

## ***Wakiksuyapi:*** **Carrying the Historical Trauma of the Lakota**

Maria Yellow Horse Brave Heart

*The Lakota (Teton Sioux) historical trauma response is a constellation of features associated with massive group trauma across generations, such as the 1890 Wounded Knee Massacre and the removal of children to federal boarding schools. Similar traits have been identified among Jewish Holocaust descendants. This article presents both quantitative and qualitative data on the experience of Lakota historical trauma among a coping segment of the population. The data supported the theory of a Lakota historical trauma response. Wakiksuyapi, those carrying the historical trauma, can transcend trauma through a collective survivor identity and a commitment to traditionally oriented values and healing.*

The Lakota (Teton Sioux) historical trauma response is a constellation of features associated with massive group trauma across generations, such as the 1890 Wounded Knee Massacre (Black Elk & Neihardt, 1932/1972; Brave Heart, 1998; Brave Heart-Jordan, 1995; Lakota Times, 1990) and the forced removal of children to federal and mission boarding schools (Noreiga, 1992; Tanner, 1982). Similar traits have been identified among Jewish Holocaust descendants (Fogelman, 1988; Kestenberg, 1990). This article presents qualitative data on the experience of Lakota historical trauma.

The development of a Lakota historical trauma response theory and its features are presented. Imbedded in this discussion is a review of relevant trauma literature. Further, the concept of *Wakiksuyapi* (Memorial People) is defined. Quantitative data from historical trauma intervention research, which support the theory of a Lakota historical trauma response, are briefly reported. Next, the qualitative study is described and the findings elucidated. The article concludes with recommendations for future research.

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### **WAKIKSUYAPI AND THE LAKOTA HISTORICAL TRAUMA RESPONSE**

Lakota history has been traumatic. Legters (1988), Stannard (1992), and Thornton (1987) detail the genocide perpetrated against Native people. Tanner (1982) asserts that the United States had no intention of long-term Lakota survival but treaties became more affordable alternatives to war. The policy of genocide is detailed in congressional documents: "[Indians] are to go upon said reservations . . . they are to have no alternative but to chose between this policy of the government and extermination" (U.S. Senate Miscellaneous Document cited in Brave Heart, 1998, p. 288).

In 1890, Tatanka Iyotake (Sitting Bull), the personification of traditional Lakota leadership and resistance, was viewed as a threat by government officials. On December 15, 1890, Tatanka Iyotake was assassinated. Several of his survivors and followers fled in fear to join Sitanka (Bigfoot). Sitanka and his band also feared persecution by the cavalry who in fact followed them to Wounded Knee. Here, these hundreds of Lakota were disarmed and then massacred at Wounded Knee Creek on December 29, 1890, their bodies thrown into a mass grave (Brave Heart-Jordan, 1995; Lakota Times, 1990; Miller, 1959/1985). This massacre has reverberated through the hearts and minds of Lakota survivors and descendants.

An additional trauma for Native people has been the placement of American Indian children in boarding schools, sometimes over 1,000 miles away from families and tribal communities, under federal policy since 1879 (Brave Heart-Jordan, 1995). Tanner (1982) described the mistreatment of Native children being shackled and chained to bedposts, and beaten in boarding schools. Further, overcrowded and deficient conditions fueled the tuberculosis epidemic from which more than one-third of the Lakota population over one year of age died between 1936 and 1941 (Tanner, 1982). Gradually, many boarding schools were replaced with regular reservation day schools but individuals report boarding school trauma even as late as the 1970s (Brave Heart, 1999a).

### **DEVELOPMENT OF THE THEORY OF LAKOTA HISTORICAL TRAUMA**

As a Lakota immersed in Lakota culture and history, I have been examining generational trauma and its impact for the past 20 years, first as a clinical social worker and more recently as a clinical researcher. Personal cognizance of *historical trauma*—cumulative wounding across generations—facilitated the development of the theory of a Lakota historical trauma response.

Carrying an ancestral legacy of trauma as a lateral descendant of Tatanka Iyotake (Sitting Bull) and a member of the *Wapaha Ska tiospaye* (White Lance extended family kinship network) who are Wounded Knee descendants, I became conscious of my own unresolved historical trauma in 1978. I began incorporating this concept in clinical work as well as community training and healing workshops, initially describing this phenomenon as the historical legacy and then intergenerational Posttraumatic Stress Disorder (PTSD). In 1988, I developed the theoretical construct of the historical trauma response, refining my earlier hypotheses. Confirmatory experience among the Lakota and other Native people, in clinical social work practice and community workshops, led to more systematic study of historical trauma and its application in prevention and intervention (Brave Heart-Jordan, 1995; Brave Heart, 1998, 1999a).

