HEALING THE WARRIOR'S SOUL: THE USE OF CEREMONY AND STORY IN HEALING THE INVISIBLE WOUNDS OF WAR

By

JANE BERRY

A capstone submitted to the
Graduate School-Camden
Rutgers, The State University of New Jersey
In partial fulfillment of the requirements
For the degree of Master of Arts
Graduate Program in Liberal Studies
Written under the direction of
Dr. Greg Salyer

Dr. Greg Salyer

And approved by

Camden, New Jersey
October 2017

CAPSTONE ABSTRACT

Healing the Warrior's Soul: The Use of Ceremony and Story in Healing the
Invisible Wounds of War

by JANE L. BERRY

Capstone Director: Dr. Greg Salyer

The men and women who fight our society's wars pay a high psychological cost. Levels of mental illness, homelessness, and domestic violence are high, and in 2014 veterans accounted for 18 percent of all deaths by suicide. Clearly this is a significant problem, not just for the veterans and their families, but for society as a whole. This paper examines whether, in caring for veterans, modern medicine can take any lessons from traditional Native American healing methods, in particular in the use of story and ceremony. It explores the concept of moral injury, the historical place of Native American healing, and its significant but often unacknowledged and overlooked contribution to modern medicine. It goes on to examine the way in which story and ceremony are linked, and at the power of story, and addresses the subject of healing the warrior, and the steps which are necessary in order to do this. Finally it touches on the role of story in the modern world, and on the importance of involving the entire community in healing the warrior's soul

ACKNOWLEDGEMENTS AND DEDICATION

I would like to thank Dr. Charme for creating this excellent and challenging program, and most of all for accepting me onto it, and allowing me to pursue my dream of taking my education to the next level.

Thanks also to Dr. Greg Salyer for his support and assistance in writing this capstone, and to Dr. Demaray for encouraging me to go ahead with choosing this subject.

Thank you to all of the professors whose classes I have taken on the program, they have all been interesting, challenging, and thought provoking; and to my fellow students who have made the journey enjoyable.

I thank my children, Nicola and James, for their support and encouragement.

I dedicate this paper to my husband, Robert, whose steadfast love, support, and belief in my abilities, has enabled me to embark on, and complete, this journey.

Healing the Warrior's Soul: The Role of Storytelling in Healing

War is a mythical happening....
Where else in human experience,
except in the throes of ardor....
do we find ourselves transported
to a mythical condition and
the gods most real?

- James Hillman

A Terrible Love of War

Introduction

Throughout human history societies have fought wars, and those wars have exacted a great toll from the individuals, the warriors, which those societies have sent out to do their fighting for them. The physical costs to warriors can be seen very easily: limbs lost, scars, disfiguration, and damage to sight and hearing. What are less noticeable are the invisible costs, the ones which are mental, emotional, moral and spiritual in nature. Through the centuries these costs have been known by many names – Soldier's Heart, Shell Shock, Combat Fatigue, War Neurosis and, more recently, Posttraumatic Stress Disorder (PTSD). Different labels but similar, devastating consequences for those who suffer from them, and for those around them, both their families, and for the wider

community. The results of several studies point to the severity of some of those consequences.

In 2016 the Department of Veterans Affairs published a report which found that in 2014 alone an average of 20 veterans died by suicide each day. Although veterans represented only 8.5 percent of the adult population, they accounted for 18 percent of all deaths by suicide. The report found that "after adjusting for differences in age and gender, risk for suicide was 21 percent higher among veterans when compared with U.S. civilian adults." (U.S. Department of Veteran's Affairs, 2016, p. 4). The website of the National Coalition for Homeless Veterans (NCHV) carries the information that veterans make up 11 percent of the adult homeless population, with 20 percent of homeless males being veterans. Whilst the transient nature of the homeless population makes it difficult to obtain accurate figures the NCHV estimates that almost 40,000 veterans are homeless on any given night, and that 51 percent of them have disabilities and 50 percent have serious mental illness (National Coalition for Homeless Veterans). Equally alarming is the high level of domestic violence perpetrated by veterans suffering from PTSD. A 2006 study, of couples seeking relationship therapy at a Midwestern Veterans Affairs (VA) medical center, found that 81 percent of veterans with PTSD had engaged in at least one act of violence against their partners in the previous year, the same rates were reported by those suffering from depression. This is a rate that is more than six times higher than that found in the general population. Of even more concern 45 percent of those with PTSD, and 42 percent of those with depression reported at least one act of severe violence – a rate that is 14 times higher than in the general population (Sherman, Sautter, Jackson, Lyons, & Han, 2006, p. 486).

