



# Recognizing and responding to the intergenerational trauma carried by Indigenous Peoples in your practices

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# Workshop Background and Context

- ▶ Speaker biography
- ▶ Indigenous healing movements
- ▶ Trauma repair models and fields of practice
- ▶ Operating from trauma and culturally informed models







## A little bit about me

- ▶ Born and raised in Stó:lō territory
- ▶ Attended Seabird Island Community School ~ proud product of the Indian Rights for Indian Education movement
- ▶ Ancestral homelands are in Treaty 1 territory, on the Sandy Bay Ojibway First Nation
- ▶ My sons are 23 and 18, my daughter is 10. They are my greatest accomplishments

Sandy Bay Indian  
Residential School

Assiniboia residential  
School

St. Boniface Catholic  
School

University of  
Manitoba







University of Manitoba,  
1969



# Indigenous Healing Movements

## Indigenous Worldviews

- ▶ Relational healing paradigms
- ▶ Holism
- ▶ Spirituality
- ▶ Relationality
- ▶ Connection to natural world
- ▶ Non-dualistic thinking
- ▶ Individual wellness intimately tied to community wellness and the natural world

## Western biomedical approaches

- ▶ Often ineffective, inappropriate, and underfunded
- ▶ Services are underused as a result, proliferating mental health challenges
- ▶ Rooted in theories and techniques that displace culture, promote assimilation, and compound trauma

# Trauma Repair and Fields of Practice

## ▶ DSM-V

- ▶ Type 1 Trauma
- ▶ Type 2 Trauma
- ▶ Historical, Collective or Intergenerational Trauma
- ▶ Little t trauma

## ▶ National Child Traumatic Stress Network

- ▶ Bullying
- ▶ Community violence
- ▶ Complex trauma
- ▶ Disasters
- ▶ Early Childhood trauma
- ▶ Intimate partner violence
- ▶ Medical trauma
- ▶ Physical trauma
- ▶ Refugee trauma
- ▶ Sex Trafficking
- ▶ Terrorism and violence
- ▶ Traumatic grief

# At risk groups

- ▶ Child, adolescent, and adults who engage in problematic substance use
- ▶ Individuals, families, and communities experiencing poverty
- ▶ Military and veteran families
- ▶ Homeless people
- ▶ LGBTQI2S
- ▶ People with Intellectual and developmental disabilities
- ▶ Residential School and Day School and Child Welfare survivors and their children



# Historical Trauma Model

- ▶ First written about by Maria Yellowhorse Braveheart
- ▶ Extensively written about in the Indigenous health literature
- ▶ Presented 4 main ways in which HT impacts Indigenous peoples:
  1. HT is the cause of disordered health and behaviours
  2. HT as an outcome of the colonial project
  3. HT as a mechanism for intergenerational transmission of problem behaviours
  4. HT related stressors

# Historical Loss Scale

- ▶ Perceived Losses
  - ▶ Land loss
  - ▶ Language loss
  - ▶ Loss of traditional spiritual ways
  - ▶ Loss of family ties because of boarding schools
  - ▶ Loss of family members lost due to government relocation
  - ▶ Loss of self-respect from poor treatment by government officials
  - ▶ Loss of trust in whites from broken treaties
  - ▶ Loss of culture
  - ▶ Loss from the effects of alcoholism on our people
  - ▶ Loss of respect by our children and grandchildren for elders
  - ▶ Loss of people through early death
  - ▶ Loss of respect by our children for traditional ways

(Whitbeck, Adams, Hoyt, & Chen, 2004)

# Historical Loss Associated Symptoms Scale

- ▶ Often feel sadness or depression
- ▶ Often feel anger
- ▶ Often anxious or nervousness
- ▶ Uncomfortable around white people when you think of these losses
- ▶ Loss of concentration
- ▶ Feel isolated or distant from other people when you think of these losses
- ▶ Loss of sleep
- ▶ Rage
- ▶ Fearful or distrust the intentions of white people
- ▶ Feel like it is happening again
- ▶ Feel like avoiding places or people that remind you of these losses

