

The Facilitation of Healing for the First Nations People of British Columbia

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This study explores the facilitation of healing for First Nations people living in the province of British Columbia. The purpose of the study is to develop a reasonably comprehensive scheme of categories that will describe from the perspective of First Nations people what facilitates healing.

The research method involved interviews with 50 adult First Nations volunteers who were long-term residents of British Columbia and also in a position to observe what facilitated their own healing. The Critical Incident Technique (Flanagan, 1954) was used to elicit 437 incidents from 50 participants. Fourteen categories emerged from an analysis of the incidents reported. Several procedures were used to examine the soundness and trustworthiness of the categories. The results indicate that healing can be facilitated in the following ways: participation in ceremony, expression of emotion, learning from a role model, establishing a connection with nature, exercise, involvement in challenging activities, establishing a social connection, gaining an understanding of the problem, establishing spiritual connection, obtaining help or support from others, self care, setting goals, anchoring self in tradition, and helping others. A preliminary examination of the healing outcomes of these facilitating events suggests that an effective healing program for First Nations people would invoke empowerment, cleansing, balance, discipline, and belonging.

Narrative accounts were analyzed to reveal an organization for the categories. Four divisions of categories emerged as a result of this analysis: separating from an unhealthy life, obtaining social support and resources, experiencing a healthy life, and living a healthy life. Further analysis of the narratives revealed five overall themes that serve to enhance the categories and outcomes presented in this research. These themes are: a broad spectrum of healing resources are available to First Nations people; First Nations people have a different way of seeing the world that has to be understood before effective counseling services can be provided; First Nations people expect that whatever is healing should help them to attain and/or maintain balance; self-transcendence followed by connectedness is a common route to healing for First Nations people; and First Nations people are seen to act as agents of their own healing.

The findings of this study contribute to the field of counseling psychology by providing a reasonably comprehensive scheme of categories and themes that describe from the perspective of First Nations people what

facilitates healing. This study suggests promising developments in First Nations healing that have implications for both research and practice.

Prologue

Health means much more than freedom from disease just as healing means much more than the process of getting rid of disease. The classic definition of health and healing must be expanded to include components such as love, belonging, and balance. This article reveals one such model of healing as described by First Nations people of British Columbia.

I was motivated to do this study as a result of my experience counseling First Nations people in both British Columbia and the Yukon Territory. As a First Nations person myself, I have been able to combine my growing knowledge of Aboriginal culture and healing with the training I have received in counseling psychology. I refer to my knowledge of First Nations culture as *growing* because I did not grow up with my people (Mohawk of Kahnawake) and only started on the path to learn my culture in 1986.

After completing my MA in counseling psychology, I used traditional Western therapeutic approaches with First Nations people and often found that they were only moderately effective. For the five years (1986-1991) that I lived in the Yukon Territory, I worked as both a counselor with Indian Affairs and as a high school counselor in Whitehorse. This work enabled me to travel to all the First Nations communities in the Yukon and to provide counseling to hundreds of First Nations people. While completing my PhD in counseling at the University of British Columbia, I had the privilege of working as the counselor at the First Nations Longhouse and later as the Director of the Native Indian Teacher Education Program. It was then that I began to use culturally specific ways of counseling First Nations people in addition to more conventional Western approaches. On observing the success of the culturally specific methods I became interested in discovering other Indigenous paths to healing. From my own experience it was apparent that the most revealing source of such information was First Nations people themselves. This study was, therefore, designed to provide First Nations perspectives on healing that would benefit counselors, health care professionals, educators, and First Nations communities.

This study will be of benefit to counselors because they will learn ways of healing for First Nations people that are culturally relevant and effective. Counselors may be relieved to learn that there are many effective ways of healing for First Nations people. Their role as counselors may evolve to become that of facilitators who assist and enable First Nations clients to use one of the ways of healing described in this study. It is also hoped that counselors will assist First Nations people to use the findings of this study to further develop techniques and healing strategies. I believe that such collaboration between counselors and First Nations people can

lead to the development and refinement of powerful ways of healing for all people.

Those involved in the delivery of health services might benefit from this study as they no longer need to feel that they must adopt the role of “expert” in facilitating healing for First Nations people. They will learn that First Nations people have their own ways of healing that are both relevant and effective. I hope this study will motivate health professionals to continue this process of enquiry in learning about effective healing from the real experts, namely, First Nations people who have experienced healing. Such insight has the potential to change the way health professionals view the scope and nature of the delivery of health services provided to First Nations people.

First Nations educators will benefit from this study if the findings are used to develop a program to train counselors to work with First Nations students in school settings. Educators may also benefit because of the similarities between healing and education. An understanding of healing for our people can add to an understanding of what facilitates learning. The five outcomes of healing identified in this research—empowerment, discipline, cleansing, connecting, and balance—might also be similar to the outcomes of learning. It is hoped that the methodology used in this study might also be used by First Nations educators to conduct a similar study to examine the facilitation of learning.

First Nations communities may benefit from this study because the findings suggest some promising approaches that might be used by members in the community.

Please note that although I have attempted to use the contemporary term *First Nations* in the text, you may occasionally see the terms *Native*, *Metis*, *Indian*, or *Aboriginal*. These terms are used interchangeably and refer to the same people.

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