Clearly there are significant problems facing many military veterans today, problems which affect not just the veteran but also those close to them, and there are implications for society in general. Conventional psychiatric medicine can help many of these veterans, however some doctors have begun to examine whether the ways in which non-western societies reintegrate their returning warriors, and help them to heal the invisible wounds of war might also be effective. In Native American cultures much of this healing centers around storytelling and ceremony, and this paper will examine the role of both in "healing the soul," and whether aspects of such traditional indigenous healing methods might have some relevance in the wider treatment of disorders such as PTSD

The Warrior and Moral Injury

In his book, *Warrior's Return: Restoring the Soul After War* Edward Tick tells us that, over the course of 5600 years of recorded history, mankind has fought more than 14,600 wars (Tick, 2014, p. 7). He comments that the only cultures which have not produced warriors have been those which have been completely isolated from other human societies. For the most part, wherever there are groups of people they have lived in competition with other groups of people, and they have developed warrior traditions to "initiate their young, protect their people, define identities and boundaries, gather resources, nurture children, and aid the elderly" (Tick, 2014, p. 7)

Common to virtually all societies have been a complex set of codes which define warriorhood, and which are made necessary by the violence which is inherent in the warrior's way of life (Tick, 2014, p. 9). These codes lay out the ethics by which the

warrior is expected to conduct himself, enabling him to protect himself from the psychological damage which come with killing another human being, something that is considered to be morally wrong in most cultures. Tick quotes a military ethics professor as saying that such warrior codes "serve as moral and psychological armor that protects the warrior from becoming a monster in his own eyes" (Tick, 2014, p. 9). For some these codes do not provide enough protection and some psychologists refer to the consequences as "moral injury." In most cultures the warrior came to be seen as a noble protector of the people – whether a Medieval knight abiding by the code of chivalry, or the Samurai living his life by the code of Bushido. (Tick, 2014, p. 10). At the heart of all of these codes are ideals of honor, and duty. One former South African paratrooper sums it up as follows "the spiritual core of submission and dedication to a moral authority greater than oneself is at the heart of things." (Tick, 2014, p. 10) and US Army chaplain Kevin Turner, who served with the Special Forces offers the following "the highest calling of a warrior is when they stand, even unto death, in the defense of one who has been knocked down." (Tick, 2014, p. 10)

According to Tick, one of the biggest issues facing modern veterans is that it has become too painful for society to accept what it is doing when it sends young men out to kill other young men, that we have "developed a national taboo against admitting this essence of warriorhood, leaving the veteran mistrustful of how he or she will be treated by non-veterans, fearing rejection, and hating the question 'Did you ever kill anyone?'" (Tick, 2014, p. 12). He contrasts this with traditional cultures, which do not hide this part of the warrior's job, either from the young who might follow that path, or from society. Tick quotes a member of the Pend d'Oreille tribe from Montana is quoted as saying "Our

word for warrior is *Sxwplstwe* (man) *or Sinmsci* (woman) which means 'one who is tasked to kill and/or take blood" ... there was never any pretense that the warriors in battle would do anything but kill our enemies." (Tick, 2014, p. 12) Tick's view is that everything about the warrior code, its unique spirituality, its traditions, tales and principle are "to a significant extent shaped around the most traumatizing action a person can perform: killing other human beings" (Tick, 2014, p. 12).

In ancient Greece Socrates taught that the essence of our moral character is our soul, it is that part of us which differentiates between good and evil, and if we make the wrong choices it can shrivel and die. In most societies, the taking of another life is considered to be morally wrong, and in order for the warrior to overcome this, to go against what they have been taught from infancy is evil, it has been necessary for society to come up with ways to justify it under certain circumstances. The concept of the "just war" is what has allowed Judeo-Christian societies to go against the commandment of "Thou shalt not kill," and as long as the warrior believes that he or she is fighting for a just cause they are able to justify, to themselves what they have had to do, and they can learn to live with it. The problems arise when they are asked to do something which violates their deeply held moral beliefs, or if they are "trained or used in illegitimate, abusive, disproportionate or immoral ways" (Tick, 2014, p. 14), under those circumstances the soul is wounded, and Moral Injury occurs

According to Rita Brock and Gabriella Lettini moral injury and PTSD are not the same thing, they argue that it is possible to have moral injury without PTSD, although, they say, "many books on veteran healing confuse and conflate them into one thing" (Brock & Lettini, 2012, p. xiii). According to them the difference is partly physical, with

PTSD occurring in response to danger, and being a response to danger, there are definite symptoms – flashbacks, nightmares, dissociation, and clinicians have treatments for it.

Brock and Lettini assert that it is only after the physical symptoms of PTSD are relieved enough that the moral questions begin to emerge. They describe moral injury as being the "result of reflection on memories of war or other extreme traumatic conditions, and say that in recent years clinicians working with veterans have begun to understand it as a separate, hidden wound of war.

Having identified the problem, the question arises of who best to treat it, and in trying to answer that question some clinicians have begun to look away from the modern, western medical model and towards the more holistic approach taken by many indigenous peoples. In particular, they have looked at storytelling and ceremony, and towards the growing field of narrative medicine.

The Historical Place of Traditional Native American Healing

The importance of story in Native American healing traditions is well illustrated in Leslie Marmon Silko's 1977 book *Ceremony*. In this book the hero Tayo, with the help of two medicine men, examines and transforms his own story, a journey which brings him peace and healing following the horrors which he had experienced in the Pacific theatre of World War Two. One author who has written extensively on the subject of narrative medicine is Lewis Mehl-Madrona, a part Cherokee doctor who has spent a lifetime examining traditional healing methods, and learning how to incorporate them into his practice as a modern physician and psychiatrist. In the introduction to his book *Coyote Wisdom* Dr. Mehl-Madrona tells us that "I realized that hearing and telling stories are

integral to healing. By hearing stories about healing from people who seem like us, we become inspired to believe that our own healing is possible." (Mehl-Madrona, 2005, p. 1) In talking about healers, Mehl-Madrona goes on to say that they "use the ancient art of storytelling – a masterful tool and, no doubt, the mother of hypnosis ... The wisdom for how to heal is contained within these stories, which serve as an orientation into a culture of faith and hope."

