CREATIVE ARTS, CULTURE, AND HEALING: BUILDING AN EVIDENCE BASE¹

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ABSTRACT

While Indigenous societies have acknowledged the healing power of visual art, dance, music, drama, and storytelling for millennia, the western world's recognition of the therapeutic benefits of the arts is more recent. The Aboriginal Healing Foundation recently completed a study of the use and benefits of creative arts in First Nation, Inuit, and Métis healing programs throughout Canada. This study presents compelling evidence that creative arts, culture, and healing are linked — to each other, certainly, and also linked to the idea that, when given the freedom to choose, community-based healing programs overwhelmingly include creative arts. The findings should be of interest to Aboriginal communities and organizations engaged in mental health and healing, policy makers, funding bodies, program managers, healers, counsellors, artists, governments, and academics.

^{1.} The authors wish to acknowledge all of the people in communities and organizations who took the time to respond to the Creative Arts and Healing Survey at a time when many were also in the process of shutting down programs or closing their doors due to the winding down of Aboriginal Healing Foundation funding. A special thank you is also offered to the healers, counsellors, and therapists who shared their ideas and insights about creative arts, culture, and healing in telephone interviews and to *Tsow-Tun Le Lum* Healing Society, workshop facilitators, and participants for allowing researchers to participate in the "Honouring Your Grief" art therapy workshop.

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BACKGROUND

In Canada, the destructive and disruptive impacts of the residential school system have resulted in a disproportionate need for healing among Aboriginal people, and the residential school legacy is itself part of a larger social construct known as historic trauma. Historic trauma is rooted in the long inventory of losses experienced by Aboriginal people under colonization — from the loss of lands, resources, and political autonomy to the undermining of culture, traditions, languages, and spirituality. These losses are experienced across time and generations (Wesley-Esquimaux and Smolewski, 2004).² It is not surprising, then, to find that the restoration of language, culture, and spiritual traditions has a positive influence on mental health, as reported by Dr. Lawrence Kirmayer and his colleagues:

More broadly, the recovery of tradition itself may be viewed as healing, both at individual and collective levels. Hence, efforts to restore language, religious and communal practices have been understood by contemporary Aboriginal peoples as fundamentally acts of healing. For most Aboriginal peoples, traditional subsistence activities (e.g. hunting) have been deeply integrated with religious and spiritual beliefs as well as with networks of family and community relationships. (2003, p. s16)

These findings are supported by research and evaluations undertaken for the Aboriginal Healing Foundation (AHF).³ For example, a study of 103 projects with promising healing practices found that more than 80% included cultural activities and traditional healing interventions (Castellano, 2006).⁴ Cultural activities and interventions included "[E]lders' teaching; storytelling and traditional knowledge; language programs; land-based activities; feasts and pow wows; learning traditional art forms; harvesting medicine; and drumming, singing, and dancing" (Castellano, 2006, p. 130). A notable component of successful healing programs was their diversity — interventions were blended and combined to create holistic programs that met the physical, emotional, cultural, and spiritual needs of participants. Not surprisingly, arts-based interventions were included in many cultural activities (drum-making, beading, singing, and drumming) as well as in therapeutic healing (art therapy and psychodrama).

^{2.} Wesley-Esquimaux and Smolewski (2004, p. 65) describe historic trauma as "a cluster of traumatic events and as a causal factor [whereby] ... [h]idden collective memories of this trauma, or a collective non-remembering, is passed from generation to generation."

^{3.} See section 9. Policy implications for a further discussion of the AHF's role and mandate.

^{4.} The AHF found that 80.6% of projects with promising healing practices included cultural activities (p. 130) and 85.4% included traditional healing interventions, including ceremonies (p. 134).

Inspired by these findings, AHF undertook a further study to examine the relationship between creative arts and healing. A survey of 137 First Nation, Inuit, and Métis projects funded by AHF during the period of 2007–2009 enquired about the use of creative arts in healing programs. The findings were remarkable: only 10 of 104 healing programs that responded to the survey indicated that no creative arts were delivered. Most projects included more than one art form and over half included seven or more such activities. Table 1 presents responses to the question, "Does your healing program involve participants in any of the following creative arts activities?"

Follow-up research included telephone interviews with 22 healers, therapists, and counsellors who incorporate creative arts into their work and a case study of a five-day art therapy workshop in a First Nation healing centre. This paper presents findings from the survey and the interviews with a special focus on the relationship between creative arts, culture, and healing.

Table 1: Creative Arts Activities

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Creative arts activities included in healing program			Percent
Visual Arts	a drawing, painting	69	66.3%
	b carving, sculpting	22	21.2%
	c beading	55	52.9%
	d mask making	21	20.2%
	e sewing	61	58.7%
	f drum-making	49	47.1%
	Total visual arts	88	84.6%
	g singing, chanting	64	61.5%
Music	h drumming	60	57.7%
	i playing musical instruments (other than drums)	34	32.7%
	Total music	72	69.2%
Dance, Movement, and Drama	j dancing	42	40.4%
	k drama, theatre	28	26.9%
	Total dance, movement, drama	51	49.0%
Writing and Storytelling	writing poetry, songs, and/or	48	46.2%
	m storytelling	62	59.6%
	Total writing and storytelling	73	70.2%
Other creative arts	n other ¹	48	46.2%
	No response	10	9.6%
1 Respondents wrote in	variety of other creative activities; build	ing a langh	ouce regalia

^{1.} Respondents wrote in a variety of other creative activities: building a longhouse; regaliamaking; collage; video productions; canoe and kayak-making; basket weaving; making corn husk mats; braiding sweet grass; tanning hides; embroidery; snowshoe-making; scrapbooking; traditional cooking; woodworking (birdhouse, rattles, masks); pottery; and making traditional parkas and sealskin kamiiks.