### **The Lakota Historical Trauma Response Features**

The Lakota historical trauma response is analogous to the *survivor syndrome* and *survivor's child complex* identified among those who endured the Jewish Holocaust, and their progeny (Fogelman, 1988; Kestenberg, 1990; Niederland, 1988), and similar traits in other trauma survivors and descendants (Lifton 1988; Nagata, 1991; van der Kolk, 1987). Specific features of this historical trauma response include (a) *transposition* (Kestenberg, 1990) where one lives simultaneously in the past and the present with the ancestral suffering as the main organizing principal in one's life, (b) identification with the dead (Lifton, 1968, 1988) so that one feels psychically (emotionally and psychologically) dead and feels unworthy of living, and (c) maintaining loyalty to and identification with the suffering of deceased ancestors, re-enacting affliction within one's own life (Fogelman, 1988, 1991). Additionally, there is survivor guilt, an ensuing fixation to trauma, reparatory fantasies, and attempts to undo the tragedy of the past.

Manifestations of the historical trauma response include depression, self-destructive behavior, psychic numbing, poor affect tolerance, anger, and elevated mortality rates from suicide and cardiovascular diseases observed among Jewish Holocaust survivors and descendants (Eitinger & Strom, 1973; Keehn, 1980; Sigal & Weinfeld, 1989) as well as among the Lakota (Brave Heart, 1998, 1999b; Brave Heart-Jordan, 1995). Lakota mortality rates for heart disease are almost two times the rate for the general United States population; suicide rates are more than twice the national average (Indian Health Service, 1995). The association of heart disease with PTSD and other psychiatric conditions such as depression has been identified by Hamner (1994) and Shapiro (1996). Current lifespan trauma, superimposed upon a traumatic ancestral past, creates additional challenges for Lakota survivors. The pervasiveness and frequency of traumatic exposure among modern American Indian youth is identified by Jones, Dauphinais, Sack, and Somervell (1997)

and Manson, Beals, O'Neill, Piasecki, Bechtold, Keane, and Jones (1996).

### **The Concept of *Wakiksuyapi***

Traditional Lakota culture encourages maintenance of a connection with the spirit world. Thus, we are predisposed to identification with ancestors from our historical past. Traditional mourning such as cutting the bereaved's hair and body are expressions of a felt loss of part of oneself with the death of a close relative. Grief was impaired due to massive losses across generations and the federal government's prohibition of indigenous practices for mourning resolution. Hence, our impaired grief and our proclivity for connection with the deceased fueled *historical unresolved grief*, a component of the historical trauma response.

Family members among Jewish Holocaust descendants who shoulder the collective generational trauma of lost ancestors are called "Memorial Candles" (Wardi, 1990/1992). For the Lakota, the closeness of the *tiospaye* (extended kinship network) and the degree of bereavement may result in *Wakiksuyapi* or Memorial People, those who carry the grief and whose lives are a testimony to the lost ancestors. Carrying Lakota ancestral trauma may be extended to certain *tiwahas* (families), *tiospayes* (extended kinship networks), or even *ospayes* (bands). For example, following the assassination of Tatanka Iyotake (Sitting Bull), many traumatized Hunkpapa fled to join the Hohwoju who mourned the death as a near relative (Miller, 1959/1985). These Hunkpapa and Hohwoju, led by Sitanka (Bigfoot), were pursued by the cavalry and massacred at Wounded Knee two weeks later. Settlement and intermarriage of many Hunkpapa and Hohwoju survivors among the Oglala have placed these three bands at special risk for unresolved grief and trauma responses. Additionally, other Lakota and Dakota bands, because of their own traumatic histories and intermarriage with the Hunkpapa and Hohwoju, may also carry this particular historical legacy of trauma and unresolved grief. These are the *Wakiksuyapi*, true to the cultural mores around grief and the connection with the spirit world and shouldering cumulative massive generational trauma.

### **THE RETURN TO THE SACRED PATH: A QUANTITATIVE STUDY**

The Return to the Sacred Path study was a preliminary step in the development of historical trauma theory. Conducted in 1992, this study asserted that the Lakota suffer from impaired grief, a consequence of massive cumulative trauma throughout history. The study examined the effectiveness of a culturally congruent four day psychoeducational intervention designed to initiate grief resolution for a group of 45 Lakota human service providers. Methodology included assessment at three intervals utilizing a Lakota Grief

**TABLE 1. Affects Experienced Before and After the Intervention**

	Before	After
Sadness	66.7%	18.2%
Grief	54.5	27.3
Pride	51.5	81.8
Anger	69.7	18.2
Hopelessness	45.5	0
Shame	60.6	6.1
Helplessness	54.5	0
Joy	45.5	75.8
Guilt	60.6	6.1

Experience Questionnaire (GEQ), semantic differential, self-report evaluation, and six week follow-up questionnaire. Data was analyzed using measures of central tendency, frequency, descriptive statistics, paired t-tests, and t-tests for independent samples.