(Whitbeck, Adams, Hoyt, & Chen, 2004)



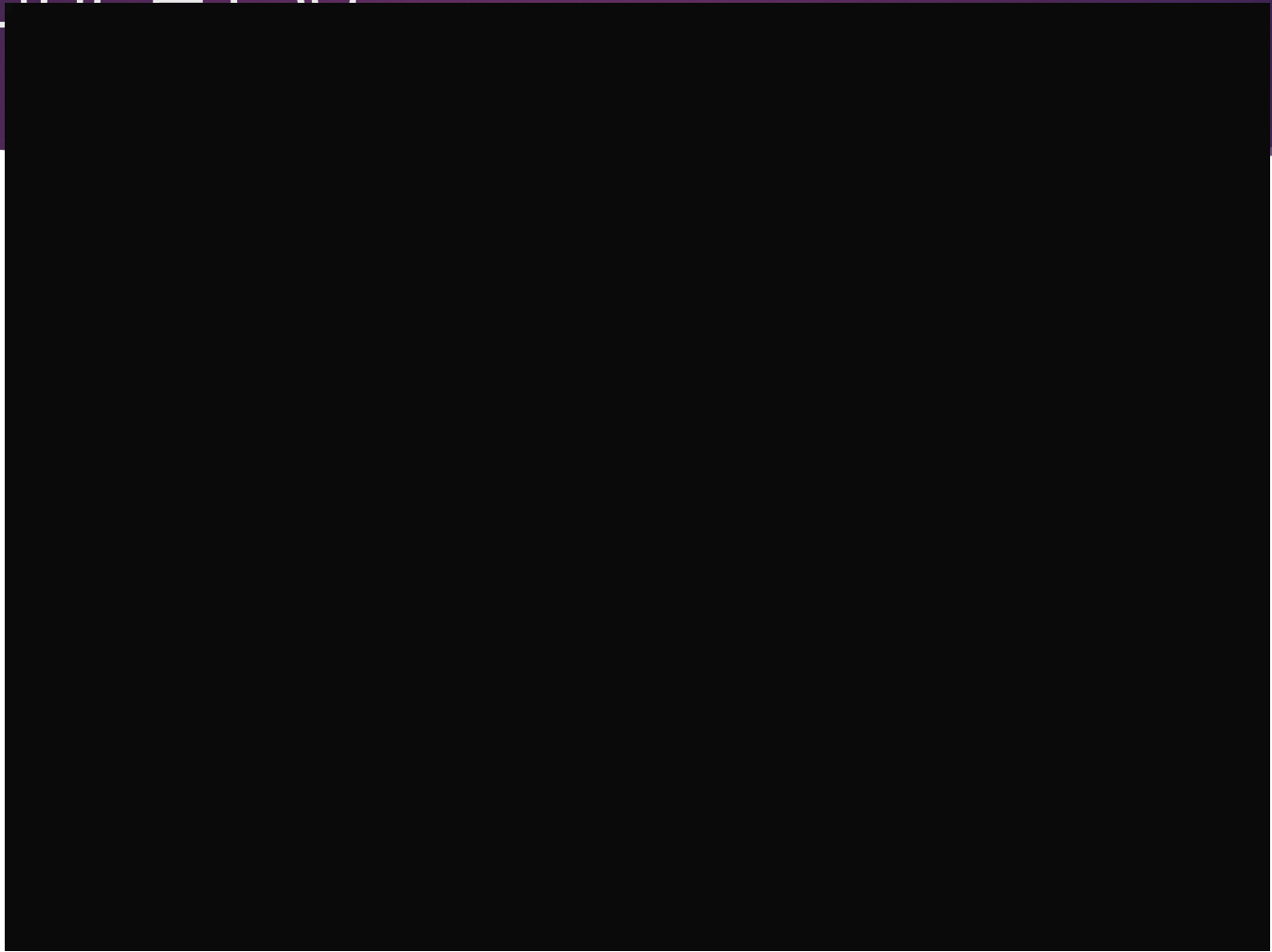
# Historical Loss Model

## ▶ References for Instruments

### ▶ Historical Loss Scale & Historical Loss Associated Symptoms Scale

- ▶ Walls, M.L. and L.B. Whitbeck, *Distress among Indigenous North Americans: Generalized and culturally relevant stressors*. *Society and Mental Health*, 2011. **1**(2): p. 124-136.
- ▶ Walls, M.L. and L.B. Whitbeck, *The intergenerational effects of relocation policies on Indigenous families*. *Journal of Family Issues*, 2012. **33**(9): p. 1272-1293.
- ▶ Whitbeck, L.B., et al., *Conceptualizing and measuring historical trauma among American Indian people*. *American Journal of Community Psychology*, 2004. **33**(3/4): p. 119-130.
- ▶ Whitbeck, L.B., et al., *Depressed affect and historical loss among North American Indigenous adolescents*. *American Indian and Alaska Native Mental Health Research*, 2009. **16**(3): p. 16-41.