THE RESEARCH PROCESS

The study has been guided by the question, "What happens when art, music, dance, storytelling, and other creative arts become a part of healing programs?" Previous research and evaluations suggested that many projects had incorporated traditional creative arts into their healing programs and some were also using art therapy and psychodrama. The research began, therefore, with a review of data submitted annually to AHF by funded projects. However, it turned out that the reporting tool used by the projects did not adequately capture information about creative arts and healing, so in the fall of 2009, a questionnaire was distributed to all active AHF-funded healing projects.⁵ The Creative Arts and Healing survey enquired about the inclusion of creative arts in healing programs and, if included, what were the perceived benefits and challenges for participants. In all, 98 projects completed the questionnaire, a response rate of 71.5%. Six multiple responses were received from projects operating in more than one location or with more than one relevant program, resulting in a total of 104 returned surveys. Responses were received from First Nation, Inuit, and Métis organizations and communities as well as from Aboriginal healing projects operating in urban centres located across Canada.

Responses to open-ended questions were entered into a word processing program (for qualitative analysis) and an Excel template (for quantitative analysis) and codes were developed inductively based on what was actually said in the responses. A codebook was developed and, to ensure that the codes were consistently applied, every fifth response and a random selection of the remaining responses were independently coded by two researchers. In all, 44.2% of the benefits responses and 38.5% of the challenges were cross-checked.

In the next phase of the study, twenty-two key informant interviews were conducted; interviewees were selected from names suggested by respondents to the survey. Selection criteria included ensuring representation of the following: Aboriginal identity (First Nation, Inuit, Métis); province/region; urban, rural, remote; traditional healer, western-trained therapist; and modality (visual arts, music, dance, storytelling, writing). The interview consent form offered two options for identifying participants: full anonymity and identifying respondents by name. The option of having their con-

^{5.} The timing of this study coincided with the final years of the AHF mandate. At one time over 400 healing projects received funding; that number had dropped to 137 in November 2009, and the funding for the majority of these ended in March 2010. AHF itself is slated to close in 2012.

tributions attributed to them in research reports was provided in order to offer front-line experts the same acknowledgement as academics and others who write about their work. The interview guide contained nine open-ended questions and was administered by telephone. Responses were recorded by hand, then typed and returned to participants to review. The full study also included a case study of an art therapy workshop that took place at *Tsow-Tun Le Lum* Healing Lodge on Vancouver Island in May 2010. This article focuses on the survey and the interviews.

ETHICAL CONSIDERATIONS

The Aboriginal Healing Foundation sponsored the study. The inspiration for the research grew out of a gap identified in program evaluation data: based on the authors' familiarity with many of the projects, we were aware that the arts were playing important roles in healing programs, and yet information collected annually from projects revealed only a few references to the use and effectiveness of visual arts, music, dance, and writing in healing. Thus, the need for the research was rooted in the internal expertise of the authors: Archibald through past involvement as an independent researcher in AHF research and program evaluation, particularly the third volume of the AHF's Final Report, and Dewar as the organization's research director. The study was not submitted to a research ethics board but was subject to AHF's internal code of conduct (available from the Aboriginal Healing Foundation), and the research process was consistent with ethical research practices. Participation was voluntary and all participants were informed of the purpose and potential uses of the research. Organizations in receipt of AHF funding are obligated by contract to respond to program evaluation surveys and questionnaires, and response rates in such cases are close to 100%. There was no obligation to participate in this study and yet the response rate was over 70%. This is likely due to the trust, built over the years, in how AHF, as an Indigenous organization, uses the information it gathers, as well as the relevance to projects of the issues addressed in the study.

The interview consent form provided individuals with the option of having their name used in reports and articles written about this study; thus, where quotations have been attributed to named individuals, permission was provided. Consent forms were returned to AHF following the interview, thereby providing participants with an opportunity to reflect on what they had said before deciding whether or not they wished their comments to be reported anonymously. Participants were assured that if they

chose not to have their named used, confidentiality would be respected and no information that discloses their identity would be released or published. In all, 17 individuals provided permission to use their names, 3 preferred anonymity, and 2 consent forms were not returned, in one case because the person had moved when their employment ended; the other person did not respond to follow-up telephone calls.

EMERGING THEMES

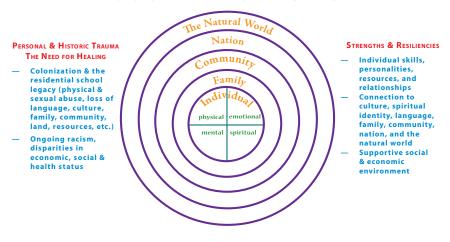
The findings provide evidence that creative activities are viewed as having healing benefits in themselves (*creative arts-as-healing*), whether the art forms used were traditional or western. Many people spoke of the healing benefits of drawing and painting, music, dance, writing, and storytelling. There were additional benefits associated with traditional arts. For example, among people who have been disconnected from their culture, learning a traditional craft or learning how to drum was a important step toward reconnecting with their Aboriginal identity and, thus, toward healing.

A second theme relates to the inclusion of creative arts in trauma recovery and therapeutic healing programs; the arts were viewed as deepening, supporting, and enhancing the healing process (*creative arts-in-therapy*). While these two themes explained a lot about the healing benefits of the creative arts, a third model was needed to complete the picture with respect to Aboriginal people: *Holistic Healing Includes Creative Arts*. This theme emerged because so many of the survey and interview responses transcended the two existing models and situated creative arts within the frame of culture, spirituality, and holistic healing. It captures the interrelatedness of creative arts, culture, and traditional healing and is consistent with holistic worldviews that stress balance, harmony, and connectedness. Figure 1 presents an overview of holistic healing and restoring balance in an interconnected world. The three models are depicted visually in Figure 2.

