



Colonization of Indigenous Peoples: Historic and Intergenerational Trauma as it Impacts Contemporary Health & Postcolonial Recovery



Lisa J. Lefler, Ph.D., Director
Culturally Based Native Health Programs
Western Carolina University

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Outline of Discussion

- 
- Status of Health at Contact (1500 AD)
 - Population Decimation and Colonial Genocide
 - Disease Clusters and the Beginning of Trauma
 - A Legacy for Health Disparities – Colonization & Assimilation
 - Recovery and Resiliency

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Kituwah Knowledge Accumulated for Millennia

- The Cherokee people, or more appropriately, the people of Kituwah have lived in the Southern Appalachian region for more than 13,000 years. They have lived in one of the most biologically diverse ecosystems in the world long enough to have observed, trialed, and inventoried thousands of flora and fauna, cosmological movements, climatological changes and geological phenomena.
- Their language preserves their science and beliefs and is critical in how Kituwah people addressed their challenges with resiliency and success.



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Indian Health in the South

- Early European travelers found the inhabitants of the Western Hemisphere to have developed extensive knowledge and efficient use of their natural resources. Archaeology is uncovering evidence that the South could have been inhabited for at least 16,000 years, as shown at the Topper Site in the central Savannah River area of South Carolina, with the oldest radiocarbon dated material in the country.
- It is thought the EBCI has inhabited lands in WNC and 7 other states for 13,000+ years.



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Diseases Before Contact

- The health of Southeastern Indians at Contact (1500 AD) varied then, as do populations today. Depending on diet, lifestyle, and location, Native peoples suffered mainly from three classifications of disease as physical anthropologists Verano and Ubelaker have pointed out.



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These were:

- 1) infectious diseases (caused by bacteria, viruses, parasites, or fungi); for example, parasites including tapeworms, hookworms, roundworms, whipworms, and pinworms were relatively common. Evidence of disease from skeletal material usually indicates the presence of chronic infectious bacterial illnesses such as the four syndromes associated with treponematoses and other infections. Anemia was also problematic in some populations and appears in the skeletal material from those groups. Finally, tumors indicative of various cancers are also apparent.



Ringworm

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Diseases, cont'd.

- 2) traumatic lesions, mostly injury related; and
- 3) disease of the joints related to use and stress, such as arthritis and rheumatoid arthritis



Traumatic lesions

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Giant Changes Worldwide as a Result of Columbus' Voyages to the New World

- 1492 is a Tremendous Landmark in human history, 2nd only to the age of dinosaurs
 - 2 very important things occurred:
 - 1 – Massive die-off of Native peoples (estimated 1 of 5 died)
 - 2 - Europeans and Africans came rapidly
- (3 Africans for each European came) Slave labor greatly altered the landscape

Charles Mann, 1493

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Trauma w/ Epidemics w/ European Invasion



- Virgin soil epidemics were multiple instances of decimation through disease related to initial contact with new European immigrating populations. Domestic-animal derived diseases, taken for granted as part of childhood among Europeans (such as measles, mumps, chicken pox, etc.), found Native populations who were not physiologically, psychologically, or culturally prepared for their effects, which extinguished whole tribes and reduced the Native populations by over 90 percent.

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American Holocaust



- New pathogens along with the brutality of colonization took its toll on American Indian people. One of the earliest recorded encounters is the Christopher Columbus expedition and the aftermath of contact. The experiences are best exemplified through the writings of Bartolome' de las Casas, an early Spanish settler who became a Dominican friar after his experience.

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Bartolome' de Las Casas

- Chronicles in gashly detail the inhumane treatment and murder of the Indigenous peoples at the hands of Spaniards in the early 1500s. Through records such as his, one begins to understand how little consideration of humane and respectful treatment most early European travelers had for the inhabitants of the Western Hemisphere. European attitudes and paradigms of "Indians as savages" translated into catastrophic health problems for Native peoples of the south.



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Smallpox

- David S. Jones, in his important contribution to this topic, *Rationalizing Epidemics*, discusses the clash of beliefs and biology between the early colonists and Native peoples. He speaks of the plagues and epidemics that eliminated 90-95 percent of Native populations in the early 1600s, with smallpox hitting hard those tribes who met the earliest colonists. With each wave of smallpox, the Cherokee population decreased by half.



