

and culturally. Growing up in a situation where I was not exposed to my own culture and traditions left me lost as to who I was and open to accepting what others said about Native people. One of the first signs of oppression is when you start believing other people's version of history about yourself. I seemed to have only numb feelings about my Native identity back then.

Both my mother and stepfather were alcohol-dependent. After their separation, my stepfather died in a fire. My mother remarried when I was about sixteen and had quit drinking. During high school, I developed an alcohol addiction. I took to alcohol like birds to flight. In retrospect, I realized what I was struggling with was issues of internalized racism and, as a result of it, a variety of self-destructive behaviors.

I received my first message about recovery from a couple of Native Americans who were active in Alcoholics Anonymous (AA) while serving in a military jail. After a couple of false attempts at sobriety, I was able to catch onto the program. My first two years of recovery were made possible by strict attendance at AA meetings. Several years later, I had the opportunity to attend my first sweat lodge ceremony. Experiencing it seemed to make all the difference in the world for me. It directed my recovery in a way that would not have been possible without access to my culture and identity as a Native person. It was through exposure to the traditions of my People that allowed me for the first time to develop long-term relationships with others and good connections with my community. As a result of this experience, I began to understand the influence of culture and identity in the recovery process and the influence of people who can teach these cultural ways and traditions to us. My own recovery experience taught me what has to happen for other Native People. It has been a real blessing to be exposed to people knowledgeable in the ways of our culture and traditions, who could and did teach me about myself, about who I am, and where I came from.

Having those mentors in my life, with their understanding of Native ways and identity issues, has allowed me to access areas of my life that otherwise would have remained invisible to me. I would have been left with a substantial void inside. Learning how I, as well as my People, reacted to being oppressed by oppressing others and losing ourselves in destructive behavior and thinking has made it possible for me to bring that understanding to the treatment process and to others who are still suffering from mental health and addiction problems so that they too can transcend those barriers for themselves.

Question: How would you define Native Americans or Native People as a group, and what characteristics do they share?

Lawson: Native People comprise over 350 different tribes and languages that are unique to this continent. We are both very different and very similar. There is not,

for example, one monolithic religion that belongs to all Native People. We have many languages, cultures, and many religions. We understand these differences, as we always have. But, today, we are focusing more on our commonalities—on those things that pull us together. Paramount among these are historical experiences. As a group, we have all been systematically subjected to colonization, to the effects of losing our language and our culture, and to governmental policies that have been destructive to our People and eventually led us to a variety of social and health problems. These, in turn, have divided us in relation to ourselves and into differences in levels of acculturation. There are people that range from very traditional to fully assimilated and differ enormously in how they relate to their culture and identity.

Differences among Native Peoples are small in comparison to those things that set us apart from members of the dominant culture. I think we stand apart because of a value system that is qualitatively different and a set of historic experiences that cannot really be understood by dominant culture. When I take a look at the behavior of Native People, the first thing that strikes me is that we keep to ourselves—[we] are very insular and private, especially in comparison to members of the dominant culture. Some of this is certainly dictated by culture. But for Native Peoples, it is also a matter of self-protection. This is because of a shared sense of historical oppression and victimhood. The historical experiences of genocide and culturicide have left a deep mark upon our thinking and feelings, which is all the more tragic because our only “crime” was being on this land first. Everyone else that is in America today has come from somewhere else, but as Native People, this is the land from which we originated. We believe that we were created here. This is where our People have come from. It is an intricate part of who we are—how we define our communities and our mental health. When we view many of the problems that have arisen in our communities, we know they arise because of the loss of our land and our way of life that is so tied to the land. And of all the peoples in America today, we have been the least welcome.

The process of becoming an “American” for most citizens involved willingly giving up one’s cultural heritage or identity in order to assimilate into the dominant culture and its values. This has been a very damaging process for Native People. We did not ask to be part of this process; it was forced upon us. Native People experienced enormous and longstanding traumas in their lives as a result of the assimilation process. And it is not an experience that many dominant culture people can really identify with: having your religion outlawed, having your language outlawed, and living in a world that has devalued your very existence. And that brings about feelings of justified anger that are present in our Native communities. Anger is everywhere, and it plays itself out in different ways as our People respond to both historical and ongoing oppression. It comes out in the form of self-destructive

behavior, alcoholism and drug addiction, suicide, and homicide. We have become very different as a result of our historical experiences in "America," and these differences have to be paid attention to in the counseling setting. Our mental health issues involve the forced imposition of the dominant culture's value system over our indigenous value system and have resulted in vast conflicts and misunderstandings as well as much resentment and mistrust that exist in our community.

