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**Using Art Therapy with
Aboriginal Offenders**

Diane Gattermann

A Research Paper

In

The Department

Of

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**Presented in Partial Fulfillment of the Requirements
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Abstract

There is a sharp contrast between the Euro-American and Aboriginal-American conceptualisations of criminality and its consequent treatment. While the Euro-American paradigm views criminality as a pathology of the individual, First Nations peoples view it as a spiritual, emotional, mental and physical imbalance that stems from, and ultimately has repercussions for, outside sources. Because of its holistic approach, emphasis on non-verbal symbolism, and non-threatening use of art as a therapeutic milieu, art therapy proves to be an efficacious transcultural tool in the treatment of adult offenders at a correctional institution for Aboriginal men. Review and discussion of Euro-American and Aboriginal views of criminality and treatment is followed by a brief discussion of the historic and political context in which First Nations peoples are situated and which must be understood in order to fully grasp the basis for the contemporary social, emotional, and psychological conditions of Aboriginal individuals. This is followed by two case studies, which exemplify the use of art therapy in this context.

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Table of contents:

INTRODUCTION.....	1
THE EURO-AMERICAN APPROACH TO CRIMINALITY	3
CAUSES.....	7
<i>Biological.....</i>	7
<i>Psychosocial.....</i>	9
<i>Social-cognitive.....</i>	11
SOLUTIONS	12
<i>Incarceration.....</i>	13
<i>Treatment Plans.....</i>	14
THE NATIVE-AMERICAN APPROACH TO CRIMINALITY	17
CAUSES.....	18
SOLUTIONS	22
<i>Problematic Issues.....</i>	22
<i>Incarceration.....</i>	24
<i>Traditional Healing.....</i>	26
<i>Sentencing Circles.....</i>	28
<i>Healing Centres.....</i>	29
ART THERAPY.....	30
ART THERAPY WITH OFFENDERS	30
ART THERAPY WITH NATIVE AMERICANS.....	32
<i>Art therapy techniques.....</i>	33
<i>Art therapy materials.....</i>	35
ART THERAPY WITH ABORIGINAL OFFENDERS	36
AN ART THERAPY INTERNSHIP WITH ABORIGINAL OFFENDERS	37
THE ART THERAPY SITE.....	37
<i>The physical set-up.....</i>	37
<i>The staff.....</i>	38
<i>The residents.....</i>	38
<i>About Waseskun.....</i>	39
<i>The Waseskun approach.....</i>	40
<i>My background.....</i>	41
<i>Methods, mediums, and scheduling.....</i>	43
TWO CASE STUDIES	46
<i>Case study 1.....</i>	47
<i>Case study 2.....</i>	58
DISCUSSION.....	68
CONCLUSION	75

REFERENCES.....	86
APPENDIX A.....	92
THE TWELVE TEACHINGS OF THE SACRED TREE (ROSS, 1996:275)	92
APPENDIX B	94
THE BITTERROOT (CADUTO AND BRUCHAC, 1995)	94
APPENDIX C	95
WORDS TO THE POEM BY JOHNNIE (IN FIGURE 10).....	95
APPENDIX D.....	96
CONSENT FORM	96

Table of Figures

Figure 1.....	48
Figure 2.....	49
Figure 3.....	51
Figure 4.....	52
Figure 5.....	54
Figure 6.....	55
Figure 7.....	57
Figure 8.....	60
Figure 9.....	61
Figure 10.....	63
Figure 11.....	63
Figure 12.....	65
Figure 13.....	68

INTRODUCTION

During my art therapy internship, I was fortunate enough to work with individuals from a correctional facility for Aboriginal men. This institution used traditional healing, as well as culturally sensitive counseling methods to assist in the healing experience of approximately 20 men at any given time. The halfway house provided housing and treatment for men currently serving a jail sentence. These men come from diverse cultural backgrounds, languages, and geographical areas that stem the length and breadth of eastern Canada. It was during this period of time that I realized that crime and the treatment of offenders is understood and dealt with in a very different manner by some Native institutions than it has been historically in conventional correctional facilities.

Due to the focus on Aboriginal issues during my undergraduate degree in anthropology, I was relatively well read on the idea that “culture is treatment¹” (Dufrene, 1988:1489) and that it is important to understand the historical context from which psychological distress may arise among First Nations peoples. However, I was not prepared for many other aspects, such as the healing effect of the ceremonies, rituals and having an Elder present to add assurance and balance to both the residents and the staff members. I was also surprised by the diversity of thoughts, behaviours, and spiritual practices among this relatively small group of Aboriginal people and its impact on the therapeutic process. Furthermore, it became an ongoing process of trying to find a balance between the thoughts and practices of traditional healing and trying to discover a

¹ This is a term used by Dufrene (1988) to represent the use of cultural and spiritual traditions in the treatment of First Nations peoples.

way that art therapy could best serve the needs of this particular diverse group of Aboriginal men.

Criminality, as almost all else, is defined, understood and treated differently according to culture. What is understood as being criminal may vary according to cultural beliefs and understandings. For example, the use of drugs and alcohol, and the practice of bigamy, prostitution and gambling may be considered a crime in some societies while remaining legal or even normative in others (Rice & Harris, 1997). Thus, how criminality is conceived is contingent upon a larger social and cultural context.

Historically, criminality in Euro-American society has oscillated between two ideologies, which have thus resulted in separate approaches to the understanding and treatment of criminal offenders (Rice & Harris, 1997). The first ideological belief has been that prison or the threat of punishment in one form or another will reduce the rate of crime in a given society. This concept has led to the development of the prison system and the idea of punishment as a solution to criminal behavior.

The second ideological belief is that crime is due to outside factors, such as, injustices in society, failures within one's family life, and faulty early experiences, which produce criminal behavior in offenders. This belief has led to the notion that offenders can be reformed and hence the development of various types of therapeutic treatment began to appear within the prison systems. Throughout history there has been a continuous shift between one ideology and the other that might be accounted for by the cyclical nature of oscillation between liberal and conservative thinking within society at any given moment.

Criminality, amongst Aboriginal peoples in Canada and the United States, has taken on new meaning due to the historical, political and social context that is believed to negatively effect Aboriginal offenders dealing with a justice system that is steeped in Euro-American preconceptions, ethics, and ideas of society, justice and treatment. In order to exemplify the differences between the conceptualisation and treatment of offenders among Native and non-Native systems of justice, I will be discussing the various conceptualisations of criminality found in literature focusing on the differing approaches and the underlying ideologies which form both viewpoints. I will then discuss the use of art therapy with Aboriginal offenders in relationship to these concepts and will be using case studies to exemplify how art therapy can aid in the healing process of this particular population.

THE EURO-AMERICAN APPROACH TO CRIMINALITY

Criminality, as defined in the extant literature, is described as being a pathology, of which specific definitions vary according to author. Tardiff (1995) defines criminality as a psychopathology, which is associated with any number of psychiatric disorders. While Hart and Hare (1997) describe criminality as an antisocial personality disorder, whose predominant feature is the disregard for and the violation of the rights of others (Reid & Wise, 1995).

One of the most debated and documented viewpoints is Yochelson and Samenow's (1976) definition of the Criminal Personality, which describes the criminal as

being a combination of four personality disorders, which also meet many of the same criteria for the Cleckley psychopath (1976) and the Kernberg psychopath (1975).

Yochelson and Samenow (1976) view the criminal as suffering from a combination of antisocial, narcissistic, borderline, and histrionic personality disorders. According to Wulach (1988), Yochelson and Samenow have defined the Criminal Personality as consisting of specific criteria which fall under the aforementioned personality disorders as defined by the DSM-III-R guidelines. Individuals falling under the category of Criminal Personality (Yochelson & Samenow, 1977) exhibit the following symptoms that also apply to those with adult antisocial personality disorder. These symptoms include, erratic employment histories, child abuse or neglect, illegal behavior, a lack of enduring sexual relationships, having been involved in fights, having defaulted on debts, having had occurrences of aimless traveling or wandering, having repeatedly lied, and having shown a lack of remorse (Wulach, 1988).

Criminal Personality, corresponds to the criteria of narcissistic personality disorder. Symptoms include, having rage or shame in response to criticism, being exploitative, having a grandiose sense of self-importance, having a belief in the uniqueness of their problems, having a preoccupation with fantasies of power, having a sense of entitlement, showing a need for constant admiration, as well as, having a lack of empathy (Wulach, 1988).

In correspondence with borderline personality disorder, a Criminal Personality will show signs of unstable intense relationships, self-destructive impulsivity, affective

instability, inappropriate intense anger, recurrent suicidal threats, persistent identity disturbance, and chronic feelings of emptiness or boredom (Wulach, 1988).

The fourth noted disorder is that of the histrionic personality. Under this heading, the Criminal Personality will show signs of a constant demand for praise, display inappropriate sexual seductiveness, have an over-concern with physical attractiveness, display exaggerated emotionality, need to be the center of attention, rapidly shifting shallow emotions, and showing a self-centered need for immediate satisfaction (Wulach, 1988)

Under the symptoms of the Hervev Cleckley psychopath (1976), the Yochelson and Samenow Criminal Personality type shows similar symptoms. These include, having a superficial display of charm and good intelligence, an absence of delusions, unreliability and untruthfulness, a lack of shame or remorse, poor judgement, pathological egocentricity and the incapacity to love, general poverty in affective reactions, a specific loss of insight, an unresponsiveness in interpersonal relations, a fantastic uninviting behavior (with alcohol), suicidal threats being rarely enacted, impersonal sex life and a failure to follow any life plan (Wulach, 1988).

The differences between the Cleckley and the Yochelson and Samenow's view of the criminal, is that the latter has stressed that the fears in the criminal are "widespread, persistent and intense throughout his life" (1977:258), that the criminal behavior is almost always motivated by a thrust for power and a need for excitement, instead of Cleckley's description of the criminal acting in inexplicable ways. Furthermore, while Cleckley believed that the criminal psychopath could not learn from his experience,

Yochelson and Samenow believe that he does learn from his experience but that this learning involves ways to become a better criminal.

The Otto Kernberg psychopath (1975) resembles Yochelson and Samenow's Criminal Personality (1976) in that both show signs of grandiosity, splitting, projective identification, denial, and a consciousness of primitive fantasy (Wulach, 1988).

Kernberg sees the antisocial personality disorder as being "an extreme form of pathological narcissism" (1975:254), that he identifies as a type of borderline personality disorder that uses typical borderline personality disorder defense mechanisms, such as those mentioned above. Yochelson and Samenow (1976) view these defense mechanisms as thinking errors, which they describe, in similar terms as, the power thrust, fragmentation, victim stance and a building up of the self-image to deny aspects of the criminal's personality to himself.

In Yochelson and Samenow's viewpoint, the criminal is perceived as pathological, loveless, unmoved by guilt, exploitative, and fragmented (1976). The repetitive "thinking errors" (Wulach, 1988:185) lead the offender to various criminal behaviors. Thus, according to Yochelson and Samenow, it is only through the development of new thinking and behavioral skills that the criminal can be reformed. In all cases described above, criminal behavior is understood as the result of a psychopathological disorder.

Causes

While the understanding of criminality seems to be similarly defined, its causes are widely varied, contrasted and contradicted. I will lay out the various findings and sources and leave it up to the reader to come to their own conclusions. The causes of criminality may be divided into three categories: 1) Biological; 2) Psychosocial and; 3) Social-cognitive.

Biological

By biological causes, I am referring to the idea that aggression, which can lead to criminal behavior, is an outcome of various components that are caused by specific brain processes (Reid, 1993). This category may then be broken down into several other categories of causality under the heading of biological or physiological, such as, genetics, brain dysfunctions, neurobiological processes, psychophysiological correlates, improper diet, and the use of drugs and alcohol.

Antisocial personality disorders in adults, which may lead to criminal actions, has been noted by several sources to, at times, be caused by genetic factors (Reiss and Roth, 1993; Lyons et al, 1995; Carey and Goldman, 1997; McGuffin and Thapar, 1998). Some studies have shown that genetic factors in adult criminals have been more of a predictive of antisocial behavior than family environment.

Other sources view brain dysfunction as a cause of criminality (Hale, 1983; Reiss and Roth, 1993). Brain dysfunction may interfere with language processing and cognition and are commonly found in criminals and psychopaths (Reiss and Roth, 1993).

Some causes of brain dysfunctions are preventable and include exposure to lead, head injuries, and the mother's use of alcohol or drugs during pregnancy.

Neurobiological processes are electrical and chemical activities in the brain that underlie observable human behavior. Neurological abnormalities in the brain may lead to violent behavior due to the increase risk of school failure and interpersonal relationships, whose failure is linked to subsequent antisocial behavior (Reiss and Roth, 1993; Ferris and De Vries, 1997).

Another biological determinant of criminal behavior may have to do with psychophysiological correlates. This is to say, that antisocial personality types have been found to have a high rate of psychophysiological underarousal and seek stimulation more readily than other individuals (Raine, 1997; Scarpa and Raine, 1997). This process of stimulation seeking may then lead antisocial individuals to commit criminal behaviors.

Improper diet has been another proposed cause of criminality. Studies have shown a relationship between nutrition and violence (Brennan and Mednick, 1997). A high sugar intake may result in hyperactive, irritable and aggressive behavior in individuals, which may result in criminal behavior.

Yet another possible cause of criminality has been the link between alcohol and drug abuse and criminal actions (Smith and Newman, 1990; Reiss and Roth, 1993). Alcohol abuse has been noted to be a predisposing factor for violent behavior by increasing aggressiveness and a tendency towards violence. Research on the use of alcohol and drugs have indicated that the likelihood of violence depends on the user's

expectations and on the situational and social context within which the drugs and alcohol are used (Reiss and Roth, 1993).

Psychosocial

Another factor in the cause of criminality may be discussed under the larger heading of psychosocial causes. By the term psychosocial, I am referring to the behaviors and psychological functioning, which have resulted from the adaptation to one's social environment (Gray, 1994). The social environment may be broken down into two separate elements: the microsocial and the macrosocial. The microsocial sphere includes the individuals, peers, gangs and family surrounding the self; while the macrosocial includes larger contexts, such as societies and communities (Reiss and Roth, 1993). The psychosocial causes of criminal behavior may include physical and/or sexual abuse, a difficult social-economic situation, a deprivation of liberty, a weak ego and unstable defense mechanisms, personality disorder and collapsible defense mechanisms, and hyperactivity-impulsivity attention problems (HIA) and conduct problems (CP).

