



Tribal Boarding School Toolkit for Healing



THRIVE

at the Northwest Portland Area Indian Health Board



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Summary

In January 2023, Northwest Portland Area Indian Health Board (NPAIHB) and Indian Health Services (IHS) contracted with Kauffman and Associates, Inc. (KAI) to develop an electronic toolkit for teachers, public health professionals, mental health professionals, tribal administrators, and public safety professionals. The toolkit is intended to be a brief, reader-friendly resource with information on the historical trauma resulting from Indian boarding schools in the United States. This team conducted a literature review, spoke to boarding school survivors and descendants, consulted with individuals and organizations working in the field of American Indian and Alaska Native (AI/AN) healing and resilience, and collaborated with educators to develop this toolkit.

The purpose of this toolkit is to provide those who work in AI/AN communities with information, resources, and suggested activities for talking about and healing the generational traumatic impacts boarding schools have had on AI/AN individuals, families, and communities.

There are multiple ways to use the toolkit. We strongly encourage you begin at the first section, Opening in a Good Way. From there, you can either follow the modules in order or jump to a module further along in the toolkit.

Throughout this toolkit, sections are emphasized for simple and quick referencing with the following icons:



Call to Action – Activities for users of the toolkit to implement in their communities and with their clients



Highlights – Important information for users of the toolkit to keep in mind



Experiential Therapies – Creative outlets or practices that are proven to assist with healing from trauma

The Tribal Boarding School Toolkit for Healing was developed under a contract between IHS, NPAIHB, and KAI. We wish to thank the many individuals who participated in focus groups for their insights and brilliance, in addition to the following individuals whose work was invaluable in compiling this toolkit:

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We would like to acknowledge the complexity of this work and the vulnerability of those who chose to participate in the creation of this toolkit. They invested not only their professional insights but their personal family stories, and without their profound commitment to highlighting the truth of the boarding school experience and its impacts, this toolkit would not have been created.

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Opening in a Good Way

Acknowledgement

The authors of this toolkit acknowledge and honor the resilience and strength of the U.S. Indian boarding school students, survivors, and their descendants. The enduring trauma inflicted by forced assimilation policies is a painful chapter in American history, and we stand in solidarity with those who have carried the weight of this legacy for generations.

To the survivors and their families, your courage in sharing your stories and seeking healing is a testament to your indomitable spirit. We recognize the profound intergenerational trauma that has been passed down and the continual impact it has had on AI/AN communities.

We also extend our gratitude to those who will use this toolkit—the dedicated administrators, public officials, health care providers, and educators who work tirelessly to provide support, healing, and education to those affected by this historical injustice. Your commitment to addressing the complex physical, emotional, and cultural wounds caused by these policies is commendable.

In community and ceremony, we can strive for healing, reclamation, and revitalization of AI/AN cultures and traditions these policies tried to extinguish.

Disclaimer

This toolkit is a valuable resource for those seeking to understand the historical context and impacts of U.S. Indian boarding schools and provides actionable steps, exercises, and discussion guides on how to address those impacts in AI/AN communities. However, we must acknowledge that its contents may be emotionally challenging for some readers.

The information presented in this toolkit delves into forced assimilation, cultural erasure, and the enduring trauma experienced by AI/AN people. Readers should be aware that encountering this material can evoke strong emotional reactions, including sadness, anger, and grief.

It is crucial to exercise caution while engaging with this toolkit and to prioritize self-care. If you are an AI/AN person, this content may resurface intergenerational trauma. Please seek support from your community, mental health professionals, or cultural healers as needed.

For all readers, especially educators and researchers, we encourage a thoughtful and respectful approach to the subject matter. Remember that the intention of this toolkit is to promote understanding, healing, and foster asset-focused community building, but it may not be suitable for all audiences.

By choosing to read this toolkit, you acknowledge the potential emotional impact it may have. Proceed with sensitivity, compassion, and a commitment to promoting awareness and justice for AI/AN communities.

Discussion Guides

Discussions about U.S. history and the experience of AI/AN children who attended Indian mission and U.S. Indian boarding schools is important not only to gain a greater understanding of history but because of the impact it has on AI/AN people today. This toolkit includes examples and best practices on how to have these difficult conversations. This includes knowing where to begin and understanding and preparing for potential “activators” or re-experiencing for individuals who might have direct or generational trauma associated with boarding schools. Also included are some practical tools to start or manage the conversations and basic-level interactions to focus and apply resiliency factors.

It is also important to know how to guide discussions with those who do not have direct experience with AI/AN culture and history, or who are unaware of the historical and inter-generational trauma impacts of boarding schools in Indian Country.

Discussions with Children and Youth

Often adults try to protect children by not discussing difficult or emotional topics. When adults avoid these topics, children and youth need to fill in the blanks themselves. They may not have the emotional or cognitive abilities to fully understand the information they are hearing or finding themselves through media, or websites. Therefore, it is essential that adults serve as their guides and help young people navigate traumatic histories and events.



Focus on Repair and Resilience. Discussions should move beyond being trauma informed to focusing on being healing centered. This approach acknowledges that people are more than their traumatic experiences and emphasizes the possibilities for well-being. Dr. Shawn Ginwright's model for healing centered engagement can be a useful framework for these discussions. The framework provides a strengths-based social emotional learning strategy that includes five main elements: culture, agency, relationships, meaning, and aspirations.

Teach the accurate history of Indian boarding schools. The National Native American Boarding School Healing Coalition offers developmentally appropriate curricula for students in elementary through high school. When teaching the history of boarding schools:

- Stick to the facts while explaining the government policies that lead to the creation of the schools, the experiences of the children who attended them, and the lasting impact on AI/AN communities.
- Provide information in small accessible developmentally appropriate chunks.
- Watch for signs students are disengaging or need time to process their emotions.
- Take breaks as needed and leave lots of time for questions and reflection.

While preparing for the discussion, make sure to check your biases, and process your emotional reaction to the content. Remember it is okay to not have all the answers to young people's questions. Remain humble, and model for them that it's okay not to know how to find the answer they seek. And that it's okay to have an emotional reaction to difficult content.

Center the assets and strength of AI/AN people. While it is important to acknowledge the intergenerational trauma caused by boarding schools, it is also important to highlight the individual and collective strength and resilience of AI/AN people. Share stories, music, art, and accomplishments of historical and *contemporary* AI/AN people.

Create a safe space for youth and children to express their thoughts and feelings. Be patient and make sure students feel safe sharing reactions to what they are learning. Provide opportunities for them to share ideas about how to promote healing. They might not have the words to fully express what they feel about the harm caused (Riley & Hayes, 2018), or they may need time to process. You can give space for processing by offering options including discussion, music, art, or play.

Offer support and resources. Let youth and children know they are not alone and that there are resources available to support them; and that there are opportunities to take action. Create a resource list of books, websites, support groups, or invite elders to serve as facilitators of additional conversations.

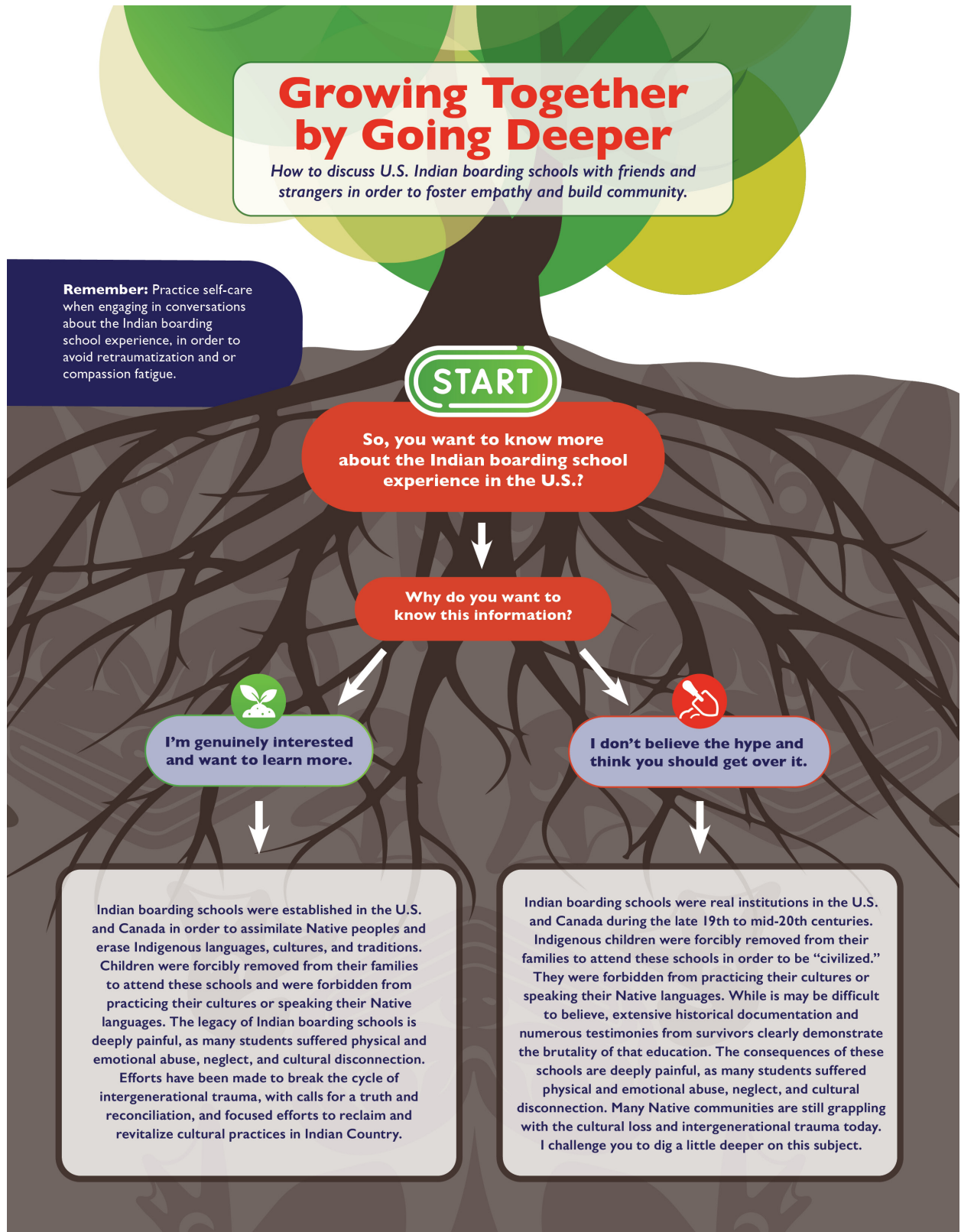


Figure 1. A guide to discussing Indian boarding schools



Image Source: Wikimedia Commons

Figure 2. Native American youth at Carlisle Native Industrial School, Pennsylvania (c.1900)

“Indigenous people and individuals have the right not to be subjected to forced assimilation or destruction of their culture.”