The circle in the centre represents the individual within the world; it is an interconnected world, and when all is well, the individual lives in balance — physically, emotionally, mentally, and spiritually within themselves and in balance within family, community, nation, and the natural world. On the left are the negative influences, both personal and historic, that explain, in part, the great need for healing among Aboriginal peoples. On the right are the individual and collective strengths and resiliencies, and these too have an influence on the well-being of individuals and communities. The goal of healing is to restore balance.

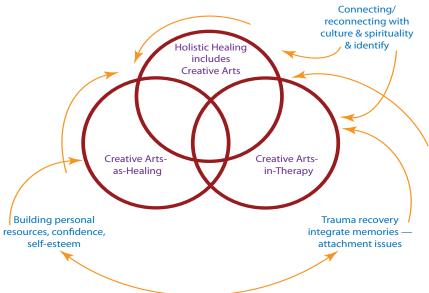
Figure 1: Holistic Healing = Restoring Balance¹

HOLISTIC HEALING = RESTORING BALANCE



1. The circles in this figure are based on a combination of Figures 2 and 3 (Castellano, 2008).

Figure 2: Creative Arts and Healing: Three Interconnected Models



The circle representing *creative arts-as-healing* focuses on the innate healing power of art and creativity while the *creative arts-in-therapy* model speaks to the use of the arts in the therapeutic process. The top circle, *holistic healing includes creative arts*, was needed to complete the picture with

respect to Aboriginal people because holistic healing transcends the other models by including creative arts, culture, and spirituality within its very definition. The circles are overlapping because often a healing program includes elements of two or all three models. The arrows show that the overlap is dynamic and the primary benefits of one model can support movement into the other areas or models.

Personal Development: Creative Arts-as-HEALING

[C]reative activities like beading, sewing, knitting, and carving are, in the end, spoken about by clients as being therapeutic. They find it grounding, centering, a way of being at peace within themselves. If someone is in turmoil, it's hard to come to that quiet place of concentrating: doing wonderful work with the hands brings the mind to rest. And with this comes being skilled; it builds skills and this brings self-confidence up a little more knowing they are able to produce this wonderful piece of work. Shame and guilt can be very high in people who have had traumatic experiences (Survey Record 91, [ON]).6

The survey included an open-ended question asking how participants in healing programs benefited from creative arts activities while the interviews asked about changes observed in participants. Almost 80% of the survey responses mentioned benefits related to personal growth and well-being (Table 2), and these findings were corroborated in many of the interviews. Benefits were associated with participating in creative activities, which were often considered to be therapeutic in themselves. The benefits were related to participation in both traditional and Western creative arts.

Among the survey responses, 42% of the programs that included creative arts reported increased levels of confidence and self-esteem among participants. Building self-esteem was often linked to the ability of participants to create something that could be seen, touched, or heard, something they were proud of: "Confidence and self-esteem are built through their finished product" (Survey Record 62 [MB]). People learned a new skill or improved an existing one, thereby increasing feelings of competence. Elisapee Davidee Aningmiuq in Iqaluit, Nunavut, remarked on the connection between creativity, confidence, and healing:

Inuit have been very creative in print, drawing, and sewing, and it's really hard for the artistic gift to come out if a person is hurting too much. There is no

^{6.} Survey responses were numbered as they were received and included initials indicating the province or territory.

Panafita	Count	Percent	Percent of Responses
Benefits	(n=104)	(n=104)	(n = 94)
Self-esteem	40	38.5%	42.6%
Product/ Accomplishments	28	26.9%	29.8%
Skill Development	24	23.1%	25.5%
Reduced Stress/tension	23	22.1%	24.5%
Openness and Creativity	19	18.3%	20.2%
Enjoyment	14	13.5%	14.9%
Self-expression	13	12.5%	13.8%
Spirituality	11	10.6%	11.7%
Thinking, concentration	6	5.8%	6.4%
Other (specify)	12	11.5%	12.8%
Total Records with Personal Development	75	72.1%	79.8%

Table 2: Creative Arts-as-Healing

question that creating is a part of healing, it brings the person out, their identity and self-expression, and it builds confidence in a person. I have seen young adults in the program who have never worked before and after the nine-month program, they have gained confidence in being creative with their hands and they went out and got work — office work, not creating with their hands, but their involvement in the program brought back encouragement, the will to do something. (interview, 24 April 2010)

Jill Goodacre, a clinical therapist and certified expressive arts therapist, works with children, adults, families, and groups on a reserve in British Columbia. She spoke about the impact of a children's traditional theatrical performance on both the children and their families:

The play we did with the youth generated a lot of pride — not just among the youth but also within their families and the entire community — seeing their kids perform on stage. There was a tremendous amount of pride as well as learning: stage techniques, memorizing and projecting lines, making costumes, drumming and singing in public. It was confidence-building for kids who have been marginalized to be seen prominently on stage. This was healing for them and their families. (interview, 13 May 2010)

Similar benefits were reported when youth in an Inuit community learned hip-hop, an initiative offered at the request of a group of young people who normally stay away from organized activities. Hip-hop includes breakdancing as well as creating poetry, artistic graffiti, and music. Jakob Gearheard, who works at the Ilisaqsivik Wellness Centre in Clyde River, Nunavut, spoke about some of the impacts:

Many frontline workers have noticed a lot fewer problems with these youth. A judge said there is a reduction in youth crime in the community and attributed it to the program — she's making the link, and local RCMP, and the visiting

mental health worker have noticed a reduction in suicide ideation among the youth who participate in hip-hop. Our own workers keep track of who has quit smoking and who is smoking less, harm reduction, and they notice a difference. (interview, 14 May 2010)

