methods and First Nations and Métis spirituality allowed me to establish a safe and respectful environment with the participants. I believe that this allowed them to feel comfortable sharing personal stories and intimate details of their experiences and stories.

Limitations of the Current Study

There are several limitations to this study. First, all of the participants were educated individuals from a midwestern university. Although their backgrounds and experiences differed, they were all at a similar educational place in life being enrolled in their post-secondary programs of study. By widening the participant pool to include other individuals with a range of educational experiences, individuals living in the city or on reserves, elders and younger individuals, the results could have offered different or broader information.

Another limitation was the number of participants. Additional participants would have been preferred; however extensive recruitment processes had only limited success. Although interest was shown, only three participants were recruited for the study. Interviewing more participants may have offered other experiences, more in depth stories and a deeper look into how traditional healing methods affect spiritual, emotional and mental growth and healing.

Finally, this study only involved participants who identified as Métis or Cree. It did not hear experiences and feedback from individuals from other First Nations communities. There may be differences in ceremonies, protocols, experiences and values. This specific study

included two Métis individuals and one Cree individual. In order for the information to be more broad and applicable to a wider population, more data from other Indigenous communities would be important.

Implications for Future Research

This study was unique in the fact that it looked at both how traditional healing methods affect healing as well as how some of these methods could be incorporated into counselling. It attempted to fill a gap in the literature and to offer a comprehensive look at a topic that is not overly researched. More research is needed in this area to continue to decolonize the counselling approach.

Since this study had a small sample of participants, a study with a larger sample which included individuals from different backgrounds would be beneficial. It is difficult to make the assumption that all, or even the majority, of First Nations and Métis individuals are affected in the same way by traditional healing methods, and that the opinion is the same in terms of applying them to counselling. A wider population would offer a more comprehensive view on what is beneficial and how the traditional healing methods aid in healing.

Implications for Counsellors and Psychologists

To assume that a First Nations or Métis client that enters your office wants an inclusion of traditional healing methods in the process, or is even deeply rooted in cultural and spiritual beliefs, is a form of colonialism. As Louis said in his interview, it comes down to who the client is, and what they want. With that in mind, communication, honesty and respect are key factors. Speak with the individual client, learn about who they are as a person, what is important to them, their beliefs, culture and values in life. Then make the effort to include whatever it is they find beneficial to healing into their process of counselling.

Based on the interviews from this study, traditional healing methods do in fact foster healing in all quadrants of the person's being. They are a cultural and spiritual approach to finding and maintaining balance, in comparison to the Westernized approach of scientifically based therapy. Also based on the interviews, the participants believe there is a place for the integration of traditional healing methods into counselling sessions. However, this must be done with care and respect, and a knowledge of First Nations and Métis cultural and spiritual beliefs. This extends beyond simply understanding why an individual finds healing in smudging. It includes proper protocol, respectful approach to working with the individual, an awareness that

written records may not be appropriate, and why sage or sweet grass is important. Again, the importance of communication, honesty and a solid foundation in a relationship is important. Ask the client what they need in order to heal and be prepared to exit your comfort zone. Be prepared to invite community members, elders, family and friends into the process. Be prepared to release what you think you may know is best for a client, and accept that the individual most likely knows what is best for their own personal healing. Be the guide we are trained to be: ethical, respectful and believing in the innate good of all people.

Researcher Self-Reflection

Spirituality

This study became important to me before I even began the process of writing. Although I am an individual who does not identify as First Nations or Métis, my views on spirituality and nature align with many First Nations and Métis views. My connection to the Earth and Mother Nature, as well as my deep love of drumming and smudging, became my heartbeat throughout this process. As a spiritual individual entering a primarily scientifically minded field, I wanted to explore more in depth how spirituality plays a role in healing, but more specifically, how First Nations and Métis spirituality can play this role.

Traditional Healing Methods

Although my exposure to traditional healing methods is quite limited, and my knowledge and understanding fairly basic, I believe there to be healing present in them. From my personal experiences and stories shared by individuals in my personal life, I wanted to hear more stories from individuals, and begin to paint a picture of what healing looks like, feels like, and how one experiences it. Not only healing, but holistic healing, that includes mental, spiritual, physical and emotional aspects of an individual's existence. As a future psychologist, I also wanted to understand if and how these traditional healing methods could be incorporated in the counselling relationship with clients.