In looking at this subject it is important to keep in mind that in Native American tradition the word "healing" does not necessarily equate to the word "cure" as western minds understand it. Rather, it is concerned with the restoration of balance and, although some of the authors whose works have been studied for this paper have encountered tales of remarkable recovery from serious illness, in the majority of cases the process of healing has been more concerned with the cultivation of a sense of peace and acceptance.

The idea that in telling one's story, one can change its course in the future, is not entirely unknown to western minds, of course, even though it is not necessarily expressed or understood in that way. When someone sees a psychotherapist they are essentially telling them their story, and a good therapist will then help them to develop the tools they may need to alter the path that the story takes from then on. Another example would be that of a twelve-step group, such as Alcoholics Anonymous, where a major part of the recovery process comes both from hearing, and being able to relate to, the stories of other people, and in telling one's own story. Working through the twelve steps also involves examining one's story in detail, and in doing so learning to change it.

One of the greatest injustices done to the Native American people was that for almost a century their religious beliefs, and healing traditions, were outlawed. They were denied the right to practice any form of their beliefs, their ceremonies were banned, possession of their sacred objects was forbidden. In an extreme effort to annihilate those beliefs and practices, their children were forcibly removed and sent to boarding schools to be indoctrinated into Christianity and white American culture. The medicine men who treated Tayo in *Ceremony* were breaking the law by doing so. Cultural practices, especially medicine, were driven underground, in some tribes the traditions were lost altogether as those who knew how to perform the rituals died out. It was only in 1978, with the passing of the American Indian Religious Freedom Act (AIRFA), that the freedom of their religious beliefs was restored. Until then the authorities justified the denial of First Amendment rights of freedom of religion on the grounds that various treaties had given Native Americans the status of sovereign nations, and that as such they did not qualify for the same rights as other American citizens. In another of his books Coyote Medicine, Mehl-Madrona describes attending his first sweat lodge ceremony in 1973, with the ban still in place. The participants risked being sent to jail if they were caught, along with the possibility that their scared objects would be destroyed, a risk that was very real in an area where at least some fo the local police "were fundamentalist Christians intent on routing paganism from the reservation." (Mehl-Madrona, 1998, p. 36) He recounts that not all of the local population were antagonistic, and that the secret proceedings were invariably attended by the local Catholic priest, fully prepared to swear that they were orthodox Catholic proceedings, should they have been discovered by the police.

History has largely ignored, and/or underestimated, the significant contribution which Native American traditions have made to modern medicine. An introduction on the

fly-leaf of Virgil Vogel's 1970 book American Indian Medicine states the following "the disproportionate attention that has been given to the superstitious and unscientific features of aboriginal medicine has tended to obscure its real contributions to American civilization" (Vogel, 1970) Dr. Vogel draws our attention to the fact that "more than two hundred indigenous drugs which were used by one or more Indian tribes have been official in The Pharmacopeia of the United States of America since the first edition appeared in 1820" (Vogel, 1970, p. 6) In early accounts from European settlers much attention was paid to native medicines, particularly the use of plants, and many settlers turned to native healers as a last resort. Unfortunately, and despite the fact that the efficiency of much aboriginal medicine was apparently clear to the European settlers they chose to disregard the evidence. This was partly rooted in their conviction that they were the chosen people, destined to eradicate the pagans who were inhabiting the land promised to them though Manifest Destiny. This reluctance to learn from the native peoples was compounded by the equal reluctance of the latter to teach their methods. As their ceremonies and methods were sacred, forming part of their religious beliefs, only a very few, mainly missionaries and traders, were able to win their friendship and trust well enough to become privy to their secrets.

Although some of the earliest settlers may have had respect for indigenous practices this did not last, and by the late 1800s, writers such as James Mooney were dismissing their practices as worthless, arrogantly declaring that "it is absurd to suppose that the savage, a child in intelligence, has reached higher development in any branch of science than has been attained by civilized man, the product of long ages of intellectual growth" (Vogel, 1970, p. 103) In 1883 the Religious Crimes Code outlawed the

"heathenish" Indian customs which they considered to be hindering their full assimilation into American society, denying Native Americans the First Amendment rights to practice freely any religion which white America did not deem to be suitable.

Today there is increased interest in traditional healing practices, however they still tend to be dismissed by those in mainstream medicine who, sidetracked by the associated ceremony and ritual, tend to consider them to be superstitious nonsense. Nevertheless, there is some evidence to suggest that there are benefits to some methods, such as storytelling, and that modern doctors could learn something from indigenous healers, even if it is only from the perspective of the amount of time which they devote to their patients.

A Modern Shaman

Dr. Mehl-Madrona is a half-Cherokee physician and psychiatrist who graduated from Stanford as their youngest peacetime graduate. Whilst still at medical school he became disillusioned with the modern medical model, realizing very early that, rather than restoring the unwell to health, it was geared instead towards "slowing and making less painful the patient's inexorable and inevitable progress towards death." (Mehl-Madrona, 1998, p. 20) He contrasted this with the holistic methods of the folk medicine which had been practiced by his Cherokee grandparents, and he was drawn towards these traditional methods, incorporating them into his conventional medical practice, and eventually becoming a shaman. From traditional elders he learned that ideas about health and disease evolve from four questions "Who are you? Where did you come from? Why are you here? Where are you going?" believing that these are powerful questions

"because they force us to tell a story about ourselves" which then becomes our identity (Mehl-Madrona, 2007, p. 6). For almost forty years he has combined conventional medical practice with elements of Native American medicine, finding success in using this approach with patients from all backgrounds.