Once the program became a regular activity, the centre trained the supervisor and some of the participants in peer counselling and, informally, the young people have begun to watch out for one another. An unexpected outcome has been the connection between Elders and youth. Community Elders, curious about the activity, began to show up to watch the youth dance, and once in a while an Elder would try a dance move or scratch the turntable. The young people appreciated this interest and, in return, they asked questions about drum-dancing and throat singing:

Then the youth got interested in the Elders' dance and creative stuff and they asked questions, asked the Elders to teach drum-dancing. And throat singing goes well with beat boxing, it's a lot like throat singing in many ways. (Jakob Gearheard, interview, 14 May 2010)

Participants in healing programs made drums and then learned to play them and they wrote and recorded songs, created poems, told stories, performed in skits, and made videos. A sense of accomplishment is associated with the pride of completing a task and doing it well. Whatever the art form, effort was expended and the result was a product that could be enjoyed, shared, given as a gift, or sold. Making gifts for loved ones "gives them true pleasure" (Survey Record 26 [YK]). Another respondent noted, "It gives them opportunities to be generous" (Survey Record 71 [BC]).

In addition to the knowledge and skills acquired in learning an art or craft, there were numerous opportunities for personal growth. When making snowshoes, for example, there are ways to go back and fix mistakes, which is a good metaphor for life. The process involves "patience, precision, and finger work. You also stop to think about the meaning of the snowshoe and what each part of the snowshoe represents in our life and culture" (Interview #16, 28 April 2010 [translated from French]). Lucy Lu, an art therapist at Minwaashin Lodge, a support centre for Aboriginal women in Ottawa, noticed that participants often showed fear or anxiety when presented with art materials and no clear instructions. And yet "they do the art anyway and nothing bad happens so it helps them to face other problems in their life" (interview, 17 May 2010).

Almost one in four survey respondents reported that participating in creative activities relieved tension, reduced stress, and led to feelings of comfort and well-being. Others simply said the activities were enjoyable: participants laughed together and looked happier, less depressed. After dealing with difficult emotional issues in therapy, creative arts activities can have a soothing effect (Survey Record 45 [NU]). Participating in creative activities opened some people up to accepting new ideas and possibilities and they were able to look at things from a different perspective: "Creativity allows participants to solve problems in new and surprising ways" (Survey Record 20 [MB]). One healing program included creative arts to help clients relax and "use the creative parts of their brains," opening the door to learning new skills or enhancing existing ones and to feeling a sense of pride and accomplishment (Survey Record 71 [BC]). The impacts of this cannot be underestimated; people entering a healing program are often depressed and anxious and their lives have been in chaos for a long time. Any activity that makes them feel better about themselves will enhance and support their healing process. For some, the creative arts even provided a path to healing the spirit, comforting the soul, and gaining inner peace: "The spirit is reflected through creativity. Creativity is an excellent venue to reconnect individuals with their spirituality" (Survey Record 88 [ON]).

The benefits reported above suggest that people who participated in creative arts activities as part of a healing program gained confidence, learned new skills, were more relaxed, open, and creative, and generally felt better about their lives. These are positive outcomes. Expressive arts therapist, philosopher, and educator Stephen K. Levine wrote, "There is in the use of art a capacity for self-expression that is desperately needed by those who suffer intensely" (Levine, 1997, p. 4). The next section looks at what respondents have said about the contributions of creative arts to healing the longstanding traumas associated with the residential school legacy.

CREATIVE ARTS-IN-THERAPY

Art can be used to express emotions safely, ideographically. People learned in residential school that you are punished for speaking, so they lost their voice, they lost their capacity to express themselves. Art became the process of regaining voice. Stories can be told in pictures, in music and in movement; sometimes with tears, but often with lots of laughter. I realized that at residential school people learned not to play, so we turned it over, invented or created games and provided experiences whereby people could express themselves through play with the effect of helping them to rebuild trust in relationships, an essential ingredient in healing. We began to use play — drums, balls, stilts, string — and do things they didn't get to do as children. They expressed themselves as they would have, if allowed to be children. (Bill Stewart, Yukon psychologist, interview, 7 May 2010)

Healing from posttraumatic stress - and for survivors of residential schools and their descendants, healing from historic trauma - is a process that is now reasonably well understood in the field of psychology. Judith Herman's 1992 book Trauma and Recovery described how a history of prolonged periods of terror and abuse can lead to a deeply troubled state known as complex Post-Traumatic Stress Disorder (PTSD). Others such as Eduardo Duran and Bonnie Duran (1995) and Cynthia Wesley-Esquimaux and Magdalena Smolewski (2004) have written about historic trauma, a similar condition with roots deeply embedded in the history of what Aboriginal people in North America have experienced and endured. Healing from PTSD, according to Herman, requires passing through three stages: establishing safety and trust, remembrance and mourning, and reconnecting with the self and others. The healing stages involved in addressing historic trauma are similar but more complicated because the trauma is imbued in losses experienced by one's people in addition to whatever the individual has experienced. Thus, learning about, mourning the losses of, and reconnecting with family, community, culture, and traditions are significant parts of the healing process.

Just over 20% of the survey responses referred to ways that creative arts built trust and helped to establish emotional and cultural safety. Art therapist Lori Boyko spoke about the benefits of using art with residential school survivors: "Working with paint, chalk, clay, pencil crayons, or markers, people are able to work through memories of trauma and concretely create safety in images" (interview, 31 March 2010). Another person observed that for many clients, "spending time in a safe and culturally relevant environment initiated healing" (Record 40 [ON]). Safety and communication were often enhanced by involving participants in activities that occupied their hands. Reflecting on the programs offered in an Inuit community, Jakob Gearheard said,

[W]hen people are doing things with their body, there's a connection between body, mind, and spirit. They're being creative and active. Being fully engaged in a creative thing like sewing, the mind is engaged, the heart or creativity is engaged on a more spiritual level and they are physically engaged, working with the hands. It allows people to feel more secure, more safe. They're in an almost trance-like state and they go deeper into the issue they are talking about than if they were sitting face to face talking with a counsellor. (interview, 14 May 2010)

Approximately 60% of the survey responses described ways in which the creative arts contributed to, initiated, and supported therapeutic healing.