Results confirmed that (a) education about historical trauma would lead to increased awareness of associated affects, and (b) sharing these affects in a traditional context would provide cathartic relief. Participants affirmed the usefulness of the theory of historical trauma in facilitating a healing process (Brave Heart, 1998; Brave Heart-Jordan, 1995). Tables 1 and 2 indicate the reduction in affects over time and significant changes in the Lakota GEQ respectively (see Table 1 and Table 2).

### **A QUALITATIVE STUDY OF WAKIKSUYAPI: METHOD**

The emotional experiences of trauma survivors has a bearing not only on coping skills but also levels of stress which can result in or exacerbate physical and psychological problems; depression and somatic symptoms are comorbid conditions with PTSD (Brave Heart, 1999; Pribor, Yutzy, Dean, & Wetzell, 1993; Ursano, Griefner, & McCarroll, 1996). A tension in the literature on Jewish Holocaust survivors and descendants is the failure of some research to capture the internal affective experiences of survivors and descendants in spite of positive quantitative measures of coping behaviors (Fogelman, 1988; Solkoff, 1992). In light of this issue, a sample of high functioning individuals, defined in the following section, were selected to participate in a qualitative study that would elaborate affective experiences of Lakota historical trauma, including personal lifespan trauma.

This study was orientational qualitative research (Patton, 1990), one

TABLE 2. Reduction in Grief and Trauma Components on the Lakota Grief Experience Questionnaire (GEO) from T1 to T2

	<i>M</i> (T1)	<i>M</i> (T2)	<i>P</i>	Significance
Shame	3.21	2.67	.004	$p < .01$
Stigmatization	2.92	2.31	.001	$p < .01$
Anger at U. S.	3.15	2.87	.012	$p < .05$
Obsessive Thoughts	3.38	2.79	.007	$p < .01$
Feeling Blamed for WK Massacre	2.63	1.96	.023	$p < .05$
Feeling Responsible for undoing pain of our people's past	3.04	2.46	.004	$p < .05$

that was informed by a theoretical framework, which incorporated heuristic and phenomenological features in that (a) the researcher is immersed in the study population, and (b) extensive time was spent with the study participants. Because of the sensitive nature of the material and the potential for affect intensity, a safe therapeutic environment and sufficient emotional containment were crucial. Consequently, intensive group interviews were conducted over four days for two sessions respectively in the sacred place of origin for the Lakota, *Paha Sapa* (Black Hills, South Dakota). Further, traditional ceremonies provided culturally congruent emotional containment and catharsis.

For the first session, there were nine participants, five women and four men. At the second session, two years later, there were eight participants and equal gender distribution. Five of the original participants—three men and two women—were present, which provided the phenomenological study opportunity.

### **Selection and Description of Participants**

Participants were invited by this researcher from personal and professional contacts because of (a) their helping and leadership roles within the Lakota community, and (b) their sobriety or abstinence from alcohol suggesting their capacity to cope with painful feelings. Further, participants' adequate levels of coping skills and ego functioning were assessed through observational and self-report measures during interviews prior to data collection. These were operationalized as (a) gainful employment, and (b) a sufficient level of stress and affect tolerance manifested in completion of difficult ceremonies such as *Wiwanyang Wacipi* (Sun Dance) or *hanbleceya* (crying for a vision) which both involve significant ability to delay gratification, modulate affects, and cope with stress. The rationale for these criteria were to protect the participants from retraumatization. Adequate ego functioning is also a criteria for Holocaust treatment groups in order to prevent too much regression and possible emotional re-traumatization (Fogelman & Savran, 1979, 1980).

### **Sample Characteristics**

The study focused on the internal affective experiences of trauma among this group of resilient, coping participants. Characteristics of the sample included gender balance and diversity in (a) boarding school vs. day school attendance, (b) phenotype (skin color and features), (c) Lakota language fluency, (d) extent of participation in traditional Lakota spiritual practices, (e) reservation versus urban residence, (f) educational background, and (g) current residence. The majority of the participants have lived at their reservation of origin at least some part of their lives. Some participants had a college education. The mean age was 43 years, with the ages ranging from mid 30s to

early 50s. The diversity of the sample is important in order to examine both common themes as well as differences among sub-samples. With more sample diversity, there might be more generalizability which could be examined in future studies.

### DATA COLLECTION

Triangulation was utilized in data collection with video and audiotaping as well as field notes; that is, several methods and sources were incorporated in order to capture diverse and disparate themes (Patton, 1990). Participants were asked to keep journals which they submitted for content analysis. The journals contained written reactions and notes regarding traumatic memories.