~ United Nations Declaration on the Rights of Indigenous Peoples, Article 7

The Past

Forced Assimilation and Its Impact on American Indians and Alaska Natives

Genocidal practices were used on AI/AN people well before the establishment of Indian mission and boarding schools. To help better understand the boarding school system and the role it played in a much larger agenda, it is important to first understand the definition of genocide, as well as the genocidal federal policies and experiences that preceded the boarding school system. According to the United Nations, genocide means any of the following acts committed with intent to destroy, in whole or in part, a national, ethnical, racial, or religious group such as (United Nations, n.d.):

- Killing members of the group
- Causing serious bodily or mental harm to members of the group
- Deliberately inflicting on the group conditions of life calculated to bring about its physical destruction in whole or in part
- Imposing measures intended to prevent births within the group
- Forcibly transferring children of the group to another group

The impacts of genocide on AI/AN populations in the U.S. have been profound. Throughout history, AI/AN people have experienced various forms of violence, dispossession, and forced assimilation. The very experience of children who were put through boarding schools was a direct result of genocidal policy and practice. The following statement makes the level of intent clear: “Kill the Indian in him and save the man.” – Gen. Richard H. Pratt, Superintendent, Carlisle Indian School.

A Long Legacy of Dehumanization

The dehumanization and objectification of AI/AN people was a constant feature of U.S. policy from the moment of first contact and is perpetuated to this day. Examples of this include:

- **The Doctrine of Discovery** – Historical legal concepts issued by the Vatican that were used to justify the colonization of AI/AN lands, resulting in land dispossession, cultural destruction, forced assimilation, and loss of AI/AN sovereignty and rights.
- **The Declaration of Independence** – Authors of the Declaration of Independence referred to AI/AN people as “merciless Indian savages,” which was used as a justification for the seizure of AI/AN lands and other acts of violence (Ostler, 2020).
- **The Marshall Trilogy** – Three landmark Supreme Court cases that enshrined the Doctrine of Discovery into U.S. law and asserted that legal powers of landownership and sale of AI/AN lands belonged to the U.S. government.
- **The Monroe Doctrine** – A legal policy which declared the U.S. as sole colonizer of the Western Hemisphere.
- **Manifest Destiny** – An ideology that deemed White American settlers as ordained by God to pursue U.S. western expansion (Thornton, 1990).



Research whose land you are on and learn about the history of the AI/AN people who live there. [Native-Land.ca](https://www.native-land.ca) is a useful tool for researching these matters.

These legal concepts and policies are the bedrock of White supremacist structures and thinking. They paved the way for further dehumanization of AI/AN people in early American literature as savage animals to be killed or tamed, oversexualized objects or stereotypical villains in Western films, and caricature mascots for sports teams, all of which persist to this day. The systemic othering of AI/AN peoples has contributed to overt acts of racism and discrimination historically and currently, like the implementation of Indian boarding schools and over-representation in both foster care and the criminal legal systems today.



- Do not wear other people's traditional clothing as a costume.
- Hold your friends and family accountable when they use problematic language about AI/ANs.
- Be an ally: Learn with humility, center the impacted, step up or stand back when asked to do so.
- Learn about the difference between cultural appreciation and appropriation:
 - **Do:** Buy art, textiles, jewelry, music made by AI/AN people
 - **Do:** Attend public events lead by AI/AN people
 - **Don't:** Buy "Native style" art, jewelry, textiles made by non-Natives
 - **Don't:** Attend traditional AI/AN ceremonies lead by non-Natives (or facilitate them)

Microaggressions against AI/AN people occur in almost every aspect of modern American life, including the workplace, schools, hospitals, and in popular media. The legacy of these policies has had a lasting impact on how AI/AN people are perceived not only by others but by themselves, due to loss of land, loss of culture, loss of language, and thus a loss of identity fed by internalized racism.

Avoid using stereotypes or forcing AI/AN people to endure microaggressions. Common examples of these include:

- But you don't look Indian?
- How much Indian are you?
- What are you?
- You're really well spoken.
- Let's have a powwow (when referring to a meeting, discussion, etc.)
- Do you live in a tepee?
- I need to find my tribe (when referring to finding your community, or like-minded people).



Overview of U.S. Indian Boarding Schools

Between 1819 and 1969, the U.S. Department of the Interior operated 408 Indian boarding schools (U.S. Department of the Interior, 2022). As part of a program of cultural genocide and assimilation, AI/AN children were forced to attend these schools, which replaced their languages and cultures with English, Western agriculture, and Christianity. AI/AN children were taken from their families, physically and psychologically abused, molested and sexually assaulted, and even killed. This was not a mistake. Rather, the boarding-school system was a deliberate strategic attempt to assimilate AI/AN children through consistent, insidious tactics which included the following:

- Forced removal and relocation of AI/AN children
- Renaming Indian children from Indian to English names
- Cutting the hair of Indian children, which was of great cultural significance
- Discouraging or preventing the use of AI/AN languages, and practice of AI/AN religions or cultural practices
- Organizing AI/AN children into units to perform military drills



If you are interested in tracing your ancestors' experience at Indian boarding schools, The National Native American Boarding School Healing Coalition will be launching an online platform to help. In the meantime, please see their document "[Locating Relatives at U.S. Indian Federal Boarding Schools Research Pathfinder.](#)"

Please take a moment to make sure this is the right time to go down this path, as this work can activate a secondary trauma response. Also keep in mind that not every survivor defines their boarding school experience as adverse—AI/AN people may be at various stages of reconciliation with this experience, and it is important to respect their individual healing processes.

Through these and other policies, the boarding schools systematically replaced AI/AN people with Western military and religious systems. School officials, predominantly from religious institutions, forced foreign names, clothes, and haircuts onto students—and they divided students into mixed tribal groups without a common language. Children were punished for practicing their cultures and religions, including the crucial rites of passage from the physical world to the spirit world upon the death of a parent. The goal was not only to break cultural connections, but also to deter students from running away from the schools by depriving them of external community.



Image Source: Library of Congress

Figure 3. Students and teachers from the government Indian school on the Swinomish Reservation, Washington (c. 1907)

Physical abuse was rampant in the boarding schools. Students who spoke their Native language or otherwise resisted assimilation were flogged, whipped, slapped, cuffed, put into solitary confinement, denied food and medical attention, and more. Students were raped and sexually assaulted, often by teachers and school administrators. Poor living conditions, overcrowding, and malnutrition at the schools made infectious disease widespread. More than 500 children died at the 408 boarding schools between 1819 and 1969, with 50 schools known to have gravesites—an estimate expected to grow significantly as more evidence emerges (Levitt et al., 2023).

Indian boarding schools were also child labor mills. Students learned Western agriculture and were forced into manual labor, often growing crops and raising livestock that the schools needed. The institutions were, “in effect, envisioned as schools for civilization, in which Indians under the control of the agent would be groomed for assimilation” (Newton, 2019). Thus, in addition to social-engineering away AI/AN identity and treaty obligations, the boarding schools served a dual purpose of creating an exploitable workforce.

In 1975, the Indian Self-Determination and Education Assistance Act turned over education management to tribes. By the 1980s, most large boarding schools were closed. Now, the Bureau of Indian Education (BIE) operates a small number of schools, of which only four are off-reservation residential schools (*Indian Boarding Schools*, 2019).

Activities:

Reflection Questions:

- *How was the history I was taught in school similar or different than what I am learning about in this toolkit?*
- *Why is it important to understand this history and how it impacts the families I serve?*



Digital Storytelling

Digital storytelling is a powerful tool for communicating and processing complex emotions using digital technologies. It combines narrative storytelling by way of voiceover with photography, animation, film clips, text, and audio to create a three- to five-minute-long video. Not only can digital stories be used for telling personal narratives, but they can be used to explain concepts, historical events, or make an argument.

Much of the technology needed to create a digital story is already available on cell phones and computers. To make a digital story, you will need photos, a camera, a microphone, and video editing software. Some devices have video- and audio-editing software already installed, but there are free resources available online as well.

Using one of the prompts below, write a script of roughly 200–500 words. Once you have completed your script, gather or create some visual elements to help tell your story, as well as any audio you would like included, such as background music. You will record the script you wrote as your narration or voiceover using the internal microphone on your cell phone or computer. Once you have all your visual and audio assets gathered, begin to piece the material together for your digital story with the video-editing software.

Digital Storytelling Prompts:

- For AI/AN readers:
 - What are the ways you see your ancestors' or family members' boarding school experience impacting you or your children?
 - What does healing look like for my family/clients/community?
- For non-Native readers:
 - What does holding space for my clients or students look like?
 - When I show up for my clients in a good way, but I am not sure what to say or do, it feels like ...

Examples of digital stories:

- Barbara Aragon (Laguna Pueblo, Crow, French-Canadian), "[Seal Woman](#)"
- National Indian Council on Aging, Inc., "[Cycle of Life: Native Elder Bikes to Wellness](#)"

Further information on creating digital stories:

- [Share Your Story: A How-to Guide for Digital Storytelling \(SAMHSA\)](#)
- [Digital Storytelling in 5 Steps \(Youth Engaged 4 Change\)](#)
- [Digital Storytelling Introduction \(SAMHSA\)](#)

Historical Impacts

“[My grandmother] was farmed out to a doctor’s family in Portland [Oregon] as a maid and housekeeper from the boarding school. I wonder what she wanted to be before boarding school. What were her dreams? They were all just taken from her.” – Gary Neumann, CPS (Salish)

Early in the 19th century, the federal government recognized the importance of the Indian family unit (U.S. Department of the Interior, 2022). For nearly 500 years, breaking apart Native families was a goal of the federal Indian Policy of Assimilation. In 1928, the Secretary of the Interior reported that the policy did not assimilate Native people, but it did destroy Native families.