#Resistance150





# Culturally Safe Trauma Repair

CODE SWITCHING BETWEEN BIOMEDICAL TRAUMA DISCOURSES

AND

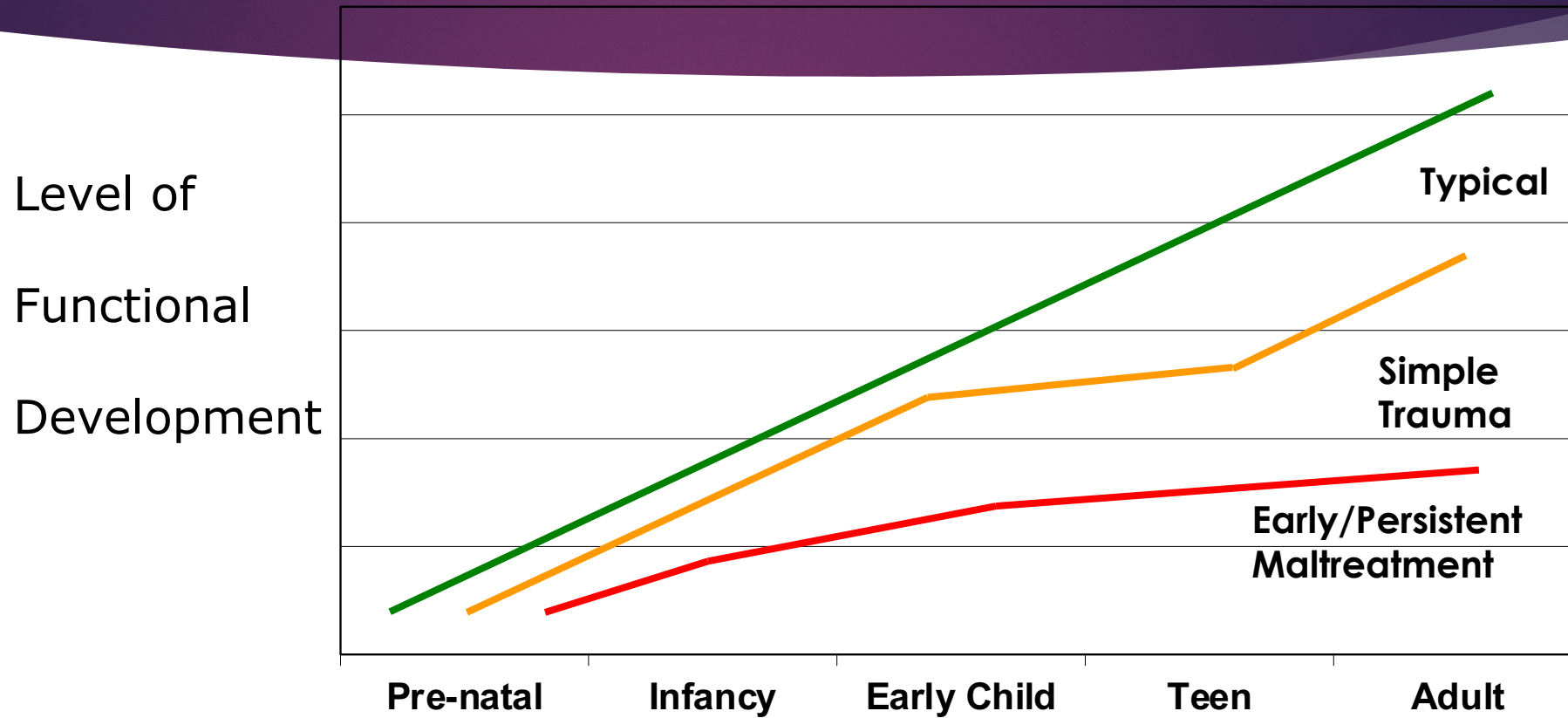
HISTORICAL TRAUMA



# Developmental & Neurobiological Language

USING THE COMPLEX CARE  
AND INTERVENTION/WRAP  
AROUND APPROACH

# Developmental Trajectories: Effects of Maltreatment & Trauma



# Recognizing Complex Trauma across 7 domains

## ▶ 7 Developmental Domains – Complex Trauma Care Intervention (Geddes, 2016)

1. Neurological & Biological Maturity
2. Over-reactive Stress Response
3. Emotional Regulation
4. Attachment and Relationships
5. Identity Development
6. Behavioural Regulation
7. Cognitive & Language Development

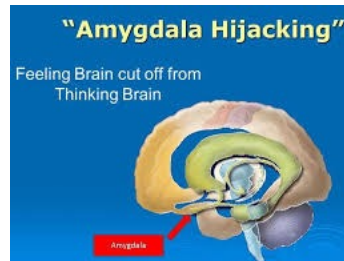


# Living with Fear: A Stress Staircase



W. Smith and C. Geddes, 2012

# “Amygdala Hijack”



Hand Model of the Brain



Grounding and accessing  
rational thinking in your  
interviewees

# 5 questions to answer following an amygdala hijack

▶ 1. What am I thinking?

(5 minutes) write this out and within the first 5 minutes. Do not proceed to the next question until 5 minutes has passed.

This time gives your basal ganglia a chance to integrate feelings, thoughts, and movements



# Second question

▶ 2. What am I feeling?

(5 minutes) write this out and within the next 5 minutes. Again, do not proceed to the next question until 5 minutes has passed.

This time gives your **basal ganglia** a chance to further integrate feeling, thoughts, and movements and your **temporal lobe** a chance to create emotional stability

# Third question

- ▶ What do I want now?

(5 minutes)

Allows time for the **cerebellum** to engage in executive functions, connecting to the **prefrontal cortex** and allowing for cognitive integration

# Fourth question

- ▶ How am I getting in my way?

5 minutes

Allows even more  
time for the  
***prefrontal cortex*** to  
learn from history  
and mistakes