Criminals often are noted to have a history of suffering from physical and/or sexual abuse (Otnow-Lewis, 1989; Haapasalo, 1997; Pincus, 1999). This abuse may result in criminal actions by providing a dysfunctional model of behavior. It also may result in injury to a person's central nervous system, which may result in a decrease in impulse control, logical thinking and proper social behavior. Furthermore, earlier abuse may invoke rage in its victim, which is later displaced on others (Otnow-Lewis, 1989).

One's social-economic situation, such as a concentration of poor families in geographic areas and a great income disparity between those who are poor and rich,

differential social organization, such as family disruption and housing density, and indicators of opportunities for violence, for example, drug and firearm trafficking, may result in criminal behavior (Reiss and Roth, 1993).

An excessive deprivation of liberty may also be seen as a cause of criminal and antisocial behavior (Cormier, 1966). This deprivation may include a person's complete confinement to a cell, which may result in deep emotional disturbances, which could lead to suicidal or homicidal tendencies. An alternative outcome is that the individual withdraws into the self and enters into a psychotic state, which often includes a reaction of rage.

Another cause of criminal behavior is described by Cormier (1970) as a weak ego and unstable defense mechanisms. This is said to be due to social, individual and constitutional factors which result in what Cormier terms, a primary delinquency. Another cause of criminal behavior, termed by Cormier (1970) as the late delinquency stage, is personality disorder and a stronger but collapsible defense mechanism.

Yet another cause of criminal behavior, has been attributed to hyperactivity-impulsivity attention problems (HIA) and conduct problems (CP) (Otnow-Lewis, 1989; Reiss and Roth, 1993; Lynam, 1996). This is said to be due to the fact that HIA increases risk in those who are already at risk, that HIA leads to symptoms of CP, and that children with symptoms of HIA and CP have a strain of conduct disorder which appears to be early symptoms of psychopathology (Lynam, 1996). These symptoms may include attention deficit, restlessness, lack of concentration, risk-taking, a poor ability to delay gratification, and a low level of empathy (Reiss and Roth, 1993).

Social-cognitive

The third category is the social-cognitive causes of criminality. By social-cognitive, I refer to criminality as a learned response to one's social environment (Gray, 1994). Social-cognitive causes include criminal behavior as a heritable/familial component, failure of the family to provide guidance and discipline, a disturbance of object-relations, and as learned responses to frustration.

It has been suggested by some researchers that criminal behavior, such as aggression and violence, may be a heritable component which one could develop on the basis of hereditarily determined structural deficiencies, which have resulted from a lack of an ability in "object cathexis" (Reid, 1978:85). Aggressive and violent behaviors are learned from models within the family (Reiss and Roth, 1993) and which may later lead to antisocial and criminal behaviors.

Failure of the family to provide guidance and discipline is seen as yet another possible cause of criminal behavior (Otnow-Lewis, 1989; Harris and Rice, 1997). Studies have shown the importance of the family in the development of criminal behaviors. There is an indication that an inadequacy of disciplinary actions has led to a evolution of antisocial behaviors at a crucial stage of development (Otnow-Lewis, 1989).

Yet another cause of criminal psychopathology has been identified as a disturbance of object-relations (Reid, 1978). It is thought that the internalization and identification processes could not proceed in the usual manner when emotional ties were missing and, thus, the criminal develops a sense of depersonalization that is seen as an important defense mechanism of the offender. Furthermore, a disturbance in object-

relations development impedes the building of extended object-relationships to one's community, society and culture (Reid, 1978). Proper development in this area would aid an individual in the internalization of social standards that would reduce a tendency towards criminal behavior.

Another social-cognitive cause of criminal behavior may be learned responses to frustration (Reiss,, 1993; Eron, 1997). Aggressive or violent behavior may be learned from observing such models as one's family, friends, and neighbours, or by participating in situations in which violence was an acceptable reaction by the participants. If anger and violence becomes sanctioned at an early age as an appropriate reaction to frustration, anger, or opportunities, than the same behavior may later be used to justify criminal behaviors.

While I have discussed various causes of criminal behavior under separate headings, it must be noted that these categories may overlap and that the causes may rely on an interplay of environmental, social, psychological and biological factors that may all contribute in varying degrees to criminality within an individual.

Solutions

Thus far, we have understood that according to a literature review stemming from a Euro-American approach, criminality is viewed as a psychopathology which may be the result of any number of psychological, biological, social and/or environmental causes. With this base to build on, a proposal of solutions has arisen from two fundamental understandings of the criminal: 1) that criminals can be reformed, and; 2) that they

cannot. Due to these underlying assumptions, incarceration was proposed as the sole solution to criminal offences, but the imprisonment would entail a possibility of two basic approaches: 1) incarceration without treatment plans, and; 2) incarceration with treatment plans.

Incarceration

Historically, harsh punishment was said to lead to more crime, instead of a reduction in crime (Rice and Harris, 1997). While there is some evidence that consistent punishment in the form of criminal sanctions can reduce illegal behavior (Brennan and Mednick, 1997), it has also been noted that the prison system itself may increase the likelihood of recidivism (Rice and Harris, 1997). Thus Euro-American society has shifted back and forth in their beliefs centering in the efficacy of prison sentences.

Prison sentences may be said to reduce crime through deterrence or incapacitation (Reiss and Roth, 1993; Rice and Harris, 1997). It has been stated that deterrence, which is to say imprisonment or fear of such, actually alters criminal behavior by discouraging crimes. But it is more likely that incapacitation leads to the more probable of results. Incapacitation is said to reduce crime merely by physically isolating persons who engage in violence and removing them from society (Reiss and Roth, 1993).

Forms of deterrence within the prison settings include shock incarceration (also called, “scared straight programs” (Rice and Harris, 1997)), boot camps, fixed sentences, the elimination of parole, intensive supervision programs, and a resurgence of capital punishment (Rice and Harris, 1997). Following the theory that incapacitation of offenders means that prisoners can no longer victimize the general public, there has been

a recent demand for longer incarcerations that imprison as many criminals as possible for as long a time as possible (Rice and Harris, 1997).

Treatment Plans

The 1960's and 1970's saw a resurgence of prison reform and researchers focused on the idea that treatment might lead to a reparation or change in defective personal qualities of offenders that led them to criminal actions (Rice and Harris, 1997). Various forms of treatment and reformation plans were tried in numerous prison settings. These plans include Gestalt therapy, insight-oriented therapy, behavior therapy, pharmacotherapy, dietary interventions, a combined psychosocial and biological approach, re-education and resocialization approaches, and a therapeutic community approach.

Gestalt therapy has been used and documented in prison settings as an effective form of reformation. The Gestalt approach, which was used with hard-core criminals, was said to be especially suited for this population because of the subjects' reluctance to identify with a normative social value system and because of the prisoners' limited verbal skills (Serok and Levi, 1993).

An insight-oriented approach, which focused on evoking emotional responses, was used at another prison setting. This approach used psychodynamic counseling, group encounter sessions, and defense-disrupting therapy (Rice and Harris, 1997). Psychodynamic therapy may provide sufficient insight into why the offender feels compelled to use violence as a coping mechanism and may help in expressing feelings and resolving conflicts using appropriate verbal methods (Tardiff, 1995).

Yet another style of treatment approach focuses on behavior therapy methods (Reiss and Roth, 1993; Tardiff, 1995). It is said that behavioral therapy is especially effective with the sex offender population (Reiss and Roth, 1993). Electric shock paired with photographs of children has been used in this approach for treating pedophiles. In addition to this, assertiveness training, anger management, life-skills management, and relapse prevention techniques are taught to offenders to help them learn new behaviors that are more socially acceptable.

Pharmacotherapy has also been used as a treatment method for criminals (Reid, 1978; Ferris and De Vries, 1997; Karper and Krystal, 1997). The pharmacological agents used in the treatment of violence acts on the serotonergic, noradrenergic, and γ -aminobutyric acid, and dopamine neurotransmitter systems. Studies have shown that the pharmacological effect on the serotonin system may reduce impulsivity, and therefore may decrease acts of violence. Antidepressants may be used for depression or attention deficit/hyperactivity disorder. While lithium has been successfully used as an anti-aggressive agent and has been especially effective on those with excitability and impulsivity disorders (Karper and Krystal, 1997)

Another biological intervention has been the use of vitamin-supplemented diets, which are said to improve the personality functioning in adult inmates. It has been stated that low blood glucose levels result in a release of adrenalin, which is associated with irritability and aggressive behavior. Therefore, a dietary intervention may influence antisocial behavior through a regulation of hypoglycemia and alcohol abuse. According to Karper and Krystal (1997), there is a bi-directional relationship between hypoglycemia

and alcohol abuse, the latter of which has a noticeable direct effect on violent and antisocial behaviors.

An alternative treatment modality has been a combined psychosocial and biological approach. Kristiansson (1995) describes a treatment plan combining the use of pharmacotherapy and a cognitive-behavior-based educational program, which she used in prison settings. The combined psychosocial and biological approach proved effective in developing a decrease in impulsivity, which led to improved coping strategies.

Re-education and resocialization through the development of relationships was a method used by several researchers (Angliker et al, 1973; Yochelson and Samenow, 1977; Wulach, 1988). This method focuses on the analysis of thinking patterns and an ensuing program designed to develop responsible behavior. This program is meant to help each individual gain awareness of his behavior and to gain insight and motivation to seek help. The program is designed so that each individual would begin by learning through the input of others, but would eventually learn to act as his own control.

The therapeutic community is a method referred to as consisting of “radical reforms” (Rice and Harris, 1997: 426). It is described as fitting into the method mentioned above of re-education and resocialization. This method proposes to alter the custodial and punitive institutional settings and through this, change the offenders’ personalities and behaviors, which would in turn lead to psychological well-being and a reduction in crime. Cormier (1968) described the therapeutic community as a,

a very specific technique in social treatment, the organization of a milieu where all relationships, whether established during working hours, recreation, or leisure time, are deliberately used as a social learning experience.”
(Cormier, 1968:45)

Since all participants in the therapeutic community are involved, the acting out of staff as well as inmates is discussed. Living in such close proximity, it is impossible for the staff not to disclose part of their own personal history and problems and this is, in fact, expected, although it is not encouraged. The therapeutic community, then, becomes a “two-way therapeutic process” (Cormier, 1968:62), with the inmates and the staff playing the part of both giver and receiver.

Thus, we can see that the solutions to criminality are varied. There are those who feel that, as far as treatment goes, “nothing works” (In Rice and Harris, 1997:426) and incarceration is a solution in itself that needs no other alternatives. However, others have relied on the use of a variety of solutions, mainly in addition to incarceration, which have ranged from a variety of treatment and reformation plans based on therapy and re-education, while still others have searched for solutions based on a biological emphasis, such as dietary intervention or pharmacotherapy.

THE NATIVE-AMERICAN APPROACH TO CRIMINALITY

The Native American understanding of criminality differs from the Euro-American approach in many respects. Native communities generally view criminal behaviour as “a misbehaviour, which requires teaching or an illness which requires healing” (Ross, 1996:5). As many aspects in the Native community, criminality is understood as part of a larger whole and every action of an individual is understood as stemming from “a large, complex and powerful web of lead-up events” (Ross, 1996:210) which must be examined as such.

Offenders are seen as individuals who have lost their balance and who have failed to follow the “teachings of the Sacred Tree²” (Ross, 1996:188). Balance is an important element to maintain and, according to traditional teachings, the more a person goes out of balance with themselves, the more they will add to the imbalance in their families, communities, and countries.

The meaning of the word ‘justice’ to Aboriginal peoples, according to Ross, is understood as an “allegiance to the integrity of [their] spiritual principles and values” (1996:257). Ross quotes the words of a Cree man who spoke out at a justice conference held in Alberta in 1991. The man questioned and contrasted the Euro-American understanding of justice when he asked,

Why does your law, from the Ten Commandments to the Criminal Code, speak only about what people should not *do*? Why don't your laws speak to people about what they should *be* (1996:257)?

Causes

While the causes of criminality amongst Native Americans, which have been discussed in various literature, is significantly different from the Euro-American causal beliefs, there has also been a backlash of criticism directed at non-Native criminality causal explanations. According to Duran and Duran (1995), the use of Euro-American psychology to understand Native American problems is problematic in itself since the structural framework for analysis is steeped in a cultural context that is said to oppress

² According to Ross (1996), there are twelve teachings of the Sacred Tree which are understood to guide one throughout life in almost every context. The twelve principles of the Sacred Tree can be found in Appendix A.

Native Americans. Due to experimenter bias and transference issues, Duran and Duran suggest that non-Native psychologists are simply missing the point.

The use of alcohol is frequently discussed in the literature but is understood within a larger cultural context. According to some authors, alcohol was historically used by Native Americans as a medicine that kept rage within a kind of boundary (Duran and Duran, 1995). But its use has also been noted to remove impulse control and allows for the venting of rage, which can lead to an imbalance. Thus alcohol abuse is understood as a spiritual illness that affects spiritual communities and must be understood and treated in a holistic manner (Duran and Duran, 1995).

Duran and Duran (1995) suggest that alcohol abuse and suicide may be functional behavioural adaptations within a hostile and seemingly hopeless social context. One result of colonialization has been the decrease in traditional methods of social control by Native American communities. Alcohol abuse and its related problems, such as higher crime rates, may be one of the outcomes of this social disintegration. It has also been suggested that suicide and homicide occur in Native American communities because of the loss of culture that is a direct result of colonialization (Duran and Duran, 1995).

While alcohol and substance abuse are often understood as an individual maladaptive problem, Native American theory is quick to point out that its roots lie within the historical relationship of domination and genocide at the hands of the federal government (Duran and Duran, 1995). In order to understand the causes of criminal behaviour, as understood by many Aboriginal communities, it is important to understand

the historical context from which contemporary Native American traditions and beliefs have emerged.