“This worst of its features still persists,” the report said, “and many children today have not seen their parents or brothers and sisters in years.”

The Indian boarding school system continued breaking apart families for 41 years after that report was published. The destructive effects of this program continue to influence AI/AN families today and, without adequate measures to heal intergenerational trauma, will extend to future generations.



“Without griefwork—without a voice—trauma is passed from one generation to the next.” –Jane Middleton-Moz, MSCP

The federal Indian boarding school program was part of a broader system of cultural genocide toward AI/AN people. The school system separated children from family, culture, and language while a broader program of reservations and territorial dispossession removed entire tribes from the land and environment their culture was built on. Early forced-removal policies shuffled AI/AN people of distinct and different cultural identities together as an intentional effort to break down cultural identity (Dippel, 2014). Later, federal policies forced Native people away from their families and into urban areas (Walls et al., 2012).

In many AI/AN tribes, children learned about their world from their families, not from school. Kinship systems for the Cheyenne, for example, are how children learn traditional values of respect, reciprocity, and balance (Killsback, 2019). The great diversity of AI/AN people in the U.S. together hold a vast body of knowledge about the environments they have had a relationship with since time immemorial. And many of these relationships were purposely destroyed by federal programs of forced removal.

Centuries of disruption still impact the daily lives of AI/AN people in the United States. Trauma, like knowledge, is often passed on to the next generation. This builds up, and shows up, in many ways for AI/AN people today.

A Brief History of Federal Indian Policy

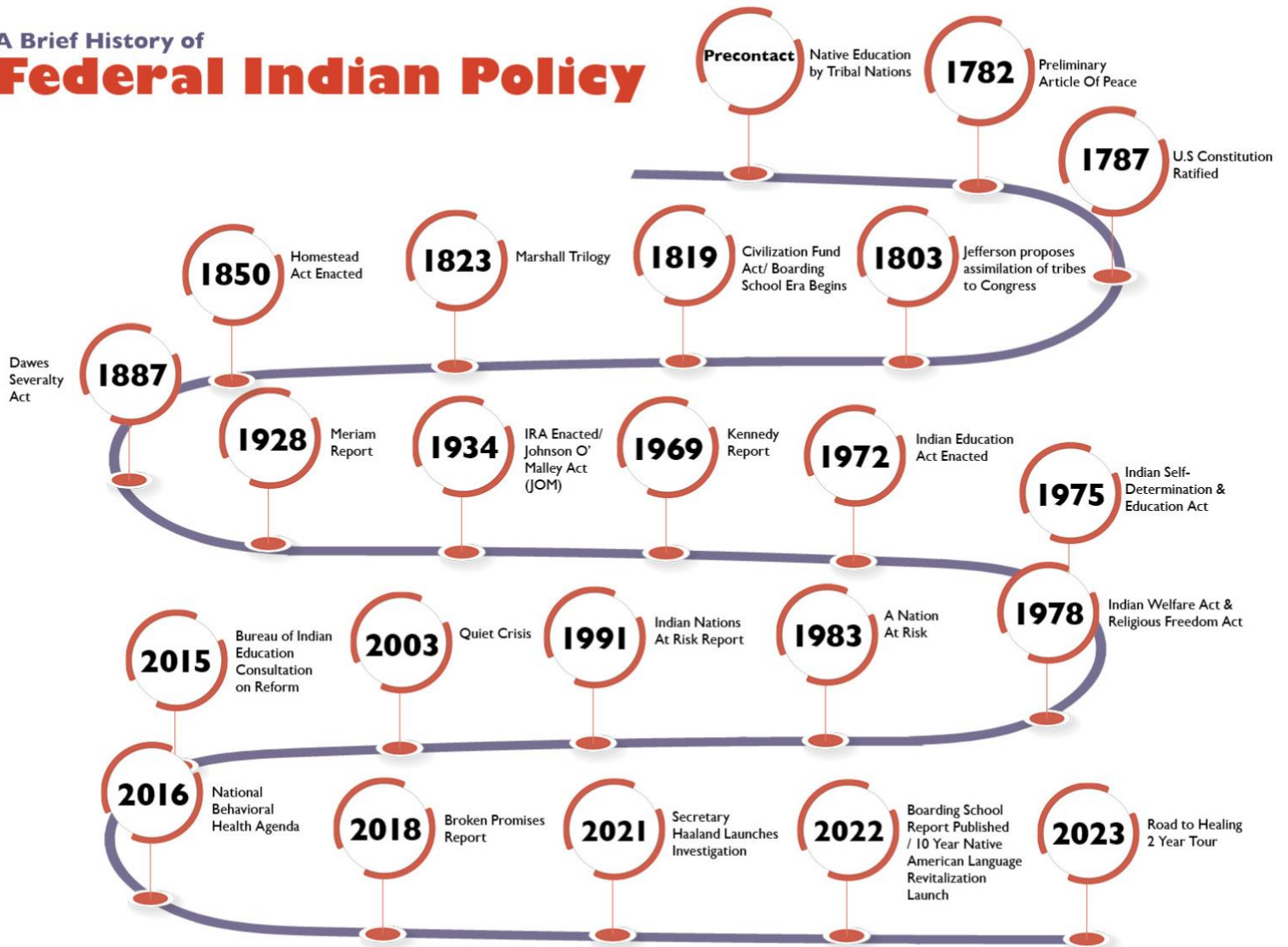
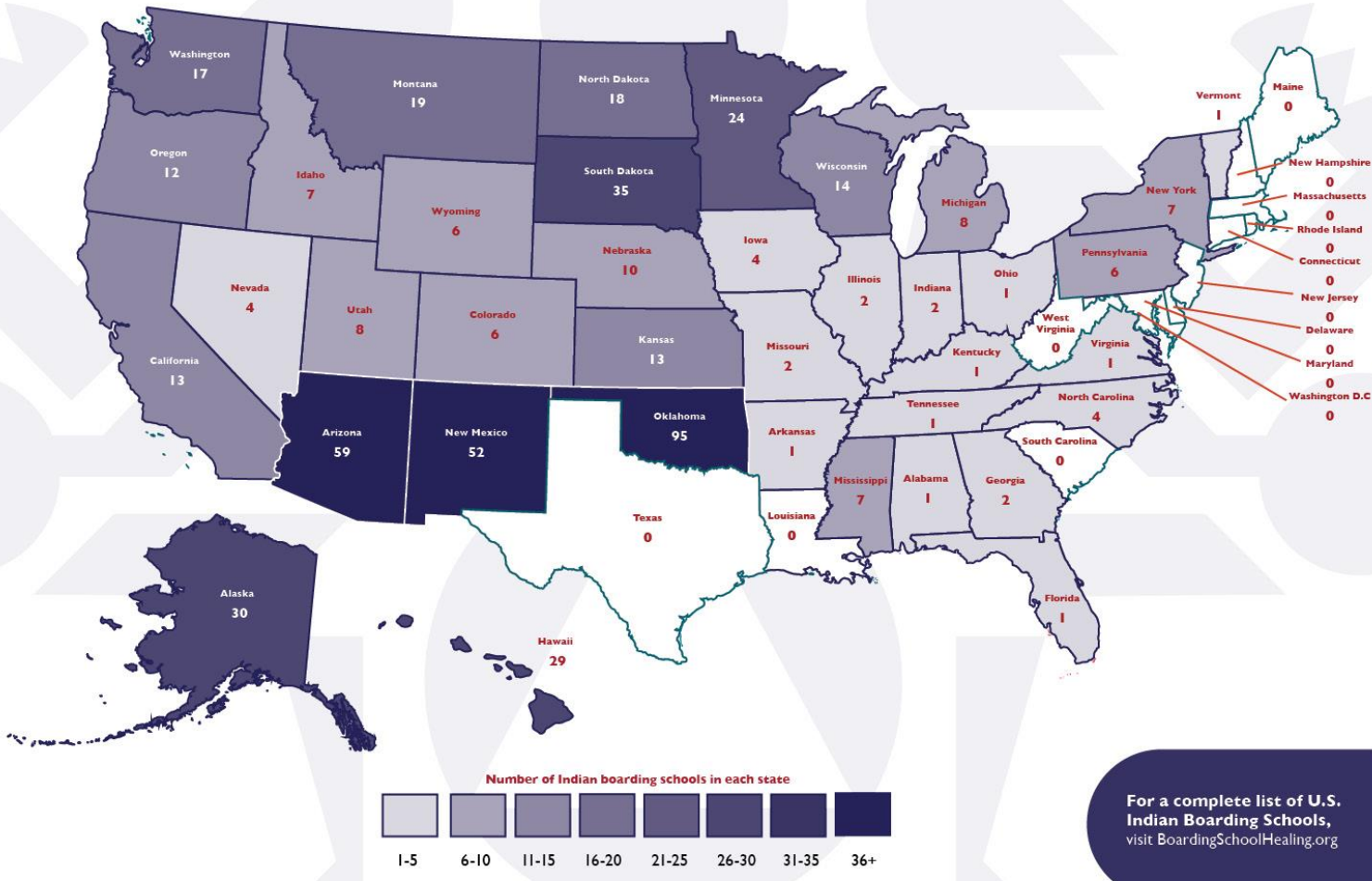


Figure 4. A brief history of federal Indian policy

U.S. Indian Boarding Schools



National Native American Boarding School Healing Coalition. (2023). Indian boarding schools in the United States. Minneapolis, MN: National Native American Boarding School Healing Coalition

Figure 5. Map of U.S. Indian boarding schools

Indian Land Cessions

From first contact to today, tribes and nations across the U.S. have experienced land loss by way of western expansion.