The data collection began with an invitation to have participants introduce themselves. On the third day, participants were asked to do a "trauma graph" visually plotting lifespan trauma. The trauma graph is a lifeline indicating all trauma and grief experiences throughout the individual's lifespan. The connection between events and specific ages or time periods in one's life facilitates awareness and memory through the visual impact of seeing trauma over time. Participants were invited to share their trauma graph with a partner and then the larger group. For the second interval, participants were asked about their lifespan trauma and its relationship to their shared historical trauma. Again, this was audiotaped, parts of it were videotaped, and field notes and journals were kept.

### DATA ANALYSIS

The audio and videotapes were transcribed and field notes and participant journals reviewed. The data were inductively analyzed and coded for themes and categories utilizing constant comparison (Strauss & Corbin, 1990) until no new categories emerged. A matrix was developed to facilitate visualization and analysis of the data (see Table 3). Further, indigenous concepts, metaphors, and typologies as well as sensitizing concepts from the Holocaust literature (Patton, 1990) were noted.

### FINDINGS

There were three superordinate or overarching themes which emerged from the data: trauma testimony, the trauma response features, and transcending the trauma (see Table 3). Subcategories of the trauma testimony included



**TABLE 3. Superordinate Themes and Categories for Qualitative Data on the *Wakiksuyapi***

<u>Trauma Testimony</u>	<u>Trauma Response</u>	<u>Transcending Trauma</u>
Wounded Knee	Trauma Identity	Coping Strategies
Boarding School	Carrying Trauma	Ideas about Healing
Day School	Anger	Transforming Past
B.S. Descendant	Impaired Bonding	
	Transposition	
	Survivor Guilt	
	Suicidal Ideation	
	Multiple Traumas	
	Somatic Symptoms	

the Wounded Knee Massacre, boarding school trauma, day school trauma, and being a descendant of boarding school survivor parents. Under the second superordinate theme of trauma response features, there existed the trauma identity—as a descendant of Wounded Knee and as a boarding school survivor or descendant. Other subcategories were the various trauma response features such as a sense of carrying the generational trauma, anger and concern with one's own aggressive impulses, impaired bonding related to neglect and abandonment, transposition and identification with the dead, survivor guilt including compensatory and rescue fantasies, self-destructive behavior, suicidal ideation, and somatic symptoms. The third superordinate theme, transcending the trauma, included the subcategories of coping strategies, healing, and transforming the trauma. A sampling of indigenous metaphors and quotes emerging from the data for the three superordinate themes and their subcategories are presented in the following sections. In order to protect the confidentiality of these respondents, no specific information will be given. As described earlier, this was a group of currently high-functioning Lakota in mid-life.

### **The Superordinate Theme of the Trauma Testimony**

At Pactola Lake in the sacred *Paha Sapa* (Black Hills) surrounded by tall pine trees, testimonies of trauma included a legacy of loss of land, animals, sacred knowledge, language, and traditions with specific mention of the Wounded Knee Massacre.

**Wounded Knee Testimony: “My grandfather had scars.”** There were references to the genocide and the perceived emotional impact from the legacy of trauma as oral histories about the Wounded Knee Massacre were shared.

[My parents] knew exactly what happened [at Wounded Knee]. They were told why grandfather had scars and [the scars] were seen and they lived through that life... my grandfather... [one of] the three who survived, the rest [of eleven brothers] were killed ...

And regarding the mass grave at Wounded Knee

... so this thing I talked about, about man and woman, the mother and the grandson, the mother-in-law ... bodies, on top of one another in death, but the spirit is still there... That feeling was shattered on that day, and that's the feeling that most people can't forget. They [non-Indians] don't see it that way; all they see are corpses.

**Boarding school trauma: "Broken Fingers".** Boarding school trauma includes physical and sexual abuse, neglect, abandonment, and deprivation.

I've been sexually abused ... it's not pretty ... I was there [at boarding school] for 12 years ... since I was five years old. I had a brother there and I don't remember ever getting to see him ... The nun ... made me kneel in the hall and I don't know if she forgot about me or what in the morning when she came to wake us up I was still, I was laying in the hall and was locked out of the dorm. So, there were a lot of abuse things ... I felt deprived in both cultures ... I didn't have a doll ... no music ... no art classes. When I was 17, I graduated and ... I didn't know how to use a pay phone when I got to the city.

Another participant shared:

I went to boarding school at six.... Being oppressed all these years, I feel angry ... We had a matron come by and grab us by our hair or by our ears and just drag us and put our hands on the desk and just beat us with a ruler. I had broken fingers. That hurts as a kid.