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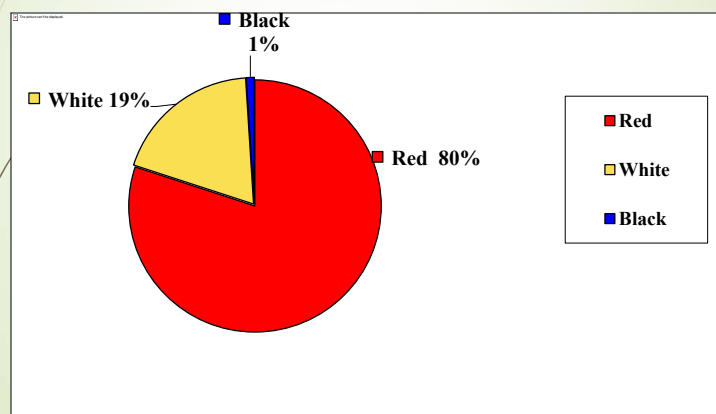
Salvation and the "Savages"

- He reminds us that disease is enveloped in larger social, political, and economic contexts that have direct impact on how disease is approached and understood. It is during this time that clergy such as John Winthrop marveled at how God had dealt with the savages and provided a land cleared for use and settlement by colonists.



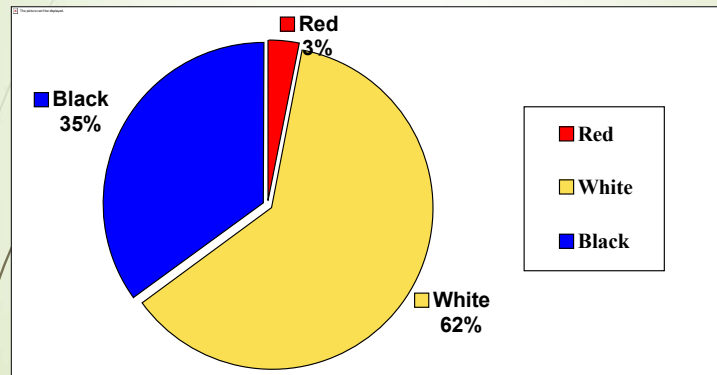
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General Population of the South, 1685 (Wood, 1988)



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General Population of the South, 1790 (Wood, 1988)



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6 Areas of Cherokee Cultural Transformation (McLoughlin 1986)

- 1) **Familial roles and kinship transformation:** a movement from a matrilineal, exogamous clan system to a more patriarchal, nuclear system that involved a shift from communal cooperation to individualism.
- 2) **Economic transformation:** from fur trading and bartering to Federal policy-directed programs of agriculture and a cash economy.
- 3) **Social and ethical transformations:** such as the decline of the "harmony" or hospitality ethics, the accumulation of wealth through inheritance via lineages, and eventually a development of socio-economic stratification and distinctions that would be made via education in white schools.
- 4) **Political transformation:** the centralization of government and authority and the adoption of an elective, bicameral legislative system with courts, police, etc. Clans were important. Each town was self-sufficient and self-governing with women having prominence in the council house.
- 5) **Religious transformation:** a movement from pluralism and adaptation of a monotheistic Christian philosophy. Cultural values shift.
- 6) **A transformation from an oral to written tradition:** for many, this shift began after Sequoyah's creation of the syllabary around 1823. Socialization and teaching approaches will change as well.

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How Does this Impact Native Health & Wellbeing?

- Must be understood in historical context – (David Vann – “History is the future of the past.”)
- American Indian Policies continue to impact Native populations (i.e. discrimination, broken promises – treaty obligations w/ US Gov’t., Indian Health - which is NOT a welfare system, has ALWAYS and is today hugely underfunded!!!)

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Vol. 192 The Civilization of American Indian Series, American Indian Tribal Governments, (Sharon O’Brien)

“The non-Indian population generally does not understand that, while Indians are eligible for many special services (including medical and dental care, educational and employment assistance, emergency food, housing and even funeral expenses), these services are not charity or welfare. Tribes bargained long, hard, and often unwillingly for these benefits and they ceded vast tracts of land in exchange for such services. The **United States is legally bound by the provisions of more than 370 treaties** and agreements with Indian nations to provide various services.”

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A Legacy for Health Disparities

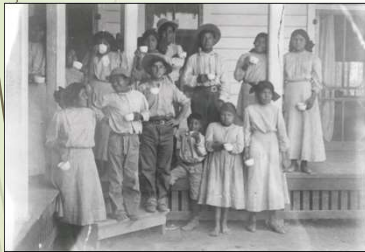
- It is no wonder that the development of policy aimed at elimination and ultimately assimilation of Native peoples would work to also legitimize Native health disparities. Eurocentric, paternalistic and Christian-centered paradigms rationalized the often harsh and traumatic policies forced upon American Indians. Rationalization of destroying towns, crops, forced removal from homelands, separation of families from their children and grandchildren, and attempted obliteration of their language and spiritual beliefs has left its mark, not only culturally and economically, but in significant health disparities.