Culturally, Native People tend to be nonintrusive and nondirective. They let people make up their own minds. If people come and seek advice, it will be given but not offered. Life is experienced as an interconnected entity. Nature, the People, the community all intertwine and depend upon each other for meaning and existence. We also tend to be very spiritual in our orientation, and the underlying force of our spiritual beliefs comes from the geology of the area from which we come. That spirituality infuses the community and becomes its base. It is central to the identity of each person and gets expressed through various religious and cultural practices. The creation stories of each People, for example, are set in the geographic area from which they came. The Navajo and the Hopi believe that they came up through the center of the world, and that center is located in their sacred places. For the Modoc people of central Oregon, their creation story is built around the lava beds of northern California, and they believe that humanity enters the world through the creation center, which is located there. All things come from our ties to the land, and all Native People are joined in their commonality with the Turtle Island, as we refer to the continent.

Question: Could you describe some of the names that have been used historically to describe and identify Native Peoples and the general process of naming within the culture?

Lawson: In regard to names, there are the names that we call ourselves and then there are the names that other people have given us. Most familiar to dominant culture is the term *Indian*. It is actually a misnomer. It comes from the time that Europeans first landed on this continent. Christopher Columbus mistakenly believed he had landed on the coast of India, and, hence, we got tagged with the name *Indian*, which has over time taken on a pejorative meaning for us. In spite of the fact that the term has been prevalent in describing us, it carries no significance in our world. At some point, we as a People decided to take control of how we identify ourselves.

The process began with the term *Native American*, which signifies that we come from this continent. But, then, because we predate the naming of this continent and the Americas, we have begun to look at ourselves as the Indigenous People or First People of this land.

Outside of these more political distinctions, we also have names which we prefer to use and with which we more closely identify ourselves. There are tribal names and

affiliations, such as Creeks, Choctaw, Crow, and so on. There are often clan names within the tribes and then there are individual names—how we identify ourselves personally. Many of us have a Christian name that was given to us. But we also have personal names that are received through ceremony—a spiritual name that is often kept secret and used only for special occasions. It is important to realize that Native Peoples vary greatly in which of the various terms they prefer, and to some extent, our choices say something about where we stand politically and culturally. Some of us still refer to ourselves as Native American, and others prefer Indigenous People. Sadly, there are still many who do not care or feel anything about who they are.

When first making contact with a Native client, it is perfectly appropriate to ask where they are from, what their tribal affiliation is, and how they prefer to identify themselves. I think we get into trouble when we don't do that and start making assumptions or just randomly use a term without being respectful enough to ask.

Asking about this information is probably a good way to begin contact. In mainstream America, people are identified primarily by what kind of work they do. We don't ask people what they do for a living. Instead, we ask each other: "Where are you from?" or "Who are your people?" This is because we come from a relationship-based culture, and our relationships are defined by our communities, our relatives, and our tribal affiliations. We socially locate ourselves by our human connections, not by our activities or jobs. Two last points. Spiritual names are sacred and private and used only during ceremonies. It is considered inappropriate to inquire about these names unless they are spontaneously offered. In addition to Christian names, nicknames are very commonly used in Native communities. One might go an entire lifetime calling someone by a nickname and never know their given name.

Question: We have already talked some about history. Could you give us a nutshell version of historical events of which a provider should be aware?

Lawson: Historically speaking, Native People have suffered greatly at the hands of governmental policies and the actions of various religious groups. The experience of colonization is not just historical but is still happening in our communities today. Loss of our culture, loss of religion, loss of community, and loss of family cohesion are contemporary realities. And these patterns, which are the consequences of oppression, continue to play themselves out emotionally and psychologically in the lives of our people. They are major issues that concern us deeply because they involve nothing less than the loss of our identities and integrity.