**Children of boarding school survivor parents: "Maybe if it had happened by strangers it wouldn't have been so bad."** Descendants of boarding school survivors reported severe trauma both at reservation day schools and sometimes at the hands of their boarding school survivor parents.

I've never been in a boarding school, I wished I [had] because all the things ... happened in my home—the sexual abuse, the neglect. Maybe if it happened by strangers it wouldn't be so bad ... Then, I could blame it all on another race instead of my own family... I met my dad when I was seven or eight years old and instantly I knew

to be careful, do not trust him. So from that time on it was sexual abuse until I was 13 or 14 years old. When I was bigger, it stopped. Never got a chance to pay him back because he died... . I don't know if I hated him or loved him or what ... Yes, my parents went to boarding school [and] brought home the shame that they grew up with, not their shame but what they were taught on how to raise kids. So I grew up with that and ... I had to work through my loyalty. I had to break that bond. You know, we talk a lot about heritage and tradition and my heritage was from the Catholic nuns, that was my heritage ... . When it [the abuse] comes from your blood, your own family, that does a lot to you ... and when I close my eyes, I can still see the darkness ... so, that's how, I guess, my own trauma occurred.

**Day school trauma: “My first contact with the Whites”.** Even those respondents who had not attended boarding school experienced trauma, either as descendants of boarding school survivors or while attending day schools operated by the Bureau of Indian Affairs and/or churches. Day school trauma is illustrated by this participant:

At six years old when I first went to school I had a ruler broken on my head because I couldn't speak English. This was my first contact with the Whites ... Monday morning, I was sent into the bathroom—hot scalding water and [they'd] wash my hair with DDT. When I'd come back that evening, my mother would wash that DDT off ... DDT permeates the skull and the bones and eventually that's what kills all the brain cells ... . DDT was used at the schools on our reservations .... At 16, I was beaten again at a day school by a Catholic priest.

### **The Superordinate Theme of the Trauma Response**

Sharing details of the traumatic history can be a function of the trauma identity and trauma fixation but is also a necessary component of the healing process. Within their sharing, respondents revealed trauma response features. Consistent with Fogelman and Savran's (1979, 1980) Jewish Holocaust survivor and descendants groups, introductions involved identifying oneself in terms of historical trauma, including lifespan trauma, as a Wounded Knee and boarding school survivor and descendant.

**Trauma identity: “We think we are so bad.”** At the first interval upon introduction, participants immediately referenced their trauma, congruent with Fogelman and Savran's (1979, 1980) group members, (i.e., qualifying their trauma early in the group process as a way of establishing membership and group identity as trauma survivors). A trauma identity was alluded to by one participant in her assessment of resistance to the group getting closer:

I think it's the shame that does that to [inhibits] us, like we think we are so bad, or we are afraid of what is inside of [us] and to us the inside looks much ... worse than it does on the outside. People only think about what they have suffered.

Despite some initial resistance, a close cohesive bond emerged, consistent with van der Kolk's (1987) assessment of therapeutic trauma treatment groups. Some respondents re-enacted their trauma issues through distancing, detaching, and repeating experiences during the group process. This provided a dynamic way to observe the trauma response features. For example, one participant who had been severely neglected and had shared that no adult had looked for him as a child, disappeared one evening without letting anyone know. This was an example of distancing and detaching from others as well as repeating or re-enacting the past trauma. Others, sensitive to abandonment were "searching" in looking for the missing group member, manifested through worrying and a preoccupation with his whereabouts; this was an example of repeating past traumatic abandonment and unresolved grief (Jacobs, 1993).

**Carrying the Trauma: "There's a big hole in my heart."** The legacy of trauma and the intergenerational impact was addressed by this participant:

I think losing the land was the most traumatic ... I remember my aunts and uncles and my dad talked about ...how they were treated, some were shot, they were telling me about that my grandmother was shot ... They were starved .... You know, the big lie, that the people were forced to believe in history books, stand and salute the flag that wiped out a generation, forced into slavery, forced into their church system ... . So this happened in my great grandparents' generation when they lost the buffalo. My grandparents' generation lost the land and their livelihood ... That's from generation to generation. There are a lot of answers that I don't have and a lot of questions that I do have and there is a lot of hurt inside me ... . Some of these things happening over the years are still happening today, like my grandparents, my great grandparents had their children moved to schools ... I was moved, my brothers and sisters moved, my kids ... I couldn't watch them grow up because we were all moved. It's the same problem happening over and over again .... There's a big hole in my heart. We see it happening to our grandchildren already ... where does it stop?