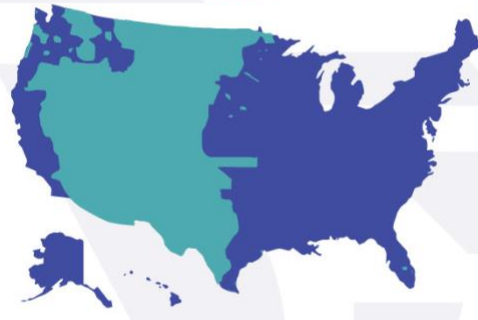
Precontact



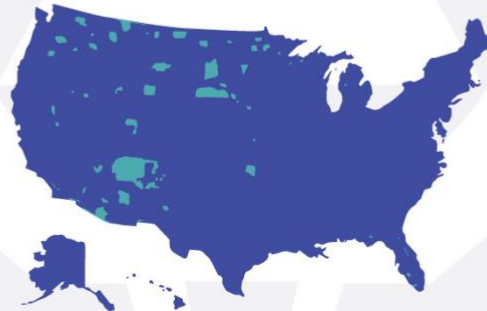
1784



1860



Present-Day Indian Reservations



National Native American Boarding School Healing Coalition 2020.

Figure 6. Distribution of U.S. Indian Reservations, 1784–2020



Figure 7. Native children looking at the land with an adult

The Present

Current Status of U.S. Indian Boarding Schools

The legacy of forced assimilation continued on through the foster care and adoption systems. In 1958 the BIA launched the Indian Adoption Project, which placed AI/AN children with urban White families (Lyslo, 1961). The BIA and the foster care system removed as many as 35% of AI/AN children—often from intact families—and placed them in White families with no connection to AI/AN culture (Johnson, 1999; Jones, 2007).

In the 1970s, people began to recognize this practice as forced assimilation. They also began to see that AI/AN children were healthier in AI/AN families, with less risk of behavioral and mental health problems than their counterparts in the foster care system who were disconnected from their cultures (Austin, 2009). In 1978, Congress passed the Indian Child Welfare Act (ICWA), which recognized a tribal government's jurisdiction over tribally affiliated children both on- and off-reservation, in addition to specifying a preference for them to be placed with other AI/AN families (Office of the Federal Register, 1978). Several lawsuits have challenged ICWA since 1978, including *Haaland v. Brackeen*, a 2018 lawsuit that went to the Supreme Court, which in 2022 upheld the rights of tribes to place AI/AN children in AI/AN families.



AI/AN children are still removed from their families at disproportional rates. AI/AN children are up to four times as likely to end up in foster care as compared to non-AI/AN children. Additionally, only 38% of AI/AN children are placed in care with kin, and 52% of the children in the foster care system are adopted by non-Native families (Disproportionate, 2021 and Casey Family Programs, 2022).

The BIE is a division of the BIA under the U.S. Department of the Interior that provides culturally relevant education services and support to BIE-funded schools.

It is important to consider the isolation these students felt while in boarding school. Unlike today, they did not have access to cell phones or social media to keep in touch with loved ones back home. The only way to communicate was through letters, many of which went unanswered. The isolation from family and culture led many children to believe they were not wanted or even forgotten. This cultural estrangement has reverberated through generations and is something Native people are still grappling with today.



As of 2020, the BIE provided education services to 47,000 students across nearly 200 elementary and secondary schools, many of which are directly controlled by tribes and tribal school boards. While only 24 of the BIE-funded schools remain residential (U.S. Department of the Interior, 2023), the intergenerational impacts of boarding schools persist in AI/AN life.



Poetry

Poetry serves as a creative and therapeutic medium for individuals navigating grief and trauma. Through its unique ability to distill complex emotions into words and imagery, poetry offers a healing process that can be profoundly cathartic and transformational. Using the prompt below, write a poem, spoken word, or rap.

Remember that poetry does not have to rhyme. Rather, focus on communicating your feelings through metaphor and meter/rhythm.

Poetry Prompts:

- When I focus on the strengths of the people who experienced boarding schools and what they and their families have overcome, I ...
- If “healing” was a geological feature, what would it be?
- What is the shape of trauma? Are its edges hard, soft, round, jagged? Does it change when you touch it? Does it change over time?

Current Impacts

“Boarding schools impacted me, my family ... I carry that trauma with me. All that trauma is handed down, the cultural loss, missing some of those things from the ‘normal human toolkit’... I want to talk about the experiences, understand the conscious choices my grandpa made that effected my uncles, aunties, and frankly even my children.” – Eric Buffalohead, PhD. (Ponca Tribe of White Eagle), Chair of American Indian, First Nations, and Indigenous Studies, Augsburg University.

Collective identity is an important aspect of resilience. Feeling a strong sense of one’s membership in a group gives individuals a source of strength (Steffens et al., 2017). The identities of AI/AN people have been under attack for centuries, and health systems are just starting to acknowledge those impacts.

Current Impacts of Indian Boarding School

The Federal Indian Boarding School era is over, but *the patterns of abuse are not.*

American Indian and Alaska Natives have higher rates of:

- Suicide
- PTSD
- Violence
- Alcohol-related deaths
- Drunk driving accidents
- Substance use and dependence

Native children are

2x

as likely to experience serious psychological distress

3x

as likely to be in foster care

In Minnesota, that number jumps to 15x (NICWA, 2021)

Native women are

2x

as likely to be **raped**

3x

as likely to be **murdered**

More than

4 in 5 Native women

experience **violence** in their lifetimes

More than

Half

have experienced **sexual violence** (Rosay, 2016)

5,712

reports of missing American Indian and Alaska Native women and girls in 2016, but only 116 cases were filed in the Department of Justice federal missing person database.

Figure 8. Current Impacts of Indian Boarding Schools



Center culture on the pathway to health. This approach recognizes tribal sovereignty and self-determination. “Indigenous culture as treatment addresses not only physical and mental health disparities but also accounts for structural issues of inequality and policy injustices, medical discrimination, marginalization, and exclusion” (BlackDeer, 2023).

Trauma and Its Impacts

The Difference Between Grief and Trauma

Grief and trauma are two distinct yet related experiences that can have a profound impact on individuals and communities. Grief is a natural response to loss, while trauma is a response to deeply distressing or life-threatening event(s). Dr. Gabor Mate explains that “trauma is not what happens to you, it’s what happens inside you as a result of what happened to you” (Bramley, 2023). Intergenerational trauma theory posits that trauma can affect subsequent generations if attachment injuries remain unaddressed and untreated (Ringel, 2005).

For survivors of Indian boarding schools in the United States, both grief and trauma are commonplace. The forced removal of AI/AN children from their families and communities; the loss of culture and language; the physical, emotional, and sexual abuse endured; and the many children who died at the Indian boarding schools all contribute to intergenerational group trauma—grief is the natural response to these sustained harms and losses. Heart et al. (2011) describes historical unresolved grief as “the profound unsettled bereavement resulting from cumulative devastating losses, compounded by the prohibition and interruption of Indigenous burial practices and ceremonies.” Without healing, the destruction of this cultural identity is likely to impact future generations (Haskell & Randall, 2009).

To support children and families in regaining their cultural identity, remind them there is more than one way to begin their journey. They can start connecting through public events like ceremonies, powwows, traditional art, literature, film, social media, or through AI/AN service providers.



The legacy of the Indian boarding schools is marked by profound and enduring historical trauma, similar to the experiences of asylum seekers, refugees, Holocaust survivors, and others forcibly relocated. For some, forced removal from family and community and loss of cultural ties resulted in a profound sense of alienation.

Additionally, those who research AI/AN communities have long identified cultural discontinuity as a contributing factor to the lower graduation rates of AI/AN students (St. Germaine, 1995). Newbreast and Brave Heart (2000, 2011) describe historical trauma in terms of a persistence of cultural shock as a result of forced assimilation, which in turn creates negative self-identify, learned helplessness, and self-sabotaging behaviors.

Due to these long-term impacts of the boarding schools, Native people may experience the following:

- Feeling like strangers to their own cultures and languages
- Feeling their identities have been reshaped by their trauma
- Loss of a sense of belonging
- Having poor long-term health outcomes
- Disproportional representation in the child welfare and special education systems

The trauma caused by adults at the boarding schools also impacted survivors' ability to parent. Instead of experiencing traditional parenting, children in the boarding schools learned a detached parenting style that, when applied to the next generation, perpetuated their trauma. Researchers found that survivors of the boarding schools tended to have harsh parenting styles, trust issues, and difficulties forming relationships with their children and families (Olson & Dombrowski, 2019).



Parents with family histories disrupted by the boarding schools or the child-welfare system benefit from parent education that models culturally relevant parenting strategies promoting family and community well-being.

Activity:

Reflection questions for Indigenous readers

- How do my ancestors' or family members' boarding school experience(s) impact me or my children?
 - How do I think this has manifested generationally?
- Who are some other people I can talk to about my family's boarding school experiences?
- What supports do I have or need? (Please see Other module for emergency resources if you are feeling you need immediate assistance.)

Unresolved grief and trauma can have lasting effects on people's lives. Survivors may struggle with:

- Depression
- Anxiety
- Substance-use disorder (SUD)
- Post-traumatic stress disorder (PTSD)
- Complex post-traumatic stress disorder (C-PTSD)



Graphic adapted from FCSS Calgary Aboriginal Research Brief #6, 2014

Figure 9. Root causes of intergenerational trauma

As many treatments for PTSD focus on addressing a single, traumatic event, the diagnosis might not adequately reflect the long-term symptoms that persist after prolonged, multigenerational abuse experienced within the Indian boarding schools.

For AI/AN people, such trauma is often compounded by ongoing oppression and the legacy of colonization. Therefore, although it is not yet listed in the DSM-5, C-PTSD—a type of PTSD resulting from ongoing, repeated trauma—may be a more appropriate diagnosis for boarding school survivors (Bellamy & Hardy, 2015).

Decolonizing the healing process for AI/AN people who have experienced grief and trauma is essential. AI/AN healing practices and traditional knowledge systems offer pathways to address

the complex trauma of boarding schools. These approaches emphasize holistic healing, community support, and reconnection to cultural identity.