One of the most significant historical factors which has affected the psyches of many First Nations peoples was the Indian Act of 1876. This Act was consolidated into a nation-wide framework and is still fundamentally in place today (Dickason, 1992). Aboriginal peoples of Canada, who were already the most regulated people in the country, became even more so, down to the personal level. The main goal of this act was to create a rigidly defined and easily administrable government definition of “Indianness”. Furthermore, since confederation the Canadian government has pursued a policy of assimilation culminated in the 1969 Trudeau government White Paper calling for the termination of Aboriginality, extinguishment of Aboriginal rights, and blanket assimilation of First Nations into mainstream Canadian society. Due to its universal negative reception, this White Paper was retracted a year later, yet the assimilation policy persists in many other forms and in many ways the damage has already been done.

Acculturation is a complex process that creates effects on many levels, including cultural, social, psychological, emotional and personal levels. Adaptive acculturation may be achieved through either integration or assimilation. The former refers to an adaptive process in which one maintains their original cultural identity. The Native population, however, underwent a process of assimilation, which is to say, that the dominant culture attempted to have Native Canadians relinquish their original cultural identity and take on that of the dominant culture (Chess et al, 1988).

As part of this process of assimilation, residential schools “were the device by which an unsympathetic majority sought to assimilate and culturally eliminate a racial minority (Brown and Vibert, 1996:479)”. Even when the intent was not malicious, and sought ethnocentrically and paternalistically to “modernize the Indians” the effects were none-the-less devastating. Although residential schools were closed by the 1960’s, those who had attended the schools had given up their Native traditions and still suffer from permanent psychological scars. Many of those who attended residential schools suffered physical, sexual, psychological and emotional abuse at the hands Euro-Canadian clergy and educators. Native people who were forced to attend these schools were taught to be ashamed of their culture, their language, and the colour of their skin. These same people now find themselves with a sense of inferiority and struggling in their parental roles (Miller, 1996). The separation from family that these Native children experienced, led to a loss of identity and connection to their family and relatives, while creating a questioning of the value of their culture and, therefore, themselves. This loss of culture and self-esteem due to this inappropriate and disrespectful government treatment of Native individuals has had dramatic effects on a significant portion of the Native Canadian population (Miller, 1996).

The effects of the residential schools can be seen in the psychological and emotional conflicts that appear in many Native peoples today. There are literally thousands of once-proud Native Canadians, who have been reduced to self-abusive states due to the results of these institutions (Miller, 1996). The shame and humiliation experienced by these victims inhibits their ability to recount and discuss this abusive part

of their past (Morrissette, 1994). The residential schools directly contributed to family breakdown and the occurrence of Native crime.

Through the need to suppress these painful memories, many Native individuals have turned to substance abuse or other self-destructive behaviours. Children of these parents are considered at a high risk of neglect or abuse and are often removed from their parents' care by child welfare workers (Morrissette, 1994). As a result of this, many of the children are placed in non-Native foster homes that minimizes contact with their own culture and traditions and once again adds to the fragmentation of Native families and the negative effects resulting from a loss of cultural identity.

Five conflictual areas have been identified among Native Americans due to this process of assimilation and the loss of cultural identity. These are: 1) a denial and lack of pride in being Native; 2) a pressure to adopt the dominant culture's values; 3) guilt feelings over not knowing or participating in their own culture; 4) having negative views of First Nations peoples; and 5) having a lack of support and belief system (Burt, 1993).

Solutions

Problematic Issues

Social learning approaches have been criticized by Duran and Duran (1995) in the treatment of alcoholism and substance abuse, which may be related to some criminal behaviours. Its results are mainly a "change in identification as a user and on knowledge of substance abuse with no variation on self-esteem or coping skills (Duran and Duran, 1995:100). Interventions by non-Native groups often use inappropriate cultural values,

beliefs and behaviours in the treatment of alcoholism, which further causes problems of alienation. Alcoholics Anonymous, with its emphasis on Christianity, may be yet another intervention that adds to the alienation of Native clients by not acknowledging Native spiritual beliefs within the healing process (Duran and Duran, 1995).

At a Native Mental Health Research Team meeting held in 1999 at the Jewish General Hospital in Montreal, researcher Kahá:wi Jacobs disclosed the findings of a study conducted at the Montreal Native Friendship Centre between 1996 and 1998. The study was designed to evaluate the severity of addictions³ and the availability of treatment for urban Aboriginal people. Of the 202 people surveyed who had an addictions problem, 25% were out on parole, while 42% were awaiting charges. Of this sample group, only 18.4% sought help. The findings of the study identified problematic barriers to getting treatment. These included: 1) missing identification (health cards or proof of status cards); 2) Lack of funding and transportation; and 3) barriers due to treatment centres (a preference to specific Nations, restricted access for urban Aboriginals, long waiting lists, long application forms that require literacy or introspection, etc.). Thus, according to Jacob's study, acquiring access to a treatment centre that focuses on the alleviation of alcohol or substance abuse is problematic at best.

Native community courts has been one suggested solution to criminal behaviour, however, some see this court system as just another way of oppressing Aboriginal peoples. These courts are based on punishment-oriented solutions and are said to have the same failures as those that are perceived as occurring in the Euro-American justice

systems. Rather than having healing occur between the victim and victimizer, the illness of imbalance is spread from one generation to another. The very existence of community courts may cause fear and suspicion amongst some individuals and a general questioning of authority and power may develop as a result, which may, in effect, cause an imbalance within the community (Ross, 1996).

Incarceration

Perhaps one of the clearest ways to sum up some of the Aboriginal views of the legal justice system is to use a quote from a Cree Elder spoken in Alberta in 1991, “We know you have a *legal* system; we’re just not sure it’s a *justice* system (Ross, 1996:253).”

Since criminal behaviour is understood in a holistic way that stresses the imbalance in an individual that stems from and effects many lives, jail is viewed as something that is an unhealthy and undesirable solution to criminal behaviour. Ross (1996) states that incarceration is an environment that reinforces the reliance on power and force within relationships and makes it harder for the offender and the victim to replace those views with one of respect and consent.

According to Ross (1996), the Euro-American justice system denies the spiritual and emotional dimensions and uses one way of thinking as a solution. This solution focuses on supposed facts and opinions. This system does not allow for the expression of emotions and feelings, or for taking into account a larger context. There is no room for healing in the courtroom setting. A Euro-American style justice process, with its

³ Ms. Jacobs used the Addiction Severity Index and the Beck Depression Inventory as part of the methodology in her study.

labelling and condemning, reinforces and preserves the negative identities behind such acts rather than attempting to understand or change them.

Furthermore, the guilty plea does not rely on understanding harmful wrong doing, or perceiving hurt and harm. The offender will generally maintain his 'not guilty' stance and will be placed into a prison setting where those around him are also in denial. These conditions do nothing to understand and heal the offender, but rather re-enforces his own sense of victimization (Ross, 1996).

As for the victim of these crimes, they are in no way close to healing themselves through the justice system. The victims often feel that the courtroom is not a safe place for them to address their victimization and feelings of anger. The criminal has a higher chance than average of being acquitted, while the victims often are ostracized, punished or driven out of the community for testifying. Thus, victims and witnesses have been less willing to come forward and testify and the feelings of trauma and victimization continue within the victim (Ross, 1996).

While the Euro-American law focuses on the individual, the Native American traditional law focuses on relationships. The former focuses on criminality as antisocial ways of coping and focuses on acts, while the latter sees criminality as a need to heal and focuses on the relationship disharmonies. The former concentrates on one's responsibility for one's own actions and the need to pay the price, while the latter focuses on the responsibility towards the health of others and reparation of mental, emotional, spiritual and physical health and relationships (Ross, 1996).

Thus, incarceration is viewed as a barrier to healing. It's main reason for being is seen by some Aboriginal people, not as a place for reformation or healing, but rather as a punishment, which is motivated by anger, revenge, guilt, shame and personal victimization. Anger towards offenders, Ross states (1996) comes from not being healed, and both offender and victim need to move beyond that negative cycle.

Dianne Reid, a Cree Elder, has stated that, "Prisons are all about closing people off from the world and preventing anything meaningful from taking place in their lives (1997:78). She sees maximum-security prisons as being a metaphor for both the issue of hierarchy and the mechanisms of authority and control. These issues of domination, then, become emotional, physical, mental, and spiritual barriers when one is trying to heal others and be healed (Reid, 1997).

Traditional Healing

Native communities across Canada have different histories, political and social dynamics, cultural characteristics, problems, economic resources and administrative abilities and, therefore, the solutions to dealing with criminality and injustices may vary greatly. However, due to a striving towards regaining a sense of cultural identity and pride, many communities are seeking to implement solutions that follow along traditional methods.

Traditional justice may involve very different players, processes and goals than those involved in the Euro-American justice system. Those involved in the process may include healers, helpers, teachers and guides. The process itself may focus more readily

on grieving, healing, bridging and restoring. And the goals may include the restoration of harmony between and within relationships and individuals (Ross, 1996).

Because the life force is believed to carry the spirits of their ancestors and tradition is passed through the elders, elders may be used as part of the healing process to guide, encourage and nourish (Red Horse, 1980; Ross, 1996). Elders may help young people to balance their behaviour with spiritual propriety. They may also be seen as documented testimony that time is constant and therefore become the unifying forces in the healing (Red Horse, 1980).

There is an especially high success rate documented in using traditional methods and the concept of culture as treatment among Native drug and substance abusers. The beneficial association between indigenous healing practices and individuals suffering from alcohol addiction has been noted by anthropologists as early as the 1930s (Brady, 1995).

Between the 1950s and the late 1960s, which was the era of “global decolonization and geopolitical retreat by Western powers” (Dufrene, 1988:7). Native peoples began turning towards their own heritage and traditions for therapeutic answers, since the time had come for Native people to seek out more culturally sensitive and holistic approaches to healing that could not be found in Euro-American approaches (Dufrene, 1988). Incorporating indigenous ideals and reinstating Native traditions became a conscious rejection of the colonizers’ culture and a repossession of the Native culture. Traditional ceremonies reinforce the Native individual’s adherence to cultural values and remind them of the importance of strengthening and reviving family and

community networks (LaFromboise et al, 1990). It is these traditions and values that become a source of strength that provides culturally consistent coping mechanisms.

The goal of traditional healing is to provide a sense of interconnectedness that can be understood as the individual's connection to the world outside of the self. This means being connected to family, friends, the community, and culture (McCormick, 1996). The goal of traditional healing has been not only the reaffirmation of cultural values, but also to consider the individual in the larger context of community. Traditionally, there has been an interdependence within Native American communities on relationship networks that support and nurture bonds of mutual assistance and affection, while emphasizing the importance of mutual respect. (Yung and Hammond, 1997). In some First Nations' cultures, establishing harmony within the community and within interpersonal relationships among members within that community is understood as the primary goal of the healing (McCormick, 1996).

Sentencing Circles

Sentencing Circles allows everyone involved in the crime to speak out before the court party, which would include a judge, crown and defence. Other participants include the victim, the offender, support people working with the victim and those working with the victimizer, the families of both the victim and victimizer, various members of the community who wish to participate and the RCMP.

It is believed that the offender needs to understand the impact of his actions on others, including the victim and their family, and the victimizers own family. All participants express their emotions and thoughts, and all present speak about the strengths

and weaknesses of the offender. It is believed when the offender hears how his actions have affected a wide variety of people in different ways, that his crime will begin to be seen in a different light. It is also believed that once the victim views the victimizer as a 3 dimensional person that they are reduced from an overwhelming monstrous size and begin to be seen and understood as a human being and lose some of their frightening edge (Ross, 1996).

Ross (1996) describes the Sentencing Circles as providing two definite benefits, that of, promoting community healing by allowing the community to have input during the sentencing and, secondly, by allowing the court to hear directly from those most affected by the victimization.

Healing Centres

Traditional healing centres focus on healing offenders in a holistic manner, focusing on mental, emotional, spiritual and physical aspects using a variety of traditional methods. Many offenders have been victims of abuse and are searching for an environment to work through these issues in a safe place. Therefore, it is thought that healing, as opposed to punishment, would be the most beneficial way to heal Native offenders. Such healing centres may focus on a variety of techniques, for example, the use of traditional values, such as honesty, caring, sharing and respect. Offenders may participate in traditional healing methods, such as healing circles, sweatlodges, and various ceremonies and rituals that are in keeping with Native American traditions and beliefs. Additional programs may be implemented, such as anger management, sexual

awareness and relationship issues, and substance and alcohol abuse programs, to name a few (Anonymous, 1998).

ART THERAPY

Art therapy with offenders

According to Carl Jung (1953), in a condition where the client's world has become empty and grey, such as in a correctional institution, fantasy may be used as a therapeutic tool. The use of images can be used to reconstruct personal belief utilizing a belief in a personified world through a faith in one's self and one's psyche as the carrier of interior personalities.

Any genuine expression of one's imaginal world in a concrete form, if done with a minimum of conscious ego involvement, can help to animate the unconscious. According to Jung (1953), if a client with psychopathic tendencies can stay within the therapeutic relationship and if the imagination can be evoked, then there is hope in reformation and healing.

Winnicott (1981) describes a holding environment as one in which an individual can experience creative growth through play but at the same time feels safe and protected. Prisons have also been called holding environments, however, they are far from providing feelings of safety and growth. Instead, they provide an environment that feels more like a vacuum, where one feels paranoid, unsafe and in which growth is curbed (Yochelson and Samenow, 1977; Murphy, 1994). Often in this environment a 'false self' is constructed, where denial and lying about one's true self are often used as

coping mechanisms, and expressions of emotions are generally discouraged (Murphy, 1994; Gussak, 1997a, Hall, 1997).

Art therapy addresses these issues on many levels. First, because of the reliance on the visual, individuals do not need to reveal to others the meaning behind their images, yet at the same time, they are able to release many emotions and work through many conflicts using the artmaking process. Art therapy can help the individual on an unconscious level to release inhibitions and feelings (Gussak, 1997a). Second, the individual can change, through the use of art, at his own pace. Using art as a therapeutic tool, allows the individual to grow and resolve his conflicts in his own time and space, while supporting the positive aspects of his personality (Carrell and Laing, 1982). Third, the art helps to channel energies in a constructive way. While prison experience can repress human emotions and tolerates acting out behaviours, the art can provide a sense of relief and minimize acting out by allowing the offender's emotions to be channelled in a positive way through the use of art (Carrell and Laing, 1982). Fourth, while prison isolates individuals, art helps to communicate a sense of self and society (Carrell and Laing, 1982). This can be done through group art therapy sessions and the sharing of ideas and thoughts in individual sessions. While an individual may not be ready to verbalize their emotions and thoughts, the art allows for a way of sharing which is safe and non-threatening. Fifth, art therapy can be used as a way to bring order to chaos. Through the creative process, one can begin to understand that which appears to be of a chaotic nature and to begin to make sense of and accept their situation and surroundings (Hall, 1997). Sixth, through art therapy one can gain a sense of competence and become

aware of their needs. They can begin to set goals, make plans, and examine their feelings about themselves and others, as well as explore their hopes and dreams (Hall, 1997). And lastly, art therapy can overcome certain set patterns by interrupting them and replacing them with dialogue. This dialogue can consist purely of a visual nature, but it contains material from the conscious and unconscious levels and helps to ventilate thoughts and feelings. Art therapy is especially effective with offenders in denial, who minimize or justify their criminal actions. Art therapy, by centering on the artmaking process, minimizes the use of verbal language, which have often been used by the offender to manipulate therapists and others (McCourt, 1994).

