USING A JUNGIAN MODEL OF THE PSYCHE TO EXPLAIN TRADITIONAL ABORIGINAL APPROACHES TO MENTAL HEALTH

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INTRODUCTION

When we use the term "psychology," we are using a Eurowestern term about how the mind works that has no equivalency in Aboriginal understandings concerning healing. However, there are areas in both Aboriginal and Euro-western practices of healing where we may draw some parallels concerning mental health. This paper will attempt to address some of the similarities and differences between the two with an emphasis on Aboriginal understandings of healing in mental health using a model of the psyche developed by Dr. Carl Jung.

According to Jungian psychology as espoused by Dr. Carl Jung, there are three levels to the psyche; in other words, there are three levels on which the mind works. These are the ego conscious, the personal unconscious, and the collective unconscious. Jung (1989) believed that a person's ancestral past was locked up in the collective unconscious. Like Jung, Dr. A.C. Ross, a Lacota educator and psychologist, in his book *Mitakuye Oyasin*: "We are all related," relates his understanding of Jungian psychology.

Dr. Jung declared that the mind could be divided into three levels... The top part of the psyche, or the mind, Dr. Jung called the conscious, also known as the ego. This is the active thinking part of the mind, the part you use when you are awake. Below that level he called the personal unconscious where all the memories since birth are...This area of the mind is repressed or suppressed. The lower level of the mind Dr. Jung called the collective unconscious. He felt that latent memory traces from your ancestral past are stored in this area (Ross 1989, p.12)

Jung believed in the interpretation of symbols with deepseated meanings to them that were held within the collective unconscious and passed into the personal unconscious of a person through dreams. Through dream interpretation and understanding the symbols, Jung believed a person suffering from psychosomatic illnesses could be cured. Aboriginal healers, the symbols generally held even greater understandings than Jung recognized. Often they were considered to be archetypal spirits of the past who when called for helped in a particular situation. They would appear as symbols because between the collective unconscious and personal unconscious there was no direct channel, although all three levels of the psyche were tied to one another. In turn, they had to be deciphered much like a code does through the ego conscious. By dream interpretation, Aboriginal healers could bring a person's ego, personal unconscious, and collective unconscious into balance by clearing the channel of any obstructions that might be inhibiting a person's mental well being.

Both points of view, Jung's and those of Aboriginal people, agree on the fundamental point that, through interpretation of dreams, healing of distressed persons can transpire. This sometimes occurred through what Jung called psychodrama and therapy. One such form of an Aboriginal psychodrama is the Ojibwe medicine dance. Jim Dumont (1989), a traditional leader of the Midewiwin Lodge, explains that, through this dance, a person can be healed in body, mind, and spirit. The dance is a means by which someone can tap the collective unconscious and find a sense of peace by dancing oneself back into balance and good health.

The Ojibwe also believe that healing knowledge could be learned through the dream state where lies the doorway between the personal unconscious and collective unconscious. Jung would have referred to this as "tapping into the collective unconscious," wherein everything has an archetype. Archetypes are the primal forms of things after which similar things are patterned. For example, the archetype of a pine tree existed before pine trees ever existed on earth. As well, the archetype of a pine tree is where all other pine trees derive their nature. Jung believed that people possessed within themselves cultural archetypes or ancestral memory.

Aboriginal people such as the Innu of Labrador professed a strong belief in archetypes. They called the archetype of man *Mistapeo* meaning the great soul where direction could be sought and found. If a person knew how to be in touch with *Mistapeo*, he or she could be aided in matters of maintaining health, finding game to eat, and even lost persons (Speck, 1963). The Innu believed that all things first existed in the dream world. Noted anthropologist Frank Speck asked the Innu about this idea. Specifically, he posed to the Innu the following question: if this is the case, why have the Innu not advanced quickly in the area of technology like the white man? The Innu answered that it was not their way to need more than what they had and they were satisfied with it (Speck, 1963).

Like the Innu, the Ojibwe and Cree also believe that everything, including the sun, stars, plants, humans, and animals, has an archetype that can be tapped into. Moreover, certain trained people can be more in touch with archetypes tan others. Some of these archetypes, like the sun, benefit people while others, like ice, may do harm if conjured by the wrong person. The archetype of man is called *Wiskejack* by the Cree or *Nanabush* by the Ojibwe and is considered benevolent. An evil counterpart also exists and could seduce a weak person to do wrong. Even mentioning his name in Ojibwe could result in bad luck. Importantly, through the dream state, one could acquire knowledge, for instance, about medicines from the archetype of plant life. While traveling through Ojibwe country during the early nineteenth century, fur trader George Nelson wrote:

As with other spirits, communication with the head of the plant world was approached through fasting, dreaming and concentration. When they want to dream of these things, they must fast and lay down to sleep, keeping their minds free as possible from any thoughts whatever, and wholly bent and employed on that particular one alone (Brown and Brightman, 1990 p. 56).