Carlisle Indian School

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Tuberculosis



- Jones further illustrates the plethora of health problems experienced by American Indians by chronicling types of health issues since 1600. Once initial disease clusters of smallpox, influenza, and measles reduced Native populations by 90 percent, federal Indian policy, which was handled by the War Department, created situations that concentrated and confined Native peoples to reservations and institutions like boarding schools.

Go to http://www.nlm.nih.gov/exhibition/if_you_knew/ifyouknew_05.html

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TB Sanitariums in Indian Country



Indian Sanitarium in Phoenix

- As a result tuberculosis became a number one health problem until well into the twentieth century. Poor health related to poverty, such as malnutrition and communicable diseases continued to plague Indian communities with the nation's highest infant mortality rates and rates of infectious disease such as trachoma which was as high as 95 percent in some Indian schools.

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Contemporary Health Issues

- Today Native peoples are working diligently to deal with what researchers Jennie Joe and Robert Young have referred to as the "diseases of civilization," diabetes, heart disease, and substance abuse. These non-communicable diseases are the latest health and social challenges facing Native peoples today.

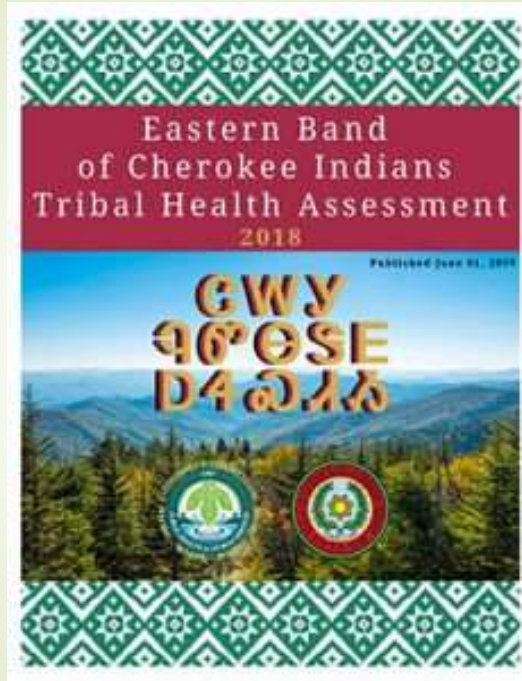


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AI/AN Health Disparities as Reported by the IHS

- ▶ The American Indian and Alaska Native people have long experienced lower health status when compared with other Americans. Lower life expectancy and the disproportionate disease burden exist perhaps because of inadequate education, disproportionate poverty, discrimination in the delivery of health services, and cultural differences. These are broad quality of life issues rooted in economic adversity and poor social conditions.
- ▶ Diseases of the heart, malignant neoplasm, unintentional injuries, and diabetes are leading causes of American Indian and Alaska Native deaths (2009-2011).
- ▶ American Indians and Alaska Natives born today have a life expectancy that is 5.5 years less than the U.S. all races population (73.0 years to 78.5 years, respectively).
- ▶ American Indians and Alaska Natives continue to die at higher rates than other Americans in many categories, including chronic liver disease and cirrhosis, diabetes mellitus, unintentional injuries, assault/homicide, intentional self-harm/suicide, and chronic lower respiratory diseases.
- ▶ Given the higher health status enjoyed by most Americans, the lingering health disparities of American Indians and Alaska Natives are troubling. In trying to account for the disparities, health care experts, policymakers, and tribal leaders are looking at many factors that impact upon the health of Indian people, including the adequacy of funding for the Indian health care delivery system.

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EBCI Tribal Health Assessment 2019

Top Ten Priorities:

1. Substance Abuse and Related Issues (75% responded this was a top issue)
2. Violence and Abuse
3. Diabetes
4. Hepatitis C
5. Heart Disease
6. Stress
7. Tobacco Use
8. Depression
9. Food Insecurity
10. Sexually Transmitted Infection and Teenage Pregnancy

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Historical Trauma? What Trauma?

At Contact the genocide began:

- Population of Native People in the Southeast within the first 200 years was reduced to 3%!!!
- Disease clusters, war, homicide
- Land seizures and reduction of homeland in the millions of acres within 3.5 generations

Colonization:

- Rationalization of disease and poor health conditions
- Assimilation policies (boarding schools, attempted termination of people, language & culture)
- Discrimination and exploitation

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Why is history that is traumatic Relevant?