The boarding school experience is a particularly destructive example. Until the mid-1980s, many Native children were taken from their natural families and communities and forced to reside in boarding schools, where they were

isolated from Native culture and ways and then immersed in the dominant culture and Christian values. In these institutions, children were punished for speaking their Native tongue or practicing traditional ways. The motto of the time was "Kill the Indian, but save the man," and its purpose was to eradicate all traces of Native culture and identity. Once accomplished, the child could be molded as desired, which meant shaping them into white Christians with mainstream values and attitudes. To make the task easier, the government outlawed our religion.

Perhaps most insidious about this practice was its effect on the Native family and its cohesion. When the children were taken out of their families, they were separated from their grandparents, parents, extended family, aunts, uncles, community, and so on. For generations, many Native American children were robbed of the nurturing of their families—deprived of the opportunity to learn parenting skills and other cultural lessons that would have enabled them to raise healthy families of their own. These children were forced to reside in institutions that were harsh and brutal. Some of our elders believe that our many social problems stem from the boarding school experience. Many of the children, as adults, remained isolated from families, no longer able to communicate because their language had been beaten out of them. They felt no comfort returning to their communities and were generally left alone to deal with the many internal issues that had been created as a result of growing up in the schools: low self-esteem, negative feelings about being Native, and a deep self-hatred. We can now see very clearly how generations of such experiences have impacted our communities and made them into what they are today.

We have begun to look at the consequences of the loss of our culture and realize that some Native People have come to internalize the stereotypes whites hold about them. As a result, they have become those stereotypes: the subtle ones and the not-so-subtle ones, the "drunken Indian," the "lazy Indian." How can all those negative stereotypes not affect us? I am thinking of one of my uncles. He once told me that during high school, he very much wanted to go on to college. He went to see a school counselor and was strongly discouraged from going on. "Native People tend to be better with their hands," he was told and encouraged to pursue a trade. And so, with that advice, he didn't go to college but went on to a trade school. He also went on to become alcoholic and drug-dependent and has since been in recovery. He attributes a lot of his problems to that stereotype and how believing in it changed his life. So, for some of us, it is all too easy to live down to the stereotypes and to begin thinking about ourselves in self-deprecating terms—that we are not very smart or that we are only good with our hands and that we are destined to become alcoholic. These issues—residual effects of the boarding schools and stereotypes—are still being played out in our present-day

experience. But, fortunately, there has been a growing movement among many Native Peoples to regain our self-identity, to regain cultural pride, to regain our self-respect, and to learn about the traditions of our families, tribe, and People.

Question: Let us switch focus and begin to look at issues related to help giving and treatment. What factors influence how Native People go about seeking help?

Lawson: When Native People become involved in treatment programs, it's usually because of some external motivating force. That is, they are mandated either because of trouble with the law, family problems, child protective services, or the like. Generally speaking, that's how most people will come to be involved with outside agencies. Sometimes, the tremendous anger and mistrust that Native People feel prevent them from seeking help outside of their community. Sometimes, it is discrimination against them that serves as a barrier to accessing treatment. When you do find Native People coming into your agencies by themselves seeking help or assistance, they often are assimilated or bicultural—those who are more familiar and comfortable with white institutions and practices.

As a result of these patterns, there is a movement among various tribes to develop mental health and addiction services within our own communities so that people no longer have to choose between white services or no services at all. The hallmark of this trend is the creation of culturally relevant services. "Culturally relevant" means that the treatment process is infused with Native cultural values, that treatment goals make sense to Native sensibilities, that the need and value of developing positive ethnic identity are acknowledged, and that services are relevant to the lives and daily existence of the people being served. It also means that services are provided in a manner that is culturally comfortable to Native People. This trend is extremely important because the fact is that Native People usually experience less success in programs designed for mainstream white clients. Cultural barriers are a major obstacle to successful treatment in any program.

Question: Are there any other things you would like to say about the nature of family, community, and culture among Native People that have relevance for human service providers?

Lawson: Family structure in Native communities is very different from the nuclear family that predominates in dominant culture. Among Native Peoples, extended families are more typical, where an aunt may also act in the role of the mother or the grandparents raise the children or an uncle is the primary teacher for a youth or cousins are treated as brothers and sisters. Traditionally, responsibility for child care is communal. Also included in the family structure are clans, which are determined by kinship, and bands, which are people living in the same locale.