Nelson goes on to explain that, once greeted by the guardian of the plant world, the dreamer is admitted through a door positioned in the midst of twenty rivers. Among the rivers is a mountain where doctors from every culture in the world are found. Inside a cave close by are other medicinal items, including bones and shells. Outside the cavern are medicinal

plants of every kind and the dreamer learns of their uses. Specifically, the dreamer learns about the medicines themselves, how they are used and prepared, how they are collected, and what songs go with them. Either the spirit of the plants or one's own guardian spirit give the person this medicinal knowledge (Brown and Brightman, 1990).

The *Rotinonshonni*, or "Iroquois," have medicine societies that participate in dream dances and dream interpretation. Such dances take place if a person, for example, has had a disturbing dream that manifests itself from the collective unconscious into the personal unconscious in a dream, such as a character who can bring misfortune. In Iroquois society, this character is called *Gagohsa*. If this is the case, the members of the medicine society, sometimes referred to as the false faces, enter a lodge and dance two dances: the rite of the common faces and the doorkeeper dance (Fenton, 1987). In early Iroquois lore, the false faces were given the gift to be protectors and healers. They acted as buffers between whatever psychological forces were affecting an ailing person as a result of something out of balance within them selves. Often the society's very presence offered comfort to them and contributed to healing.

Traditionally, during the five-day period of Midwinter festival, the Seneca people, a member nation of the Rotinonshonni confederacy, were immersed completely in dream therapy. During this period they would play out the roles from their dreams, looking as deeply as they could into their inner being, touching upon the very depths of their collective unconscious. After dreaming the night before, they would play a guessing game with another person as to what had been dreamed. At the same time, they would act out the dream that had filtered into their personal unconscious. This play-acting would fulfill the needs of the ego conscious of a person, resulting in good mental health if someone was able to guess what the dream meant. This process of interpretation would alleviate fears that had not been dealt with and that lingered within the personal unconscious of a person (Wallace, 1969). If the dream therapy did not take place, the person could be susceptible to illness as both the personal and collective unconscious of a person remained in a state of imbalance, thus affecting the ego conscious and resulting in sickness.

The Ojibwe and Cree have specialized persons involved in dream therapy. The Ojibwe refer to their dream therapists as Jeeskewin while the Cree refer to them as Miteo. The Ojibwe Jeeskeewin and Cree Miteo therapists enter a small lodge where they place themselves into an awakened-dream state. Upon placing them selves in a trance, they enter the abode of the collective unconscious where they will be in touch with the archetypal spirits who appear as more than symbols. They focus on the cosmic tree, which appears at the center of the lodge and creates an opening between the ego conscious physical worlds and the personal and collective unconscious dream worlds. From here they will be in touch with the ancestral archetypes of the universe. Within the Midewiwin tradition there are eight realms, four above and four below, of which a Jeeskewin can tap into within the collective unconscious.

According to James Sa'kej Henderson (1992), the Mi'kmag emphasizes six realms: the world beneath the earth, the world beneath the water, the earth lodge, the ghost world, the sky world and the world beyond the stars. The earth lodge is situated at the center of the others. It is within the realms beneath the earth lodge where dreamers find many of the medicines used in healing and are at the deepest levels of the collective unconscious.

Dreams are also a way for someone to establish identity and relationships with other beings. It is while they are in between a dreaming and an awakened state that elders say communication occurs between the dreamer and the ancestral archetypes. The process for this to happen requires fasting without food or water for prolonged periods of time or what is known as going on a vision quest. It is while fasting that a person is able to enter into the altered state that Dr. A.C. Ross and Dr. Carl Jung refer to as the collective unconscious. It is in between the personal and collective unconscious that a door opens allowing individuals and ancestral archetypes to discourse and make alliances with one another and where persons can tap into the healing energies that exist within oneself.