Bessel van der Kolk, 2014

- “traumatic experiences do leave traces, whether on **a large scale (on our histories and cultures)** or close to home, on our families, with dark secrets being imperceptibly passed down through generations. They also leave traces on our minds and emotions, on our capacity for joy and intimacy, and even on our biology and immune systems.”

Smallpox



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Trauma, Stress, & Disease

“For the past three centuries, extensive and sometimes forcible socio-cultural changes have impacted on the lifestyle and culture of Native Americans. Each cycle of experience with non-Indians in each historical period has left an imprint on the health picture of American Indians”

(Joe and Young, 1993).

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What is Historical Trauma?

- ▶ Historical trauma is most easily described as multigenerational trauma experienced by a specific cultural group.
- ▶ Historical trauma can be experienced by “anyone living in families at one time marked by severe levels of trauma, poverty, dislocation, war, etc., and who are still suffering as a result” (Cutler, n.d.)
- ▶ Historical trauma is cumulative and collective. The impact of this type of trauma manifests itself, emotionally and psychologically, in members of different cultural groups (Brave Heart, 2011).

(KESHA ROSS, PH.D.)

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UNFORTUNATELY MANY HAVE EXPERIENCED TRAUMA....

- ▶ **1 IN 5 AMERICANS HAVE BEEN MOLESTED** (MOST BY SOMEONE THEY KNOW – ONLY 17% OF WOMEN AND 23% OF MEN WERE RAPED BY A STRANGER). 68% OF PHYSICALLY ABUSED WOMEN HAVE ALSO BEEN SEXUALLY ASSAULTED AND THE RATES ARE HIGH FOR THOSE WHO WERE ABUSED AS CHILDREN - **1 in 4 girls and 1 in 6 boys will be sexually abused before they turn 18 years old, 34% of people who sexually abuse a child are family members.**
- ▶ **1 IN 4 GREW UP WITH ALCOHOLICS**
- ▶ **1 IN 3 COUPLES HAVE ENGAGED IN PHYSICAL VIOLENCE**

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MANIFESTATIONS OF HISTORICAL TRAUMA

- Internalized Oppression
- As the result of historical trauma, traumatized people may begin to internalize the views of the oppressor and perpetuate a cycle of self-hatred that manifests itself in negative behaviors.
- Emotions such as anger, hatred, and aggression are self-inflicted, as well as inflicted on members of one's own group.

(KEISHA ROSS, PH.D.)

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Results of Assimilation are Multigenerational...

These adaptations manifest in the following ways:

- Not able to communicate "feelings" to their children, in order to survive boarding school exp. they learned early to cut their emotions off.
- Lack of healthy parenting skills, parenting was not modeled in the boarding schools
- Loss of socialization of traditional language, culture, rituals, teachings, beliefs, etc. (severely punished for acknowledging any form of who they are as Native Americans)
- Often substance abuse and mental health issues resulted from trauma (PTSD) and present another whole series of issues past down from generation to generation. Such as low-self esteem, depression, cultural self hate, lateral violence, negative self image, distorted world view

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Intergenerational Trauma from a Kituwah (Linguistic) Perspective

- *esga adanatedi danillohisdisqohi. "they make them catch it" or "they transfer it on to them"*
- *doneyohvsgoi utloyi iyunalasdodiyi "they teach them to become the same" [children become the same as those who infected them]*
- *Utloyi anadanatesgoi "they will think in the same way" [this would refer to a mental state]*
- *So, you got it from someone else – a sickness that has to be healed.*

- *Chief Wilma Mankiller was quoted as saying "You can't see the future through tear-filled eyes."*
- *"We have to see beyond the tears to see clearly. You have to stop the cause of the tears so that you can have tohi – look out to the world – not esga, inward." (p.c. Belt and Jensen) In Cherokee, anything you can learn, you can deliberate, measure it, and change it...."*

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Cherokee Nation Seminary opened 1851 – 22 years after Removal



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Within 25 years of a Horrific, Traumatic Event...