Art therapy with Native Americans

John Kim Bell (In BereznaK Kenny, 1998:3) is quoted as saying, “Over one hundred years ago, Metis leader, Louis Riel said, ‘my people will sleep for one hundred years and when they awaken, it will be the artists who lead them’. Native tradition is steeped in the use of art for healing, expression, and as a way of life. Carolyn BereznaK Kenny (1998) states that, [Native] song, dance, art, carving, basket making and other art forms can provide the foundation for [Native peoples’] autonomy, solidarity, self-determination and the means for keeping [the Native peoples’] spirit alive” (1998:4). While Rod McCormick (1995) found that expression was the most important element of healing among Aboriginal peoples.

Thus it is no surprise that art therapy has entered into the world of healing and has been revealed to have a high success rate among Aboriginal peoples (Ferrara, 1994).

This may be due to the fact that, according to Dufrene (1988), both art and Native healing rely on the use of symbols as part of the healing process and on a rebalancing of forces. Furthermore, art therapy, more readily than a purely verbal modality, has the potential to transcend barriers that may arise in a cross-cultural context (Westrich, 1994), such as language difficulties, symbolic and metaphoric differences, and variations of expressions and gestures. Art therapy, with its ability to reduce anxiety and defensiveness, while allowing for a clarity of expression, may prove to be the most viable treatment modality for in a milieu where client and therapist are from disparate cultural backgrounds (Dufrene, 1988).

While Ferrara (1994) states that Native clients respond positively to art therapy because of their connection between art and healing, it has been my experience that some Native clients are intimidated by the artmaking process and a variety of different materials and methods may need to be experimented with in order to obtain a level of comfort and safety for the client.

Art therapy techniques

According to Diaz and Sawatzky (1995), ritual and myth may be used when working with First Nations peoples in order to encourage a reconnection to each other and their culture. Thus, art therapists may decide to use storytelling and artmaking to help clients to reconnect with their own history and the emotions that that reconnection evokes (Cattaneo, 1994). Clients who suffer from feelings of displacement could explore through their artmaking how they see their personal development as it was shaped by their culture (Cattaneo, 1994). Storytelling has long been used as a Native mode of

communication, thus, its use in combination with artmaking may serve a therapeutic purpose by combining two Native cultural elements in the act of healing.

It may be therapeutic to ask participants if they would like to share a story or myth that they remember for their childhood or later years (Ferrara, 1998). This encourages a sense of empowerment by having the client rather than the therapist lead the session. If this is done in a group setting, other members would be encouraged to draw about the story by using a literal depiction, developing an interpretation, or creatively exploring emotions that the story or myth evoked.

Stories may also be self-stories, in which the storyteller reveals elements of critical life experiences through the narrative (Diaz and Sawatzky, 1995). A loss of traditional social identity may be reconciled and a reformation of social and cultural identity rebuilt by returning to traditional myths to encourage and facilitate a reconnection of the Native client to their culture, traditions and self-identity (Diaz and Sawatzky, 1995). The traditional myths may be juxtaposed with personal stories and images and the artmaking process used to work through the identification with traditional mythological figures from their Native culture and their concepts of self.

If no one has stories, myths or legends that they would like to share, then the therapist may decide to read out a traditional myth or legend and ask the participant or participants to draw, paint, or sculpt using the legend as a theme (Ferrara, 1998). Native music and guided imagery may be introduced to help provide a relaxed atmosphere and encourage a further connection to their culture (Ferrara, 1994).

Working with dreams through art by recreating or recording them can provide significant insight and has long been a part of Native American culture and traditions (Speck, 1935).

Response drawings or painting are another method that may prove successful in the reconnection of one's culture. Using this method, the therapist may introduce a traditional drummer, dancer or artist and ask the client to draw whatever comes to mind as they are listening or watching the event (Ferrara, 1998). This technique serves not only to focus on a positive role model, but also as a bridge to reconnecting with one's own culture and instilling a sense of cultural pride.

Murals are another technique which may be used in a group setting (Ferrara, 1998). Themes may be chosen by the group in order to empower its members. The very act of working on a large mural, which relies on physical closeness and artistic collaboration, helps to create cohesion amongst the group members.

Art therapy materials.

Using materials which are culturally sensitive and familiar to the client may aid in creating a therapeutic alliance, and in the development of cultural awareness and pride. Some suggested materials are leather strips and cords, a selection of beads, soapstone and carving tools, sinew and sewing tools, fur strips, natural materials, such as wood, rocks, leaves, and bark, in addition to the more typical selection of art therapy materials (such as, paint, pastels, glue, scissors, clay, plasticine and a variety of paper selections).

Art therapy with Aboriginal offenders

To my knowledge, there has been nothing written on using art therapy with Native offenders. There was, however, a noteworthy message written by Nicki Garwood, the clinical director at Waseskun in 1998, about the art that was produced at Waseskun House, a correctional facilities for Aboriginal men.

Ms. Garwood described a small Inuk in the process of seal hunting that was made by one of the residents out of the type of foam that fills cracks around windows. The message passed on by the resident in this case was that despite his violent behaviour, he was “an artist of great talent and spirit (Garwood, 1997-98:2)”.

Another art piece was a mug portraying Buffalo Woman. This was created during a time when a resident came close to leaving but decided to stay and finish their program. He claimed, “This was supposed to be a good bye gift, but instead it’s to say here I am (Garwood, 1997-98:2).

Yet another artwork was a pipe in the shape of a tomahawk with its bowl carved by a resident who had repeatedly had drug relapses. He was helped by Waseskun House, and Garwood claims that this individual now finds quality in his life.

All of these artworks describe some of the many aspects of the residents that I came in contact with at Waseskun (the name was changed from Waseskun House to Waseskun during my internship). The works of art were unique, meaningful and showed struggles between personal and cultural identities with artwork being created from whatever was available. During the time of my stay, painstaking art processes generally included nail clippers, glue, popsicle sticks, needle, thread, yarn and a variety of other

tools and materials. Many of these artworks showed a struggle between self-identity issues, prison-culture influences, and the search for cultural identity.

AN ART THERAPY INTERNSHIP WITH ABORIGINAL OFFENDERS

The art therapy site

The physical set-up

When I began doing art therapy at Waseskun House, it was on the top floor of a building in downtown Montreal surrounded by other buildings and houses, with a highway close by and no green space to speak of. Over a period of four months, Waseskun moved to its new location one and a half hours north of the Montreal area that was located some distance from the road with a consequential increase of trees and grass, and had a forest flanking two sides of the new location. In the earlier arrangement, the counsellors went home at night and returned the next day. In the new location, many of the counsellors lived on site and were available almost around the clock for the residents. This was due to the new layout of 'the camp'. 'The main lodge' is a large building that contains the staff offices, a dining area, a group room (used for ceremonies and counselling sessions), and the kitchen on the main floor, while the basement contains washers and dryers and a padded room to do "intensive work" (spiritual work or letting out frustration). There was a shed that contained weights and some carpentry tools with the back area leading to a small swimming pool and a sauna (both of which I never saw in use). There remained three similar looking one-story buildings, which Waseskun called "lodges". One of these was for the residents, one for staff members, and one for

the family of residents who were sometimes invited down to do family therapy and healing sessions. During my internship, two sweatlodges were erected by a female Elder and her helpers. One sweatlodge is used by residents and the other is used by staff members. There is also a tennis court, which no one ever uses and a fire pit outside on the lawn in front of the dining area. The latter I did see used, sometimes just for enjoyment, and other times for ceremonies and prayers.

The staff

The staff consists of solely Native counsellors who have various degrees of formal training, ranging from drug and alcohol counselling diplomas to university degrees in counselling and therapy. The staff counsellors are mostly male, with the exception of one female counsellor.

Also on staff, is a Cree Elder and her helper, who are hired to heal the residents and staff through the use of ceremonies, sweatlodges, healing circles, and individual healing and discussions.

The remainder of those who live on site are the cook and various secretarial and office staff, and a number of night supervisors who do room checks on the residents and make sure that things are running smoothly.

The residents

The residents are exclusively male, whose ages range from 18 years old and upward. Their geographical backgrounds are from all over eastern Canada and their

cultural backgrounds are of Aboriginal descent. I personally came to know those of the Algonquin, Cree, Inuit, Micmaq, Mohawk, Naskapi, and Ojibwa Nation.

Some of the problems which many of these men have to face, besides being miles away from their families and friends and living within a restrictive environment, are drug and/or alcohol abuse problems, a childhood history of physical, mental, and/or sexual abuse, relocation and assimilation issues, loss of cultural identity, suicidal ideations, and criminal behavioral problems, such as robbery, physical or sexual assault, and/or homicide.

During my internship, numerous residents, especially those in the farther most northern communities, experienced the personal loss of family or friends due to sickness, old age, suicide, drug overdose, hunting accidents, and an avalanche. Such losses were felt within the entire group and often a death directly affected more than one resident.

About Waseskun

Waseskun was founded in 1988 and is a Cree word which literally means the time after a storm when the clouds dissipate and the sun begins to shine through (Solomon, 1997-98). It is a private non-profit, Native-owned and operated organization devoted to healing Aboriginal male federal and provincial offenders in a holistic way that includes the offender, the victim, the families and the community (Skerratt and Garwood, 1997). Staff members say that eight out of ten men who finish the therapy program at Waseskun won't end up in jail again (George, 1998).

The Waseskun approach

Waseskun uses a Native community development and Native empowerment approach, which includes not only working with the residents, but working with Native communities and agencies. Healing is thought of as an individual and a community process that is rooted in traditional values and spiritual awareness (Anonymous, 1998). Waseskun uses the symbol of the Medicine wheel as a model for the developmental journey and the balance of the emotional, physical, mental, and spiritual aspects of human nature. Residents are encouraged to examine their personal life experiences in the context of a traditional Native understanding (Skerratt and Garwood, 1997).

The intensive program is based on traditional Native spirituality. The programme lasts for a period of 20 weeks during which time the residents are encouraged to develop skills in the functional building of a community and to learn such skills as communication, problem solving and conflict resolution (Skerratt and Garwood, 1997). Vision Questing is encouraged, as are sweatlodge experiences and the making of art. Other program components are mandatory, such as individual and group counselling, Native family systems awareness, human sexuality, men's issues, conflict resolution, life skills, First Nations addictions awareness, anger management, healing circles, traditional teachings from Elders, and traditional feasts and ceremonies. As opposed to Western-based forms of therapy, the healing circles have no time limit and have been known to run anywhere between three and five hours (George, 1998).

According to Skerratt and Garwood (1997), some of the healing aspects of the Waseskun approach is the integration of traditional values in the building of healthy

relationships with the self and others. Grieving various losses and letting go of artificial substitutes which replace the fulfillment of actual needs, while learning to express emotions such as outrage and anger in safe and constructive ways, deepens the healing process. The program cycle ideally activates levels of forgiveness and a more mature handling of legitimate anger towards social change and interpersonal intimacy.

My background

I began my internship at Waseskun in the fall of 1998. I found this difficult and intimidating at first for several reasons. To begin with, due to security reasons, I was not permitted access to the residents' files at Waseskun and had to rely on my clients' word for information regarding their cases and their personal histories. This, at times, became problematic and has sometimes hindered the therapeutic process.

Secondly, I had never worked with a population of offenders before or an exclusively male clientele. Suddenly, I was surrounded by males of every age who had committed a variation of crimes and who knew each other by name, while I knew no one and seemed to be one of the few females on site.

Thirdly, I had never worked with an Aboriginal population before. Not only am I visibly non-Native, but every piece of literature that I have picked up on working with a Native population has stressed the difficulty of white counsellors working with a Native clientele. The literature warned that there would be issues of mistrust, shyness and hate. I was terrified that I would be dismissed and hated before I even got a chance to begin.

My own heritage is one of a German cultural background and upbringing, (from my father's side) and a mixture of Chinese and Danish heritage (on my mother's side).

Somehow, with this unlikely mixture, not only am I very fair-skinned but I have rather shocking red-hair that precludes the assumption that I am from any of a number of ethnic backgrounds, including my own or any Native culture (although a few of the men mistook me for being of Native blood and I took some good-natured ribbing about it).

Having undergraduate degrees in both studio art and in anthropology, directed me towards doing cross-cultural work at the Master's level in the creative arts therapies. I spent much of my time at an undergraduate, and at a graduate level, reading and writing about Aboriginal issues, focusing on traditional healing, counselling, symbolism, and art therapy techniques. While, in theory, this should have been everything I needed to prepare me for my internship at Waseskun, it was anything but. It seemed to me that much of the literature had instilled a paranoia in me and had added stereotypes of Native behaviour that I would be quick to discard.

Perhaps coming from a background as diversified as my own, with a mother who had lived out much of her childhood in an orphanage and had suffered from discrimination due to her oriental background and features, and having had both a mother and father who had suffered from poverty and near-starvation, I could identify with the strengths and pride within these men who came from such diverse backgrounds and hardships themselves. I began to search for each individual story and realized that there were no generalizations to be made. Each man had his own story and his own way of telling it and using it to help him to heal. I was there to listen and supply the art materials as together we began on a journey, which I believe helped to strengthen both of our lives and our desires to continue on our healing paths.

Methods, mediums, and scheduling

While at Waseskun, I used the object-relations approach to art therapy (Robbins, 1978). I believe that art can become a mirror to deepen the therapeutic relationship and its emphasis on non-verbal communication helps to bridge cultural and gender gaps. The art served as a container to explore various issues, object relations, defences and progressions. I also felt that the art therapy space provided a safe place to regain some of the control that the residents had felt that they had lost through the prison experience, being part of a correctional institution with rules and regulations to follow, and being forcibly removed from family, friends, and community.