The Link Between Story and Ceremony

In his book Narrative Medicine Mehl-Madrona explains how story and ceremony are inextricably linked in Native American healing, with most stories about healing involving both ceremony and the power of the mind. He discusses the way in which ceremony "requires us to transcend our ordinary consciousness and enter a state in which healing is possible" (Mehl-Madrona, 2007, p. 65) going on to state that Western industrialized society is alone in discounting the remarkable experiences which people undergo when they enter such states. In his encounters with anthropologists he recounts that many believe that shamanism is an original form of science, involving what are, in essence, scientific experiments involving "focused human consciousness" as the primary tool. There are many forms of healing ceremony, and each of the Native American nations has its own way of doing things, but some things are common to many, and one of the most widespread is the use of the sweat lodge. Native Americans are not alone in using some form of sweat rituals, some form of sweat house has been found in healing traditions in Russian, Scandinavian, Jewish, Celtic, and some African cultures. This is in addition to the historic use of sweat for cleansing in Western Europe.

In Native American tradition the sweat lodge ceremony is important because it maintains the balance and harmony that ensures wellness. The ceremony provides a "time

for purifying oneself by joining with the powers of Mother Earth and those of the Universal Circle, for giving thanks and for asking that oneself and others be blessed" (Garrett et al., 2011, p. 319)

Sweat lodges are in widespread use today among Native nations, it is not uncommon to see small versions beside homes. Their use has also been increasing in therapeutic settings in recent years. In particular it has been seen as a way of mending the "broken circle" which is a concept among indigenous populations which sees the neglect of traditional ways as being responsible for disharmony and disease, whether in the individual, family or community. Garrett et al found that more than 50 percent of Indian Health Service facilities offer sweat lodges among their complementary treatments. They found that over the last four decades there have been more than 270 studies into the effectiveness of sweating treatments and they have been shown to promote numerous health benefits, from healthier skin and deeper sleep to improvements in hypertension (Garrett et al., 2011, p. 322). In one correctional facility a study, in 2003, showed decreased levels of violence, improved levels of sociability, and an improvement in medical conditions, along with an improved ability to deal with those problems. In addition, re-incarceration rates dropped dramatically among those who had been involved with sweat ceremonies, to only 7 percent, compared with a rate of 30-40 percent which was the norm for other inmates. (Garrett et al., 2011, p. 323)

The Power of Story

Roma Hellig Morris, a clinical psychiatrist, explains in a 1996 article how she came to use story in her own practice. Like Mehl-Madrona she had become disillusioned with conventional medicine and its reductionist views of disease. She began instead to use a model which incorporated stories and nature, drawing on what she refers to as the Native American Wisdom Tradition. It is her belief that stories are the primary means by which balance is restored. Many tribal healing systems are centered around the idea that "everything in the world is woven together in an intricate web of balanced relationships" (Hellig Morris, 1996, p. 98). Illness occurs when that web is torn, which interferes with the web of connections, the balance needed to maintain the web is delicate, and easily broken. It is the belief of many that the "hateful and greedy" thoughts of even one person are enough to destroy the communal balance, and break the delicate web (Hellig Morris, 1996, p. 99). Morris also emphasizes that Native American peoples are inseparable from their stories and ceremonies, and that this applies to the community as a whole, not just the individual. As a consequence "the well-being of an entire people is thus intimately bound up with the stories they tell" (Hellig Morris, 1996, p. 100). Morris contends that this idea of interconnection is incomprehensible to modern western medical systems which offer what she calls a "fractured and hierarchical vision of nature" placing man at the top of the ladder and giving a "distorted mode of human presence on earth" (Hellig Morris, 1996, p. 105-106). Because of this view, she says, doctors tend to see health as being apart from the environment in which their patients actually live, a direct contrast to the native American view which believes that "whatever we do to the web of life we do to ourselves" (Hellig Morris, 1996, p. 106) and urges us to recognize that the story of life is one which centers on mutual dependence between species. This belief in interdependence forms a major part of Tayo's story in *Ceremony*, he believes that by cursing the rain in the jungle he causes the drought back home, and in making his journey he is seeking to make reparation for this and to restore balance, not just to himself but also to nature.

It is Morris's view that despite a plethora of stories in modern culture, in many different forms, novels, film, soap operas, they bear little resemblance to the Native American healer's aim to restore balance among the delicate strands of life' web, and so are of very little use.

Dr. Mehl-Madrona echoes these views, believing that modern medicine tends to make much use of statistics and patterns in order to "talk about disease as if it were independent of the people who have it and their stories" (Mehl-Madrona, 2007). Another book by Mehl-Madrona was written in collaboration with his wife, a psychotherapist, they apply the latest neuroscience research into memory, brain mapping and neuroplasticity to the field of narrative therapy. In the book *Remapping Your Mind: The neuroscience of self-transformation through story* they talk about how we are "born into stories, stories about our conception, our history, about who we are supposed to become, about our parents and families, about our world" (Mehl-Madrona & Mainguy, 2015, p. 8) In their view we all carry with us a "master identity narrative" this is the story we tell other people in order to explain ourselves, by the time we reach adulthood, they say, we are no longer aware of the complexities of this narrative, it is simply our truth. According to Mehl-Madrona "illnesses unfold in us in the context of these stories".