- ▶ *Da le hi si ha* – “standing up again or”
- ▶ *A le ni si ha* – “starting up again”
- ▶ *U na di wi sga* – “they are becoming well”

- ▶ *U na tlo i s di ha* - “they are getting it or it is becoming attached to them” **THIS IS MULTIGENERATIONAL TRAUMA**
- ▶ *The thing they are getting is making them alike (referring to a state of mind). This is about mental health...*

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Kituwah Perspectives of Trauma

- ▶ *Gesdi yanigotiha danitlohisdisgvi*– “they can't see that they are doing it – passing it on”
- ▶ They are teaching them to be that way through their actions – not consciously

- ▶ “the eaglet learns what it sees in the nest” children are taught to be traumatized through neglect, violence, abuse, etc. a Mongolian proverb (p.c. Belt and Jensen)

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Differences in Thinking

- In English, trauma seems like it is something that is always with you
- In Cherokee, "they making it alike" which means you can make it un-alike
- Ceremony helps you internalize how to have *tohi*, become well
- The English language fragments thinking and at the end of it, you feel alone..
- For Kituwahs, when you lose the thinking and language of community you stay traumatized
- To be *esga adanateti*— looking into yourself, or looking back to yourself (thinking that way), it makes the world smaller, it lessens the distance you can see. *esga* feeds off itself)p.c. Belt and Jensen)

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Importance of Cherokee Language to Heal – It is Medicine

- The language ties you with place, time, and the rest of the world
- It is a language of relationships and inclusion. It reflects that everything works together and promotes *duyugodvi* (*duyuk'da*)
- The idea of trying to make you feel that you are responsible for your trauma is anomalous to Cherokee or Kituwah thinking.
- We are on the right path or *uyugodvi* which results in wellness and happiness
- **Recovery** in the language is ***u di w(i) sga*** [in process]

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Healing (*u di w(i) sga*) Through Ceremony

- Going to Water
- Spiritual and/or religious events
- Tribal-specific healing ceremonies
- Healing work with a Kituwah traditionalists that includes use of “medicine,” language, and ritual
- Meditation/prayer
- Cherokee *osi* – *hothouses*
- Using healthy food and teas as part of ceremony

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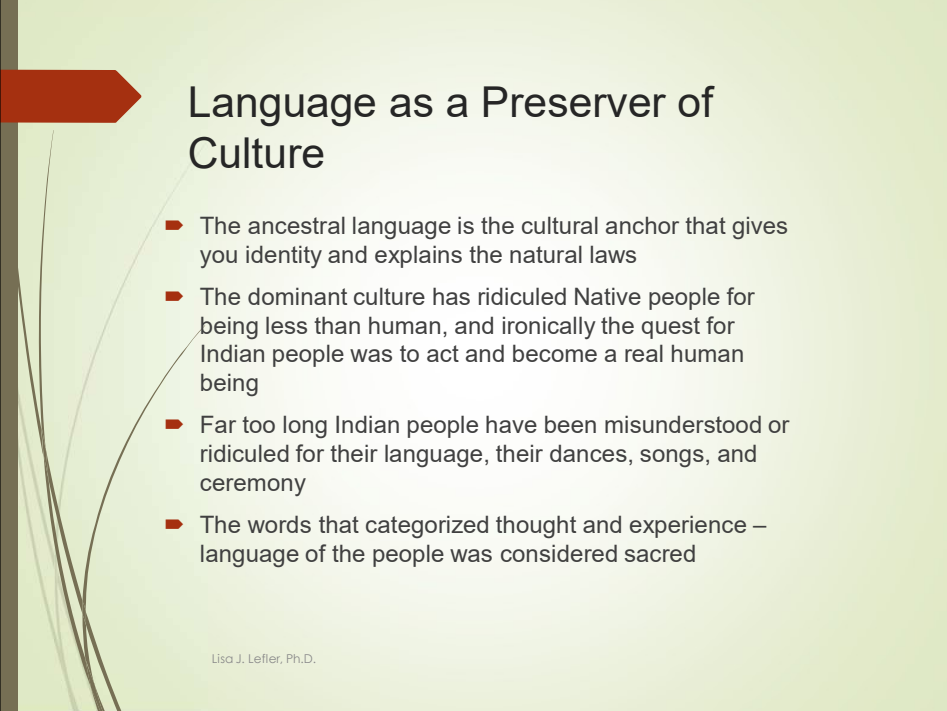
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Cont'd.