Most often this took the form of releasing strong emotions or recounting painful memories. In the interviews, a number of people addressed the need to reach trauma where it lives in the body:

I do a lot of work with movement because I believe trauma lives in the body, not the head, and therefore we need to be able to do movement to access the trauma. Different expressive arts work with the unconscious, therefore people who would suppress trauma, it comes out.... In a talking circle, people work with their heads, they can participate and still stay in control, it's not frightening. If trauma lives in a spot in the body, like a pocket on the hip, if you take it out, it festers if it's not filled up again with good stuff. Art is resource building, it fills the hole, builds good stuff in. (Carrie Reid, interview, 19 April 2010)

Table 3 summarizes the ways that creative arts contributed to healing.

Table 3: Creative Arts-in-Therapy

Benefit	Count	Percent	Percent of
Denegu	(n=104)	(n=104)	Responses (n=94)
Safely express / release emotions/ memories	32	30.8%	34.0%
Initiate / support healing	31	29.8%	33.0%
Self-awareness / Self-knowledge	14	13.5%	14.9%
Traditional healing/ Restore balance	12	11.5%	12.8%
Shared experience	9	8.7%	9.6%
Total records with Healing and the Creative Arts	61	58.7%	64.9%

There were many reasons given for the therapeutic effectiveness of creative arts. Expressive arts therapist Jill Goodacre described art as a powerful tool: "It accesses the unconscious and gets behind defences and survival strategies and allows people to develop insight — it's powerful because it allows people to reach their own insights based on their own work" (interview, 13 May 2010). The result was often a greater knowledge and understanding of the self. "Drawing and painting stimulates thinking; it evokes memories and participants are able to put into pictures these memories. This is a beginning of facing experiences and starting to heal" (Survey Record 94 [MB]). Talking about images and the feelings they evoke is an important part of the creative arts-in-therapy model. Coast Salish art therapist Carrie Reid spoke about her work with Elders:

[1]f the trauma occurred before they spoke English, they are unable to speak about it in English and that's a place I can do verbal work best when I am doing art therapy: they are able to express the trauma in the art, it takes it outside themselves, makes it tangible and then they can speak about it. The art leads to being able to speak. (interview, 19 April 2019)

Another art therapist, Lucy Lu, explained that speaking about the symbols and metaphors contained in images is valuable: "Talking about the images gives people a chance to voice that connection between the art and what is going on in their lives" (interview, 17 May 2010).

Music plays a similar role in capturing and releasing deep feelings. Singing and songwriting worked well at a women's correctional institution in Saskatchewan and with youth on a reserve in eastern Canada. Traditional healer Janice Longboat spoke about the changes she saw in a group of women who came together to sing:

[W]omen were asked to bring rattles and shakes and one of the singers on the reserve was invited as a facilitator to teach women's social songs. Well, the women opened their mouths and nothing came out — their voices were gone, all they could do was stand there and cry. That was the beginning of women finding their voice. I nurtured them until they found their voice, and they not only began to sing, they began to talk. (interview, 10 May 2010)

Longboat added that for Haudenosaunee women, singing is a part of their gardening tradition: "We sing to our seeds before planting — without a voice, you couldn't offer this spiritual part." The pivotal role of culture and traditional arts in healing is discussed in the next section.

Holistic Healing Includes Creative Arts

[A]s a means of expression that goes beyond personal resistance and language and cultural barriers, creative arts activities open a symbolic communication that brings more depth and personal and cultural relevance in the healing process. An integration of the healing transformative experience in a much comprehensive manner is attained when cultural symbols and spiritual aspects are included in the process. (Record 33 [QC])

Traditional therapists, being holistic in their approach, tend not to distinguish between creative arts and other aspects of their healing work: "Drum-making arguably can be characterized as a creative art although more in the genre of traditional art and practice" (Record 70 [ON]). This comment followed a description of the four types of drums and their uses in the Anishinaabe tradition and how some people have been gifted with the ability to translate visions into drums. Songs come from visions as well, especially songs used in therapy. Below, the therapeutic success of drumming and chanting are explained from the point of view of western and Aboriginal societies:

In western therapy it is said that drumming and chanting arouse the easy flow of neurons especially endorphins. In traditional therapy they are used to impart the healing powers of the spirits which have been practiced since time immemorial. (Record 70 [ON])

Another survey respondent wrote that when people can feel the vibration of a sound and understand that sound has a feel, they allow themselves permission to express their feelings in song (Record 55 [SK]). Traditionally, music had an especially significant role in healing ceremonies and this role continues to be acknowledged today:

Any of the music making processes bring healing to both the listeners and the players. It is long known in our culture that drumming and traditional songs are intended to be healing. They allow clients to feel a sense of belonging and/or identity. The songs are often ways to shift energy; to wrap clients in culture; to allow them to cry sometimes; and to bring joy others. (Record 71 [BC])

A number of people involved in interviews mentioned that drumming is an especially powerful route to healing for boys and young men. Also, drumming elicited strong connections to the spirit and to teachings related to the construction and proper use of a drum.