In each session, I provided the client with a choice of graphite pencils or sticks, coloured pencils (prismacolor and watercolour), oil or chalk pastels, clay, and various sizes of white bond paper. Though a variety of mediums were available, most residents chose to use either a HB pencil and/or colour pencils.

I provided art therapy services to the residents at Waseskun on a bi-weekly basis due to school obligations and the difficulty of arranging for transportation to and from the site at its new northerly location. Since Waseskun is a residential correctional setting, I remained on site and slept in the staff lodge, residing with the only Native female counsellor on staff, for three days every second weekend. We often spent much of our time before going to sleep discussing various approaches and volleying our ideas and insights about the residents and their therapeutic needs back and forth. Part of the Waseskun approach is that the staff members work with the Elder to achieve their own sense of balance and healing. Due to this sleeping arrangement, which was a voluntary

one decided upon between the counsellor and myself, I was privy to much of this process and the goings on of the centre.

Living on site allowed for me to spend sixteen hours of my day awake and on site, interacting with the residents in a variety of ways. During my stay, I have washed dishes, helped prepare meals, played cards and billiards, gone for walks in the woods, been involved in sports events, helped prepare traditional medicine⁴, attended Talking and Healing Circles, participated in a variety of ceremonies, attended a sweatlodge healing ceremony, and, of course, conducted both group and individual art therapy sessions.

In traditional Native community healing, as in Cormier's (1968) therapeutic community, it is the sharing that becomes important. I do not believe that I would have been as trusted or that the therapeutic alliances, which my clients and I achieved together, would have been so profound if I had not been involved in every aspect of the Waseskun community life while I was there. Furthermore, timing and location took on a flexible set of boundaries. I found myself conducting therapy sessions mainly in the group room or in the individual counselling room, when they were free. But often, (because the counselling rooms were booked) I found myself conducting sessions around dining room tables (sometimes when a resident had spontaneously started to draw and wanted to share his story with me), in front of the campfire, or Sacred Fire as those at Waseskun called it (because a resident wanted the Creator to witness our conversation), on a pile of bricks in front of the forest (because it allowed us to be close to the earth's elements), in the forest

⁴ In this case, I helped to gather and prepare a cold and purification medicine from a fern plant and a cedar plant, with the help of an Elder and a resident.

(because a resident wanted to show me how and where to collect “medicine”⁵), and various other impromptu places.

Since some of these sessions were very spontaneous, they ended just as spontaneously, often because a required workshop or counselling session was due at that given moment. Sometimes the sessions lasted longer than usual because the resident was struggling with some deep inner feelings which took some time in unwinding or because he was immersed in a ritual or prayer that accompanied our session. Sometimes we would have to leave our therapy area and burn tobacco⁶ as part of the healing process. I learned to be more flexible and to trust in the client’s process.

I provided both individual and group art therapy sessions. Due to the fact that I had read about the efficacy and political correctness of asking a Native co-leader to sit in on my sessions, I did so. My first co-leader, however, was a young intern himself, who because of the end of his school practicum discontinued taking part in the sessions. My second co-leader appeared to have a unpredictable schedule which made it difficult to schedule sessions. Often I would wait for an hour for a pre-arranged session which never materialized. At other times, something unforeseen would come up with the residents themselves and the sessions would, once again, have to be cancelled. Although I found the group sessions to be successful, I discontinued them due to the unreliability of the circumstances, to the disappointment of myself and many of the residents. I did, however, occasionally participate in art therapy sessions with the Inuit group when

⁵ The resident was very knowledgeable in the healing properties of various plants and trees in the forest and our sojourn instilled a great sense of pride and competence in him.

⁶ Tobacco is often placed on a fire as an offering to the Creator.

invited in by their counsellor, which I found to be a wonderful experience, which the residents seemed to enjoy and which opened up many lines of communication.

Throughout my internship, I relied on the input and advice of the Native counsellors, which were present during my weekend stays, and asked the on-site Elder and her helper for explanations, clarifications, and advice about the residents and the treatment plans. These explanations often spanned many levels. Sometimes they included stories and teachings which I was then to reflect upon and learn from, at other times I was directly explained from a traditional healing approach how the healing was to be affected, or sometimes the explanation would come from a biomedical approach, where medication and Euro-American approaches were discussed and debated.

Two case studies

Although each resident that I worked with had a different set of beliefs, strengths and weaknesses, thoughts, feelings and healing processes, I have decided to illustrate some of the strengths of art therapy when working with this population by discussing the therapy process of two of the residents of Waseskun in two separate case studies. I have chosen to discuss these two particular cases because although they come from communities on opposite ends of eastern Canada, with different cultural backgrounds and traditions, there are some similarities in their issues of identity, both cultural and self. I will not be including all of the art therapy sessions or drawings in my discussion, but for the point of brevity and clarity will limit my selections to those which best apply to the topic at hand.

Case study 1

Greg (not his real name) was first introduced to me around a campfire at the new Waseskun site. He is 34 years old, single, is unilingual English, and is from the Micmaq Nation. When not at Waseskun, he lives on a reservation in Newfoundland with his parents. According to Greg, he is serving time for assault and battery, and while living at home, usually engaged in extreme alcohol and drug abuse. Although Greg wore his hair in a waist-length style, he told me that he did not practice any Native traditions and considers himself to be an atheist. He worked as a guide back home for big game, and proudly told me that he was good at it even when he was really intoxicated. Greg, who was gifted in poetry writing and used to draw frequently in prison, was anxious to begin art therapy sessions even though he considered himself a “bad artist”. He participated in 10 individual art therapy sessions and 3 group art therapy sessions.

Our first session was on a cold day in November, where the two of us sat perched a top some bricks just in front of the forest entrance. There Greg smoked a cigarette as he began drawing to tell me a little bit about himself. He used a pencil to sketch in the original details and then used colour pencil to embellish it. Greg drew himself fishing in waders, smoking and watching a woman across the way; all things which Greg said he liked (Fig. 1). To the left of the picture stands a line of buildings and a red sports car, which Greg said was to show that he could live in the country or the city. He was quick to point out that the car and the fishing rod, both drawn in red, the latter of which he described in detail, were things that he could not afford. Greg was also able to talk about

his difficulty in relating to women and the shyness that he feels in approaching them since he has been sober.

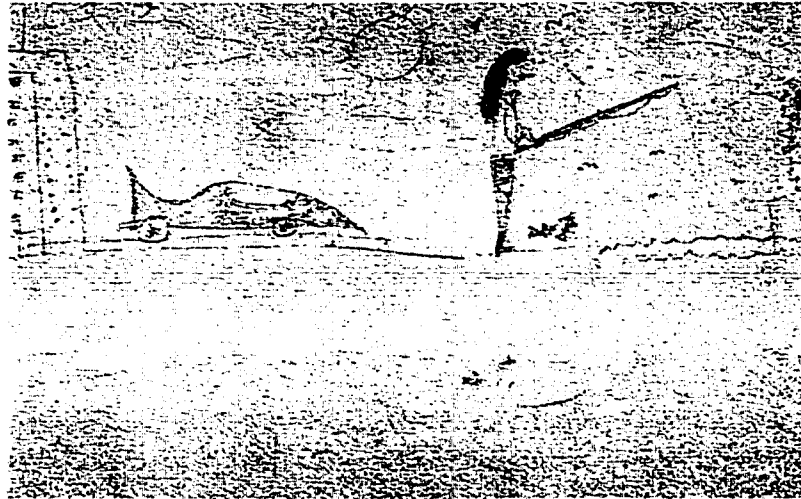


Figure 1

As we spoke, using the art to describe Greg's feelings and thoughts, a supervisor approached us. He was doing a rounds' check and was checking off each name on his roster to make sure that all of the residents were accounted for. As he approached into our therapy space, I noticed that Greg tensed up, became quiet and then began adding bars to all of the windows on the apartment buildings. I began to feel that art therapy might prove to be one of the few places that the residents could feel at ease to tell their stories and rewrite their own narratives in their own way, space and time.

The drawing allowed Greg to open up and discuss his feelings of "not having". The car and the rod are both status symbols, which are beyond his reach, while the woman is literally drawn beyond his grasp. There lies a body of water between Greg and the woman and she is placed on higher ground, which could represent the elevated position that Greg sees women in and the difficulty he feels he has in reaching a common

ground. The car and rod, both appearing as male phallic symbols, may represent conflicts with sexuality and relationship issues, which were able to be expressed in a safe and non-threatening manner.

The pull between town and country, I was later to realize, would be a common theme which represented Greg's pull between being an urban/non-traditional and a country/traditional Native Canadian. These two positions would pull at Greg's psyche in an attempt to re-unite this element of lost cultural identity and in the fight to re-establish a current identity of self.

In session two, Greg wanted to draw an image that he had reproduced many times since his high school days, and was especially a topic of conversation in prison. He said that through them, he became known as "The edge of the world guy". Greg drew the image in graphite pencil and did not colour it in (Fig. 2). He said that he had never done it in colour before but if he had he would have drawn the mountains in flesh colour and the river in red.

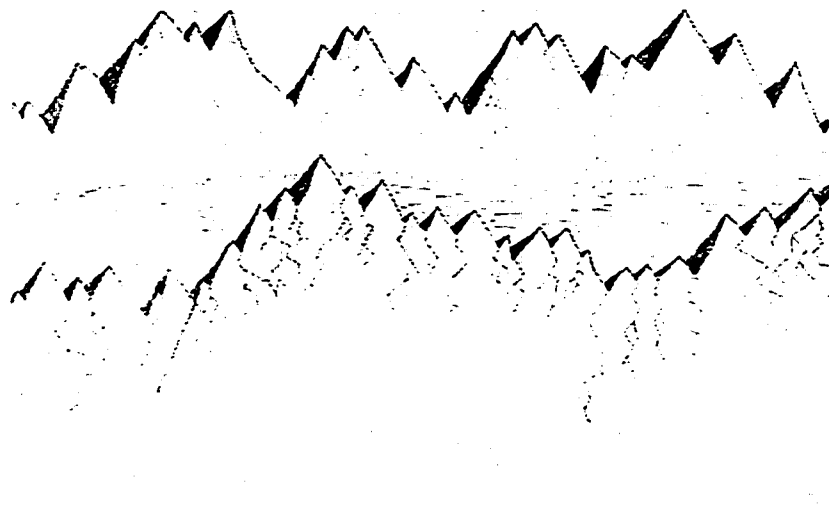


Figure 2

It was clear that Greg's drawing a painful image of broken flesh and blood. I asked if he would like to use some colour or perhaps to paint it on another day, but Greg said that he felt really tired from doing it and at the same time really relieved, as if a great deal of tension had been lifted from him. I believe that the artwork was cathartic and allowed Greg to express on paper what he did not feel safe doing verbally. The artwork also gave Greg and I an opening to discuss painful issues in his life, past and present. It was clear that his life had not been an easy one and the drawing allowed Greg to share that with me.

Greg participated in the first group art therapy session at the new site. Since there was a male Elder on hand, I asked if he would join the group and perhaps do some drumming which the group could do a response drawing to. Four residents participated in the group and sat in a circle in the counselling room as the Elder picked up a drum and began drumming to a slow and repetitive beat that is used in Sundance ceremonies. Each member, once they felt ready, were then asked to do a drawing, using whichever art tools they were comfortable, which reflected feelings and thoughts which arose from the drumming.

Greg drew a scene in pencil with four Native men dressed in traditional clothing standing around a fire, whose centre was coloured in with red oil pastel (Fig. 3). To the left and the right were two tipis decorated with animals and designs. Two horses stand to the right of the picture, while the background contains mountains. The group members took turns expressing their feelings and ideas about their drawings, while other group members questioned or added comments to the author of the work.



Figure 3

Greg entitled the drawing “Good old days” and noted that the grass in the bottom right corner of the drawing reminded him of the kind of markings on prison walls used to count off days. He also noticed that the horses weren’t tied up, which he felt depicted his need to be free. The group reflected on the drawing for a while and then Greg noticed that there were no women in the drawing. He said that he had only thought about drawing them in later and he wondered why he had forgotten to include them.

The Elder began to speak about each member’s drawing in turn (including mine and my co-leader). Without hesitation, he interpreted each artwork and he appeared to hit the nail on the head each time, since I saw each artist draw back in amazement, smile and murmur some degree of surprise and agreement. For Greg’s piece, the Elder stated that women weren’t in the picture because he is with the men now and he needs to work on himself. He pointed out that the animals were facing both east and west to show a movement of direction. The tipis were drawn, he pointed out, just as their ancestors had made them and indicated that there was a type of vision that had occurred with this

drawing. Then the Elder pointed to the fire. He said that it showed anger that was unresolved and needed to be worked on. Greg picked up on this symbolism and later used it in his drawings to show the level of anger that he was feeling. He was always careful to include it and talk about how he hoped to one day alleviate most of it, but to keep a healthy amount. This drawing proved also to be the beginning of a pull towards Greg's exploration of his cultural traditions. At the end of the session, the Elder gave the drum to Greg and asked him to experiment with it. He soon began doing a steady beat of drumming to which the Elder responded with, "Don't do the Hollywood beat. Drum from your heart." Greg then spent time drumming out beats which at a variation of rhythms.

For many other sessions, Greg drew fragmented images that he called doodles, which threw him into a mood of self-reflection. He used the various images as dream symbols, which together we tried to piece together (such as that in Fig. 4). Greg became more self-reflected and began to talk about beginning a search for who he really was. He

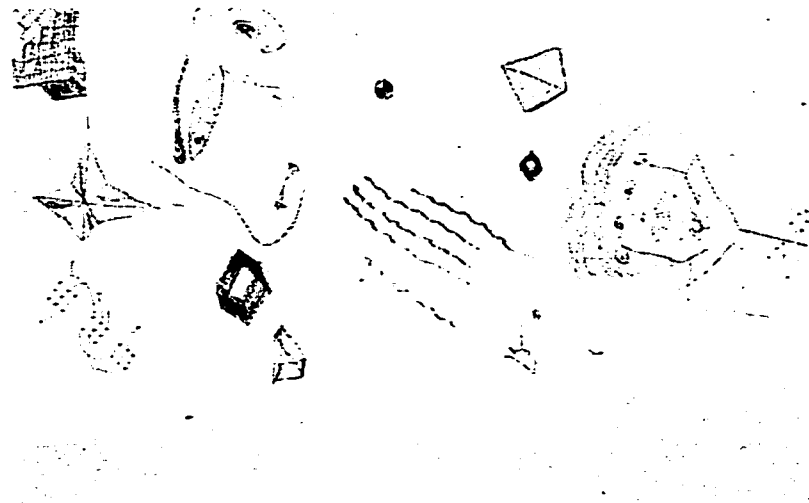


Figure 4

wanted to begin to seek out his traditional roots and at the same time a fear of relapse loomed over him. Perhaps these fragmented images was the emergence of the fragmented parts of Greg that were now rising to the surface in an attempt to become whole.