The cross-generational pattern of boarding school trauma is evident from this participant's testimony:

[My mother] called me ... in the middle of the night in a rage and fortunately I understood what was going on. She was really angry at what happened to her in boarding school, being sexually molested . . . There are stories of old people that have to be resolved. They carry their guilt, fear, and being shifted around all their lives .... I had this feeling of abandonment .... When things come up, I can remember my own feelings about being abandoned. There was a lot of abuse in my family ... We carry those things with us today and is how I'm related to them.

Premature and tragic deaths extend the grief for these Lakota. The perception of carrying grief as well as trauma was evident among the participants. This person shared her idea that the grief she carried was generational:

A lot of the times, the grief is so strong, I seem real reserved trying to walk the path ... [but] I feel a little bit anxious and a little bit stuck because I feel like I've been carrying a weight around that I have inherited and ... it gets in my way .... I have this theory that grief is passed on genetically and, ah, because it is there.

**Anger and aggressive impulses: "I was going to kill her..."** The relationship between the abusive boarding school environment and the concern about aggressive impulses, a trauma response feature, is clear in this following quote about a nun at boarding school:

She was one of the meanest natured women, I was going to kill her when I grew up ... but we need to forget and let go of it. I forgave them but I had to work on it. I realized they too were traumatized, they too were abused.

**"I don't think I ever bonded."** Impaired bonding and attachment as well as neglect are reported by several participants with generational boarding school trauma:

I don't think I ever bonded with any parental figures in my household... [My parents] were never there ... I'd take off from home, eight, nine years old, for a week at a time. No one would bother to look for me, to wonder where I'm at so I didn't bond with anybody. I didn't care after that.

**Transposition: "I saw people carrying guns and shooting."** Transposition—living one's life in the past and the present—as well as identification with the dead are evident in the words of several participants. Dreams of past genocidal group trauma were reported by participants.

When I was driving [here] ... I felt angry. I looked at the beauty of the land, of the Black Hills. I thought, "where are the Indians?" ... I had a dream the other day. It was kind of scary. I got up shaking [starting to cry]. I saw people carrying guns and shooting people [Indians] in the Black Hills again. It was a hard dream. That's what I saw.

Impairment in one's own development, as a byproduct of the traumatic history, is another aspect of transposition including the use of psychic numbing or emotional detachment:

We look at ourselves and our nation and we look at where we were traumatized.... Our development is arrested and we are stuck. [The trauma] continues to be perpetuated. I mean, that it happens over and over again in lots of different ways ... individually, personally, emotionally, and to us as a group, so we just continue to be victimized .... I think that is why a lot of our people have become apathetic and cold because this thing is so overwhelming and hopefully someone will look at all the layers of the [trauma] that we have to deal with ... it's overwhelming to me at times.

Survivor guilt: "I felt guilty." Along with transposition and the unconscious identification with the dead, there is a preoccupation with death, a sense that one has no right to live, that one has to suffer like one's ancestors (Fogelman, 1991; Kestenberg, 1990; Wardi, 1990/1992). The theme of transposition is interwoven with compensatory or rescue fantasies—a wish to undo the tragic past—and accompanying survivor guilt.

I can feel the pain yet. It's hard for me to watch [films about the Wounded Knee Massacre and/or boarding school]. I want to go over there and kick somebody in the rear end ... be the protector of the child... That's why I got into politics to rescue the people that are being harmed and hurt.

One participant shared her feelings of guilt and kept making references to death:

I felt guilty .... I thought it was a good way to die, [working for] people who's lives have been so hurt ... I couldn't live with myself if I weren't fighting for the rights of people ... All I can say is that it is worth it until I die ....

Other participants noted a sense of guilt, shame, and self-blame:

I think that we are all inhibited by the sense of responsibility, guilt . . . I'm hoping that we can let that go and get on to business because it can do marvelous things and it could start a revolution among our people, you know, let go of that burden . . . . I was really struck by the similarities [with Holocaust descendants] to what we were talking about and experiences . . . and then the sense of loyalty to their parents and the same demand put on the children . . . [I] realized that very closely because of my own sense of responsibility to try to undo, to kill, or whatever of the past.

**Multiple traumas and suicidal ideation: "I went there . . . looking to die."** A higher incidence of PTSD was noted among soldiers who were descendants of Holocaust survivors (Eitinger & Strom, 1973; Nefzger, 1970). Similarly, Indian veterans have special issues with PTSD (Holm, 1994; Manson et al., 1996; Silver & Wilson, 1988). Self-destructive behavior and suicidal ideation, manifestations of a death identity (Lifton, 1968, 1988) were shared by this Vietnam veteran, also a descendant of boarding school survivor parents.

... The only other thing I would like to speak about is my Nam experience. I went there prepared to die, looking to die, so being in combat, war, and shooting guns and being shot at was not traumatic to me. That was my purpose and my reason for being there. What was traumatic for me was that it brought on a lot of rage when seeing other people, the same color as me, being abused by the war. That was the hardest thing while I was there .... I was having a battle with the army I was in . . . .