People spoke about traditional healing as encompassing culture, language, history, spirituality, traditional knowledge, art, drumming, singing, dance, and storytelling, as well as knowledge specific to the healer's area of expertise and the type of healing being undertaken. At the same time, for people who have been disconnected from their traditions, reconnecting through traditional creative arts can play a pivotal role in healing. One survey respondent wrote, "Cultural healing is a gentle non-intrusive approach to healing" (Record 4 [BC]). Overall, more than half of the responses mentioned how participants benefited from learning and participating in traditional creative arts, including sewing, beading, drum-making, drumming, dancing, and storytelling. The sense of belonging derived from discovering or rediscovering cultural roots, feeling cultural pride, and learning about the impacts of the residential school era were deemed to contribute to healing. Table 4 summarizes the benefits of including cultural arts in healing programs.

% of all Records % of Responses Count (n = 94)(n=104)Connecting/reconnecting with culture and tra-46.2% 48 51.1% Aboriginal identity/pride 37 35.6% 39.4% Culture is healing 3.8% 4.3% Total records with culture/traditions benefits 57 54.8% 60.6%

Table 4: Culture, Traditions and the Creative Arts

Cultural identity issues were mentioned often; participants gained a sense of belonging and came closer to healing through reconnecting with their culture and traditions. For many, learning to make moccasins or how to bead or drum was their first step in reconnecting with their Aboriginal background. One person pointed out that North American museums are filled with amazing pieces of Aboriginal beading and art work and by practicing these art forms today "our people have gained a sense of self and creative ability to connect with their Spirit and honour their rich history" (Record 80b [AB]). Others highlighted the need to restore what was lost.

Recognizing how the residential school legacy ravaged family and community life, one project used art-making and traditional crafts to promote family unity, build healthy relationships, establish support networks in the community, and help restore cultural identity. Participants benefited in the following ways:

- Decreased isolation and depression;
- Revitalized the role of the community Elders;
- Increased emotional and social support for Métis youth;
- Increased self-esteem:
- Restoration of cultural identity (Record 21 [ON]).

Understanding the history of one's people and the many impacts of colonization can enhance the healing process:

Another thing that is important in the program is the teaching of Inuit history. It lifts a lot of the confusion about why things are the way they are today, why many Inuit have lost their way. People begin to make connections. Northern visual images such as icebergs and mountains are used as illustrations and Inuit really connect with symbols that are a part of their lives (Record 91 [ON]).

Cultural arts added to the self-esteem and confidence that were built through other creative endeavours. For example, for Inuit women, learning to sew resulted in a greater appreciation for the culture: "It is a very important part of the healing process because it gives them the opportunity to learn a skill and grow an appreciation for their culture and traditions" (Record 82 [NU]). For another group, learning a traditional art form provided an "opportunity to pass on skills to their children or regain skills they lost or were devalued in the residential school experience" (Record 87 [NFLD/LAB]). Liz Stone, director of an urban Aboriginal centre, spoke about the changes she has seen in people who participate in cultural arts programs:

I see individuals come into the program meek, quiet, introverted, and after a while they take on leadership roles. After being involved in a culture-based program, they are no longer unsure of themselves. They will take new participants under their wings. Participants have taken part in fund raising activities where they share their experiences with strangers without shame. They open up more, they feel less alone, they have more confidence to pull themselves out of addiction, pull themselves out of abusive relationships, pull themselves out of unhealthy situations or lifestyles. They go back to school, try new things, and take others with them (interview, 4 May 2010).

In the interviews, people were asked separately about the healing benefits of creative arts in general and the impact of engaging in traditional arts such as beading, drum-making, or drumming. Responses affirm that for many healers and counsellors, creative arts and culture are so intertwined that it is difficult to isolate what particular aspect or activity is responsible for the healing they observed in participants. The benefits of creativity, of working with the imagination, creating with the hands, using the voice, and moving the body were spoken about in relation to both traditional and western art forms. And yet, when a traditional art form or cultural component was also involved, there was added resonance:

The cultural revitalization piece is huge and artistic modalities are so integral to traditional culture. People feel connected, reconnected through the arts, whatever the modalities, with culture it's healing in itself. People respond. I think there's a resonance with their traditional way of life whether it's being rediscovered or not. Art is a traditional mode of expression and so it resonates. (Jill Goodacre, interview, 13 May 2010)

Anishanaabe Elder Fred Kelly wrote that knowledge about sacred symbols is transmitted in "language, song, visual symbolism, mental communication, and practice of spirituality that do not separate the sacred and the secular in daily life" (Kelly, 2008, p. 37). This highlights an important difference between western and Aboriginal approaches to creative arts and healing. Powhatan creative arts therapist Phoebe Dufrene acknowledges similarities between art therapy and the use of art in traditional healing, but she points out that art therapy is primarily secular whereas traditional societies do not separate art and spiritual practices. Referring to the power contained in cultural and spiritual symbols such as the medicine wheel, eagle, full moon, owl, circle, and crescent moon, she said:

Traditional Native healers or shamans draw upon a vast body of symbolism passed down through the centuries. These images are stored in the memories of traditional healers and passed from generation to generation. Myths, pray-

ers, songs, chants, sand paintings, music, etc., are used to return the patient symbolically to the source of tribal energy. (Dufrene, 1990, p. 123)

Symbols and metaphors are central features in the stories and teaching of Elders. In this regard, traditional healer Janice Longboat also includes language: "Our culture is based on what we call symbolic literacy, meaning the symbols we use relate to life, what we see, feel, hear, taste and touch, and to what we intuit" (interview, 10 May 2010). American art therapist Bruce L. Moon (2007) states that in therapy, visual metaphors "foster opportunities to support, inform, engage, offer interpretations, provoke thought, and gently confront clients in ways that are potentially safe and psychologically non-threatening" (p. 15). Cultural, mythical, and spiritual metaphors are recognized as especially powerful.⁷ If those symbols were denigrated and repressed — and in residential school they were — then the act of rediscovering them in stories and visual art can be a healing experience. However, one of the healers interviewed for this study offered the following caution. Velma Mikituk said that "some people are so afraid of their culture because of things that happened to them growing up or, having been brainwashed in residential school, they think they are going to hell" (interview, 19 May 2010). In these cases, it is essential to address the trauma before introducing culture. "The roots are there in the culture when they are ready, and then it is so healing because it reaches their spirit" (interview, 19 May 2010).