During the Christmas break, between the staff being preoccupied with the move to the new site, the packing of boxes and the feeling of impermanence and stability in the old site's setting, and the distance between residents' and their families, the mood changed at Waseskun and more of the residents seemed to be in a state of emotional fluctuation. Therefore, although it came as disturbing news, it did not come as a great surprise that Greg went AWOL⁷. I was on site when he voluntarily brought himself back in the next day after having spent the night in a state of extreme intoxication. Although Greg was sent back to prison, according to the rules at Waseskun, the staff counsellors fought to get him back and give him another chance. Greg was then asked to come back and while Waseskun recommended his release into their custody, Greg had to wait for the final approval of the parole board.

In our next group session we once again had four residents, my co-leader and myself in attendance. My co-leader read the legend of "The Bitterroot"⁸ (Caduto and Bruchac, 1995:39), while I asked the group to listen to the legend and then draw whatever came to mind. Greg used a HB pencil and coloured pencils to draw a divided scene. On the left side of the page was a depiction of urban Native people. He drew bottles of alcohol and drugs and said that some of the people had died of alcohol and drug

⁷ AWOL stands for 'absent without leave'.

abuse (Fig. 5). To the right of the drawing which took up more of the page, he drew a reservation with Native people in traditional clothing. There is a tipi with a fire inside, people surrounding a fire outside, a dog, and a chief with a pipe. There is a fence

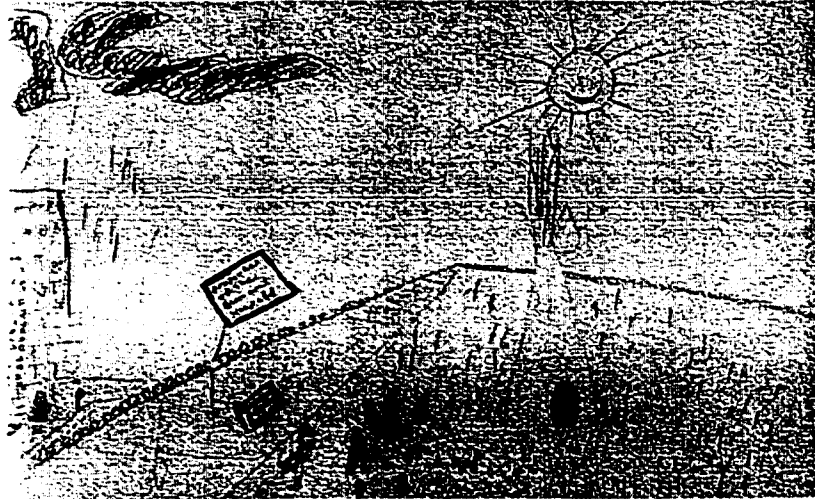


Figure 5

between the two communities. Greg drew the chief facing the fence because “the chief doesn’t turn his back from his people”. The barbed wire, he explains, is put up by the government and separates the two worlds. There are two signs attached to the fence. One says “Properties of the government keep off” and the other says, “Government property keep out”. There is a big grey cloud over the urban setting and a big yellow sun over the reservation. Greg pointed out that although there was a fence, the sun was there for everyone.

I asked Greg where he would be in the picture. He said he didn’t know, but he hoped that he would be more on the traditional side. My co-leader pointed out a gap in the fence that he said would allow people to travel between sides but Greg pointed out

⁸ See Appendix B

that both sides seemed to be stuck and unable to cross. This drawing allowed Greg and the group to talk about the difficulties of living in both a traditional and non-traditional world; between living in an urban setting and living on the reservation. Greg has drawn the reservation as showing kindness, acceptance and warmth, while the urban setting appears to be cold, empty and full of death. The artwork allowed Greg to discuss his fears about his own future and to allow others to share in his thoughts. This appeared to create group cohesion and I noticed a noticeable improvement in verbal openness and support of each other's artworks and thoughts and feelings. Not only did this group setting allow for expression visually between the members, but also there was a noticeable building of social skills as each group session showed a raised sense of awareness and an improved consideration for the feelings of others.

In session 7, Greg discussed his joy at being back at Waseskun and at the same time was overwhelmed with worry about being sent back to prison by the parole board. In Fig. 6, Greg has depicted himself in the centre of the group with the words "group

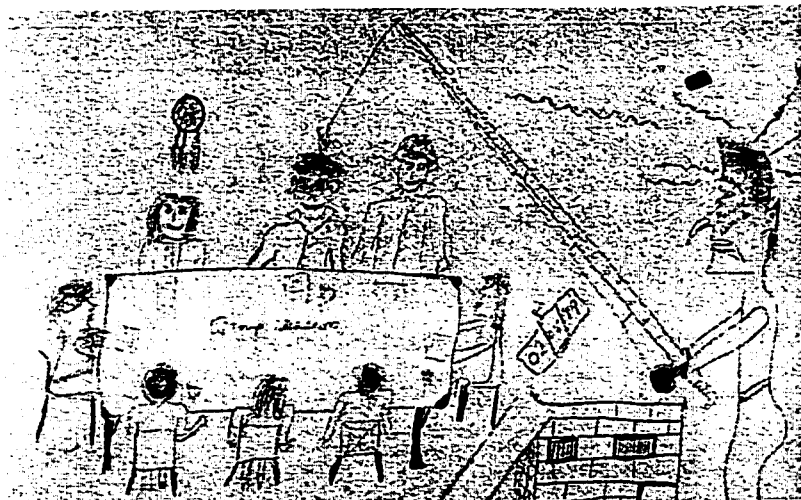


Figure 6

session” written on the table. Groups are usually held at Waseskun without a table and with the members sitting in a circle, thus this rectangular formation and the inclusion of a table may show, not only a barrier between its members, which may be caused by Greg’s uncertainty of being able to remain as part of the group, but it also may reflect his ties to Westernized living. The dreamcatcher on the wall to the left of Greg, however, shows his feeling of seeking to understand more about his traditional ways. The prison, which is drawn in the right hand lower corner, shows strong reinforcements on the bars and doors and bricks clearly depicted as the building’s surface, all may display Greg’s fear of re-entering into the prison environment where his freedom would be severely lessened from his Waseskun experience. The parole board member is significantly larger than any other figure in the drawing and holds a fishing rod to reel Greg, who has a hook in the top of his head, back into the prison.

This drawing, once again done in HB pencil, shows the various layering of issues that the Aboriginal offender must juggle. He must sift through the various elements of his life experience to re-examine, reorganize, and stabilize issues of prison, self and cultural identity in order to form a unified and healed whole. The drawing allowed Greg to talk about his fears, including change and feelings of inadequacy, and issues of pride, which had led him to go AWOL in the first place. It also served as a starting point to discuss new coping methods for handling uncomfortable emotions.

Session 10 was the first time that Greg drew a family member. In Fig. 7 Greg drew a portrait of his father with a case of beer beside him and x’s in his eyes to show that he is intoxicated. He wrote, “Three main kills for me right now – jail, drinking,



Figure 7

drugs (soft drugs)”. His father is drawn quite large on the page, which led Greg and me to discuss how large Greg’s father had been in his life. Greg recounted numerous childhood memories, some good and some bad, but in all of them his father had played a big role. When he was not drinking, Greg’s father appeared as a hero to him. Greg referred to him as a “smart Indian”. He was impressed by his father’s hunting and fishing skills and his sense of family at those times. However, during his father’s drinking episodes he became a frightening man with a powerful and intimidating anger. Through this discussion, Greg began to identify some of his own strengths and weaknesses, which were similar to his father. This seemed to be a reality that had never occurred to him before. Drawings of his early childhood made him question his childhood experiences and what role they had played on his present identity and situation.

Each day Greg seemed to question his life a little more and the reasons his present circumstances and the road to his future. When I originally began working with Greg, he discussed cutting his hair because “girls like that”. But towards the end of therapy, he

made an appointment with the barber to get a trim and have a hot oil treatment so that his long hair could stay healthy. In my last few weeks of my internship, Greg was preparing himself to enter into his first healing experience in a sweatlodge and had voluntarily begun doing more work around the site. I feel that the art provided Greg with a place to articulate pent up emotions, which previously had come out in spurts of sudden and uncontrollable anger. The art also allowed him to spend time in self-reflection, questioning his own process and why he chose the symbols that he did for each drawing. He looked forward to every session and suggested that the art therapy, which was voluntary, be made mandatory, but admitted that he might not enjoy it as much if he felt obligated. Thus, the art therapy became a therapy method of choice that allowed for introspection as well as the sharing of ideas in a safe and non-threatening environment.

Case study 2

The second case study will be based on art therapy sessions with Johnnie (not his real name), who I met in my first week at Waseskun. Johnnie in many ways is different than Greg. Johnnie is 37 years old, is not single, but is the father of two children and is separated from the children's mother. In fact, Johnnie's children live in another community but he speaks of them often and, when he is at home, he tries to visit them frequently by Ski-doo. Johnnie has short dark hair, comes from a relatively small community in the northern most tip of Quebec, and is Inuit. He is a practicing Christian, speaks Inuktitut as his first language, as well as speaking English and French, and still practises many of his traditions. Unlike Greg, Johnnie was not forthcoming with why he was imprisoned but did tell me that he had had a serious drinking and drug problem and

had sold a large quantity of drugs in his and surrounding communities before his incarceration.

Unlike Greg, Johnnie was not used to creating art and seemed to be suspicious of what art therapy was and why I was there. He began building up the therapeutic alliance in very controlled doses. Johnnie approached me when he wanted to speak to me and politely shunned me if he did not feel like talking. Control, safety and trust seemed to be big issues for Johnnie. When I first arrived and introduced myself to the group, Johnnie announced to the counsellors and the group that he would like to attend both individual and group art therapy, but when I began to schedule residents for sessions, Johnnie told me that he did not want to participate because he did not know me well enough to open himself up to me. I respected his decision and made myself available to him, repeatedly telling him that if he wanted to talk or draw, I was there.

During my first art therapy session, Johnnie surprised me by showing up. He told me that he would have to leave early because he had another session scheduled as part of his program before the end of the art therapy session. Johnnie sat in the group, which included the drumming session by the Elder, and drew a cross in coloured pencil (Fig. 8). When it was time for him to leave, he asked me if he could keep and work on his drawing, which I agreed to (compare Johnnie's Fig. 8 drawing with Greg's Fig. 3 drawing. Both were done in the same session.).

When I next arrived at Waseskun, I was told by some staff members that Johnnie had shared his drawing with them and he was beaming when he did. He sought me out that weekend and we sat down and briefly discussed the drawing. Johnnie told me that



Figure 8

he had really enjoyed working on it and it made him feel elated to be doing it. The drawing allowed him time to think about his religion and what it meant to him. He had written in the right hand corner of the drawing, "For God so loved the world that he gave his only begotten son that whosoever believeth in him should not perish, but have everlasting life." The corners of the cross were embellished with flowers and the background included a very worked overlaying of numerous coloured pencil markings. Johnnie asked me if he could borrow a piece of paper and some coloured pencils. I offered him a few sheets of paper but he insisted very strongly that he only wanted one. I accepted this and felt that it was very important that I respect this and that a therapeutic

alliance was being created through these small requests and my respect of Johnnie's wishes.

The next time I saw Johnnie, he was beaming with pride and wanted to show me the drawing that he had worked on. He showed me the Lord's Prayer written in English and Inuktitut with embellishments of flowers (Fig. 9). He told me that it was important for him to write it in his own language as well as in English and he spoke with great pride

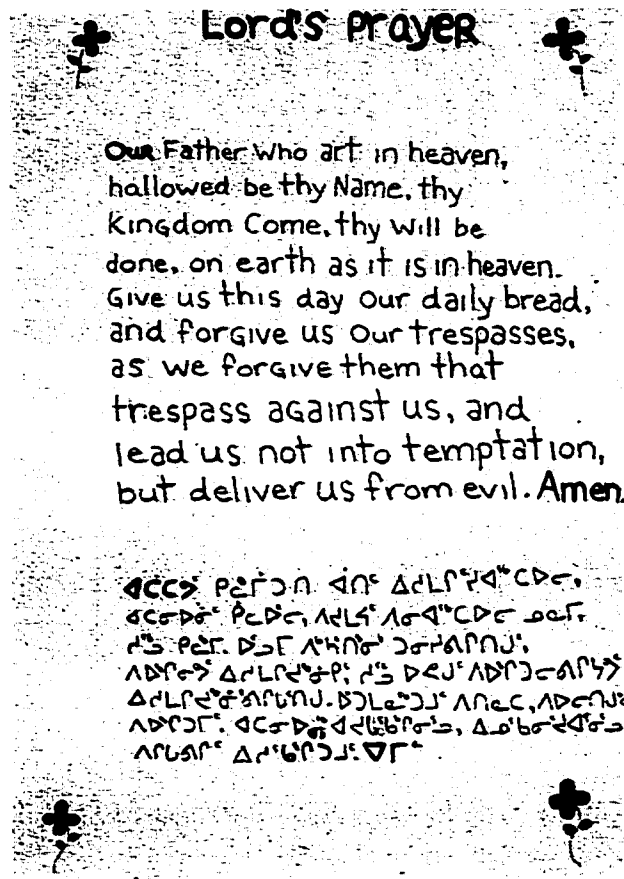


Figure 9

about the work and the uplifting feeling that he had when he created it. I believed that Johnnie was using the art to connect with his spiritual beliefs and to give him a sense of hope and belonging in this sometimes alienating environment.