Healing the Warrior

"When the brothers had returned to Mountain Around Which Moving Was

Done, they became weak and sick, and each day thinner. The Holy People sang and

prayed over them, but they still lost weight. They talked it over and decided they had

killed too much and had gone where earth people should not go. So they moved to

Navaho Mountain. There the Holy People gave Where the Two Came to Their

Father, four times, and they were cured after the fourth time. The Holy People then

said four prayers, in the four directions, and made the Painting of the Twelve Holy

People. This gave them a personal blessing, and came from the Blessing Way.

They then felt fine and could move as before. And they talked of living in the

future, and of the making of the future people." (Oakes & Campbell, 1969, p. 52)

The above passage is the conclusion to a traditional Navajo creation story in which two brothers, Monster Slayer and Child Born of Water, make a hero's journey to the home of their father, the Sun. After undertaking a series of trials they are finally acknowledged by him, equipped with magical weaponry, and return to kill the monsters

which it brings to their people, comes at a terrible price. The brothers become sicker, and sicker, until finally their Holy People realize that the problem is that they have killed too

which are threatening their home and people. However, their heroism, and the peace

sicker, until finally their Holy People realize that the problem is that they have killed too

many times, and "had gone where earth people should not go." The solution found by the

Holy People is to remove the brothers from society, and take them to a sacred place

where their own story is sung to them four times, along with prayers and blessings this cures them and they go on to live their lives.

David Kopacz, a psychiatrist working with veterans, and Joseph Rael (whose Tiwa name is Beautiful Painted Arrow) a Native American healer, use the story to illustrate the way in which they believe story works to heal. One of the key elements they believe is that the brothers were taken to a "sanctuary, a safe place that was neither war nor civilian society. They were given a special place. They were cared for and honored for the service they had performed, ridding the land of monsters. They also had their own story sung over them" (Kopacz & Rael, 2016, p. xxx). The authors believe that hearing and seeing one's actions reflected in story and ceremony helps to reinforce an individual's sense of place, and of who they are, and that this is healing, particularly when performed by civilian society.

The Navajo healer, Jeff King, who originally told the story to Maud Oakes in 1942, told her that he used the ceremony surrounding it before soldiers left for combat, and again after they returned home. According to Kopacz and Rael it is this return home which is the difficult part for most warriors. They liken the warrior's path to the hero's journey, a tale found in mythology throughout the world, from this Navajo tale to Homer's Odyssey, through Beowulf to the Quest for the Holy Grail. Wherever it is found the story follows a set sequence of separation, initiation and return, and it is inevitably the return to their community, and reintegration into it, which the hero finds to be the most difficult part of the journey.

So it is with the modern day veteran. As Kopacz comments "Veterans separate from their homeland, from their friends and family, and even from their own previous

identities. Initiation is boot camp, being deployed, and for some war and combat. The return is the most complicated part. The veteran returns home in body but there is often something still missing, some incomplete part of the initiation and the return" (Kopacz & Rael, 2016, p. xxx). The question that they attempt to answer is "How can veterans find their way home after war?" in asking this they are not simply referring to the physical home, and community, but also to the question of how the veteran can heal from PTSD or moral injury.

Human nature instills a strong resistance to killing other people, after Vietnam the US military conducted studies which concluded that many soldiers would not shoot at the enemy to kill. (Kopacz & Rael, 2016, p. 16) In order to bypass the moral instincts which lead to this reluctance military training was changed, working to overcome this to overcome this by desensitizing soldiers to the act of killing. They accomplish this by dehumanizing and objectifying the enemy, because long experience has taught military organizations that human beings are most effective at killing others if they no longer view the other person as a human being. (Kopacz & Rael, 2016, p. 13) They also attempted to bypass conscious thought, training soldiers to kill on command, reflexively and without giving it any thought. However, this does not remove the possibility of guilt once they have been able to give some thought to their actions. The authors also raise the very serious question of whether we really want to develop a military force that is not capable of moral reflection, potentially leading to atrocities. They point out that veterans "may feel as though they have lost their souls in combat, and are no longer who they were" (Kopacz & Rael, 2016, p. 17) they place this in the context of dehumanization, concluding that soul recovery is an integral part of rehumaization.

Kopacz points to military training and combat as a rite of passage, commenting that military life involves many different rites of initiation, but that what modern society is missing is an initiation rite for returning soldiers.

Native American culture understands the importance of ceremony as a way of preparing, protecting and healing the individual as they move through various stages of life. To this end warrior ceremonies play an important role, they are intended to protect the individual in battle and to instill in them the value of their tribe's traditions. Particular importance is placed on the understanding that warfare is damaging, that the warrior will encounter situations which threaten his wellbeing, not just physically but spiritually and emotionally as well. There are ceremonies to bless the warrior before he leaves for battle and others which are intended to counterbalance the experiences which he may have undergone. These are meant to cleanse the spirit, and to help him let go of his experiences, and also to transition safely back into the community. Failing to participate in such ceremonies is seen as being detrimental to the whole community, and many feel that failure to provide such ceremonies during past conflicts has resulted in lasting damage to their communities.

