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Addiction and Recovery in Native America: Lost History, Enduring Lessons

By Don Coyhis and William White

The persistence and revival of indigenous Amerindian healing is due, not to a lack of modern treatment services, but to a need for culture-congenial and holistic therapeutic approaches.... -- Dr. W. Jilek

Hear me, not for myself, but for my people....Hear me that they may once more go back into the sacred hoop and find the good red road, the shielding tree! --Black Elk

The dawn of the twenty-first century marks a time of great cultural renewal and individual and collective healing among the Native peoples of North America. The growing sobriety movement in Indian Country represents just one dimension of this larger process of personal and tribal revitalization.

The authors have collaborated for some time on researching the history of addiction and recovery among the indigenous peoples of North America. This history is being assembled from archival records and from the oral testimony of tribal elders. In our first report of this research, we: 1) explored the historical roots of Native alcohol problems, 2) challenged the “firewater myths” that have long permeated conceptions of the etiology of Native alcohol problems, 3) detailed the role Native leaders played in organizing America’s first sobriety-based, mutual aid societies, and 4) described the recent “Indianization” of Alcoholics Anonymous, the revival of Native cultural revitalization and therapeutic movements, and the development of culturally meaningful alcoholism treatment philosophies and techniques (Coyhis and White, In Press).

In this article, we will identify the movements that, for more than 250 years, have provided frameworks of alcoholism recovery for Native peoples, and explore what can be learned from these historical movements to enhance the quality of contemporary addiction counseling.

Five Movements

Five overlapping movements have provided a framework for alcoholism recovery within and across Native American tribal cultures. The first to emerge were the eighteenth and nineteenth century recovery “circles” and abstinence-based cultural revitalization movements of the Delaware Prophets (Papounhan, Wangomend, Neolin, Scattameck), the Shawnee Prophet (Tenskwatawa) and the Kickapoo Prophet (Kennekuk). These prophetic leaders used their own recoveries from alcoholism to launch abstinence-based, pan-Indian movements that called for the rejection of alcohol and a return to ancestral traditions. Native preachers like Samson Occom, William Apess, and George Copway used their own lives as living proof of the power of Christian conversion and worship to cure alcoholism. The development of new abstinence-based Native religions continued in the nineteenth century, including the Longhouse Religion (Code of Handsome Lake), the Indian Shaker Church and the Native American Church (White, 2000, 2001). These Native religions constitute the most historically enduring frameworks for alcoholism recovery within Native communities. The fourth movement, the “Indianization of Alcoholics Anonymous” (A.A.) (Womak, 1996), began in the 1960s, and represents the growing adaptation of A.A. steps (Coyhis, 1990) and meeting rituals (Jilek-Aall, 1981) to enhance A.A. effectiveness within Native communities. The threads of these earlier movements are being woven into the contemporary Wellbriety movement (Coyhis, 2000). White Bison, Inc., an American Indian nonprofit organization and one of the leaders of this new movement, is working to expand recovery support structures within Native communities across North America. This goal is being achieved through recovery education (*Well Nations Magazine*), national recovery awareness walks (“Hoop Journeys”), training indigenous leaders to organize recovery circles (“Firestarters”), hosting recovery celebration events in local Native communities, and advocating for culturally-informed social policies and treatment approaches. One of White Bison’s most recent projects is publication of *The Red Road To Wellbriety*, a Native adaptation of the basic text of Alcoholics Anonymous (see www.whitebison.org).

These five movements share many characteristics. They were created by Native men and women who entered recovery after each had been wounded by alcoholism. The religious and revitalization movements they created provided an opportunity, in healing themselves, to heal their families and communities as well. The tradition of “wounded healers” in the arena of alcoholism recovery begins in eighteenth century Native America (White, 2000). This practice drew deeply from the belief in many Native cultures that a dramatic recovery from an illness was a

potential sign of one's calling as a healer. The Native leaders of America's first mutual aid societies assumed this role more through ecstatic (experiential) initiation than didactic (formal education) initiation (Jilek 1971; Jilek 1978)—a practice that was later emulated in the rise of alcoholism counseling.