Impact of Trauma on Brain Development

Trauma physically reshapes the brain (van der Kolk, 2014). Early childhood trauma, in particular, is associated with cognitive impairment, psychiatric disorders, and poor adult functioning (Bücker et al., 2012). Children exposed to adverse childhood experiences (ACE) exhibit changes in the developing brain regions responsible for learning, memory, and emotional regulation (Anda et al., 2006). In a 2020 study, the average ACE score among AI/AN people was 2.32 points higher than those identifying as White (Giano et al., 2021). The historical trauma of removal, genocide, and cultural oppression contributes to this disparity.



Figure 10. Native man standing in front of a building

Experiencing multiple ACEs can also increase the risk of developing PTSD (van der Kolk, 2014). Symptoms include flashbacks, nightmares, and hypervigilance, as traumatized people are often subconsciously scanning for threats. This constant fight-or-flight response impedes both social interaction and learning, and can often result in a misdiagnosis of attention deficit disorder or other psychiatric conditions. It is important to note that psychotropic medications are frequently used to treat children with trauma who are incorrectly diagnosed with bipolar or mood dysregulation disorder (van der Kolk, 2015). The psychotropic drugs used to treat these disorders, when given to misdiagnosed children, can interfere with relationships and development of age-appropriate skills (van der Kolk, 2015, p. 228). Professionals should carefully consider the potential risks and benefits before prescribing these medications to children who have experienced trauma.

Additionally, the persistent effects of trauma on the brain can cause long-term disruption to the norepinephrine and cortisol systems, affecting other vulnerable neural structures (Bremner, 2006). Taken together, these impacts can lead to heightened stress responses that contribute to long-term physical and mental health problems, including cardiovascular disease, depression, and anxiety (American Psychological Association, 2023).

Activating Latent Trauma

Trauma can have long-term effects on individuals, disrupting their ability to regulate internal states and leading to feelings of helplessness. When exposed to reminders of their trauma, individuals may exhibit retraumatization behaviors, such as hyperarousal or dissociation. Even professionals are often surprised at how minimal stressors can activate major trauma responses (van der Kolk, 2014; Perry et al, 1995).



Educators, medical professionals, and behavioral health providers should be sensitive to environmental cues that may cause a reaction from a child who has experienced trauma. By anticipating difficult times and providing support, professionals can help to create a safe and supportive environment for children and families who have experienced trauma.



Trauma responses vary from person to person. Creating a safe space for open communication about potential activators is crucial to avoid re-experiencing trauma. Possible accommodations can include, but are not limited to, actions such as warning participants before anticipated loud noises, asking for permission to physically touch someone, and using calm voices.



Figure 11. Child and educator

How Trauma Shows Up in the Classroom

Trauma's Impact on Parent-Teacher Relationships

Historical boarding school trauma has had lasting impacts on the family relationships of AI/AN people and their ability to participate in Western educational institutions. For example, the way Native children were treated at the federal boarding schools may make students reluctant to engage in a classroom environment.

Many of today's AI/AN parents and grandparents were forcibly removed from their families and communities and sent to boarding schools, where they often experienced physical, emotional, or sexual abuse, or neglect. These experiences may make families uncomfortable about entering a school setting so closely tied to their traumatic experiences. Additionally, they may feel a lack of belonging due to cultural differences or a lack of community connections, which may altogether discourage a family from engaging with the community.

Reluctance to engage may also result from concerns about potential bias or discrimination. Negative attitudes toward AI/AN people persist among educators and other professionals, and microaggressions often occur in schools and related spaces (Johnston-Goodstar & VeLure Roholt, 2017). A recent study reported that 98% of Native young adults experienced microaggressions on a daily basis (Jones & Galliher, 2015).



Figure 12. Native youth giving a bracelet to an elder

It's no wonder, then, that parents may fear that their children will experience the same racism and marginalization they endured, and that any attempts to address the issue would only expose them to further trauma. In addition, parents who had negative experiences at school may have difficulty trusting teachers and administrators, making it difficult for them to form relationships with school staff and participate in their child's education (Evans-Campbell, 2008).

Activities:

Reflection Questions:

- *Do I interrupt racist conversations and jokes when I hear my friends or colleagues talk that way?*
- *Do I actively seek to understand how I participate in both intentional and unintentional racism?*
- *Do I actively seek to educate myself about the experience of racism?*

These questions were adapted from the Anti-racism Behavioral Inventory (Pieterse et al., 2016).

Educators and administrators can take several steps to build relationships with families with trauma histories. Staff should seek training on the history of Indian boarding schools and their impact on families, and then, with the engagement and guidance of local tribes, develop culturally relevant programs and curricula. School administrators should create opportunities for Native parents to participate in school decision making. By taking these steps, school communities can help to build trust with parents and create a more positive and supportive environment for all students and parents.



Nothing About Us Without Us. Non-Native educators and administrators must include AI/AN students, families, and tribal communities in the development of their culturally relevant programs and curricula. This is a crucial step in ensuring the material is accurate, culturally sensitive, and without stereotypes or microaggressions that might retraumatize AI/AN students.

Processing Trauma

Trauma can significantly impact a child's development, both cognitively and emotionally. Children who have experienced trauma are more likely to have lower measures of cognitive functioning and motor and language skills (Prasad et al., 2005). Students with a history of maltreatment often exhibit learning and memory impairment (D'Andrea et al., 2012; Flaherty et al., 2006; Taylor & Siegfried, 2005). Even after the initial trauma has passed, reminders can cause a student to experience an intense, hyper- or hypo-aroused state once again, which gets in the way of learning (Shalka, 2015). Students who have experienced trauma are often referred for special education services, and get misdiagnosed with conditions like ADHD, oppositional defiant disorder, bipolar disorder, reactive attachment disorder, or depression (Fratto, 2016; van der Kolk, 2005).

Activities:



Dramatic Storytelling

Dramatic storytelling as a model for trauma-informed care aligns with the principles of safety, trust, empowerment, and empathy. It provides a structured and therapeutic avenue for trauma survivors to share, process, and heal from their experiences while fostering a sense of community and understanding. When conducted by trauma-aware facilitators, dramatic storytelling can be a valuable tool in supporting individuals on their journey toward recovery and resilience.

Dramatic Storytelling Prompts:

- If “fear” was an animal, what animal would it be? If “healing” was an animal, what animal would it be? How would healing interact with fear?
- Recall a time when you were sad and what steps you took to resolve your sadness. Who helped you in processing your emotions? What words or actions did they share with you?
- Imagine a healing-centered classroom; how do the students and teacher feel and exist in this space?

Role of Educators

With proper training, educators can be powerful allies during team meetings and help children access necessary resources outside of class. When schools provide a safe, stable environment to students who have experienced trauma, they significantly aid the healing process (Brunzell et al., 2015).

Social Emotional Learning in the Trauma-Informed Classroom

Social and Emotional Learning (SEL) describes the process by which we learn to productively interact with others. This knowledge, skills, and attitudes allow young people and adults to develop healthy identities, manage emotions, achieve goals, display empathy, establish and maintain supportive relationships, and make responsible and caring decisions (*Fundamentals of SEL*, 2023). To support students' needs, SEL presents five core competencies:

1. Self-awareness
2. Self-management

3. Responsible decision making
4. Relationship skills
5. Social awareness



Educators should:

- Advocate for appropriate support and services and make sure students receive them.
- Create a safe and supportive classroom environment that allows students to feel comfortable and safe while learning.
- Build a solid relationship with their students and their families.

Safe and supportive student-teacher relationships are foundational because relational trauma heals within safe relationships. Additionally, when students come out of a trauma response, they can learn more effectively. Understanding the impacts of students' trauma, therefore, is necessary for educators to design the support and interventions that students need to learn the five core competencies of SEL.

How students act out depends on their age, the timing of their trauma, and many other factors. The following list describes some of the most common responses at each educational stage, but every student is unique, individual, and processes trauma in their own way.

Elementary

- Increase in stomach aches, pain, or headaches
- Changes in or inconsistent behavior
- Over- or under-reacting to sudden movements, touch, or loud noises
- Poor concentration
- Inconsistent school attendance

Middle and High School

- Self-consciousness
- Shame and guilt
- Self-destructive behavior
- Changes in interpersonal relationships
- Changes in school attendance and academic performance

To create a supportive and healing-centered classroom, educators can employ some of the following strategies:



- Provide frequent breaks (including leaving class to seek support from a counselor or nurse)
- Break large assignments into smaller, chunked tasks
- Create an environment in the classroom that is less likely to cause the child to have a reaction (e.g., think about the lighting, noise, clutter)
- When possible, prepare the child in advance for situations that may be challenging and provide additional support (e.g., active shooter and fire drills)
- Provide and teach task management strategies (National Child Traumatic Stress Network Schools Committee, 2008)



“Some of our most important work with student survivors is simultaneously simple and complicated—bearing witness to their experiences. Being present for student survivors and the pain and challenges they endure can be difficult work, yet through that process, we are also holding space for the possibility of resilience to emerge and students to be able to fully participate as engaged learners” (Shalka, 2015).

Activities:

Reflection Questions:

- *Have I asked my students and their families about what supports they need to fully engage with our school?*
- *Have I made any assumptions about behaviors I observe in the classroom?*
- *Do I have the proper training to understand how a history of trauma may impact my students learning or be misinterpreted as a disability?*
- *Have I connected with the people in my building or district who can be part of our trauma informed-healing centered support team?*
- *Have I connected with a cultural liaison, so I can become more informed on how to connect with my AI/AN students?*
- *Is my curriculum culturally relevant?*
- *Do my classroom materials reflect my student population?*



Collage

Creating a visual representation by way of collaging, painting, or sketching is a powerful way to process complex emotions and foster healing through visualization. Creating a collage will require magazines and pictures, a

posterboard, a pair of scissors, and a glue stick. Cut up the magazines and pictures and keep the images that resonate with you. Place the images on the posterboard and begin to glue them down. This is also a great exercise to use within the classroom with students of all age levels.