Assumptions

Before beginning this study, I received copious amounts of support, education and acceptance from Tribal Chiefs to educators to friends and peers. I felt I was on a path that could lead myself, and potentially other psychologists, counsellors and mental health professionals, to understand healing and the therapeutic relationship in another way. My personal views on counselling is that the therapist is not the expert. Each individual is the expert on their own

personal self and lives, and a therapist's job is merely to help facilitate this healing process; to help awaken something within the individual that already exists. My assumptions going into this study were that yes, traditional First Nations and Métis healing did foster emotional, spiritual and mental growth. I also believed that yes, individuals would want these healing methods incorporated into counselling. I believed that by incorporating these healing methods into the therapeutic approach, it would be a way of breaking through the scientific, Westernized way of approaching counselling, and incorporating cultural and personal beliefs into the process.

Experience

To be transparent and truthful, the process of writing this Master's thesis reminded me of a roller coaster. The 2 years that it took for this to come to its culmination included numerous ups, downs and even some upside down moments, where you wonder for a split second if the bar holding you in is going to give out and let you come crashing down. I began the process wide eyed and excited at the possibilities before me. I was quick to hit the ground running with the process, and was completely dedicated to it. Once my defense was accepted and my ethics was approved, I felt the energy surrounding it shift. The lack of response to participant recruitment was off-putting. With a few scattered emails, some confirmed, and all but one a no-show to scheduled interviews, it took 4 months before opening up the participant pool. I felt my excitement return; however, that didn't last long. Once I opened up the participant pool, I received numerous emails telling me that I was going about it wrong and warning me that I was being disrespectful. At this point, my energy felt drained and my excitement all but disappeared. These emails caused some anxiety and stress, however I wanted to ensure those who were wary of my background and intentions. I replied with this information, and explained who I was and why this research was important to me. One of the individuals who initially sent an email stating that a gift card was not enough, and that proper protocol and respect was especially important, turned out to be an influential participant in this study who offered valuable protocol information but also contributed immensely to my growth during this process. The participant, "George", graciously shared his stories and experiences, but also kindly guided me through protocol that I had misunderstood. His offer at the end to take me on a healing journey to an Elder and medicine man that he knew was the moment that re-ignited my drive, and reminded me why I started this journey. I was grateful that George took the time to guide me and trust me enough to share so much of his wisdom. His interview was an emotional experience for me, and brought me to tears

a few times; not only due to the sensitive information he shared, but also for the authenticity I felt from him. After that point, everything seemed to come together. All of the interviews wrapped up, the transcription process seemed to fly-by, my follow up meetings with the participants were emotional and humbling, and each one felt as though I was sitting with a friend, rather than someone who had graciously volunteered their time. This thesis process ended up being somewhat of a healing journey for myself. It made me realize that although it is me writing this thesis, it is not about me, it is not for me, and it is not my experiences. It is about the individuals who shared their stories, those that did not, and those that maybe could not. It reminded me why I started this journey in the first place. And it had nothing to do with me, after all.

Conclusion

The two research questions in this study looked at how traditional First Nations and Métis healing methods affect emotional, spiritual and mental growth, as well as whether or not inclusion of these traditional healing methods into counselling was appropriate. The stories shared by the participants were classified into pre-existing themes (McCormick, 1997). The participants all supported the fact that traditional healing methods do facilitate healing, as well as the fact that they could be included into counselling, given the appropriate counsellor and circumstances. Further, these stories and themes were grounded in Smart's (1998) religious framework, to better understand First Nations and Métis spirituality. The participant's stories encourage a pathway to understanding how to decolonize the counselling practice when working with First Nations and Métis individuals.

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Appendix A: Definition of Terms

The following definitions are from the National Aboriginal Health Organization (NAHO; 2014), with exception to the term Métis, which is provided from the Manitoba Métis Federation (Manitoba Métis Federation Inc., 2016), multicultural and cross-cultural counselling, and traditional healing methods.

Aboriginal Peoples

“Aboriginal Peoples” refers to all of the original peoples of Canada and their descendants. This term umbrellas three groups: First Nation, Inuit and Métis.

Non-Aboriginal people

This term refers to anyone that is not of Aboriginal descent.

First Nations

The term First Nation became a common replacement for band or Indian in the early 1980’s, as the latter terms were offensive to some people. First Nations people should not be used as a synonym with Aboriginal, as it does not include Métis or Inuit. This term applies to both Status and Non-Status Indians.

Indian

The term Indian describes all of the Indigenous People in Canada who are not Inuit or Métis. Indian Peoples are recognized as Aboriginal in the Constitution Act of 1982, and includes three groups: Status Indians, Non-Status Indians and Treaty Indians.

Status Indians. This term refers to people who are entitled to having their name on the Indian Register, which is an official list that is maintained by the federal government. Only Status Indians are recognized as Indians under the *Indian Act*. Being recognized under this Act gives them certain rights and benefits.