There are and have been many obstacles for the Native American family. As mentioned previously, the boarding school experience left many people devastated. Many of our social problems stem from them. Having been forced into these institutions, children were separated from an environment where they would have been socialized and reared culturally by parents, grandparents, aunts, and uncles and placed in an often-harsh environment which did not recognize Native American beliefs as having any value. Today, alcoholism is our number one health problem, with 100 percent of all Native Americans affected either directly or indirectly. In the age group of sixteen to twenty-one, we lead the nation per capita in suicides and higher than national rates of diabetes. Currently, our average life span is forty-five. These statistics attest to the problems faced in the Native American community and more privately by family members, and most of these are linked to the destruction of the cultural family.

Other disruptions for the family come from state children services agencies that routinely adopt our Native children out to non-Native homes. Often, in conjunction with religious organizations or acting on stereotypical beliefs about Native American families, these agencies disregard the critical importance of Native culture for these children. There are many horror stories from the past of white people coming into Native American communities and removing children. Fortunately, this is a practice that has been stopped by implementation of the Indian Child Welfare Act of 1978, which re-established tribal authority over the adoption of Native children. Even though our rights have been reinforced, we are constantly struggling with agencies who are working to undermine the law. By these few examples, it is obvious how there has been a basis for the development of mistrust of social service agencies—a feeling that continues today.

Oppression has had a significant effect on our family structure. Some Native People have decided not to teach their children about the culture, language, or traditions because they do not want their children to experience the same treatment of degradation and rejection from the outside world. Others have successfully made the transition into dominant society, taking on mainstream values and religious beliefs and living happily. There are also many who have managed to hang onto and practice cultural traditions and beliefs, learning from elders who have been able to share their wisdom with a younger generation. Some families mix traditional and dominant cultural ways. Clearly, we are a community in transition, adjusting to significant changes in social structure and identity, with much from the past to set right. But in spite of the historical and contemporary obstacles, our Native community is healing itself. We have weaknesses and strengths within the Native families. We have oppression and discrimination to overcome. We have social problems with addiction and

abuse. But our People are making a comeback in pride and dignity by reclaiming indigenous family values and recovery.

Question: What are the kinds of problems with which a Native client might present?

Lawson: One hundred percent of Native People are affected either directly or indirectly by alcoholism. Underlying this are a host of complex problems related to the loss of culture, identity, and disruption of the family unit, all symptomatic of a long history of genocide and oppression. There are also a lot of anger and anger-related issues, depression and hopelessness, health problems, and unusually high rates of suicide and homicide, especially among the young. There has also been a serious increase in the diagnosis of HIV in our community, mostly related to IV drug use. Among Native People who are incarcerated, alcohol and drugs are a major contributor to their incarceration.

Question: Do class or other socioeconomic issues play any role in these various problems?

Lawson: Definitely. Unemployment rates can be astronomical on a reservation, and the same is true for Native Peoples living in urban areas. The Relocation Act of the 1940s was one in a series of efforts by the government to encourage Native Peoples to leave the reservation, move to cities where jobs are more plentiful, and become part of the American mainstream. That was the ultimate goal. However, the reality was not quite as simple as that. Although some did relocate successfully, many found the experience traumatic. In the move from reservation to city, many traditional ties were lost. Kinship ties weakened with distance, and some people became disassociated from their relatives and community. Many ended up living marginal existences in the skid row areas of cities, and those who followed them from the reservations would tend to migrate toward these same enclaves. What the logic of the Relocation Act did not envision was the reality that most of these people, familiar with a very different kind of existence, did not have the dominant cultural tools to survive successfully, let alone prosper in such a foreign environment where they were met with substantial discrimination and rejection.

The move to the city was also instrumental in cutting off many from traditional cultural ties to their People. In addition, certain patterns of connection between the reservation and urban settings began to emerge. First, it was not uncommon for individuals to move back and forth between the two, and for many, this became a lifelong pattern. Second, animosities and various conflicts developed between people from these increasingly divergent lifestyles, with each looking down on the other. In general, some people in the urban centers may tend to view those on the reservation as backward, their ways antiquated, rustic. Those on the reservation, in

turn, tend to see the urban dwellers as having lost their way—as suffering from the same malaise as the white man. Today, increasing numbers of Native People are returning to their traditions and culture in both locations and striving for unity.