Collage Prompt:

- A trauma-informed and healing-centered classroom looks like ...
- A trauma-informed and healing-centered community looks like ...

Impacts of Trauma Later in Life

One study on ACEs and premature death concluded that people with six or more ACEs tended to die nearly 20 years earlier than the general population (Brown et al., 2009). Additionally, as an individual's ACE score increases, so do other related risks, including issues with moods, physical symptoms, SUD, memory, sexual health, anxiety, smoking, obesity, and sleep issues (Anda et al., 2006).

Substance Use Disorder

The intergenerational impacts of boarding school trauma have also contributed to disproportionately high rates of SUD among AI/AN people (Chansonneuve, 2007). According to Dr. Gabor Mate, "addiction begins as an attempt to induce feelings that we were biologically programmed to generate innately and would have—if unhealthy development hadn't got in the way" (2022, p. 232). When viewed through the lens of how trauma constantly disrupts AI/AN children's development, along with the persistence of systemic inequalities toward AI/AN people, the high incidence of SUD is an unsurprising result. The opioid epidemic has been particularly devastating to AI/AN communities, as overdose deaths have increased more than fivefold over the past twenty years (*Opioid Overdose Deaths*, 2023).

Visit [StopOverdose.org](https://www.stopoverdose.org)

*Information on signs of an overdose.
Instructions for obtaining and using naloxone (Narcan).
Resources for providers and community members.*

Challenged Relationships

People who have experienced trauma may also have difficulty forming and maintaining healthy relationships. They may mistrust others, have difficulty communicating their feelings, and experience the “fight, flee, fawn, or freeze” trauma response.

Strong Hearts: Native Helpline

1-844-7NATIVE (762-8483)

Confidential domestic and sexual violence helpline for AI/AN, offering culturally appropriate support and advocacy.

Houselessness

Trauma and houselessness create a vicious cycle: while trauma acts as a risk factor for houselessness, houselessness also increases the risk of additional trauma (Buhrich et al., 2000; Robinson, 2014). In a nationally representative survey on houselessness, approximately 10% of AI/AN families with children aged 13–17 reported youth houselessness or runaway experiences, and AI/AN young adults were three times more likely to be houseless than their White, non-Hispanic peers (Mortan et al., 2019).



Protective factors for AI/AN youth include personal wellness, positive self-image, self-efficacy, family and non-familial connectedness, positive opportunities, positive social normal, and cultural connectedness.

Unemployment

People who have experienced intergenerational trauma may have difficulty finding and keeping employment. They may have difficulty concentrating, following instructions, and working with others. They may also be more likely to experience anxiety and depression, making it difficult to function at work.

Suicide

While suicide is discussed in other areas of this toolkit, it is important to stress the close connection between self-harm and untreated trauma. (Afifi et al., 2007). [WeRNative](#) provides culturally appropriate support to people at risk of suicide, an especially important consideration when addressing boarding school trauma.

Crisis Text Line

Text “Native” to **741741**

Crisis counselors are available 24/7 for confidential support and resources.

Other Crisis Lifelines

988 Suicide and Crisis Lifeline

Dial 988

Strong Hearts: Native Helpline

Dial 1-844-7NATIVE (762-8483)

Trans Lifeline

Dial (877)565-8860

The Trevor LifeLine

Dial 1-866-488-7386

Decolonizing Mental Health and Substance Use Disorder Treatment

Most commonly available treatments do not help AI/AN trauma survivors build healthier relationships with their communities and families. Because C-PTSD is often caused by relational trauma, any healing must occur in the context of relationships. Rather than healthy relationships being a result of successful treatment, teaching survivors to form, manage, and heal community relationships is an integral part of the treatment itself.

Post-traumatic Growth

While trauma is rarely one’s preferred method of personal growth, it does often result in increased resilience and transformation. This knowledge can give providers and families hope, knowing that survivors may ultimately form a deeper appreciation for life, develop new strengths and stronger relationships, open themselves to new possibilities, and deepen their relationship with their spirituality (Collier, 2016).



Culture is prevention. Use traditional practices in recovery and ongoing therapies with your clients. Traditional drumming has been used for AI/AN people with substance use disorders and is a promising healing activity when coupled with traditional SUD therapies (Dickerson et al., 2012).

Activities:

Reflection Questions:

- *Do I have the skills necessary to help my clients or students who are experiencing the long-term impact of trauma?*
- *If not, how can I build a network of other providers to refer my clients/students to when needed?*
- *Am I cautious to not ask questions that make my clients/students reexperience their trauma?*
- *Do I let my clients/students guide the conversation, so they only disclose what is comfortable to them and necessary for our work together?*



Traditional Music

Traditional music, singing, and drumming hold profound significance for AI/AN people as vessels for prayer, community and family connection practices, and healing tools when confronting trauma. These cultural practices serve several important purposes:

- **Cultural reconnection:** Boarding schools aimed to erase cultures, languages, and traditions. Traditional music offers a means to reconnect with cultural roots, fostering a sense of identity and belonging that was forcibly stripped away.
- **Spiritual healing:** These cultural practices often have deep spiritual significance. Drumming, for instance, is a practice used to communicate with the ancestors and the spirit world. Engaging in these activities can help individuals find inner peace and spiritual healing.
- **Community and support:** Traditional music and drumming are communal activities, fostering a sense of unity and support among survivors and their communities. Coming together in song and dance can create a supportive environment for sharing experiences and healing collectively.
- **Emotional expression:** Music and singing provide a means to express complex emotions that may be difficult to articulate otherwise. Music allows survivors and their descendants to release trauma in a safe and culturally relevant way.
- **Resilience and empowerment:** Engaging in these practices can be an act of resilience and empowerment by reclaiming and practicing the traditions that were meant to be erased by forced assimilation. It demonstrates the survival of AI/AN cultures despite centuries of oppression and serves as a source of strength for individuals and communities.

If drumming or traditional music groups are not accessible, try integrating traditional music from your local communities into your classroom, office, or medical practice.

Resources

[Child Trauma Toolkit for Educators](#)

[Culture is Prevention: SAMHSA Native Connections](#)

The Opioid Crisis: Impact on Native American Communities

The Healing of the Canoe Curriculum: A life skills and SUD-prevention curriculum for tribal youth, designed to leverage a tribal community's unique tapestry of traditions, beliefs, values, and stories to help Native youth gain both a deeper sense of belonging and a framework for success in life.



Figure 13. Native people performing a traditional dance

The Future

Impacts

"We have the capacity to heal if we have the right structure and supports. We don't have to hide it." –Aaron Payment, EdD, EdS, Med, MPA (Sault Tribe of Chippewa Indians).

As the Road to Healing Reports are released, it is important to note that retraumatization may occur in your communities. Health care providers, tribal administrators, and educators should be prepared for potential influxes of patients, students, and community members in crisis. Increase staff trained in trauma-informed care during the days and weeks surrounding the release of the Road to Healing Reports and encourage staff to practice self-care while assisting community members in crisis.



The first step toward change is awareness. Right now, the public-education system acknowledges neither the U.S. government's acts of genocide nor its policies of forced assimilation (National Congress of American Indians, 2019). The upcoming *Road to Healing* report, commissioned by Secretary of the Interior Deb Haaland, will be an important step to engaging with this history and addressing its continued influence on the AI/AN population. But it is only the beginning. A new wave of stories of abuse from the survivors of Indian boarding schools and their descendants have already emerged from the report's initial listening sessions (Rickert, 2023).

Activities:

Reflection Questions:

- *Do I provide space in my practice for my clients/students to be the experts in their own histories?*
- *Have I created a support system to help me navigate the emotions that come up for me when I am learning about intergenerational trauma and harmful policies created by my country's government?*
- *Do I look for AI/AN ways of knowing and AI/AN scholars when I am seeking out information to better support my AI/AN clients/students?*



Dancing

Traditional dancing can play a significant role in healing from intergenerational trauma. Interwoven with history, spirituality, and community, traditional dances offer a path toward reconnecting with one's root and fostering emotional and psychological well-being. Traditional dancing serves as a powerful tool for healing in several ways:

- **Cultural reconnection:** Participating in these dances helps individuals reconnect with their culture, providing a sense of identity and belonging.
- **Spiritual connection:** Dancing allows participants to connect with their spirituality, offering a sense of purpose, inner peace, and a way to address the spiritual wounds inflicted by historical trauma.
- **Community support:** Traditional dancing is a communal activity and fosters a support system where individuals can heal collectively, share their stories, and receive emotional support from one another.
- **Resilience building:** Dancing requires discipline, commitment, and perseverance, and can serve a vital role for healing from trauma as practitioners build resilience and develop a positive self-image.

Is there an opportunity to integrate traditional dancing into your practice, office, or classroom? Are there community events or clubs in order for community members to connect with this integral part of AI/AN culture and community?

Resources

[Qungasvik](#): A Model for Promoting Reasons for Life and Reasons for Sobriety in Yup'ik/Cup'ik Communities created by the Center for Alaska Native Health Research.

Resilience and Brilliance


The U.S. government has tried for more than 500 years to erase the history and culture of the AI/AN people. Currently, it recognizes 574 different tribes in the lower 48, Alaska, and Hawaii, while states recognize an additional 200. Almost all of the people from these tribes are now English-speaking Americans, but even after a cultural genocide they remain Native, with unique and resilient languages, cultures, and traditions. The resilience of these tribes comes in part from three things: language revitalization, cultural reclamation, and traditional and contemporary art.

Language Revitalization

Congress knew early on that language was an important part of how Native people identified with their culture (*Indian Education*, 1969). By forcing children to speak only English, and punishing them for speaking their language, many children lost their Native language. The U.S. government implemented these strategic measures to force assimilation and make it easier to take AI/AN people's land away—the places where they spoke their Native language. However, today, 350,000 people speak more than 175 AI/AN languages in the U.S. More than 170,000 people speak *Diné Bizaad* (Navajo) alone. (U.S. Census Bureau, 2011).