# Fifth question

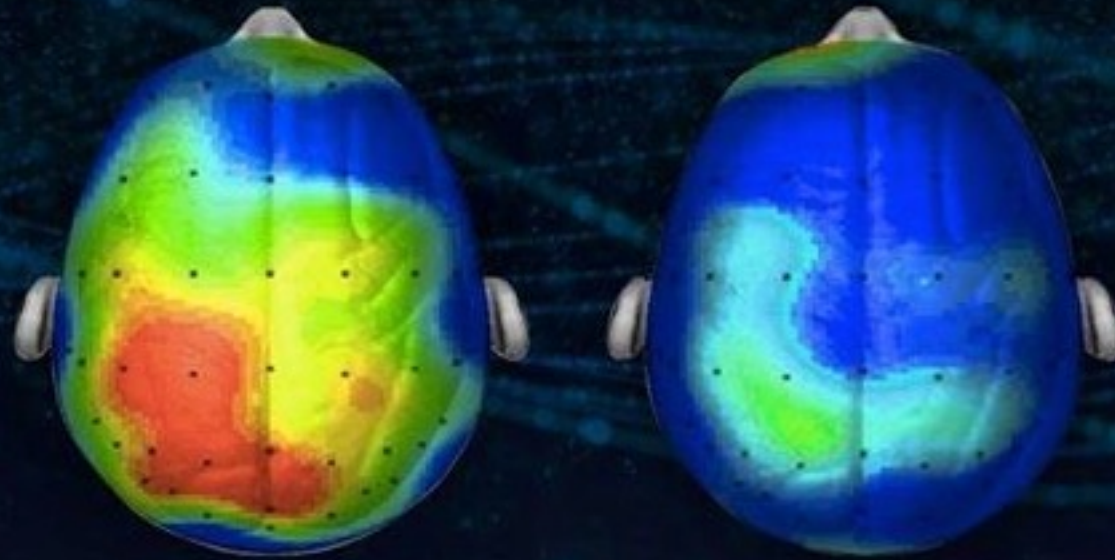
- ▶ What do I need to do differently now?

5 minutes

Your **prefrontal cortex** has now had time to resume the role of “boss” and get back to “supervising life”. This includes planning, goal setting, insight. This also allows for the **anterior cingulate gyrus**, which functions like the brain’s gear shifter, to see options and go from idea to idea.



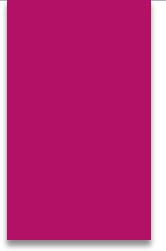
# BRAIN BEFORE AND AFTER 10 MINUTE MEDITATION