There is an important cultural point here as well. In mainstream culture, success is measured in economic terms, and socioeconomic success implies a certain lifestyle that depends on having sufficient monetary resources, accumulating wealth, regular employment, living according to a certain style, and so forth. Our traditional cultural values are very different from this. Our wealth is located in the richness of our culture, tradition, ceremonies, and in the richness of our lifestyle. Difficulties arise when a person tries to live by a cultural value system that is not based on material economic gain within a broader culture that is so absolutely dedicated to it. These are not value systems that are easily integrated. Such clashes set the stage for Native Peoples losing our lands and having our language and culture outlawed in the first place. Today, we struggle with a similar conflict around remaining attached to our traditional way of life that cares little about accumulating economic wealth. It comes down to the question of divergent value systems. Those who are bicultural know what they would need to do to be successful—and that would be to eliminate their culture and perform accordingly—but that would go against their beliefs, which are based in indigenous culture and tradition. The integration of two such diverse value systems is difficult, to say the least.

Question: In making an initial assessment, what kinds of information do you feel it is important to collect from a Native client?

Lawson: Before getting too specific, I want to say something about cultural perspective and worldview. During any assessment process, it is *vital*—I can't emphasize this enough—that counselors and other human service providers be aware of their own cultural values, biases, and barriers and understand clearly how they themselves have been influenced by culture. All behavior is derived from a cultural context, as are treatment programs. If one is going to assess a client whose worldview is culturally different from one's own, then it is likely that if the client displays culturally relevant behavior, it may well be labeled as "deviant" or "abnormal." For example, in dominant culture, a firm handshake is seen as a sign of honesty, sincerity, and straightforwardness, whereas if one encounters a person of traditional Native beliefs, a firm handshake is avoided because in our culture, it is sometimes seen as being intrusive, rude, overbearing, and impolite. However, someone assessing that behavior from a dominant cultural perspective might construe it as reflecting dishonesty, nonassertion, withdrawal, and evasiveness. When working with people from diverse cultures, it's always important to validate their experience and existence in terms

of their own cultural perspective. In order to do this, we as service providers must be aware of our own culture and how that culture affects our lives.

Assessments must be carried out within the framework of the client's own culture. It is important, however, to not let the client be your only source of information about their culture. This information needs to be balanced with information from their community as well. It's necessary that you reach out to our communities and listen to the people. It has been my experience that the more you learn about another's culture, the more open they are to you. Learn as much as you can. You get that information from the community through developing relationships. Go to the communities and events and develop relationships. This doesn't mean that you have to give up your own cultural values or beliefs. It does mean that you should be able to understand and respect beliefs of others and evaluate their behavior from within their cultural context.

Perhaps the most important piece of information to gain about Native clients is where they fall on a continuum from assimilated to traditional. People that are assimilated will often feel uncomfortable around their own People, not knowing the behaviors and what is expected of them. They appear to be Native and possess all the physical features of being Native, but internally, they're different. They may feel uneasy because of their lack of knowledge of traditional ways and may feel unaccepted because of it. Assimilated individuals tend to act differently than those who live by traditional values and possess a traditional belief system. The assimilated person may appear more talkative and open, even though there might be distrust. They will be the ones who know the rules of the program and of society in general. In short, they will have learned what one needs to do within dominant culture to survive. Traditional Native People present themselves as more reserved and quiet. But rather than being indicative of withdrawal, it comes from a cultural value of respect, non-intrusiveness, and honor.

What kind of information should you seek from a client? There is all the standard assessment material. Who was a person raised by? Family structure? Religion? But with Native People, what is important is to interpret this information through the filter of how they see themselves culturally.

This would include identity development, involvement with the community, involvement with family, how family views its situation, whether or not traditional beliefs are practiced. Again, the distinction between assimilated and traditional is important because treatment methods may differ according to where a person falls on that continuum. By way of example, there was a doctor in Seattle who noticed that Native People weren't recovering as fast in the hospitals as he felt they should. They regularly spent longer periods in the hospital. One of the things he did was go to the elders of the Native community and started

incorporating medicine people and traditional healers as part of the treatment process in the hospital. And recovery times shortened dramatically.