- A person that has been rejected or abandoned by their family and community has a wounded soul
- Ceremony is a mechanism [ritual] that allows the person to be reconnected with their Spirit – facilitates soul healing – historically has often been with community
- A realignment of body, mind, spirit, which moves the person to a level of understanding and accepting their place in the universe
- Goal is for the person not to fight or struggle internally any longer for acceptance and peace
- Elders from all tribes will tell you that ultimately, the medicine is within you
- True healing always comes from within us
- Must remember it is our body that is sick, not our spirit

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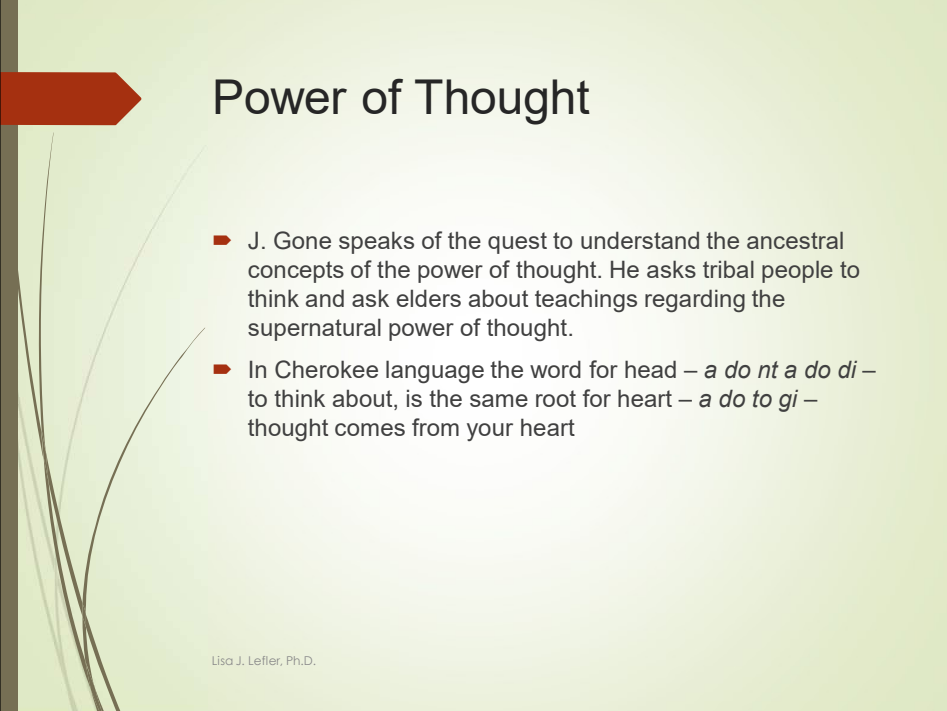


Language as a Preserver of Culture

- The ancestral language is the cultural anchor that gives you identity and explains the natural laws
- The dominant culture has ridiculed Native people for being less than human, and ironically the quest for Indian people was to act and become a real human being
- Far too long Indian people have been misunderstood or ridiculed for their language, their dances, songs, and ceremony
- The words that categorized thought and experience – language of the people was considered sacred

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Power of Thought

- J. Gone speaks of the quest to understand the ancestral concepts of the power of thought. He asks tribal people to think and ask elders about teachings regarding the supernatural power of thought.
- In Cherokee language the word for head – *a do nt a do di* – to think about, is the same root for heart – *a do to gi* – thought comes from your heart

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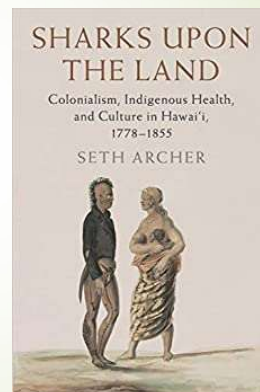
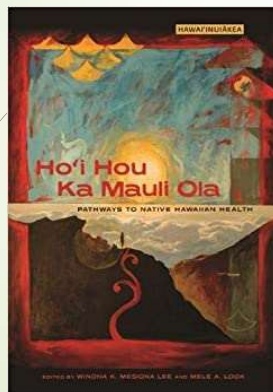
Indigenous Tribal Thought: Community is Critical

- Western medicine isolate people – follows a dominant society's value on individualism
- Isolation of a person is contrary to group emphasis
- If a person is going the way of isolation, he or she has decided that way themselves but we have to “get them back”
- To rejoin a person to the community and the world

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Example of Native Hawaiians and Their Journey to Wellness



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Ho'I Hou Ka Maui Ola

- Hawa'inuiakea School of Hawaiian Knowledge
 University of Hawai'i at Manoa within the Dept. of Native Hawaiian Health, in the J. Burns School of Medicine.

 The Dean of the School who is Native Hawaiian says, "We all have much to learn from the holistic perspectives, practices, and expertise derived from centuries of knowledge that our health and well-being with our ecosystems...we start at the intersections of the spiritual, ancestral, cultural, and environmental factors of health and wellbeing. . . It speaks to the concept of the sacredness of relations."