These ancestral archetypes within the dream world are referred too by the Ojibwe and Cree as *Atisokanak*, and sometimes as Puwaganak or Manito. The *Atisokanak* can help a person avert a crisis in life and have the ability to heal illnesses that have resulted from the mind. The Iroquois refer to the

ancestral archetypes as *Oai:ron*. Like the *Atisokanak*, the *Oai:ron* have healing properties within them referred to as *Oren:ta*, which is an energy situated both inside and outside both the mind and body. The *Oai:ron* and *Atisokanak* are malleable and transmutative, allowing them to take different forms in the personal unconscious dream world of a person. When the energy from them is applied to someone who is sick, they are able too be healed.

Dreams are also used for acquiring spiritual names that can create a bridge between the ego, personal and collective unconscious of a person. For example, an individual will ask someone who is experienced in dream interpretation to help them find a name. The person whose advice is sought is usually an elder or someone knowledgeable in the healing methods of the culture. It may take several years before an Elder is informed in a dream by an *Atisokanak* of a suitable name for the person they are to name. Being named serves as an identity marker for the person, establishing the individual in a relationship with the ancestral archetypes and allowing the person to tap into its essence for guidance. This is fundamental to Aboriginal psychology, wherein everything is based on relationships within and without.

It is important to understand that when dealing with ancestral archetypes within the collective unconscious, a person with bad intentions will receive benefits for only a short time. These ancestral archetypes will eventually rebound against the personal unconscious of the person if not put to good use and can result in sickness or even death. In the Ojibwe understanding of life, everything comes full circle eventually. This is why advocates of the Midewiwin society are so stringent in their conduct. They know that one must have strong moral convictions when forming relationships with ancestral archetypes. This is why they emphasize the seven moral teachings: honesty, respect, kindness, bravery, wisdom, love, and humility. When a person is living up to his or her potential by practicing these values, the person can then be a practitioner in the healing knowledge of the society.

Over the years, Aboriginal people have lost some of the skills that their ancestors knew for bringing the mind into balance and good health. For instance, the Iroquois, Ojibwe, Innu and Cree had in the past elaborate communal ceremonies that dealt with mental anguish and grieving. The loss of various forms of traditional healing methods has affected Aboriginal people in their recovery from colonization with serious implications for their well-being. Forced education, Christian missionizing, and misunderstanding have occurred at the expense of traditional forms of healing methods and have eroded the balance needed for good mental health.

Mi'kmag educator and scholar Marie Baptiste comments on how the Western educational system has affected the psychology of Aboriginal people and, in particular, Aboriginal youth. She refers to this phenomenon as cognitive imperialism, "This educational process is called cognitive imperialism, the last stage of imperialism wherein the imperialist seeks to whitewash the tribal mind and soul to create doubt" (Barman, Hebert and McCaskell, 1989:37).

Baptiste is referring to the effects of residential schools and the western education system on the psyche of Aboriginal people and the doubt ingrained in many Aboriginal youth today about their identity. This unfortunate situation is due in part to the fact that some members of traditional societies have come to believe the versions of culture and history set down by Europeans. This is most evident when it comes to Aboriginal understandings of healing, as in the overemphasis put on bad medicine over that of good medicine in some Aboriginal communties. Certainly there is overwhelming evidence to suggest that Aboriginal children have suffered from the social modeling they received in residential schools and the colonial education forced upon them. Often the price has been fear and an internalized hate for anything that reminds them of their Aboriginal identity. This has resulted in a closing off of the collective unconscious wherein lies ancestral memory, from the ego and personal unconscious of the person, resulting in a state of mental instability.

Add to these unfortunate realities death through disease as well as loss of lands, traditions, language, and children. The result is severe mental trauma among many Aboriginal people in the Americas.

According to psychologists Eduardo and Bonnie Duran (1994), there are four stages of Post-Traumatic Stress Disorder as experienced by Aboriginal people today that affect their mental

- well-being. These stages are indicated below (which I have further elaborated on):
- 1) Impact or shock: The first phase starts at the moment a community and its people are traumatized. This is where the ego splits in a person in order to avoid complete dissociation from his/her natural surroundings. There is a partial or complete regression, which allows the complex to develop a life of its own in the personal subconscious. He/she begins to shut out from the collective unconscious, wherein lies ancestral memory which ties one to the archetypes of the past. This results in symptoms beginning to manifest themselves in the personal subconscious, which are then acted out in the ego conscious. A lack of a resolution to the colonial structures being imposed on them result in symptoms that require some type of medication. The fact that the colonial structures remain is a continual source of aggravation, which cannot be expressed and therefore become repressed. The repressed feelings of loss and rage develop a life of their own in the personal unconscious or in the 'black world' and continue to haunt the person due to the need for these feelings to become resolved and thus allow the person to regain harmony within. Add to this, if the person does not medicate themselves, then the only defense left in the light of pain is complete disassociation between the ego conscious and collective unconscious where ancestral memory is retained. The person no longer has an awareness of who they are, thus rendering them feeling as if they are nonexistent. Complete disassociation from oneself as an Aboriginal person is the end result for some and can result in mental illness.
- 2) Withdrawal and Repression (Warrior Regression): At this point, a person may survive psychologically in the only way available to them. One of the quickest ways is to withdraw emotionally and literally shut down emotions so as to avoid the pain of what has occurred. Many of our grandparents who went through the residential school experience suffered from this and then passed it down to our parents. The traditional understanding of provider has been withdrawn from the world, leaving an emptiness or emotional hole in the life of the person, family and community. Attempts at being a provider and defender are plagued with problems, which for the most part are expressed in non-constructive ways. Aboriginal men often try to regain the role as protector and provider by joining the military. In fact they have a high enlistment rate serving in a "beyond the call of