While many Native languages persist even after the attempts to eradicate them, many are now lost or spoken by only a few tribal elders. Every year more tribes work on reviving and restoring their languages and now the U.S. government is supporting these efforts. The Biden Administration is working on a 10-year plan to revitalize AI/AN languages in the U.S. and many tribes are already bringing language back using old [recordings from anthropologists](#) and input from [linguists](#).

The reports from Congress in the 1800s were right—language is a huge part of Native Americans are as people. AI/AN languages are more than just a tool for communication, they are a container for thousands of years of identity. They transmit a unique worldview and culture.



Tribal communities with many Native language speakers have lower suicide rates (Ozbolt) and tribal communities with language and cultural education programs have higher high school graduation rates (Meza). Speaking a unique language, and being a part of bringing them back, builds culture as a tribe. And the resilience in preserving and revitalizing language is a big step toward healing from trauma (Marshall, Antoine).

Activities:

Reflection Questions:

- *Have I asked my clients/students about their preferred language?*
- *Have I checked my bias and reactions to clients/students who don't speak "perfect" English?*
- *Do I see speaking multiple languages as a strength and understand the importance of cultural connections?*
- *Do I know of language programs in my community that support AI/AN language learning?*



Ceremony

"The most powerful forms of healing are wrapped in ceremony." – John Bird, (Blackfoot) Substance Abuse & Suicide Prevention Facilitator

Ceremonies are not mere cultural practices; they serve as a crucial pathway toward healing, reconciliation, and restoration of identity and spirituality for AI/AN people. They help reconnect individuals with their culture, facilitate storytelling and spiritual connection, provide a supportive community, and promote emotional expression. Whether it is the sweat lodge ceremony, the powwow, or the potlatch, these practices reinforce the importance of cultural identity and serve as a powerful antidote to the erasure of the boarding school system.

As community leaders and providers, you have a unique position to facilitate intergenerational connection and cultural knowledge sharing. Are ceremonies practiced in your community? Which ones, and who leads them? Do young people have access? Is there a community calendar that lists seasonal ceremonies? Work with your community to create these resources, and they can have powerful impacts.

Cultural Reclamation

Forced assimilation and removal destroyed cultural practices as effectively as it did language, but AI/AN people in the U.S. displayed remarkable resilience for preserving lifeways in the face of this radically changing landscape.

First foods were an important connection to culture for many tribes, but these relationships were also destroyed by colonizers. The U.S. Army intentionally culled the buffalo herds of the Plains tribes (Waltmann, 1971), Western agriculture destroyed camas bulb fields, and overfishing destroyed many salmon runs (Thompson, 2022).

But many of these relationships are healing. Salmon ceremonies, once common in coastal and river tribes, are coming back again. Buffalo herds are repopulating in the Plains. The federal government is beginning to involve tribes in the management process for wildlife habitat,

forests, and wildfire management. Relationships to plants and animals that tribes have held since time immemorial are being recognized, and those relationships build back lost culture, community connection, and physical health.



Figure 14. Native youth listening to an Elder's story

Traditional and Contemporary Art

The patterns and colors of Native art have featured in mainstream colonizer culture since the first European contact. Centuries later, traditional arts like weaving, beading, and sewing have continued to be unbroken. For many people, they are a physical connection to tradition and culture, and many tribal communities teach these skills both to strengthen tribal bonds in youth and as a path to healing.

Dance, song, and craft are often combined in traditional Native art. In the 1970s and 80s, a circuit of traditional and competitive powwows grew across the nation (Lassiter, 2005). Now, there are hundreds of intertribal powwows every year, where AI/AN people from hundreds of tribes perform expressions of traditional culture—such as the jingle-dress dance of the Navajo Nation—and explore new evolutions of the arts.

More recently, Native culture—not just the appropriated imagery—has begun to be featured in mainstream media. Artists like The Halluci Nation, who blend traditional Cree singing and dancing with modern beats, are trending on Spotify. Their music videos, which have millions of views, portray modern Native people engaged in traditional dance, and often tell stories about the challenges faced by their communities. Other popular music artists like [Supaman](#), [Tall Paul](#), and [Snotty Nose Rez Kids](#) are blending AI/AN culture with hip-hop elements, building a new, shared identity in urban Native populations.

Contemporary art also helps AI/AN people heal from historical trauma. Popular television shows such as [Spirit Rangers](#), [Molly of Denali](#), and [Reservation Dogs](#) put young AI/AN actors in front of a national audience, the latter offering a highly visible portrayal of the horrors of the residential school system. Such representation builds collective understanding both of the nation's oppressive history and how it created the contemporary reality for AI/AN people, knowledge crucial to any eventual healing.

Activities:

Reservation Dogs: Deer Lady – Discussion Guide
Season 3: Episode 3

How to use this guide: The questions below are meant to serve as prompts, not a script. Please feel free to change the language to best suit the participants in your group. We also encourage you to follow the natural flow of the conversation and only bring in additional prompts when the discussion seems to be losing steam. Please be mindful of any stress or trauma reactions AI/AN participants may be experiencing. The goal of these discussions is to move from being trauma-informed to healing-centered.

“They can’t stop you from smiling.” – Deer Lady

Deer Lady

- What do you already know about the Deer Lady (or Deer Woman) legend?
- Why do you think the writers felt that Deer Lady should be in this episode?
- Why does Bear stay safe during his time with Deer Lady?
- Did Deer Lady’s actions right a wrong? Why or why not?

General Prompts

- What emotions came up for you while watching this episode?
- What stereotypes were confronted in this episode?
- What did you learn about the role of the priests and nuns at the boarding schools?
- Why did the priest tell Deer Lady that “Most men who live like me are dead by now?”
- What questions do you have after watching? Where can you look to get those questions answered?

Prompt for Discussions with AI/AN Peoples

- In what ways can this type of media help us heal?
- What are the benefits or risks of bringing these hard conversations to more mainstream audiences?



Figure 15. Full waiting room at a Native health clinic

Frameworks for Healing

AI/AN tribal communities have long practiced community-based and traditional healing. As health care became increasingly tied to the Indian Health Services' standards of care, however, traditional healing practices became deemphasized.

That process, however, is beginning to reverse itself. Congress has authorized more flexible sorts of funding, so tribal nations are increasingly applying traditional healing practices to modern ailments under a self-governance approach.

As tribes are at varying stages of cultural and traditional reclamation, these traditional practices may be applied to a wide range of physical, mental, emotional, social, and spiritual matters.

The 2015 Tribal Behavioral Health Agenda aimed to measure the impact of trauma-informed care and traditional medicine on health outcomes (SAMHSA, 2016). Traditional practices and ceremonies are important sources of healing for many AI/AN people, despite the complex task of integrating them with modern practice. As researchers gain familiarity with a trauma-informed framework, however, new strategies have begun to emerge. Whatever the specific methods, any effective trauma-informed care begins with the reclamation of culture, language, and AI/AN ways of knowing.

Traditional Medicine Approach to Healing

While traditions vary widely across AI/AN communities, one common thread is how all healers are called to lifelong learning and practice in traditional medicine. Not only must they be steeped in culture and language, they learn to seek direction from their ancestors, as holistic herbal medicines are often passed down through the ages via oral tradition. In some cases, the physical form of these medicines is crucial, such as how some forms of aspirin were derived from an Indigenous practice of using red willow bark as medicine. Anishinabe (Ojibway, Odawa, Potawatomi) Biimaadziwin teachings include stories of Nanabush and Ducks to explain how the Creator revealed the healing properties of red willow bark.

Traditional healers may be embedded in a tribal community, or they may be supported by tribal- and behavioral-health divisions. Sometimes, they are able to treat someone right away, but other cases may require the healer to orient themselves to the particular situation, including listening for guidance from the ancestors. Often, the healers will offer a diagnosis and prescription of lifestyle adjustment, change, prayer, or contemplation in an effort to help the patient more effectively balance the competing priorities in life.

This holistic life assessment is vital to the role of traditional healing in addressing historical and intergenerational trauma, as is attunement with one's cultural heritage, language, and the wisdom of one's ancestors. By addressing the disconnection caused by removal and assimilation, these methods heal wounds Western medicine is only beginning to acknowledge even exist. While simple, this is far from easy, and tribal leaders and health practitioners face many challenges in returning to traditional cultural ways.

The Trauma-Informed Leader

If tribal leaders understand the profound loss and negative outcomes caused by forced assimilation and cultural discontinuity, then they will be able to more effectively use traditional methods to confront the loss. Many trauma-informed elected tribal leaders have begun more openly discussing the matter of suicide, for example, although in some cultures it remains a sensitive matter to speak of the deceased. But preventing suicide requires discussing suicide. On this and many other topics, engaged policy makers must secure appropriate funding and tools to deal with the crises of suicide, addiction, and overdose.

The traditional seven grandfather teachings for some tribal communities of *love, respect, bravery, wisdom, truth, honesty, and humility* may inform how these difficult conversations can build capacity for understanding and healing (Waseyabek Development Company, n.d.). While not all tribal leaders are expected to be experts in everything, all who have care and compassion for their communities stand to benefit from their understanding of trauma-informed care.

Activities:

Reflection questions:

- *How do I keep myself regulated so that I can model self-regulation for my students?*
- *What are the things that gave American Indian and Alaska Native people good health, wellness, and balance before contact?*
- *When I restore cultural activities in my family, we experience ...*

Resources

[Child-friendly Restorative Tools by Arti Mohan](#)

[Lesson Plan: Native American Boarding Schools and Human Rights](#)

[Exploring the Stories Behind Native American Boarding Schools](#)

Practices for Self-Care

Providers must have their needs met, too, if they are to serve AI/AN children and families. As the saying goes, “we cannot self-care our way out of systems of oppression.” Systemic change is required, which means we need to acknowledge our collective responsibility to ensure health and wellness in our communities.