Issues and Challenges

The questionnaire asked what challenges or problems face participants involved in creative arts activities.8 Twenty-two of the one hundred and four responses did not answer the question or wrote "no challenges." Of those that did respond, the most pressing concerns were related to issues and problems that participants faced within their program, and often overcame. The most common were related to insecurity and fear of failure, including lack of self-esteem, lack of trust, and feeling blocked, numb, or stretched outside of one's comfort zone. One person wrote, "It is very personal — it involves connecting with the body rather than the brain, and this experience would be challenging especially if the survivor coped by being numb" (Record 2 [SK]). For the most part, these personal feelings of inadequacy and discomfort did not stop people from participating in the activity and many of the personal development benefits discussed earlier are the direct

^{7.} For an excellent discussion of the use of symbols in western society see Furth (2002).

^{8.} This question was not asked in the interviews.

result of continuing in a program despite fears. One response addressed the need to introduce creative arts to residential school survivors in a way that ensures they feel safe:

Sometimes participants find creative arts activities threatening. These activities have to be introduced when the participant feels safe enough and is ready. The participant's boundaries must be respected first and foremost as healing and respecting boundaries is the primary aspect of healing from RS [residential school] abuses (Record 1a [BC]).

Participants were also observed to experience frustration and impatience and sometimes were unable to finish projects. Competitiveness was mentioned as a problem in a couple of responses. Others wrote about participants' reluctance to show or talk about their work and, on occasion, someone would experience emotional overload. A smaller number of responses reported personal issues and problems that likely inhibited participation in the program or activity: poverty, alcohol and drug use, denial, lack of motivation, relapse, and lack of interest. Other obstacles, such a lack of transportation, child care, and family support, may have inhibited participation or made regular attendance difficult.

On a broader scale, a number of programs were challenged by a lack of funds, human resources, physical space, and materials and supplies, the last being a particular problem for projects in urban areas looking for materials to make traditional arts and crafts. A few mentioned the need for personnel with the right combination of skills and knowledge:

Lack of cultural leadership can be a potential challenge when many of the cultural leaders are impacted by residential school and are reiterating culture through the lens or filtered by residential school experiences. (Record 19 [BC])

Some respondents mentioned challenges associated with the loss of traditional knowledge, culture, language, skills, and traditional values or difficulties finding Elders and teachers to provide traditional skills instruction. Community conditions, such as poverty, a culture of alcohol and drugs, or a lack of leadership, occasionally made it difficult for people to participate in creative arts and healing programs, as did facing discrimination and stereotypic views of Aboriginal people in the wider society. Finally, a small number of people mentioned programming issues, such as scheduling problems; the impact of weather and seasonal conditions; and the fact that the role of the creative arts in healing is often undervalued. One person pointed out the challenges associated with the lack of recognition of the healing benefits of creative activities and traditional arts:

Acknowledgement that this is a legitimate form of healing and counselling: For example, our sewing program is a 'traditional counselling program' — it is not simply 'stitch and bitch.' Western trained counsellors, psychologists and social workers often do not recognize this and they do not treat it as legitimate counselling. (Record 44 [NU])

Building Relationship/Building Community

In Trauma and Recovery, Judith Herman wrote about the role of connecting with other as essential to healing:

The core experiences of psychological trauma are disempowerment and disconnection from others. Recovery, therefore, is based upon the empowerment of the survivor and the creation of new connections. Recovery can take place only within the context of relationships; it cannot occur in isolation. (1992, p. 133)

Some respondents in this study reported that relationships were built and connections made among program participants, often leading to a decreased sense of isolation. For example, women in one program bonded and were then able to provide each other with support and guidance (Record 28 [YK]). Another respondent noted that residential school abuse left people feeling jaded and creative arts activities drew them out of their isolation. In addition, "Some participants share what they've learned and go on to use this knowledge as volunteers and in their work" (Record 79 [BC]). Another reported an increase of youth involvement in community events, including politics, sports, and community development (Record 23 [ON]). Some improvements were also noted in relationships within families. Table 5 summarizes improvements in social and community relations reported in the creative arts and healing survey.

% of all Records % of Responses Benefit Count (n = 94)(n=104)Building/improving relationships 29 27.9% 30.9% 10.6% 11.7% Building community 11 Total records with social benefits 32 30.8% 34.0%

Table 5: Social Relations

In the interviews, people were asked about changes they observed in the community since the introduction of creative arts and healing programs. The question was asked in 21 of the interviews: 16 reported positive changes; one said the approach was too new; and 4 provided mixed reviews. One person despaired that the wounds are so deep, so intergenerational that things may never change, and a couple of people said that even with the progress being made, there is a great deal more to do. In fact, breaking the silence around abuse in residential schools has opened wounds and created turmoil as well as helped many people take the first step toward healing.