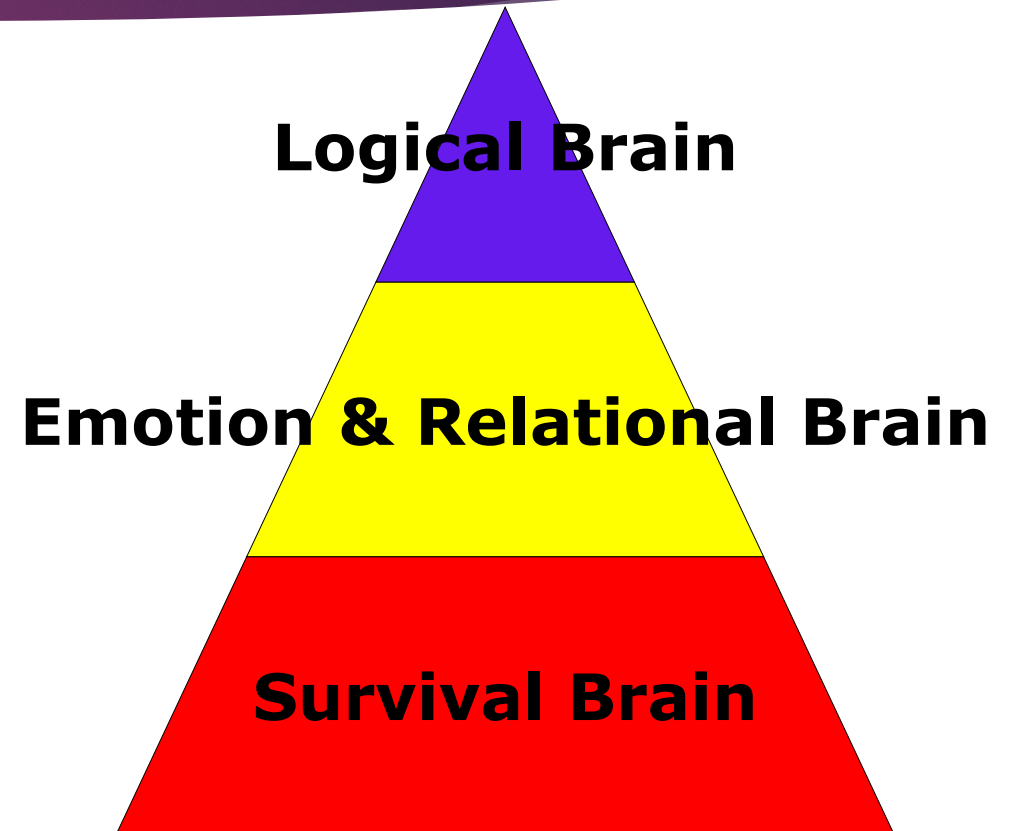
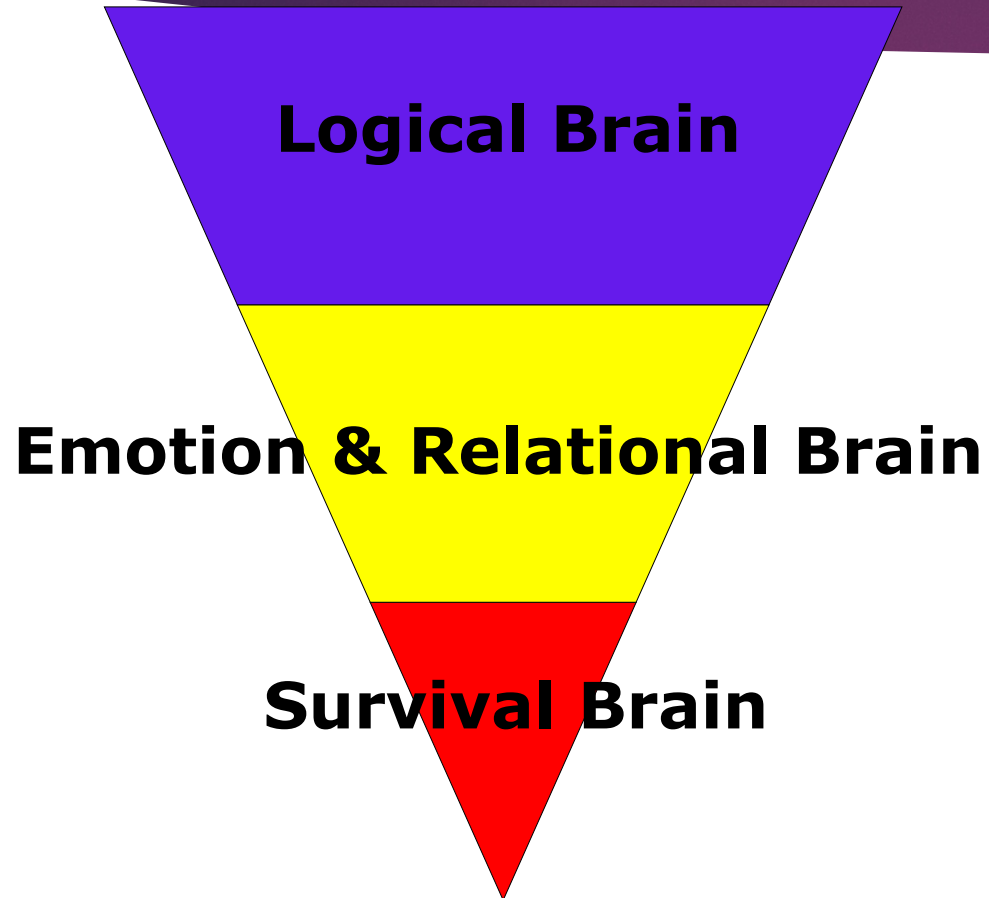
BEFORE