Native American recovery movements rose from the prophetic visions of their leaders. These visions portrayed alcohol as a weapon of cultural conquest and sobriety as a strategy of cultural resistance. The movements identified above were multidimensional movements containing a unique combination of spiritual/religious rebirth, cultural revitalization, personal healing, and, in some cases, political advocacy. All provided a pathway and framework for recovery from alcoholism that inextricably linked the sobriety and health of the individual to the survival and health of the tribe.

Therapeutic Functions

Viewed as a whole, these indigenous movements provide a striking list of therapeutic benefits. In fact, one might assess current treatment designs by their ability to achieve these very utilities. Here's some of what they provided:

- **Commitment:** culturally framed rationales for radical abstinence and a call for sobriety and sacrifice to a higher purpose than self (the People).
- **Purification:** rituals of physical and emotional detoxification (fasting, purging, sweating, herbal medicines) and spiritual connection (vision quests).
- **Substitution:** replacement of alcohol with other sacred substances, e.g., the "Black Drink," peyote, tobacco, sage, cedar.
- **Identity:** affirmation of personal and cultural identity--connection with ancestral traditions and innate knowledge (the ancestors within).
- **Reconciliation:** mending of family and social relationships.
- **Prescriptions for living:** a reconstruction of values and daily lifestyle (e.g., the Code of Handsome Lake, Peyote Way, the Red Road).
- **Re-connection to Community:** sustained affiliation with a stable network of recovering people supported by a larger cultural community.
- **Ceremony:** participation in rituals that solidify pro-recovery values and relationships.
- **Story:** the transmission of life-changing ideas through the ancient oral tradition of storytelling.
- **Meaning:** a worldview of oneself and one's sobriety within the context of

Native history, culture and religion.

Legacies and Lessons

What can today's addiction counselor draw from these movements? We would suggest at least five interrelated lessons.

1. *Alcohol and other drug problems in Native America are rooted within complex historical, cultural, political, and economic processes, and the resolution of these problems must reflect a deep understanding of such processes.* Native alcohol problems emerged and continue to emerge through a collision of context and person. While the understanding of the unique vulnerability of each client is essential, so also is an understanding of the ecology within which Native alcohol problems arose and have continued. More specifically, this ecology must be understood in terms of the interconnectedness between the wounding and intergenerational healing of the individual, the family and a people: the honor of one is the honor of all...the hurt of one is the hurt of all. The resolution of Native alcohol problems must be linked to hope for a people as well as hope for the individual being counseled.

2. *The most viable frameworks of addiction recovery for Native Americans tap the deepest roots of tribal cultures.* The job of the conscientious addiction counselor is to become a student of these cultures--their histories, their organization, their values, their ceremonies and folkways, and their systems of healing. The addiction counselor can help forge a bridge between the treatment agency and tribal cultures by encouraging the involvement of family elders, tribal elders and traditional medicine people (herbalists, shamanic healers, spiritual advisors) in the design and delivery of treatment services for Native clients. The goal here is to create a menu of words, ideas, rituals and experiences within the counseling milieu that can be selectively used by Native people who bring enormous diversity in terms of their personal histories, personalities, religious and spiritual beliefs, and degree of acculturation (Weibel-Orlando, 1987). Such an approach recognizes the multiple sources and patterns of Native alcohol problems as well as the multiple pathways and styles of long-term recovery among Native peoples.