Question: Are there subgroups within the Native community that are particularly at risk?

Lawson: I believe that all Native People, especially children, are at risk for developing alcoholism or some other form of dependency. There are physiological issues—social, economic, and emotional ones as well. They have been passed down from generation to generation and together create a “lump sum” of a risk for us as Native People. At one time, it was prevalent in our communities to accept alcoholism as a way of life. That is how we tended to cope with oppression and the discrimination in our lives. It became part of our continual grieving process. Although in many places this is still the norm, there are many of us who are beginning to take more control over our lives and find recovery.

Question: What suggestions can you give regarding developing rapport with Native clients?

Lawson: I believe we have to be aware of our own prejudices and biases and the way we regard people who are culturally and racially different from us. It is not a matter of learning to say or do the right things. Instead, we have to be aware of ourselves and the underlying issues that affect our clients. It's not about having to learn all the ins and outs. We are dealing with a very diverse population. It's impossible for me to say, “Well, this is the one thing you will need to say or this is the one thing that you do in order to develop rapport.” I would be merely creating a new stereotype.

We are all going to make mistakes, and mistakes are a common thing in working with diverse cultures. But if one really comes from a place of acceptance and respect as a care provider, then that is going to translate into developing rapport with clients. As helpers, we all have a goal in mind: helping to develop a therapeutic relationship so that clients can heal themselves. But there is more than one road we can travel to get to the same place.

In order to develop rapport with Native clients, one has to learn to not be afraid of their anger. You can be sure that there is going to be mistrust and anger that may very well be directed toward you personally as a white provider. But if you can tolerate it, not be frightened by it, and just allow it to be expressed as honest communication, you will be on the road to making a connection. There is the possibility the client will see you as part of the white establishment and, as such, unlikely to be of any real help. Remember: Historically, Native Peoples have had their feelings discounted, been patronized and demeaned, and chronically abused by the system. You may be witnessing justified anger running rampant. In

short, you may be stereotyped and lumped into this category of the enemy. The only way to get beyond this is to acknowledge your whiteness and the feelings they are likely to project onto you as well as your general understanding of what they have experienced as a people. But be clear: The walls are not going to come down overnight but only with time and patience. In addition, becoming aware of the effects oppression has on a People will aid in understanding self-destructive behavior, such as addiction being systemic to oppression.

Question: What else is important to know about working therapeutically with Native clients?

Lawson: I have provided services to both white and Native clients, and there are clearly some important differences. In the white groups, traditional counseling methods are effective. I am more direct and confrontational here, and the clients tend to respond positively. I use a very different approach with Native clients. We sit in a talking circle, but it is the issues we talk about that are important. The issues have to do with Native culture, identity, how they see themselves as Native People, the effects of stereotyping, justified anger, positive identity development, and ceremony. And we use ritual objects and ceremonies as part of the process: eagle feathers and pipes, smudging, sweat lodges, and so on, introducing our culture into the treatment process and acknowledging what they are going through ritually and with ceremonies. Such a process fits naturally with our cultural understanding of health and sickness. We also discuss the effects of oppression while at the same time addressing the issues around denial, relapse prevention planning, and recovery maintenance.

As far as therapeutic styles with Native People, you will most likely be working with those who either know nothing of their culture or are bicultural. In both cases, I find that traditional counseling methods generally prove effective but with the incorporation of cultural material. My approach with Native Americans is to use culture as an avenue to recovery because loss of culture and identity is the most basic problem that Native People face. In this regard, I assist clients in identifying their culture, how it has influenced them, how they came to lose touch with it, and how they may become reconnected to their culture. I also have them identify where they stand along the continuum between traditional and assimilated. At times, I come across clients who hide their issues behind culture or try to use it to get something for themselves. They use it as a "front"—as a means of not dealing with treatment issues. The value of culture and community is not about what it can get you but who you can become because of it. The challenge for non-Native service providers is to know the difference between clients using culture as a defense and when the Native culture is genuine.