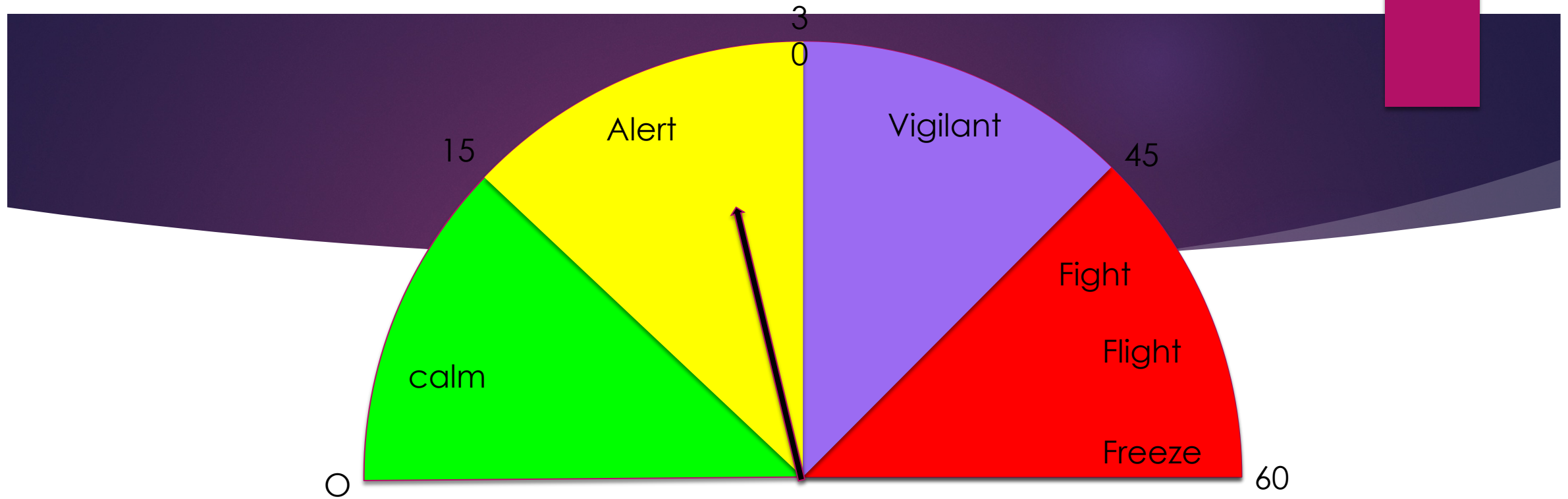
AFTER

Why it is important  
to centre healing  
and trauma repair  
in our practices



# How are we organised?





Over-Reactive Stress  
Response – tracking this  
in ourselves and in others



# Attachment, abandonment and Trauma

## ▶ 7 Developmental Domains – Complex Trauma Care Intervention (Geddes, 2016)

1. Neurological & Biological Maturity
2. Over-reactive Stress Response
3. Emotional Regulation
4. Attachment and Relationships
5. Identity Development
6. Behavioural Regulation
- 7.

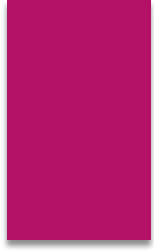
# Culturally safe interventions

Domain	Interventions	Rationale
Neurological & Biological Maturity	Massage, hammocks, tight tuck in, cozy nest, drumming, singing, sound generator, calm music, horseback riding, dance, rocking, tapping, bouncing, bi-lateral rhythm	Regulates internal clocks, proprioceptive sense, improves large and small motor coordination, distraction reduction to achieve calm states, etc
Over-reactive Stress Responses	Healing ceremonies, smudging, swimming, self-calming, de-escalation, calming activities, relaxation, mindfulness etc.	Removes awareness of outside noise triggers, teaches important self-soothing skills, exposure to soothing experiences, engagement of spiritual help
Emotion Regulation	Emotional dialogue, feeling charts, emotional literacy, reflecting feeling/empathy, express needs, broaden and build positive emotions, learning to speak one's language	Learn awareness of emotional states, encourages validation, creates opportunity to engage with positive emotion states and memories, encourages use of our ancestral languages for self-expression