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Seth Archer, *Sharks upon the Land*

- By the late 1700s (with the arrival of Captain Cook in 1778), health was the most overarching crisis in Hawaii.
- Before 1820, people from all over the world, including Great Britain, France, Spain, Mexico, Russia, Germany, Canada, Canton, the South Pacific Islands, the US and other countries came and began to settle. With them came diseases and death.
- Massive deaths had far-reaching implications as it had on epidemics in other parts of the world. Infertility, political and economic upheaval, loss of cultural features (language, ceremony, etc.), loss of family and community members who held responsibilities/knowledge/guidance.

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Native Hawaiian Health

- In the 18th Century, the population was about a half a million people. By 1850, it had been reduced by 90%.
- The impact of death and poor health, reduced fertility, and loss of social resources endures to this day.
- Many champion "health decolonization" as a major component of tribal sovereignty and self determination. As Archer says, **"Colonialism lives on in the bodies of the colonized."**
- Healthy Indigenous people (in body, mind, and spirit) and essential for healthy leadership and self-governance.
- As the Hawaiians and other Indigenous peoples have experienced, poor health undermines everything they value; language, solidarity, and ultimately sovereignty.
- By being serious about language preservation (immersion schools, cultural charter schools, early educational recruitment and traditional training for health providers) has resulted in a cultural renaissance as well as improved health. **By 1920 there were fewer than 1000 speakers, today fluency is approaching 10,000.**
- Health history matters in following the trajectory of a people, a culture. Scholars have not followed the processes of health and cultural change amid the chaos and disruptions of colonization.

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With Colonization. . .

- Comes changes in what one believes is right or wrong, true or false, how one perceives the place of gender, understanding of "religion, sexuality, family structure, and societal elements as cultural forms.
- Most of what we understand about Indigenous epistemologies that were extant even before colonization can be best understood linguistically. As Cherokee elder and speaker Tom Belt has said often, the Cherokee language is not just a code for English. It is a means of preservation of thousands of years of Native science, physics, natural laws about relationships and cycles that connect women (particularly for matrilineal tribes), with celestial activities and the land.
- **Medicine and healing are also cultural forms as they include attitudes, understandings, behaviors, and beliefs for both practitioners and patients. These are not disconnected from spiritual matters – as nothing was.**

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Health

- As Archer points out in his work, “place and culture were inextricably bound...health is to be understood as a biosocial and biocultural phenomenon . . . And a comprehensive study of colonialism must address disease and its consequences as principal causes and prime movers” [of health status – in all aspects of the meaning of health].
- **Disease and fear colonizes.** As Kituwahs believe, conversely, health is a manifestation of balance, joy, happiness, vision, and the embrace of *duyuk’da*.
- The positive changes that have occurred for Native Hawaiians in recent generations have largely come from the revitalization of culture, ceremony, and language. Returning to traditional foods and activities have centered the health of Hawaiian people.

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Cherokee Worldview - Tohi:

- One Cherokee elder spoke of things that can “lead one to sickness.” Again in tribal societies physical and mental/emotional properties are all interconnected and not understood as separate parts of a person.
- Tohi: [pronounced tow-hee] is the Cherokee paradigm of things being “as they should,” in balance and moving along normally. Being upright and walking forward, seeing and hearing all that is around you is tohi. It puts you in a place to see where you can serve – that is a Kituwah being a real human being.
- Things that can put an individual “out of balance” includes unstable emotions and behaviors, such as obsessing. The elder said “obsessing takes you away from reality which makes you unbalanced. The ancestors say that ‘human beings don’t act that way, when someone obsesses.’”

[Lefler, Lisa J. fieldnotes 2006]

[Also in Under the Rattlesnake: Cherokee Health and Resiliency, Lefler, L.J., editor. University of Alabama Press, 2009]

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Those Who Have Experienced Multigenerational Trauma may deal with

- Substance Abuse or dependence
- Distrust towards mental health providers/medical providers
- May have experiences prejudice and discrimination
- May lack a strong sense of identity
- Fear of failure or ridicule
- Frustration w/others responding to them in a stereotypical way rather than as an individual
- Conflicts between long term goals and feelings of alienation from community and extended family.

■ LaFromboise, T.D., Trimble, J.E. & Mohatt, G.V. (1990)

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What Does This All Mean?

- The choices we make can impact not only our health, but the health of our children and grandchildren on down.
- Likewise, the choices our ancestors made have had an affect on us.
- Being cognizant of how this works allows us the ability to move out of maladaptive patterns.
- This has huge implications for those populations who have experienced historical and intergenerational trauma.
- It forces us to "practice medicine" with a different and more holistic approach, treating whole people, not just our biological ailment(s).
- How we think, behave, and relate to others (including animals, plants, etc.) affects our own health.