Native Americans enlist for military service in large numbers, and they form the largest per capita ethnic group in the US armed forces. Warriorhood is seen as being a life journey, away from thinking about self, and towards thinking about community. Within Native American communities there exists a proud warrior tradition. The values of service, loyalty and courage are seen as important values and young men, and increasing numbers of young women, are encouraged to develop them as part of their path towards becoming community leaders. As they were forced to assimilate, and were

deprived of their ceremonies service in the military became seen as a way to continue the warrior tradition. However, many tribes lost the knowledge of their military ceremonies during the time that they were outlawed. Some nations, such as the Zuni Pueblo, and the Navajo, continue to practice them, others are beginning to revive them, but much knowledge has been lost forever. In addition, modern methods of warfare differ considerably from those which were the norm when many of the ceremonies were last performed. In Silko's Ceremony Ku'oosh, the first medicine man who Tayo consults, feels that the old ceremonies are not adequate to deal with the scale of warfare seen in WWII, and is unsure whether he will be able to help. The attitude of the younger medicine man, Betonie, who essentially makes it up as he goes along, is similar to that of an Iraq War veteran, quoted on the Administration for Native Americans (ANA) website, who says 'People are afraid of doing the ceremonies wrong, because they don't know exactly how it was done in the past; but what's important is the *intentions* that people have when they do the ceremony" (Administration for Native Americans; storytelling for healing.)

A 2014 documentary, shown on a Utah TV channel examined the use of ceremony in treating returning veterans who are suffering from PTSD. Healing the Warrior's Heart (Telonidis, 2014) talks about some of the historical traditions surrounding warriors, and finds that there are lessons for today. In the Blackfeet tribe returning warriors had to follow certain procedures when they returned from battle. One of those procedures was that immediately on their return to the camp they went immediately to a large tent, where they were segregated from the rest of the community. During this period of forced quarantine they sat around a fire and exchanged their stories

of the battle. In this way they talked through their experiences, and expunged some of the mental wounds of battle. Sharing their war stories with their peers in this helped the warriors to undergo a process of healing, while at the same time there was a protective buffer zone between them and the rest of the community. Once the period of purdah was over they were welcomed back into the community with further ceremonies, and feasting. It seems to be an eminently sensible solution to the potential problems that can be caused by discharging battle damaged young men back into civilian society, with minimal debriefing and support.

Native Americans are not the only indigenous culture to recognize that returning warriors were in a dangerous state. Kopacz and Rael mention the Maori people of New Zealand who have a concept called *tapu*, which means "sacred" or "prohibited." Returning warriors were considered to be tapu and were required to undergo a ceremony which would return them to a normal state. In doing so they recognized that warriors were in a different energetic state to other people, and that they needed work before they could safely reintegrate into normal society. (Kopacz & Rael, 2016, p. 42)

In a 2007 paper Lawrence W. Gross examined the experience of Native American veterans of the Vietnam war in an attempt to find out whether the use of traditional methods of healing had been good for them, and whether there were lessons which could be used in the treatment of veterans of more recent conflicts. Gross found that Native American veterans encountered a number of barriers which prevented many of them from using conventional methods of treatment. Chief among these problems was that the Veteran's Administration (VA) system was difficult to use. It had no outreach to American Indian veterans, these veterans distrusted the VA, they lacked the resources

necessary to access it, and the system had no representation within their communities. As a result many of these veterans turned instead to traditional healers.

In examining the available literature Gross found that Native American veterans suffered from PTSD at greater rates than other veterans, however he concluded that this was probably because they were heavily exposed to combat, with some forty-two percent reporting that they had seen heavy combat, and a further thirty-two percent reporting seeing moderately heavy fighting (Gross, 2007, p. 375). As well as PTSD some eighty-one percent reported problems with alcoholism and around the same percentage experienced depression. However, they were less likely to experience other forms of substance abuse, and had a lower incidence of other psychiatric disorder. Importantly between sixty-five and eighty-five percent of those who reported that they had overcome their problems also reported that they had attended ceremonies aimed at dealing with the problem (Gross, 2007, p. 375)

Within the ceremonies story is all important. In Chapter 11 of Walking the Medicine Wheel Kopacz and Rael return again to the story of When the Two Came to Their Father. They draw particular attention to the part where "The Holy People gave Where the Two Came to Their Father, four times, and they were cured after the fourth time." (Oakes & Campbell, 1969, p. 52). They point out that in his commentary on the story Campbell writes "the one sung over becomes identified outwardly and inwardly, with the divine hero, and thus imbibes the power and the harmony of his perfection" (Oakes & Campbell, 1969, p. 53), and it is their view that this is intended to describe not only the way that an individual takes on the role of mythic hero, but also the way in which the person can be brought back from the mythic field of adventure to take their

place within society once more. Campbell, they assert, "illuminates another level of the story.: the psychospiritual level of myth that tells us not how to fight and kill external enemies, but how to be true human beings by conquering our own monsters" (Kopacz & Rael, 2016, p. 197). In this way, they believe, Campbell is describing the risks that the warrior is running when he steps outside the normal moral bounds of society to become a killer, and unless society acknowledges this, with some sort of ceremony, the returning veteran may become a monster. This, they say, is how many veterans actually feel, that they have lost their humanity, feeling only anger and rage, and unable to experience normal loving emotions. As a result many seek escape, in drugs, and alcohol, and in the end they "perpetuate the very violence and threat to society that they sacrificed their humanity to combat" (Kopacz & Rael, 2016, p. 197)