duty" manner. By serving as a soldier, the traditional role as protector has found some expression once again, except that the man is serving as a soldier protecting the way of life of those who have destroyed his traditional way of life. Serving in the colonial army can only contribute to the dissonance and splitting away from their identity as an Aboriginal person.

- 3) Acceptance/Repression (Magical thinking): This phase is characterized by denial; the person attempts to believe that they are getting things under control and things are not as bad as they see or that they will get better through some miraculous intervention. There have been many instances in the history of the colonization process where Aboriginal people believed that if they had the right medicine that their way of life would be magically restored. The Code of Handsome Lake of the Iroquois is one example and the Ghost Dance of the Lakota is another of the magical thinking complex that by following a certain belief the world will be restored to its natural order. That ideology persists even to this day. Others turn completely away from Aboriginal belief systems and join fundamentalist Christian organizations that take control over the decisions in their lives, thus rendering them completely disassociated from their collective unconscious resulting in further illness within themselves. The cohesion of an ancestral-based community is what gives medicine its effectiveness. Without that cohesion the medicine loses its power.
- 4) Compliance and Anger (decompensation): The person at this point realizes that things are going to continue to be bad and optimism is unrealistic. This can create a sense of uncontrollable anger. The person cannot control the rage and does not know to whom the rage is targeted or where to target the rage. In many instances the anger is targeted against members of one's own family and other members of one's own Nation. This can result in those who have disagreements about tradition releasing their anger against one another. This is the point at which the internalized hate for their situation can result in hate for others who may not be in agreement with their own ideology. This is also a result of the colonial divisive process that has been internalized. The appropriate target for the hate is not realized and instead of the anger exploding outside it implodes inward upon one another as they struggle in trying to restore their fractured identity (Duran and Duran, 1994:40).

The effects of Post-Traumatic Stress Disorder associated with cognitive imperialism have resulted in serious mental health problems for many Aboriginal people by casting doubt on the viability of their own traditions as a part of the healing process. The underlying effect of this is endemic suicides among the young who question the place of their traditions in contemporary society, leaving doubts about their own identities. Even some elders are unsure that their traditions have a place in a contemporary world (Barman, Hebert and McCaskill, 1989). Significantly, there is one last stage that exists, and it is a positive one.

5) Trauma Mastery (healing): This is the stage at which the person must arrive in order to be healed. By understanding the dynamics of the trauma, the person becomes open to the truth of the situation and anger and frustration become pointed at appropriate targets. Understanding the collective circumstances of one's people allows the individual to understand that he or she is a victim of something that occurred years before and that is continuing to play out negatively in Aboriginal communities even today. It is this stage that the person progresses to true healing. For Aboriginal people, this may combine Euro-western and Aboriginal forms of healing. For some it may mean visiting a Western psychologist or joining a self-help group or using traditional practices with an Elder. Others may combine all three options or choose one form or another. However, to be truly healed, there must be a cultural element. In most cases when someone has reached this level, they are able to make clear-minded decisions about life and are not susceptible to the negative influences of others. They are then ready to take responsibility for past negative behaviors. Until the person does so, no healing takes place. At that time the passage way to ancestral memory and the ancestral archetypes is once again cleared of any obstructions and the end result is good mental health (Duran, Duran, 1994:41)

Traditional fasting or dream-questing is one form of traditional therapy that can mend the rift that has occurred through cognitive imperialism between the ego conscious, personal and collective unconscious of a person, bringing balance back to the mind, resulting in good mental health. It is through traditional fasting whereby elders/therapists have traditionally mended the splits that have occurred within the different levels of the mind of a person.

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