Non-Status Indians. This term refers to people who consider themselves Indians but the Government of Canada does not recognize them as Indians under the *Indian Act*. This may be due to being unable to prove their Indian status or they have lost their status rights for varying reasons. Non-Status Indians do not have the same rights and benefits that are available to Status Indians.

Indigenous

The term Indigenous refers to people who are native to a specific area. It is a term that refers to Aboriginal people internationally.

Métis

Métis means a personal who self-identifies as Métis, is of historic Métis Nation Ancestry (refers to Aboriginal people who resided in the Historic Métis Nation Homeland and refers to the area of land in west central North America which was used and occupied as the traditional territory of Métis), is distinct from other Aboriginal groups or peoples, and is accepted by the Métis Nation.

Inuit

Inuit is a term that refers to a circumpolar people who inhabit regions in Canada, Alaska, Russia and Greenland and who share a common culture and language. The Indian Act does not recognize Inuit.

Native

The term Native is similar in meaning to the term Aboriginal; the term describes descendants of the original peoples of North America. The term is generally not perceived as accurate as Indigenous or Aboriginal.

Multicultural/Cross-Cultural Counselling

This is an important term in Canada, specifically in terms of counselling. We live in a country considered to be a cultural mosaic, meaning our country is made up of numerous ethnicities and cultures in addition to Indigenous peoples. To assume that a Westernized approach towards counselling would work with all cultures in our country is not appropriate. Pedersen and Ivey (as cited in Arthur & Stewart, 2001) have suggested that counsellors adopt a “culture-centered” perspective, which means that they have an awareness of the broad spectrum of similarities and differences in society’s norms and how these differences might affect individuals’ interpersonal behaviors and in turn, contribute to a client’s worldviews. Being competent in multicultural counselling simply means that a counsellor should be able to effectively provide services to individuals with a different culture than their own. According to Collins & Arthur (2010), a competency in multicultural counselling is reliant on three elements: cultural awareness of self, or being aware of one’s own values and biases; cultural awareness of others, or understanding the worldview of the client; and a culturally sensitive working alliance.

Traditional Healing Methods

Wyrostok & Paulson (2000) define traditional healing methods as “...activities and ceremonies performed with the help of an elder or recognized healer for the purpose of helping people to feel better mentally, emotionally, physically and spiritually” (p. 16). Some examples of this might include sweat lodges, prayer ceremonies, pipe ceremonies and herbal cures, such as sage and sweet grass (Wyrostok & Paulson, 2000).

**Department of School and Counselling Psychology
University of Saskatchewan**



**PARTICIPANTS NEEDED FOR
RESEARCH IN TRADITIONAL FIRST NATIONS AND
MÉTIS HEALING METHODS**

We are looking for volunteers to take part in a study of identifying traditional First Nations and Métis healing methods that could be incorporated in counselling.

As a participant in this study, you would be asked to participate in an interview which includes questions on your experience with traditional healing methods

Your participation would involve 1-2 sessions, each of which is approximately 60 minutes.

Participants must currently be enrolled in one of the following education programs at the U of S: NORTEP, SUNTEP or ITEP

For more information about this study, or to volunteer for this study, please contact:

Sarah Binsfeld
School and Counselling Psychology
at
Email: slb432@mail.usask.ca

This study has been reviewed by, and received approval through, the Research Ethics Office, University of Saskatchewan.

**Department of School and Counselling Psychology
University of Saskatchewan**



**ARE YOU FAMILIAR WITH TRADITIONAL FIRST
NATIONS AND MÉTIS HEALING METHODS?**

We are looking for volunteers to take part in a study of identifying traditional First Nations and Métis healing methods that have fostered your personal growth.

As a participant in this study, you would be asked to participate in an interview which includes questions on your experience with traditional healing methods

Your participation would involve 1-2 sessions, each of which is approximately 60 minutes.

Participants must self-identify as First Nations or Métis.

This study is open to all First Nations and Métis students, staff and faculty at the University of Saskatchewan.

As a thank you for your participation, you will receive a \$10 gift card.

For more information about this study, or to volunteer for this study, please contact:

Sarah Binsfeld
School and Counselling Psychology
at
Email: slb432@mail.usask.ca

This study has been reviewed by, and received approval through, the Research Ethics Office, University of Saskatchewan.

Appendix D: Consent Form

Participant Consent Form

Project Title: Traditional First Nations and Metis Healing Methods: Do They Support Emotional, Mental and Spiritual Healing?