Necessary Steps to Healing

In *Warrior's Return* (Tick, 2014, p. 205-214) Ed Tick lays out six steps which he sees as being essential to the path of the warrior's return, those are

- 1. Isolation and tending
- 2. Acceptance of Warrior Destiny
- 3. Purification and Cleansing
- 4. Storytelling and Confession
- 5. Restitution in the Community
- 6. Initiation

- 1. Isolation and tending: In many indigenous societies returning warriors are seen as emotionally polluted, and are isolated from their communities. Their needs are tended to by holy people and elder warriors. Tick points out that our ancestors were deeply concerned by the polluting effects on the body and soul of violence and, most especially, contact with death. In the modern world returning soldiers are rushed home as quickly as possible, whereas our ancestors insisted on the restoration of purity. This can, he says, be seen as far back as the Old Testament where Moses insisted that anyone who had touched a corpse must remain outside the camp for a week, purifying themselves and all of their possessions, twice, before they could re-enter. As we have already seen the Blackfeet tribe insisted on isolation for their returning warriors, and other tribes had similar quarantine periods. These practices were meant to prevent the societal ills that we see all too often with today's veterans – the increased levels of domestic violence, suicide, substance abuse, and suicide. Tick reports that some National Guard units offer their troops a return retreat before they go home, others insist on periodic attendance at such retreats. Tick contends that if all retuning veterans were offered such assistance "we could reduce the numbers and severity of traumatic cases because we would replace neglect upon return with the proper circle of tending, thereby erasing a significant dimension of the betrayal wound" (Tick, 2014, p. 208)
- 2. Acceptance of Warrior Destiny: In this element the returnees remained separated until they were able to say a sincere and authentic "yes" to their warrior destiny (Tick, 2014, p. 208). Tick states that "Attending elders and

holy people listened deeply for their warriors' "Yes". That essential affirmation shifts something in the psyche....we agree deep inside to accept and work with our lots rather than live a life of angry protest and denial. Only when warriors found and declared this deep affirmation did thy leave isolation"

- 3. Purification and cleansing: This is an important part of the process, washing away the taint of blood and death that clings to warriors.
- 4. Storytelling and confession: Tick sees this as an essential step in the process. He comments that "Warriors, their families, and communities confess through storytelling. Stories release emotion, reveal secrets, educate, organize our lives into coherent narratives, point toward meaning. In the story we transform from victims to heroes and heroines. Stories transform events from personal history into community mythology. Individual warrior's stories become their culture's warrior mythology". (Tick, 2014, p. 211) Storytelling is, he asserts, a necessary step in restoration, and it is practiced in warrior cultures around the world, without it he says "we are not who we claim to be and are affected and poisoned by our disguises if we do not embrace our full and truthful histories. Not telling stories renders truth a casualty and our identities a mask." He points to the success of South Africa's in achieving significant national reconciliation by the means of their Truth and Reconciliation Commission, which allowed perpetrators of apartheid to tell their stories and admit their crimes before the entire nation, achieving a national catharsis in doing so. The idea of confession is an ancient religious one, in which one person represent

- the Divine and witnesses, in silence as a wrong doer tells his or her stories, cleansing their soul in the process. In this way, Tick comments, "secrets are released, and no longer work as an inner poison"
- 5. Restitution in the community: This works both ways, the community needs to take up the burden and the pain, while the returnee is forgiven and healed from private suffering. (Tick, 2014, p. 212). Because warriors serve under a mandate from their society many traditional societies practice a ritual whereby responsibility for damage, destruction and death is formally transferred from the warrior to the community. In this way the burden of guilt is lifted from the shoulders of returning veterans. Conversely, in many countries, veterans, and veterans' organizations make restitution by assisting in rebuilding, and repairing infrastructure damaged by war.
- 6. Initiation: Here Tick quotes a veteran, John Fisher, as saying "A veteran does not become a warrior simply by going to war. A veteran becomes a warrior when he or she has been set right with life." (Tick, 2014, p. 214). This process may involve an initiation rite, with awards, totems and community recognition.

Storytelling in the Modern World

Native American storytelling is an oral tradition, and because of that the digital era holds out new promise. According to Janelle Palacios digital means of recording

stories can "foster liberation from dominant socio-cultural world that continues to marginalize the marginalized" (Palacios, 2012). Palacios tells us that this is because digital storytelling allows the storyteller to control what it is important to tell, and it can facilitate problem solving. She cites the example of a rural Californian tribe who took part in an exercise of digital storytelling. The result was that problems were highlighted in the supply of affordable, healthy food. After the community and important stakeholders were shown the digital stories they were motivated to take steps to make much needed changes. This resulted in an improvement in the supply of fresh food in the supermarkets, food choices that targeted people with diabetes, and machines which allowed the electronic transfer of benefits. Palacios sees that there are advantages to be gained with digital storytelling both in the way that it can help to educate the wider world about their needs and concerns, while at the same time raising awareness, especially about health issues, within the communities themselves.

Conclusions

When I began the research for this paper my intention was to examine whether conventional medicine could learn from traditional methods of healing, specifically storytelling, in the treatment of veterans suffering from PTSD. The literature available suggests that western medicine can indeed learn some lessons from indigenous healing methods. Perhaps one of the most important being the value of time. Modern doctors have less time than ever to sit and listen to their patients, to really hear the story that they are trying to tell. Managed healthcare typically allows for a ten to fifteen minute slot per

patient and, rather than being able to sit and take a detailed history, doctors are often reduced to checking off a series of boxes on a computer checklist.