But systemic change, although required, is slow. As that transformational work progresses, we must also build strong networks of providers and support staff to ensure that we confront the challenges together, as a community, instead of each trying to go it alone. Some tips for identifying and minimizing provider burnout are:

- Understand the symptoms of compassion fatigue and burnout
- Seek out support from colleagues or professionals
- Stay solution-focused (i.e., resist the urge to focus on past trauma(s) instead of on the possibility of healing)
- Create balance—give yourself permission to experience joy and to take breaks
- Lean into culture and ceremony
- Say no when you feel you don't have the capacity to engage at the requested level
- Build or reconnect with community.
- Take care of your physical and mental health needs
- Look for opportunities that build hope
- Connect with nature

Resources

[Compassion Fatigue: Can We Care Too Much](#) (Administration for Children and Families)

Advocacy at the Community Level

“In the end, the only thing that is going to make the change is when we go back to our culture. In good community prevention plans, they all go back to whatever the culture is.” – Anna Whiting-Sorrell, MPA (Confederated Salish and Kootenai Tribes)

Advocacy for the necessary systemic change occurs at every level, from the individual, to the neighborhood, to the community, to national initiatives such as the Federal Indian Boarding School Initiative, announced in 2021 by Secretary of the Interior Deb Haaland (DOI, 2021).

On a local scale, efforts include advocating for the return of ancestral remains, as was done by the Rosebud Sioux (Associated Press, 2021). Similar efforts have been championed by many Native tribes and organizations across the country.

These local efforts have been unified by the National Native American Boarding School Healing Coalition, which has in turn created toolkits and resources to advocate for the U.S. Truth & Healing Commission Bill. Passing this bill would authorize a full inquiry into federal assimilation policies, identify the locations of children's burial grounds at residential schools, consolidate relevant church and governmental records, provide for public hearings, and result in a final report, including concrete recommendations for reconciliation (*U.S. Truth & Healing Commission Bill Advocacy Toolkit*, n.d.).

As with many aspects of the boarding school atrocities, discussing how to advocate means confronting disturbing topics.

Community leaders should engage with how the Indian boarding schools touch almost every aspect of modern life for AI/AN people. These actions can include sending out newsletters, passing resolutions to honor victims and survivors, hosting community events and observances, and creating spaces for healing.





Figure 16. Nez Perce youth give a presentation at Orange Shirt Night

One example of how an individual can help a community heal from boarding school trauma was shown at a high school in the Pacific Northwest. Nez Perce tribal member, Jayden Leighton, a high-school senior, successfully petitioned her school to host an Orange Shirt Night during a varsity volleyball game. Her team wore special orange jerseys for the match, at which spectators were able to learn about the impacts of the Indian boarding schools.

“She is so brave and passionate,” said Jayden’s mother, Teresa. “She planned that whole event by herself—her teammates helped her to decorate the gym, and I made the flyer, but she took the initiative to get the t-shirt design, sponsor, and to sing an honor song and lead a moment of silence.” Community leaders do not have to be professionally trained, or even adults—we all can make a difference. What matters is being informed, passionate, and committed.

Some dates to consider incorporating Indian boarding school awareness activities include:

- National Missing and Murdered Indigenous Peoples Day, May 5
- Yellow Ribbon Week, the week of September 9
- World Suicide Prevention Day, September 10
- National Day for Truth and Reconciliation (also known as Orange Shirt Day), September 30
- Indigenous Peoples Day, Second Monday in October
- Red Ribbon Week, October 23–31
- Native American Heritage Month, the month of November

Activity:

Reflection questions:

- *Do I focus on individuals or the community? Why is this my focus?*
- *How do I engage with my neighbors and community?*
- *Who is in my community? Is it intergenerational, diverse, healthy?*
- *Who do I wish was in my community, and what steps can I take to get there?*
- *When I create sacred spaces for ourselves, our families, and our communities we ...*
- *Using our strengths, my community can create ...*

Appendix

Tribal Coordination of Healing

Although AI/AN communities face a daunting combination of historical and intergenerational trauma, cultural discontinuity, oppressive federal Indian policy, and the systemic issues resulting, they continue to thrive. The next step, however, is to move from understanding the context and challenge of this historical legacy and helping Native communities heal.

The CDC has offered some guidance by using social-ecological modeling to identify potential reforms at the individual, family, community, tribal, and societal levels. Below is one such model, designed to address substance-use disorders and suicide in the context of intergenerational trauma.



Figure 17. Examples of how to confront historical and intergenerational trauma (Melnick)

Structuring interventions across multiple levels could more effectively confront substance-use disorders in general, in addition to giving Native communities powerful new tools to fight the opioid epidemic. It is important to keep in mind however, given the traditional interdependence of tribal communities, these social dimensions are often blurred—a tribe is both a community and an organization, for example, and so multiple categories of intervention may apply. While

complex, these holistic solutions are crucial to successful implementation of any intervention strategy. Figure 18 illustrates some of the complex ways that influence can operate in Native communities. (Alvidrez et al., 2019).

Domains of Influence	Levels of Influence			
	Individual	Interpersonal	Community	Societal
Biological	Biological Vulnerability and Mechanisms <i>Metabolic Syndrome</i>	Caregiver-Child Interaction <i>Out-of-Indian Home Adoption</i> <i>Grandparent/Child Rearing</i> Family Microbiome	Community Illness Exposure <i>Exxon Valdez Oil Spill</i> <i>Gold King Mine Waste Water Spill</i> Hard Immunity	Sanitation Immunization Pathogen Exposure <i>Uranium and Coal Mining</i>
Behavioral	Health Behaviors <i>External Locus of Control</i> <i>Drug Preferences</i> Coping Strategies Resilience Spirituality <i>Community-mindedness</i>	Family Functioning <i>Extended Family</i> School/Work Functioning	Community Functioning <i>Collective Resilience</i> <i>Cultural Forms of Social Control</i> <i>Language Revitalization</i>	Policies and Laws <i>Termination and Relocation 1953</i> <i>Indian Self-Determination & Education Assistance Act 1975</i> <i>American Indian Religious Freedom Act 1978</i>
Physical/Built Environment	Personal Environment <i>Subsistence Activities</i>	Household Environment <i>HUD Housing Clusters</i> School/Work Environment <i>Boarding School Education</i>	Community Environment <i>Natural Resources</i> Community Resources <i>Gaming</i> <i>Tribal Commercial Enterprise</i>	Societal Structure <i>Matrilineal, Patrilineal, & Bilateral</i> <i>Systems of Descent and Jural Authority</i>
Sociocultural Environment	Sociodemographics <i>Per Capita Payments</i> Limited English Cultural Identity Response to Discrimination <i>Historic Trauma</i>	Social Networks Family/Peer Norms <i>Traditional Men's/Women's Societies</i> Interpersonal Discrimination <i>Stereotyped Threat</i> <i>Racial Prejudice</i>	Community Norms <i>Progressives and Traditionalists</i> <i>Alcohol Prohibition</i> Local Structural Discrimination <i>Boarder town Economics</i>	Social Norms <i>Hollywood Indian</i> <i>Firewater Myth</i> Societal Structural Discrimination <i>Sports Mascots</i>
Healthcare System	Insurance Coverage Health Literacy Treatment Preferences	Patient-Clinician Relationship <i>Implicit Bias</i> Medical Decision-Making <i>Cultural Construction of Health</i>	Availability of Health Services <i>Direct, Contracted, and Compacted Services</i> Safety Net Services	Quality of Care Healthcare Policies <i>Reimbursement of Tribal Healing Ceremonies</i> <i>Indian Health Care Reauthorization Act</i>
Health Outcomes	Individual Health	Family/Organizational Health	Community Health	Population Health

Figure 18. Levels of influence and their domains

Considering these factors, individually and in combination, is crucial to developing holistic, trauma-informed strategies. While certain broad patterns exist among AI/AN communities—cultural identity, manifestations of historical trauma, sociocultural attitudes toward drug and alcohol use, and the like—the tool can be applied to particular tribes, communities, or regions to provide a clearer view of the specific challenges they face. This helps ensure an individualized, culturally appropriate fit between a strategy and the issue it aims to address.

This sort of approach has led to more traditional, trauma-informed health approaches on the part of the federal government, state health agencies, and regional tribal organizations. While not all tribal leaders or policymakers are expected to be experts in trauma-informed care, a baseline competence on the subject is helpful in treating AI/AN communities with compassion, empathy, and understanding.

Definitions

American Indian and Alaska Native (AI/AN): the Indigenous people of what is now known as the contiguous United States and Alaska.

Boarding Schools: residential educational facilities intended to force Western education upon the AI/AN people while also attempting cultural erasure and assimilation.

Bureau of Indian Affairs (BIA): the branch of the U.S. Department of the Interior which engages with AI/AN tribes on a nation-to-nation basis, including treaties and pacts, and which provides services to AI/AN nations per the Federal Trust Responsibility.

Bureau of Indian Education (BIE): Branch of the U.S. Department of the Interior that manages and administers education programs and services for AI/AN students attending schools operated by the federal government on or near reservations.

Federal Trust Responsibility: A legal and ethical obligation of the U.S. federal government to protect the rights, resources, and well-being of AI/AN tribes and individuals as established through treaties, laws, and agreements.

Forced Assimilation: A process in which a dominant culture of a group imposes its customs, values, language, and way of life upon a minority culture of a group, often through coercion, discrimination, or legal measures, with the goal of eradicating the minority culture's distinct identity and replacing it with the dominant culture's norms.

Forced Removal: the collective United States government policies that removed AI/AN people from their historical lands or diminished their size and confined AI/AN people to reservations.

Historical Trauma: A subtype of trauma that refers to group-level experiences which produce lasting psychological and physiological symptoms in group members.

Indian Child Welfare Act (ICWA): A U.S. federal law enacted in 1978 designed to protect the best interests of AI/AN children by establishing jurisdictional and placement preferences for child custody cases involving AI/AN families.

Intergenerational Trauma: A subtype of trauma like historical trauma, but which also impacts descendants of the original experiencers.

Resilience-focused: A type of care provided or healing that takes place which emphasizes strength, integration of traumatic experiences into one's overall self-narrative, and ability to heal.

Traditional Practices: Customs, rituals, beliefs, and activities that have been passed down through generations within a specific cultural or social group, often holding significant cultural, spiritual, and historical significance.

Trauma-informed Care: An approach to providing support and services that recognizes and responds to the impact of past and ongoing trauma on individuals' mental, emotional, and physical well-being, with a focus on safety, trust, and empowerment.

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