**Somatic symptoms: "... With the pain, my breath would stop."** Psychosomatic illness has been observed among trauma survivors (Hamner, 1994; Shapiro, 1996). Participants in the present study reported early heart attacks for family members in their late 30s and early 40s as well as premature deaths of parents from heart disease. Upper respiratory conditions were noted by participants in childhood during boarding school and currently with disorders such as severe asthma. Massive deaths from tuberculosis have been associated with boarding school crowding and conditions (Brave Heart-Jordan, 1995; Tanner, 1982):

I was always sick ...when I was a kid... I remember one time I was really sick and I was faced with a choice in the hospital, if I should continue breathing or just stop because to breathe it really hurt so much. I guess that was pneumonia. From pneumonia, people die. So I remember that.

Another participant shared a similar story:

I went to boarding school when I was five and I got really sick—I almost died—I couldn't breathe. I had pneumonia . . . I think I was really sick from a broken heart [Talking about the trauma] before, with the [emotional] pain, my breath would stop . . . for a long time my life was really like that from all the trauma I'd been through. A lot of it stopped my breath.

### The Superordinate Theme of Transcending Trauma

Under the theme of transcending the trauma, healthy coping strategies used to deal with the trauma, ideas about healing, and transformation of the traumatic past were revealed. Coping strategies included emphasizing traditional Lakota values, focusing on helping others and future generations. Ideas about healing incorporate awareness of and talking about the past with a focus on the commonality among the Lakota of shared trauma. An outgrowth of the first interval and the quantitative study was the formation of the *Takini* (Survivor) Network, a group dedicated to further research and promoting healing. Transforming the traumatic past involved reframing, finding the positive aspects of a painful experience.

**Coping skills and strengths: "We would die for each other."** Traditional values and practices of generosity, deep emotional attachments, and loyalty were described by participants and identified as coping skills and strengths.

I grew up with an extended family . . . I would have never made it [if not] for all the help. They were kind of traditional people and they took me in . . . showed me affection and love and a real discipline of life . . . We still knew somebody was there. I guess my buddy said it the best. I hadn't seen him for years and we cried. He said [when] he got back from Vietnam . . . "but when I looked into your eyes, you were my brother, I would never have to worry about somebody coming up behind me, you were always there." So, a lot of us understand that we would die for each other.

Hard work and service to others were also coping strategies. One participant shared: "No matter what kind of history I have, no matter what happened to me, I've always worked hard."

Similar to Holocaust descendants' concern with the impact upon the third generation, participants shared their experiences with Lakota youth:

The kids that I work with are really angry at the Creator for their pain, their abuse. "Where was your God when I was being hurt? Where was your God all the nights I was being raped?" We never realized that they [children] were given to two people, to be accepted and to love, and to guide them, to nurture them. We never realized it.



If God didn't want us to have those kids to give them that love and guidance and nurturing we wouldn't have them, they wouldn't be with us ... All the kids that I work with want that from their parents, they want a house, they want to be assured, they want to hear those words .... They are hungry, they are starving for that ... they will take everything that's offered them ... [With my kids] it was foreign to me to do that, I mean, I didn't know what love was until I was 37 years old ...

Another participant emphasized being a survivor and a helper rather than focusing solely on the trauma as a source of identity:

I'm proud of the fact that my ancestry is so tough, they are survivors ... on both sides ... a history of helpers ... people who went out of their way to help others .... I really work and give services in [the] area for kids who come from broken homes that are abused. We try to protect them.

**Healing: "We as ... Lakotas are obligated now to ... make people aware."** Views about how to heal from the historical trauma were shared. The importance of a return to traditional values and spirituality was prominent: "It's up to you to do something, to ask the spirits for direction because we need each other; I worry about it today because time is short." Another participant shared:

Even our old people tell us to take the past to learn but to go on .... I'd like nothing better than putting everybody through a [purification] lodge, have everybody stay out here, for four days ... and go through that immersion, have us speak ... Lakota. I think maybe at that point, whatever you call it, trauma, indoctrination, whatever it is at least it will wake us up that the life and society that we are in is all chaos ... but we as ... Lakotas are obligated now to at least make it known or teach or do what needs to be done to make people aware ... We felt traumatized and we are traumatized ... [healing] means to talk about the past and the future ... That's why we are doing this, it's addressing the issues, I suppose, and that's why the person must come out of the healing, our mourning, our pain ...

The importance of sharing and talking about the trauma and focusing on a common identity as Lakota survivors was emphasized.