In the Native tradition the story is all-important, and it encompasses every aspect of the patient's life. The healer uses a mixture of story and ceremony in order to help the person see the ways in which they can take control and change the story. In doing so they have the opportunity to restore balance and find peace and healing, although not necessarily a cure in the western sense of the word. In some tribes, faced with a patient for whom death seems certain, the drastic step would be taken to change the person's name. the name, rather than the body, is what defines the person in native American tribal culture. Changing the name makes them an entirely new person, it wipes out the old story altogether, and allows for a new start, a new story, and the possibility of a new ending.

Many of the doctors and therapists who have been quoted in the paper have had success in using traditional healing methods to help veterans of all backgrounds find a new peace. In reading the literature, however, it became clear to me that storytelling alone is not enough. In native healing traditions story and ceremony are inextricably linked, each is completely dependent upon the other. As most native American ceremonies are sacred in nature they are not typically available to outsiders. However, it quickly became obvious that perhaps the most important aspect was the involvement of the entire community in the healing process. In indigenous cultures returning warriors are honored and celebrated for the sacrifices which they have made on behalf of their community. In wider society returning veterans are more likely to be regarded with suspicion, if not disdain, for the things which they have done on our behalf. As modern armies become smaller and more professional we are less and less likely to be personally

acquainted with serving military personnel. This results in a disconnect between warriors and the society which they serve, a disconnect which is widened if the cause for which they are fighting is perceived as being unjustified, or immoral. Modern technology beams the images of war into our living rooms, and public sympathies are fickle, turning in an instant from adulation to revulsion and rejection. Society as a whole could take a lesson from indigenous communities, Lawrence Gross believes that "it would be well for American Indians to work with various non-Indian groups to develop rituals and other practices appropriate to the non-Indian traditions to help non-Indian veterans recover from posttraumatic stress disorder and to honor them for their service" (Gross, 2007) in his view this is one of the most important tasks facing native peoples, that beginning with helping veterans would be a good start in overcoming the attitude, which he still sees as being sadly prevalent in society, that American Indian cultures "are nothing" and so have nothing to offer. He states that "if we can remain aware of our tendency to close our ears to the words of Native American healers, there is much that we might learn from them."

References

- Administration for Native Americans; storytelling for healing. (n.d.). www.acfhhs.gov/programs/ana/resource/native-american-storytelling-for-healing
- Brock, R. N., & Lettini, G. (2012). *Soul Repair: Recovering from Moral Injury after War*. Boston, MA: Beacon Press.
- Garrett, M. T., Torres-Rivera, E., Brubaker, M., Agahe Portman, T. A., Brotherton, D., West-Olatunji, C., ... Grayshield, L. (2011). Crying for a Vision: The Native American sweat lodge ceremony as a therapeutic intervention. *Journal of Counseling and Development*, 89(3), 318-325.
- Gross, L. (2007). Assisting American Indian Veterans of Iraq and Afghanistan cope with posttraumatic stress disorder; Lessons from Vietnam and the writings of Jim Northrup. *American Indian Quarterly*, 31(3), 373-409.
- Hellig Morris, R. (1996). The Whole Story: nature, healing, and narrative in the Native-American wisdom tradition. *Literature and Medicine*, 15(1), 94-111.
- Kopacz, D. R., & Rael, J. (2016). Walking the Medicine Wheel: Healing Trauma and PTSD. Canada: Pointer Oak/ Tri S Foundation.
- Mehl-Madrona, L. (1998). Coyote Medicine. New York, NY: Fireside.
- Mehl-Madrona, L. (2005). Coyote Wisdom. Rochester, VT: Bear & Company.
- Mehl-Madrona, L. (2007). *Narrative Medicine: The use of history and story in the healing process*. Rochester, VT: Bear & Company.
- Mehl-Madrona, L., & Mainguy, B. (2015). Remapping Your Mind: The Neuroscience o self-transformation through story. Rocheste, VT: Bear & Company.
- National Coalition for Homeless Veterans. (n.d.). http://nchv.org
- Oakes, M., & Campbell, J. (1969). When the Two Came to Their Father: A Navaho War Ceremonial given by Jeff King (2 ed.). Princeton, NJ: Princeton University Press.
- Palacios, J. (2012). Traditional storytelling in the digital era. *Fourth World Journal*, 11(12), 41-56. http://dx.doi.org/Retrieved from
- Sherman, M. D., Sautter, F., Jackson, M. H., Lyons, J. A., & Han, X. (2006, October). Domestic violence in veterans with posttraumatic stress disorder who seek couples therapy. *Journal of Marital and Family Therapy*, *32*, 479-490. http://dx.doi.org/Retrieved from

- Telonidis, T. (Editor). (2014). *Healing the warrior's heart* [Television Broadcast]. Elko, NV: Western Life Folk Center.
- Tick, E. (2014). Warrior's Return: Restoring the soul after war. Boulder, CO: Sounds
- U.S. Department of Veteran's Affairs. (2016). Suicide Among Veterans and Other Americans 2001-2014 (). Washington, DC: Government Printing Office.
- Vogel, V. J. (1970). *American Indian Medicine*. Norman, OK: University of Oklahoma Press.