Researcher: Sarah Binsfeld, Graduate Student School and Counselling Psychology, University of Saskatchewan, slb432@mail.usask.ca

Supervisor: Dr. Tim Claypool, Counselling Psychology, (306) 966-6931, tim.claypool@usask.ca

Purpose(s) and Objective(s) of the Research:

- The main objective is to identify whether traditional First Nations and Métis healing methods help foster emotional, mental and spiritual health.
- The secondary objective is to determine how these healing methods could be incorporated into counselling practices in the province of Saskatchewan.

Procedures:

- During a one hour interview, you will be asked a series of questions regarding your views, experiences and opinions on traditional healing methods.
- You will be recorded through use of an audio recording device. You may ask that the recording device be turned off at any point during your interview.
- The interview will take place at the University of Saskatchewan in the College of Education.
- Approximately one hour of your time will be necessary for this interview.
- There is a possibility of a follow up interview at a later date to review the transcribed interview before it is submitted as data in the study (this is not mandatory).
- Please feel free to ask any questions regarding the procedures and goals of the study or your role.

Potential Risks:

- There are no known or anticipated risks to you by participating in this research

Potential Benefits:

- The knowledge you share during this interview could help counsellors and psychologists understand not only the importance of culture and traditional healing methods, but also help them understand how to incorporate culture and traditional healing methods into future counselling sessions

Confidentiality:

- Your answers will remain confidential. Your name or any other identifying information will not be published or shared with a third party
- Any direct quotes will be assigned a pseudonym
- All audio files and transcripts will be kept securely and privately on cabinet on PAWS

Right to Withdraw:

- Your participation is voluntary and you can answer only those questions that you are comfortable with. You may withdraw from the research project for any reason, at any time without explanation or penalty of any sort.
- Should you wish to withdraw, your data from the interview will not be used
- Your right to withdraw data from the study will apply until you have had the opportunity to review and approve your transcript.

Follow up:

- To review your transcript, please attend a follow up meeting at a mutually available time. We will set up a meeting time at a later date, once transcribing of all interviews is complete. I will contact you through the email you have provided.

Questions or Concerns:

- Contact the researcher(s) using the information at the top of page 1
- This research project has been approved on ethical grounds by the University of Saskatchewan Research Ethics Board. Any questions regarding your rights as a participant may be addressed to that committee through the Research Ethics Office ethics.office@usask.ca (306) 966-2975. Out of town participants may call toll free (888) 966-2975.

SIGNED CONSENT

Your signature below indicates that you have read and understand the description provided; I have had an opportunity to ask questions and my/our questions have been answered. I consent to participate in the research project. A copy of this Consent Form has been given to me for my records.

_____ *Name of Participant* _____ *Signature* _____ *Date*

_____ *Researcher's Signature* _____ *Date*

A copy of this consent will be left with you, and a copy will be taken by the researcher.

Audio Recorded Data: Participant to provide initials:

- Audio of my interview may be taken of me for the purpose of this study and future data of this study.

_____ *Name of Participant* _____ *Signature* _____ *Date*

_____ *Researcher's Signature* _____ *Date*

Appendix E: Transcript Release Form



**Research Ethics Boards (Behavioural and Biomedical)
TRANSCRIPT RELEASE FORM**

Title: Traditional First Nations and Metis Healing Methods: Do They Foster Emotional, Mental and Spiritual Healing?

I, _____, have reviewed the complete transcript of my personal interview in this study, and have been provided with the opportunity to add, alter, and delete information from the transcript as appropriate. I acknowledge that the transcript accurately reflects what I said in my personal interview with Sarah Binsfeld. I hereby authorize the release of this transcript to Sarah Binsfeld to be used in the manner described in the Consent Form. I have received a copy of this Data/Transcript Release Form for my own records.

Name of Participant

Date

Signature of Participant

Signature of Researcher

Appendix F: Interview Questions

Background questions

- What First Nations or Métis group do you identify with?
- Do you have any prior knowledge and/or experience with traditional healing methods (for example: smudging, drumming, sweat lodge)?
- Do you currently partake in any traditional healing methods?
- Do you currently partake in any other forms of healing that are not traditionally First Nations and/or Métis?
- How would you describe feeling healthy in all aspects – mentally, spiritually, emotionally and physically? What would that look like to *you*?

Key Question(s)

- What (if any) traditional First Nations and/or Métis healing methods have you found to be beneficial to your emotional, spiritual or mental growth and healing?
- Can you give a specific example on how one or more of these traditional healing methods affected your life?
- Are there any other life practices you have found useful and/or helpful in your emotional, mental and spiritual growth?
- If you were to see a counsellor, would you want there to be an inclusion of traditional healing methods in the process? What would that look like counselling sessions?
- If you were to see a counsellor, what would be useful or helpful in counselling for your personal emotional, spiritual and mental growth?