3. *Traditional treatment and mutual support require significant adaptation to enhance their effectiveness with Native Americans.* Native purification and healing practices (sacred dances, the sweat lodge, and talking circles) may have special applicability to Native people suffering from alcoholism who are also estranged from tribal identity, language, and ceremonies (Hall, 1985). Dr. Wolfgang Jilek

(1978, 1981) has described the potential therapeutic effects of ceremonies (the Spirit Dance, the Sun Dance and the Gourd Dance) and the potential value in the cross-cultural collaboration between Western and Native healers in the treatment of alcoholism. Bridging the gap between Native and Western healing practices begins with the mastery of cultural etiquette--the etiquette of respect inherent within verbal and non-verbal (e.g., eye contact, touch, boundaries of personal space) communication rituals, and the recognition that such etiquette varies across and within tribes. Bridging that gap requires delivering such assistance within the elements of particular Native cultures. Such elements include: values (e.g., patience, generosity, cooperation, humility), teaching metaphors (e.g., the medicine wheel), symbols (e.g., the sacred pipe, eagle feathers), rituals (e.g., sweat lodge, smudging ceremonies), traditional skills (e.g., carving, silversmithing), stories, and cultural events (e.g., powwows). It calls for the presence of Indian men and women within the treatment milieu who offer living proof of the redemptive power of recovery and cultural re-connection. The addiction counselor is best viewed as a midwife who helps combine and elicit these healing experiences rather than as the expert who “treats” the client.

4. *Personal recovery for Native Americans is best framed within a broader umbrella of Wellbriety--physical, psychological, relational, and spiritual health.* The concept of Wellbriety is an affirmation of the interconnectedness of all aspects of one’s life. At its most practical level, the focus on Wellbriety calls for global rather than categorical assessment, treatment plans that reflect the total vulnerabilities and assets of the person/family/tribe, and advocacy for sustained recovery support systems in the client’s physical and cultural environment.

5. *Addiction treatment and recovery support services are best framed within a broader concern for the global health of Native communities, rather than through a singular focus on alcohol- or other drug-related problems.* The danger in the sometimes exaggerated and narrow focus on Native alcohol problems is that one comes to see alcoholism treatment and alcoholism recovery as a panacea for individuals and tribes instead of viewing Native alcoholism as nested within a much more complex network of political, economic and social problems that are linked to the history of Native tribes within the United States (Westermeyer, 1974). It is this nexus between the individual, the community and history that has long given religious and cultural revitalization movements an important role in the resolution of Native alcohol problems. This fifth principle, by affirming the inextricable link between personal health and community health, calls upon the addiction treatment agency and the addiction counselor to become actively involved in the communities within which their clients reside or to which they identify.

This person-community link is being conveyed to Native communities across the country within the cultural model of the Healing Forest. When a sick tree is removed from diseased soil, treated, and returned and replanted in the same diseased soil, it gets sick again. What is called for instead is a healing of the tree AND the replacement of diseased elements in the soil with nurturing elements (*Red Road to Wellbriety*, in press). Personal recovery flourishes best in a climate of family health, cultural vitality, political sovereignty, and economic security. What White Bison and other Native recovery advocacy organizations are trying to do is mobilize all segments of Native communities—the tribal councils, schools, churches, service programs, and political and cultural organizations—to forge and then actualize a healing vision for the community. The goal is to create a Healing Forest that creates a synergy between personal and community wellness. Such a synergy is reflected in the words of Andy Chelsea, who as the Shuswap tribal chief at Alkali Lake, declared, “The community is the treatment center” (Abbott, 1998).

A Closing Thought

There is a long history of harm done in the name of good in the relationship between Native tribes and federal and state governments and other organizations. One of the most egregious of such injuries was the enforced removal of Native children to Indian boarding schools that were designed to destroy the “Indianness” of these children. The motto of William Pratt, the founder of the Carlisle School in Pennsylvania, was “Kill the Indian and save the man” (Coyhis, 2000). It is instructive that this systematic dismantling of Native family structure and deculturation of Native children was implemented with promises of its potential benefit to Native peoples. A history of such misguided and harmful interventions calls upon professional helpers today to enter into our relationship with each Native client and each Native community with an attitude of quiet humility, observing the ultimate ethical mandate to “First do no harm!”. The capacity of addiction counselors to be part of this era of healing and renewal will be enhanced if we enter into partnership with Native communities, or serve these communities from within, as observers, as listeners, and as students.

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