Among the positive changes reported was an increase in community involvement and leadership with more people showing an interest in public affairs and taking on leadership roles. Not all of the reported benefits are attributable to healing programs, but they have made a positive difference, as noted by Velma Mikituk:

On reserve, a lot of leaders have been through here and at gatherings you see more positive stuff. There's more employment, leadership, healthy families — people are stepping forward in a leadership capacity, stepping up and wanting to make changes. (interview, 19 May 2010)

In some communities, more people are seeking therapy, an indicator that problems are being recognized and addressed. There are also more informal supports for people in crisis. Bill Stewart, a psychologist who incorporates a number of creative arts into his work, noticed big changes in the Yukon over the past decade:

People are talking more, participating in circles — circles are making an amazing comeback in the communities. Now, when a crisis occurs, First Nation people get together, there's a circle, people bring food and nurture one another.... Before, people scattered and started drinking. In the last ten years, there are more gatherings and when people gather, they bring food, and this is nurturing for the body and soul. I was called to one of the communities because of a suicide and by the time I got there, they didn't need me, they had opened a kitchen where people could eat 24 hours a day, there were circles; the people had gathered. (interview, 7 May 2010)

More cultural events are being held in communities and people of all ages are participating. Positive changes were also reported in community environments; in one case, the atmosphere was described as more welcoming and accepting. One person noticed a general trend toward wellness; another mentioned a critical mass of people having addressed their trauma and moved on. A few reported reductions in alcohol and drug abuse and, in urban centres, an increase in cultural pride. Finally, people noticed an increase in volunteering, helping friends and family, and even engaging in fundraising to support existing programs. A number of the interviewees mentioned becoming involved in counselling and healing after having been

through their own healing process — in effect, they wanted to give the kind of help and support they had received.

Policy Implications

The Aboriginal Healing Foundation was established with a \$350 million fund on March 31, 1998, with a mandate to deliver funding to support Inuit, Métis, and First Nations community-based healing services and activities which address the intergenerational legacy of physical and sexual abuse in Canada's Indian Residential School system. The mandate also included promoting reconciliation between offenders and victims, former students and residential school staff and administrators (the church entities and the Government of Canada), Aboriginal people and Canadian society as a whole, and within Aboriginal communities. In the spring of 2005 Federal Budget, the Government of Canada committed \$40 million for a two-year period to the AHF, which enabled the AHF to extend eighty-eight projects for thirty-six months, to March 31, 2007. No new projects were funded at that time. The Indian Residential School Settlement Agreement (IRSSA) of 2007 committed a further \$125 million to the AHF and the mandate was extended by five years, to 2012.9 However, there was no further funding for the AHF in the 2010 Federal Budget: the Government of Canada will now provide mental health supports to residential school survivors through Health Canada.

The AHF and its network of funded projects are unique. Unlike other funding mechanisms, project proponents were invited to tell the funder - the AHF - what survivors and communities needed and wanted; the model was not a top-down approach. Communities determined what they wanted to address and how they wanted to approach this. To further support these community-based initiatives, the AHF developed reporting tools that allowed it to study both the AHF model and the effectiveness of the approaches taken by individual projects, to the extent possible given the limited scope of its evaluation and research mandate. What the AHF has been able to communicate with the generous support of its project partners

^{9.} The \$125 million committed to healing in the IRSSA for former students of Indian residential schools has extended the timeframe of the AHF as follows: In 2007, AHF extended 134 funded projects to March 31, 2010, and 12 healing centres to March 31, 2012 — a total of 146 funded projects. In 2010, a government evaluation of AHF programs, as indicated by the IRSSA, was completed; it recommended ongoing funding. In 2010-2012, with no further funds coming to the AHF, a wind-down strategy was implemented. This means that, Canada-wide, 134 community-based programs funded by the AHF shut down their operations on March 31, 2010. In 2011-2012, there will be a final audit, followed by the closure of the AHF.

is the extent to which projects across the country, representing the vast diversity across and within First Nations, Inuit, and Métis communities, have contributed to the development of a deeper understanding of what healing means in the context of the legacy of residential schools, individual trauma, and historic trauma.

This study presents compelling evidence that creative arts, culture, and healing are linked — to each other, certainly, but also linked to the idea that, when given the freedom to choose, community-based healing initiatives overwhelmingly include some facet of the creative arts. This is further evidence that the model works and serves as a significant step toward the development of promising practice(s).

The issue for many of the participants in this study is summed up by one interview respondent:

The hardest part is that this type of healing doesn't fit into a box. There are so many components, you have to know the individual, fit the healing to the individual. I worry about it being turned over to Mental Health because they are fond of boxes there. Each program is different, there is such a diversity of need we have to meet their needs as individuals. That's the part, the other medical path is so much boxes and labels. (Velma Mikituk, interview 19 May 2010)

As the Aboriginal Healing Foundation prepares to close, its commitment to fostering a supportive public environment for community-based healing initiatives continues with a sharpened focus on ensuring that the hard work of AHF staff and its network of researchers, project staff, volunteers, and clientele, and the value of that work — in healing and in communicating challenges and successes — is widely disseminated. A difficult truth remains, however. The results of this study speak to years — up to a dozen in some cases — of careful collection of data and analysis within a unique set of circumstances, which are also set to lapse.

The AHF itself, including the resulting model and attendant processes, was a formal policy direction, as articulated in *Gathering Strength: Canada's Aboriginal Action Plan* in 1998. Such a direction may or may not be repeated in the future. Regardless, these results show that Aboriginal communities understand to a significant degree what best serves those individuals, families, and communities in response to historic trauma and the legacy of residential schools. These findings should inform current and future investments in healing and other therapeutic interventions; however, support for survivors of those schools and those affected intergenerationally now shifts squarely to the individual. Health Canada's Resolution Health

Support Program, which received additional funding in the 2010 Federal Budget, is meant to serve the needs of individuals as they move through the other components of the IRSSA: compensation, the activities of the Truth and Reconciliation Commission, and commemoration. Given that Health Canada's First Nations and Inuit Health Branch does not recognize art therapy (individual counselling under NIHB is only covered if the therapist also has a masters in counselling) and the fact that cultural activities are rarely considered by governments to be valid mental health interventions, it is clear that Aboriginal communities face a doubly, if not exponentially, challenging reality, which is that evidence of success in design, implementation, and outcomes does not necessarily lead to success in sustaining these efforts — and particularly where the creative arts, culture, and healing are concerned.

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