I think one thing, too, is that recognizing that we've come from traumatized backgrounds one way or the other. I think that just going back to some of the fear-based things, as social workers or counselors that empathy and being non-judgmental, people will accept me as I am, and maybe I don't walk the same way or, ah, I think that my

experience is still valid. We all have our own personal experiences full of pain, but it is so personal for me to be connected with others. I mean it's something that really comes from the heart.

Understanding the historical legacy of trauma was a helpful concept for participants:

... I realize that people who've been abusive to me were themselves neglected and abused ... . You have to realize that honestly [our parents] did the best they could having the history, the trauma, and their generation [in] boarding school ... and [we need] to resolve that within ourselves ...and just leave it at that ... because it still hurts ... .

**Transforming the trauma: "We can make it good or... bad."**

Struggles with aggressive impulses emerged in the data. One participant described his way of transforming his severe sexual abuse and neglect and his destructive as well as suicidal impulses through helping others:

If I needed an excuse to die or get drunk, all those things, all I'd have to do is open up that container inside ... . Because I believe that feelings never go anywhere, they never die... they are always with us. So we can destroy the people who are around us with them [feelings] or we can help them [people] ... . I committed to work with [children who are sexual abuse victims] .... All of these things that are in the past don't have to be bad. Our reaction to them makes all the difference in the world. We can make it good or ... bad.

## DISCUSSION

The study provided insight into the experience of Lakota historical trauma among a non-clinical sample. This group of high functioning and coping Lakota helpers and community leaders still manifested signs of the trauma response in their trauma identity, transposition, and survivor guilt. Participants presented themes supporting the theory of a Lakota historical trauma response and suggested that traditional values facilitate coping and healing.

The integrity and internal validity of the data analysis were facilitated by the triangulation in data collection as well as repeated observations and immersion. The diversity among the sample was a strength of the study but more investigation is needed. While the study's focus of inquiry was on the experience of Lakota historical trauma and its relationship to current lifespan trauma, further study would be beneficial. While transforming the trauma as well as the trauma response feature of survivor guilt may have motivated the

service career choices of these participants and their commitment to helping others, *wowaunsila* (compassion) and *wacante ognake* (generosity) are traditional Lakota values and suggest that some trauma response features may be more of a culturally congruent manifestation of a traditional orientation.

Of further interest, the study of traditional Lakota bereavement may present as pathological grief in a Eurocentric framework. The stages of Lakota grief may be qualitatively distinct from typologies of grief identified in Eurocentric literature. The degree of attachment to others appears deeper for the Lakota when one examines the degree of involvement in extended kinship networks. Further, the traditional Lakota response to bereavement, such as cutting one's hair upon the loss of a close relative, implies a different type of attachment than that described in the literature. Additionally, the Lakota connection with the ancestor spirits and invocation of the spirits in ceremonies suggests culturally distinct grief resolution as opposed to Freud's (1917/1957) concept of decathexis or detachment from the lost object (person). From a Eurocentric lens, Lakota attachment may appear disordered and the subsequent resolution of loss of that object might appear pathological rather than resolved. Finally, the subjugation of knowledge about Lakota and other Native genocide in the general population could result in the failure to examine Lakota grief as a culturally normative reaction to massive group trauma.

From the current study, social workers can gain insight into working with oppressed populations. One inference would be the importance of considering traumatic histories of oppressed people, and the impact history has on presenting problems, health statistics, and other psychosocial conditions. Second, the need to attend to cultural definitions of relationships and their meaning as well as cultural definition's of normative bereavement is critical. Caution should be taken not to impose one's own cultural framework upon that of a client.

The importance of client narratives and testimonies is critical to culturally sensitive practice with oppressed populations, whether that practice be interventions or research. Congruent with a strengths perspectives, study participants' manifestations of resilience in the face of massive group and individual lifespan trauma were noted. Social workers must provide opportunities for client strengths to emerge in practice. Social workers must develop a respect for indigenous values, culture, experiences, vitality, and potency while simultaneously being cognizant of and sensitive to traumatic histories.

## CONCLUSION

A qualitative study of experiences of historical trauma among a coping segment of the Lakota population was conducted within a traditional context. Emergent themes from the data supported the theory of a Lakota histori-

cal trauma response. Ideas about healing and coping emphasized traditional Lakota values, particularly compassion and generosity. Future research questions include identifying who are *Wakiksuyapi*, what are the risk factors for carrying the Lakota historical trauma, and how can the trauma itself and the trauma response be quantified, measured, documented, and healed. The Takini Network, a Lakota survivors collective, is dedicated to trauma research and development of historical trauma healing strategies. This group of *Wakiksuyapi* have transcended trauma through a collective survivor identity and a commitment to traditionally oriented values and healing *hecél lena Oyate nipi kte* (so that the Lakota people may live).

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