I. Introduction

Researchers in the field of intercultural counseling recognize that some therapeutic approaches might be ineffective or even harmful when applied without regard to the cultural background of the client (Sue & Sue, 1990). One cultural group that seems to be affected by a lack of cultural sensitivity in counseling is the First Nations population. Despite this population's disproportionately high level of suicide, drug and alcohol abuse, and other mental health problems (Nelson & McCoy, 1992), First Nations people tend not to use the counseling services provided by the majority culture, and of those First Nations people who do use such services approximately half drop out after the first counseling session (Sue, 1981). In an effort to address this problem, researchers in First Nations mental health (York, 1990; Lafromboise, 1988; Darou, 1987) have stressed the need for mental health theorists and practitioners to question the appropriateness of counseling methods presently being used in the treatment of First Nations people and to become familiar with mental health healing processes that might be more appropriate for First Nations people. As much of the theory and practice relating to the provision of mental health services for First Nations people is based on opinion and conjecture, it is important that First Nations people themselves be provided with an opportunity to provide information as to what facilitated healing for them. In response to this need to understand what First Nations people report as helpful, the research question for this study was: What facilitates mental healing among First Nations people of British Columbia?

Purpose of the Study

Through gathering reports from First Nations people, the aim of this study was to develop a set of categories that describe what facilitates healing. The categories are intended to further the development of a theoretical framework that is more in keeping with a First Nations world view. An investigation of this kind is intended to contribute to the larger field of intercultural counseling by providing data and information of culturally appropriate ways to facilitate healing for a First Nations population.

Rationale of the Study

There are several reasons for conducting a study of healing among First Nations people of British Columbia. First, there is a high incidence of mental health problems among First Nations people in British Columbia and the rest of Canada (York, 1990). In British Columbia alone the suicide rate for First Nations teens is seven times higher than the national average (Bellett, 1994). Other mental health problems such as depression and substance abuse are also significantly higher (Nelson & McCoy, 1992). It is therefore critical that more research on First Nations mental health be

undertaken so that mental health professionals can design culturally appropriate interventions.

Second, the field of intercultural counseling has paid little attention to the ways in which various cultural groups have organized their own means for obtaining help. These traditions are apt to define what is effective or sensible. In a study of the history of traditional Native healing, Katz and Rolde (1981) argue that helping networks have been in operation for many years. As Sue and Sue (1990) explain, some of these methods of healing have been dismissed as "unscientific, unprofessional, and supernatural" (p. 187) They argue that the mental health profession needs to examine the viability of traditional methods of healing and determine how they might be combined with Western healing. Several researchers have stated the need for an understanding of effective and ineffective mental health interventions for First Nations people. York (1990) argues that we urgently need to examine the appropriateness of the mental health services presently being offered to Native people. Neligh (1990) states that because psychotherapy for Native people has received so little study, there clearly exists a need for the development of a uniquely Aboriginal field of psychotherapy. Lafromboise (1988) recommends that psychologists become familiar with traditional Native mental health practices before they impose their own values on Native people. Everett and Proctor (1983) also believe that therapists cannot offer culturally appropriate mental health services until they understand the cultural values of Native people that pertain to healing. This study begins to address these recommendations by providing a broad set of categories that describe what facilitates healing for First Nations people.

Third, many of the programs and initiatives used by the majority culture to "assist" First Nations people have been unsuccessful. The residential school policy and the policy of assimilation are better known examples of "assistance" that were counterproductive (Anderson, 1993; Herring, 1989). These initiatives were considered to be a solution to what was seen as the First Nations problem of retaining a way of life and culture that was considered inferior to that of the majority culture (Haig-Brown, 1989). On a different scale, Atkinson, Morton, and Sue (1989) point out that therapeutic approaches such as client-centered therapy have also been unsuccessful when used with First Nations populations. In most cases the program or initiative used to assist First Nations people has not been based on research conducted with them.

Fourth, the present study was also undertaken as a way of addressing the lack of research attention given to understanding First Nations mental health. In an extensive review of multicultural counseling research, Ponterotto and Casas (1991) noted that few studies focused on mental health strengths of minority cultures. They emphasized the need for research that examined positive coping strategies used by minority groups.

This study is intended to fill the gap by providing mental health practitioners and researchers with an initial understanding of the healing processes that reportedly work for First Nations people so that culturally appropriate programs and initiatives can be developed to assist them effectively.

Approach to the Study

The methodological approach used in this study is based on the need to give First Nations people a voice in identifying what can help them in healing. First Nations traditions of healing have not been given enough serious consideration by the mental health profession (Lafromboise, 1988). It is therefore appropriate to bring these traditions forth so they can be examined. There is a great deal of knowledge available to mental health service providers through the process of speaking directly with First Nations peoples about what worked or did not work for them in the healing process. The Critical Incident Technique was used in this study because it allowed First Nations people to share their own knowledge and voice their own experiences. In addition, the Critical Incident Technique provided a reasonable approach to addressing the research question.

Tenth Anniversary Celebration

In 1997 we will be celebrating the 10th Anniversary of the First Nations House of Learning, University of British Columbia.

Throughout the year, many visiting speakers will be heard at special events and activities.

Come join in our celebrations!