# Attachment, abandonment and Trauma

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## Insecure Attachment Continuum



### Avoidant/Dismissive

- Often neglected
- “You don’t exist” (Purvis)
- Independent
- Emotionally cool
- Push away
- Need engagement

### Preoccupied/Angry

- Often enmeshed/volatile
- “I don’t like you” (Purvis)
- Dependent/overly sensitive to relational cues
- Emotionally reactive: Push-Pull
- Need non-reactive adult presence



**Being ignored causes the same  
chemical reaction in the brain  
as experiencing a physical injury**



PreventDisease.com



# Emotional Abandonment

Acceptance

Rejection



Varying degrees of emotional availability and parental indifference to a child's needs and wants

- ▶ Prevalent in addictive family systems, and whenever there is a physical abandonment, emotional abandonment always accompanies it
- ▶ Children who grow up in addictive family systems must live with multiple conditions of loss and lost events (*give examples*). As a result, children grow up with a finely developed denial mechanism impairing the ability to identify needs, wants, and feelings, or to attach any value to these
- ▶ Adults who come from or live in an addictive family system may find that when in a coupleship, their partners needs and feelings are more important
- ▶ Elders who come from or live in an addictive family system may be able to state their wants and needs for their children and family members, but not for themselves, and find themselves in a lifestyle where their needs are chronically unmet
- ▶ Hiding a part of yourself in order to get a) approval, b) protection, and/or c) belonging in a family system represents an abandonment of self.
- ▶ Ask yourself: Do the people you work with have the skills to identify their feelings, needs, and wants in their family system? Do they have the skills in which to express their feelings? Can they attach value to their needs and feelings? Can they tolerate feelings without having to medicate them, run, or self-destruct?

# Culturally safe interventions

Domain	Interventions	Rationale
Attachment and Relationships	<p>Story telling            Sharing songs            Preparing food with others; Serving            Talking circles            Land based activities, food harvesting            Cultural productions – weaving, carving, beading, art making</p>	<p>Introducing rituals increases predictability and routine, calms attachment systems and primes people for bonding. Activity, art, and story based interactions can be safe ways to reorient people to trust and bond.</p>
Identity Development	<p>Documenting a life line (therapeutic), celebrating successes, engagement of strengths, learning meaning and strengths associated to traditional name, names of home, places, clan. Building opportunities to practice generosity (give aways)</p>	<p>Aids in the development of a cohesive life story, builds self-concept and self-esteem, reconnection with sources of strength, courage, and wellness</p>
Behavioural regulation	<p>Behavioural observation            Outdoor education            Correctional programming – respectful relationships, AA/NA usually show up here</p>	<p>Cultural philosophies may be less directive in Indigenous communities, but modelling and sharing provides cultural leadership, scaffolding.</p>
Cognitive and language development	<p>Cue-ing when stuck, creating reminders and cognitive prosthetics for memory problems, problem solving, ritualizing to generalize, re-telling traditional stories, oral language listening</p>	<p>Aids with poor memory skills or auditory receptive lags, can be individually tailored to the culture and development of the person</p>

# Culturally Based Interventions

- ▶ Respect Indigenous Knowledge and Sovereignty
  - ▶ Must respect Indigenous laws
  - ▶ Must not be misused or trivialized
  
- ▶ Integrative, holistic, and land based
  - ▶ Involve restoration of that which has been removed or taken away
  - ▶ Advance the wellbeing of all interconnected domains of living (land, water, people, animals, future and past generations, etc....)





# Questions and Workshop Closure