A great sense of pride was achieved through the creation of the artwork, which then allowed Johnnie to talk about the fact that some of his community was currently in the Montreal area and had shown him a great amount of support and love. He spoke about his own pride in having stayed sober for so long and he told me that he wanted to continue to do so and then go home to help other people. Since he has been gone, 7 people have commit suicide in his community and he hopes that he can bring a difference and a sense of hope to his community on his return.

Once again Johnnie borrowed some colour pencils and one sheet of paper. On my return, he once again produced a drawing. This time Johnnie had written his own words about his belief in God (see Appendix). He wrote the words in English, coloured in the background with many layers of light coloured pencil markings and embellished the poem with different coloured hearts and flowers (Fig. 10). Johnnie told me that he had felt so uplifted after he wrote it that he had shared what he wrote with his AA group. He beamed as he told me how they had clapped and how everyone had liked the poem. Johnnie was using the art to not only raise his self-esteem, connect to his religious beliefs, find a sense of hope, but also to reach out and connect with other people about his feelings and beliefs.

Johnnie borrowed the same art materials again and on my next visit he produced another drawing. This time it was of a minutely drawn maze (Fig. 11). In the centre of the maze coloured in in red was the word “prison”, to the left of the maze was written in yellow “freedom” and at the bottom of the maze (covered to maintain confidentiality) was written his name in blue. Johnnie told me that the path is small and narrow to get

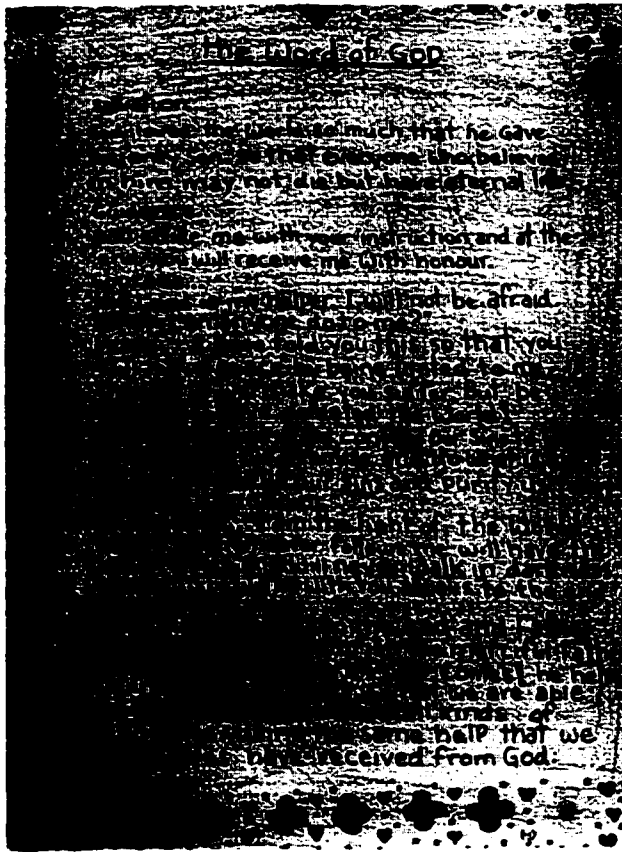


Figure 10

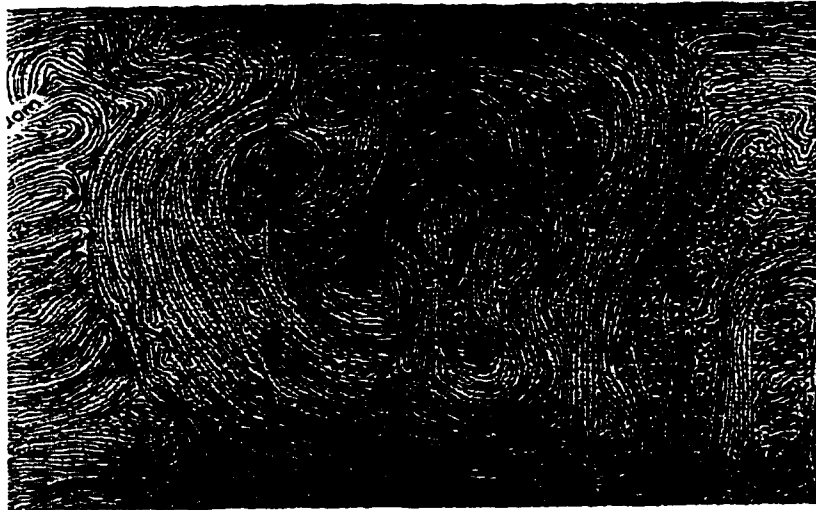


Figure 11

from prison to freedom, but if I looked closely I could see that he has found that path. He expressed his fear about going back and said that he never wants to be in a position where he finds himself back there. It was surprising to see Johnnie move away from his drawings about his Christian faith and begin to explore other areas of his life. Johnnie's prison experience had had a large impact on his life and using the art, Johnnie was able to explore his feelings about his process of moving from incarceration, to the Waseskun halfway house, to his eventual release back into his community.

At this point, Johnnie had begun asking me to see all of his artwork and to help him reflect on his process. He also asked me to help him to share his artwork and thoughts with his other counsellors. Johnnie took great pride in his work, but he also used the artwork as a starting point to begin expressing to others things about himself that he had been reluctant to share before. The artwork seemed to provide a safe space for him to discuss his thoughts and ideas. He noticed that his drawings were taking on new forms and he felt that there was still more change to come. The art was helping him to explore areas previously guarded and closed.

Before this point, Johnnie would give me back the coloured pencils when he showed me his drawing and later in the weekend ask for them back with one piece of paper. He now began asking if he could keep a few sheets of paper and some coloured pencils in his room.

The next time I arrived at Waseskun, Johnnie approached me quite early on to show me his drawing. It was different than all the others because it showed scenes from his homeland. The drawing showed an Inuk in the centre of the page carrying a harpoon

(Fig. 12). There is a dog with him and a rifle between the figure and the water. This, Johnnie told me was because one needs to be prepared in case of attack by wild animals, such as polar bears or wolves. A corner of the lake is showing with two loons resting on the water. These are important birds to Johnnie and he had explained to me previously

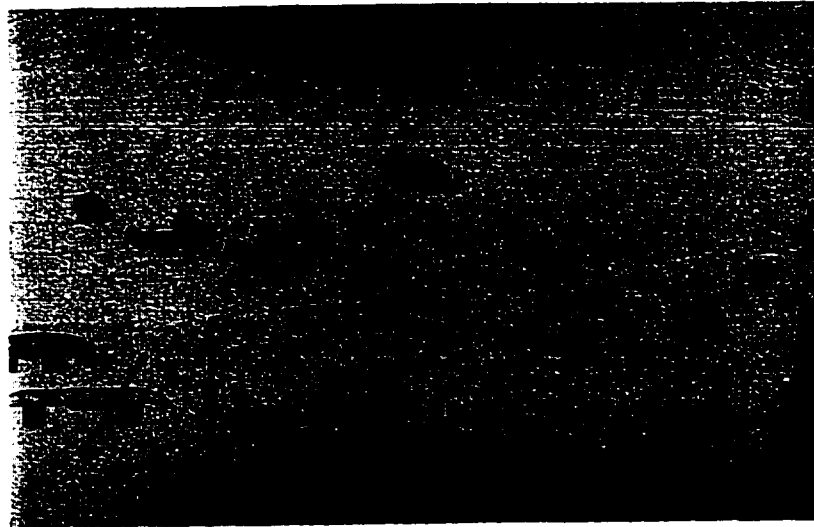


Figure 12

that they represented medicine and healing. To the left of the drawing are all of the things that a hunter would need to survive. There is an igloo, a Ski-doo with all of the tools to fix it in case it breaks down and extra fuel. There is in the foreground a kayak and a sled; both of which are turned upside down to keep it from freezing into the snow. There are also an assortment of tools to help him out, like an axe, a shovel and a knife. Johnnie pointed out that the hunter is wearing traditional clothing. His boots are made from sealskin and his pants and coat are from polar bear. He has everything that he needs to survive right from his own community.

In the background are hills with an abundance of caribou roaming on them. Johnnie pointed out that although caribou are the easiest to hunt, the hunter knows that he

wants a seal and he will wait all day for that, even if it is harder to get. On top of one of the hills is an inukshuk, which are giant constructions of rock in the shape of a man and which point the way to the nearest village. Johnnie pointed out that inukshuks are often placed near water to point out where all of the fish are to be found. He told me that when a person goes hunting they usually go with someone or they tell others that they have gone and if they don't come back when they are expected than a search party will be sent for him. He pointed out how it can be life threatening to be out alone because one's snowmobile can break down, they can run out of fuel, or can have an accident and it is very important to be able to rely on others.

I believe that Johnnie was beginning to learn to trust others and through his artmaking process he was beginning to think about his future and, like the hunter, beginning to gather together the tools that he would need to prepare himself for his journey. I also believe that this drawing shows a sense of cultural pride that I had not seen before and that the choice of hunting seal was Johnnie's own conviction to stay sober and to take the difficult path instead of the easy one because it was what he really wanted to do.

The words in the thought bubble above the hunter are "Hope I will be lucky today!" Johnnie often told me that he viewed every day like a new day and took it always one step at a time. I believe that though it was often difficult for him, because he missed his family, friends and homeland, he was willing to overcome the hardships and to stick to it.

I believe that the artwork was allowing Johnnie to explore previously uncharted areas and that he was able to openly discuss his own culture and traditions and to have a sense of pride in himself. I also believed that the drawings allowed him to contemplate about areas of his life that he had previously not openly discussed, such as his hopes and dreams and that it gave him a great sense of pride to explain aspects of his homeland to someone who was unfamiliar with his customs.

The artwork allowed for Johnnie to speak about areas of his life at his own pace. He could focus on the images of the art if he chose to do so without expressing any outlying thoughts or emotions. My ability to go at Johnnie's pace began to build a sense of trust to the point that that weekend, Johnnie revealed to me that he had tried to take his life when he was younger. He had shot himself in the head but somehow had survived. He spoke about his fear and his emptiness and how he felt that there was no one out there willing to help. It was a big step for Johnnie to open up to me the way he did and I listened quietly, knowing that he now believed that if he didn't return from his hunting trip that there would be those who he could depend on.

In our last session, Johnnie showed me a drawing that he had created during our time apart. It was of four Inuit men out on the ice fishing (Fig. 13). There are a variety of tools around them, such as axes to break the ice, and scoops to remove reforming ice, rifles, harpoons, and there are numerous fish that have been caught. In the distance is an igloo with men waiting with sleds to come and get the fish and also there is an inukshuk pointing to the good fishing areas. All the men are wearing traditional clothing.



Figure 13

Johnnie told me about the various fishing techniques and how you must rely on each other during fishing or hunting. In fact, this was the first drawing in which Johnnie depicted a sense of community. It is possible that the artmaking had made him more aware of his own sense of community, both at Waseskun and at home. He had recently begun speaking out more in the group sessions and had begun standing up and speaking out for his rights and the rights of others.

Johnnie took great pride in his work and told me that he had enjoyed the sessions and sharing with me parts of his community living. I believe that the art helped him to express himself in a safe and non-threatening way, while working at his own pace and disclosing information about himself at his own level of comfort.

DISCUSSION

One of the most challenging aspects of working with this population was trying to decide how art therapy could best accommodate the existing framework amongst this

particular group of Aboriginal men. I was particularly fearful of using an approach that would be incompatible with the ideology that was in place within the existing programs themselves. I found what worked best was to ask the opinions of as many staff members as I could and to keep myself open to the needs of the residents and the opinions of my on-site and off-site supervisors.

My on-site supervisor, Bevan Skerratt, was very open to the use of art therapy and in particular appreciated the fact that art therapy theory acknowledges and often reflects a Jungian approach. Nadia Ferrara (1998), an art therapist who has worked for many years with the James Bay Crees, informed me that approaches focusing purely on the individual or family issues has been problematic when working with Native clients. Rather an approach of preference is a holistic one, wherein the four quadrants of the Medicine Wheel may be utilized to achieve a holistic sense of healing. According to my teachings from the Elder at Waseskun, an effective healing technique should include emphasis on the mental, emotional, physical and spiritual levels of an individual. The healing should not rest solely with an emphasis on the individual, but should take in the larger context, such as family, friends, and community.

The importance of community and its effect on the individual may be seen in both case studies. In his ice fishing drawing (Fig. 13), Johnnie expresses the importance of friends and community. The art allowed Johnnie a chance to discuss and reflect on how one's very life may depend upon one's relationship with others and the issue of trust as viewed in this larger context. In Greg's drawings (Figs. 3, 5 and 6), his sense of individual and cultural identity is tied up in his questioning of how he fits into a Native

community and what that sense of community means for him. The artwork allowed both Johnnie and Greg to incorporate wider issues such as family, friends, community, culture, identity and spirituality.

Art therapy may incorporate all of these elements by placing emphasis on any variety of levels and topics. For example, unconscious and spiritual levels may be approached through the exploration of myths and legends, allowing abstract images and feelings to emerge in relationship to stories and music, as well as exploring dreams and thoughts that arose from the experience on a spiritual level. Relationship issues can be confronted through direct conscious approaches, such as discussing past and current relationships and using them as topics for artmaking, as well as through a less conscious process, for example, using the therapeutic relationship as a holding environment to repair, rework, and experiment with relationship issues in a safe and non-threatening way.

The artmaking process also allows for some work on a physical level. For example, vigorous drawing techniques or the pummelling and manipulation of clay, allowed for physical exertion and for a release of pent-up emotion in a socially acceptable and cathartic manner. The process of art therapy also allows for the expansion and exertion of mental exercises by creating a space where the client can think about his past and begin to plan for his future. In my own work at Waseskun, maps and diagrams were often drawn during a session and a literal mapping out began of future hopes and dreams, which focused on a renewal of their journey onto a clearer and more positive path.

This particular site gave me an opportunity to think about the methods which I have used and the preconceptions which I have as an art therapist and as an anthropologist. Thus my own journey became one of a re-evaluation and questioning of my thoughts, ideals and working patterns.