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SO WHAT DO WE DO?

- TAKE TIME TO LEARN MORE ABOUT YOUR FAMILY AND CULTURAL HISTORY – HOW DOES THIS EXPLAIN YOUR VULNERABILITY TO HT - AND IDENTIFY YOUR STRENGTHS THROUGH THE STORIES OF YOUR ANCESTORS
- LOOK FOR WAYS OF HEALING, BOTH SELF AND LARGER COMMUNITY
- WITH HT COMES PAIN – LEARN HOW TO DEAL WITH AND RELEASE THIS PAIN IN "HEALTHY" WAYS
- THERE ARE CULTURAL AND SPIRITUAL WAYS OF HEALING – SEEK THEM OUT
- SEEK PROFESSIONAL SERVICES
- WORK TO HEAL SELF AND OTHERS THROUGH SEEKING SOCIAL AND ENVIRONMENTAL JUSTICE (WHEN THE LAND IS SICK, WE ARE SICK)

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To heal community

- EDUCATE – CREATE COMMUNITY FORUMS THAT PROVIDE INFORMATION ABOUT THE IMPACT OF TRAUMA , WHAT SERVICES ARE AVAILABLE AND HOW TO ACCESS THEM
- TEACH ABOUT THE LANGUAGE, HISTORY, AND CULTURE OF THE REGION, AND PROVIDE DISCUSSION ABOUT HOW OUR FAMILIES HAVE RESPONDED
- IN THE KITUWAH TRADITION, THINK IN TERMS OF GADUGI – SERVING OTHERS, THINKING OUTWARD ABOUT THE NEEDS OF OTHERS AND MOVING "UPWARD AND FORWARD" IN THE RIGHT WAY
- TAKING TIME TO REFLECT, MEDITATE, OR RE-CONNECT: TO THINK ABOUT THE QUALITY AND DYNAMICS OF OUR RELATIONSHIPS WITH 1) OTHERS; 2) THE NATURAL WORLD AROUND US; 3) OURSELVES; & 4) THE SPIRIT WORLD

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Always working toward
Tohi' – Physical, Mental,
and Spiritual state of
being

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- Goodyear, A.C., in *Paleoamerican Origins: Beyond Clovis*, eds. by R. Bonnichsen, B. Lepper, D. Stanford, M. Waters (2005); John Lawson, *Lawson's History of North Carolina* (1937 a reprint of 1714 edition); John W. Verano and Douglas H. Ubelaker, eds. *Disease and Demography in the Americas* (1992); Bartolome' de Las Casas, *In Defense of the Indians*, translated by Stafford Poole (1992); Peter H. Wood in *Powhatan's Mantle: Indians in the Colonial Southeast*, eds. Gregory A. Waselkov, Peter H. Wood, and Tom Hatley, (2006); David S. Jones, *Rationalizing Epidemics: Meanings and Uses of American Indian Mortality since 1600* (2004); Everett R. Rhoades, *American Indian Health: Innovations in Health Care, Promotion, and Policy* (2000); Jennie R. Joe and Robert S. Young, *Diabetes as a Disease of Civilization: The Impact of Culture Change on Indigenous People* (1994); David H. DeJong, *If You Knew the Conditions: A Chronicle of the Indian Medical Service and American Indian Health Care, 1908-1955* (2008); Gregory Cajete, *Native Science: Natural Laws of Interdependence* (1999)

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A FEW SUGGESTED READINGS

The image displays seven book covers arranged on a light green background. On the left, there is a vertical decorative element consisting of thin, dark, curved lines and a solid red arrow pointing to the right. The books are as follows:

- SCARED SICK**: The Role of Childhood Trauma in Adult Disease by Boris Karasik and Meredith A. Wiley.
- THE BODY KEEPS THE SCORE**: Brain, Mind, and Body in the Healing of Trauma by Bessel van der Kolk, M.D.
- AMERICAN INDIAN AND ALASKA NATIVE CHILDREN AND MENTAL HEALTH**: A National Consensus Document on Cultural Competence, Prevention, and Treatment.
- Ho'i Hou Ka Maui Oia**: A collection of stories by various authors.
- THE CONQUEST OF THE NEW WORLD AMERICAN HOLOCAUST**: A History by David E. Stannard.
- RATIONALIZING Epidemics**: A History of the World by Robert M. Young.
- IN DEFENSE OF THE INDIANS**: A Letter to the King by Bartolomé de Las Casas.