I provided culturally relevant treatment services for the Native Americans incarcerated within the Oregon Department of Corrections who are dealing with their addictions. As a part of those services, I conducted a weeklong alcohol and drug workshop and ongoing treatment groups that focus on Native American spirituality, ceremony, and recovery. As a part of the workshop, we utilized the talking circle, drumming and singing, sweat lodge ceremony, smudging with sweet grass or sage, use of eagle feathers and other sacred objects, and discussed issues that are relevant to their recovery. Through this service, many Native inmates have been given their first positive encounter with Native American culture and tradition. I believe this is an important thing to offer them—to be able to get in touch with their culture and to be able to have some experience with their traditions. Again, I see that as critical to recovery for Native American clients. But there are some diverse opinions about this within our communities. Some of our elders say: “They never sought out the culture while they were in the community. Why should we go to the institutions to provide them with anything cultural? When they get out of the institution, let them come to us.” That’s a valid point. But at the same time, I feel that it’s important for a person’s recovery to develop some cultural awareness. The issue of them learning it in the institutional setting is that, often, much of the learning comes from other inmates. So, information can get contaminated inside institutions.

Similar dynamics can occur in treatment in general, and that’s why it’s important for non-Native providers to have connections and resources in the Native community. It is clearly not productive for providers to exclusively learn about Native culture from their clients. Contact with the community will also give you a certain credibility. In working with our People on a regular basis, you just have to get out of your office and make contacts. We are a relationship-based culture.

Question: Finally, could you present a case that brings together the different issues and dynamics about which you have been talking?

Lawson: I am thinking of a client I’ll call Joe. Joe came to a program where I once worked called Sweathouse Lodge. It was an inpatient alcohol and drug treatment program that focused heavily on traditional Native modes of healing. We used sweat lodges, brought in traditional people to speak, brought in medicine people, hosted spiritual gatherings, took clients to powwows, and did a lot of resocialization work. When Joe entered the program, he was twenty-five and very angry and mistrustful not only toward the system, but toward the program as well. He had developed a severe alcohol and drug problem by the age of seventeen. His family had a long history of alcoholism. His parents knew nothing about their culture and traditions, and although he had a grandfather who was very traditional, he had only limited contact with him. Joe was mandated to the program by court order

and was initially very resistant to treatment. While in the program, he experienced his first sweat lodge ceremony. It was a very positive experience for him, and he reported that during the ceremony, he felt for the first time some connection with his Native heritage and the value it might have for him. This motivated him to seek out further information about his own culture and traditions. In group therapy, he revealed harboring prejudicial and destructive thoughts about being Native. As a result of growing up in an alcoholic home, he had learned to equate being Native with being drunk and violent, as these were the only role models he had.

Through continuing positive contact with Native culture, in the form of ceremonies and positive role models, he was able to begin to distinguish between what was truly cultural and what was internalized from negative stereotypes of Native People and culture. This, in turn, enabled him to develop a more positive cultural self-image, something which was totally lacking before coming to the program. He increasingly took pleasure in attending sweat lodge ceremonies, learned to drum and sing, learned more about Native values, and in time began to work at incorporating these values in his treatment plan. He became more open to attending Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) meetings and eventually involved himself more and more in the Native community. As part of treatment, he received a lot of very direct feedback from other Native clients and staff. He found it very helpful to hear others who had gone down a similar path of alcoholism and dysfunction "call him" on his self-destructive behavior, attitudes, thinking patterns, and lifestyle.

The eventual result was better feelings about himself, an emerging ethnic identity, and a positive sense of belonging to the Native community. During group therapy, he was able to make the connection between his own self-destructive ways and the lack of culture and traditions in his life. In short, participation in the program forced him to experience a powerful identity crisis and reformation, and it gave him an outlet and place to experience feelings that he thought were unique to him. After completion of the program, Joe continued to seek out sweat lodges and remained actively involved in community events. He has begun to take on some communal leadership roles and actively strives to encourage others to find recovery through their culture and traditions.

SUMMARY

This chapter is comprised of an in-depth interview with Jack Lawson. He is a Native American Coordinator for the State of Oregon Youth Authority and a member of the Creek Nation. During the interview, Jack discussed several key points such as how he defines Native People and characteristics they share, the process of naming