While much literature discusses the efficacy of the Pan-Indian⁹ approach to healing, I began to see early on that this was not an easy path for healing for some of the residents. Traditional healing circles require one to sit in a circle and participate in ceremonies that often speak about the Creator, ancestral spirits and animal spirits. While this has proven to be a successful method for Native individuals who have come from this tradition, it can elicit negative responses from those coming from a different series of traditions. For example, one Algonquin resident said, “I don’t like standing when we do the circle. Where I come from we always sit and I don’t like to share standing up¹⁰.” A number of Inuit residents expressed such thoughts as, “I find praying to animals stupid.” While another had said, “When I go home, I may use the talking circle in my community, but we will not wait until it comes our turn to talk. I don’t like that. I think when someone has something to say, they should say it and not have to wait.¹¹” Others showed great anger by saying, “I believe in Jesus Christ, but I feel that I am never allowed to talk

⁹ Political and ideological movements in which Native North Americans closely identify with each other as members of a larger group sharing many common beliefs and a strong common heritage.

¹⁰ Standing was at times a requirement at Waseskun though not always.

¹¹ In a talking circle each person speaks as long as they need to speak without interruption but they must wait for their turn to come according to their placement in the circle (this is sometimes also done by passing around an eagle feather with the idea that the person holding the eagle feather is entitled to speak and all others must wait until the eagle feather comes to them).

about it.” The openness to other spiritual beliefs and ideas depended on entirely on the beliefs and mood of the counsellor who was running the circles. Some days I did notice that there was an openness to the ideas and beliefs of others, while some days the other traditions were not discussed at all.

It then came as no surprise that many of the Inuit residents drew images steeped in Christian beliefs and quoted bible passages to me during our sessions. Generally, once they saw they I accepted their beliefs, which often came out in anger and as a release to repression, our topics could move on. Once the initial outflow and sharing of religious beliefs or detailed descriptions of their own traditions, which differed from those at Waseskun, then they were able to discuss their past, present and future, as well as beginning to put their Waseskun experience into perspective and appreciate the counselling, lessons, friendships and sense of community that they had come to learn much from.

I had read and heard that all Native people take to drawing like a duck to water. I felt at the time that seemed to be a large generalization and was soon to discover how much so. Many of the men I worked with smiled shyly when I asked them to draw and then would laugh, sometimes out of amusement and sometimes out of embarrassment, at their inability to work with drawing tools. Many of the Inuit men especially were more gifted at working with particular materials that, due to budget considerations, I could not have on hand. Many of the men were skilled in soapstone carving, but could not afford tools. Others spent their time creating objects painstakingly on their own time that were constructed out of finely sculpted popsicle sticks. For the men that I worked with, I found

that the type of clay which I used, was initially too soft and then later dried up quickly and became too brittle for the men, who were used to the using a harder and more stable substance such as stone or wood.

I also was under the impression that having a Native co-leader for my group sessions would be of the utmost importance. I hoped that that person could guide me and make sure that I didn't make any cultural faux pas. While, in theory, I still agree with this, I realize now that this is making many assumptions. Being Native doesn't necessarily mean that you work well in groups, are able to articulate your ideas and feelings or are necessarily in tune with your own cultural traditions.

My first co-leader was a gentle, kind and educated young Native man who was also doing an internship. His however was in social work. Although he worked very well in the group setting and he taught me a lot about group dynamics, he was not very aware of the political and historical influences present in current Native healing practises and didn't particularly agree on the use of culture as treatment.

My second co-leader was also a gently soul who had done much work on himself spiritually, was involved in sweatlodge experiences, had done self-discovery workshops using art and was currently a drug and alcohol counsellor at Waseskun. Unfortunately a few things clashed in our experience together. Although I respected him as a person, I had to be very clear (after a few aggressive sessions) that the drug counselling approach of tough love and needing to admit your faults and failing to the group was not exactly the approach that art therapy used. I had to explain that it was a much more gentle experience that probed the unconscious and worked on many different levels. I pointed

out that people were encouraged to talk when they were ready to and that if they were not ready, the art could stand for itself.

Another perplexing experience was the one in which the Elder had attended my art therapy session. He had told me that I needed to develop my skills and “see things the Indian way and not the white man’s way”. I needed to feel the drawings with my heart. I understood what he was trying to tell me and respected what he was doing. He very kindly said to me, “Don’t feel bad. It’s taken me 15 years to learn how to see things. I didn’t become an Elder over night.” After much thought, and some consultation with my off-site supervisor, I realized that I am neither an Elder nor a shaman and that to call out interpretations was not what art therapy is meant to do. I understand how this can work if one is an Elder or a shaman, but I believe that both of those paths are paths that are laid out for one early on and that one can’t just slip on their shaman outfit overnight. It is something that takes years of training, understanding of a tradition, and should be deserved. I, on the other hand, cannot with a clear conscience tell people what I see in their drawings. Yes, I have studied various assessment techniques but they are meant, as has been clearly pointed out to me by one of my supervisors, as a *clue* to what is going on. The images are meant to point to where the client is and to help the therapist to better understand the direction and to help guide the client more successfully, but it is not meant to be used as a definitive answer.

CONCLUSION

Over and over again, the power of art therapy has surprised and impressed me. It's flexibility and adaptability is astounding. I have come to realize that working with Aboriginal offenders, as with working with any other client, is to be proceeded with the individual in mind and the art therapist would find it best to avoid stereotyping methods, materials, or treatment plans. Each individual that I worked with had their own sets of strengths and problematic areas. Art therapy helped to find and work with those strengths, while uncovering, confronting and working through the problematic ones.

Aboriginal offenders, in this particular setting, were coping with numerous losses – the loss of freedom, separation of family, deaths in their community, and a letting go of old maladaptive coping mechanisms and old personalities and lifestyles. They are also dealing with the adjustment to the rules and regulations of the halfway house, the community aspects of living with other residents, and the day-to-day coping with memories from their past and current frustrations. In a setting such as this one, because of the prison culture personality, which is often embedded very strongly in the residents, it is not always encouraged to be open and honest with one's feelings. There is also a fear of negative repercussions from speaking their mind, such as having privileges revoked or having a report written up.

The issue of trust is a central one in working with offenders. In this particular case, it may be relevant for the therapist to question whether mistrust has arisen from the individuals having been immersed in prison culture, wherein mistrust is a form of survival and a predictable reaction to authority figures. Alternatively, is the mistrust part

of a larger social and historical context, wherein white people or authority figures are viewed by some aboriginal individuals as oppressors, and therefore are not to be trusted.

The individuals with whom I worked at Waseskun appeared to at some point allow themselves to develop a sense of trust and authenticity in the therapy sessions. This may be due to the fact that art therapy works at an unconscious level which allows for the release of resistant material. Being a part-time, unpaid therapist, may also have placed me outside of the political system of the correctional institution since I did not have direct authority to make any major decisions and may have been viewed as a more neutrally-oriented staff therapist. It is also possible that the very medium of art materials and the unconventional approach of using art as a therapeutic tool, placed art therapy outside of realm of traditional therapy and was, therefore, perceived as less of a threat.

Art therapy has been called “the hidden weapon” (Gussak, 1997b: 61) because it hides the therapeutic process. I found myself explaining art therapy to other staff members and counsellors as going in the backdoor. Here was a community filled with suspicion and mistrust and I walked in armed with only a box full of art supplies and a portfolio full of paper. I took the residents to various different areas around the site that they did not associate with therapy, and asked them to draw whatever they wanted. They were expecting someone to probe them with questions, write reports and analyze them, and instead they found themselves absorbed in artmaking, which evoked all kinds of memories, and at the same time was fun. I initially underwent a trial period, where only a few of the residents agreed to draw, but then once I had been okayed I was overwhelmed with requests to do artwork.

Greg had originally been concerned about doing drawings with me. He explained, "I was worried that you would play with our heads at first. But, you know, you're okay. I like this art therapy stuff." He wished that I could be on site more often and that he could spend more time doing art therapy projects. Johnnie, on the other hand, had been particularly resistant to doing any work with me. He increasingly volunteered to share his work with me and later told me, "It's important what you do here. Even if it's only these little drawings with people. It shows us that you care and we get to know you that way."

Many of the residents shared similar feelings about the art therapy. One client told me, "You know, I kind of liked this. It wasn't like the rest of the program. I got to talk about whatever I wanted to. And I could do it on my own." Another individual said, "I wish that they would make this part of our regular programme." While still others expressed their readiness to participate by simply approaching me with a paper and pencil, beginning to draw while sitting beside me, and sharing their stories verbally and through the artwork.

After a few sessions, I didn't bother to tell my clients that we were doing therapy. I just kept doing it. I heard stories that often were followed by the words, "I never told anyone this before. I wonder why I'm telling you this." Sometimes an exploration of the artwork led to a detection of early suicidal ideations, which led to a more watchful eye by the staff and more intensive therapy for the individuals, while catching a crisis at an early stage.

Upon working with the aboriginal offender population at Waseskun, I was faced with the difficulty of not having access to client files. This meant that I rarely, if ever, knew what my clients had been institutionalized for, which created a difficulty in developing treatment plans and complicates a discussion of aboriginal criminality. It is possible that a screening process may have been used to keep the more hardened criminals elsewhere, such as in a prison. Rules at Waseskun were enforced and those who could not adhere to them (for example, those who used drugs, alcohol, or were abusive to other residents) were returned to prison.

It is possible that the aboriginal men that I worked with were not serious criminals and did not fall under the category of those with a criminal personality. According to the listing of behavioral traits typically displayed by those with a criminal personality (Yochelson & Samenow, 1977), I should have found in the men at Waseskun a wide range of behaviours that fall under the category of antisocial, borderline, narcissistic and histrionic personality disorders. On closer examination of a listing of these aforementioned traits, I discovered that very few of the men displayed traits in all four of these categories.

In particular, Greg and Johnnie displayed the exact opposite traits to those listed under the narcissistic and histrionic personality disorder. Both men showed a low sense of self-absorption and a high level of empathy to other individuals, as well as demanding little praise or attention. Under the category of borderline personality disorder, present traits were minimal, including solely self-destructive impulsivity, such as alcohol and drug abuse, and occasional displays of inappropriate anger. Perhaps the only category

that seems to hold more than one or two of the behavioural traits that I have witnessed in either Greg or Johnnie is the antisocial personality disorder. Yet even within this category, some of the traits mentioned were the exact opposite in Greg and Johnnie. For example, lack of enduring relationships, defaulting on debts, and occurrences of aimless travelling, particularly didn't apply to these two men. Both individuals had had long-term meaningful relationships, both were noted for immediately repaying money or items that were borrowed, and both were very strongly connected to their families and home communities.

None of these points are to dismiss the criminal offences that either of these men have committed, but rather to point out that the social and cultural context must be taken into consideration when treating aboriginal offenders. Such offenders may not be criminals in the same sense that Euro-American society and its justice system have come to understand this category. Dr. Pierre Gregoire (1999), psychologist and art therapist at the Allan Memorial Institute in Montreal has suggested, in reference to the artwork produced at Waseskun by both Greg and Johnnie, that "The level of psychopathology and the level of morbidity are not markedly comparable to that which we normally find in drawings of serious criminals." Thus it was suggested that these men may not suffer from a psychopathology but may in fact benefit from drug and alcohol treatment programs, as well as from efforts made to resocialize and reintegrate these individuals into their respective communities.

The Euro-American justice system views incarceration as the answer to criminality. Incarceration, thus, serves the purpose of protecting society from extremely

violent individuals who have a psychopathology. The aboriginal justice system, however, focuses on a holistic approach to criminality. In this approach, the criminal is viewed as one who is out of balance and is helped by a variety of individuals to heal and reintegrate into their community.

Art therapists must be aware of these differences and the criteria for therapy needs to be adjusted for the particular cultural situation from which the criminal has emerged. When working with aboriginal offenders, the art therapist must decide whether they are treating someone with a criminal personality, or whether they are working with an individual, who displays elements of an antisocial personality disorder, is suffering from maladjustive behaviours due to alcohol and drug abuse, or a complex combination of other factors.

Using art therapy as it was previously used and documented (McCourt, 1994; Murphy, 1994) to work with offenders may prove to be effective in working with aboriginal offenders. A reliance on the art for communication may help not only in releasing emotions while relying on visual rather than verbal means, but may help those of cultural and language differences to bridge communication and cultural gaps. Although many authors refer to the importance of the use of art to bring about a sensorial stimulation and connection in order to evoke images and unconscious processes in prison offenders, it may be noted that although this is beneficial, the lack of sensorial stimulation may be minimized in a traditional healing centre. For example, Waseskun residents had an almost daily sensory intake of the aromas of sweetgrass and tobacco, the auditory sounds of drumming and singing, as well as the visual, auditory and olfactory

sensations of a nearby forest and frequent campfires. Periodic Sweat lodge experiences included a variety of sensory stimuli, including drumming, rattles, singing, intense cold (after removing clothing outside of the lodge) followed by intense heat (sitting within the sweatlodge), the smell of various “medicines”, burnt on the hot stones, and sweetgrass, as well as the taste of a variety of berries concluding the ceremony.

Although there are a variety of sensations experienced at traditional healing centres for aboriginal offenders, there is still a need for the use of art as a form of expression and healing. The artmaking process may encourage a release of inhibitions and feelings that may not be otherwise expressed in an offender population. In the case of Johnnie, the art allowed him to express his sense of spirituality (Figs. 8, 9 and 10) and his fears of going back to prison (Fig. 11). While for Greg, the art facilitated expressions of childhood memories (Fig. 7), self-identity issues (Fig. 1), and emotional pain (Fig. 2).

The art therapy also allows offenders to resolve conflicts in their own space and time while supporting positive aspects of their personality. It also allows the client to bring order to chaotic situations through the exploration of issues using art. For Johnnie, this was exemplified in his prison maze drawing (Fig. 11), where he expressed how difficult and chaotic prison life could be and his own fears of ever having to return there. While Greg used the art work to try and understand the many emotions he was feeling concerning his waiting for the parole board decision on whether he would be returned to prison (Fig. 6). The large size of the parole officer, shows Greg’s feelings of powerlessness, while the depiction of free space surrounding him at Waseskun as compared to the small bricked and heavily barred windows of the jail, allowed Greg to

reflect on the confusion he was feeling at the moment and allowed for an expression of anxiety and sadness, mixed with the hope that he would be able to remain at Waseskun.

The art therapy can also be used to help in communication between individuals who might otherwise not communicate ideas. Greg expressed his search for his cultural roots in a group session by drawing Native men in a traditional setting (Fig. 3). Johnnie, on the other hand, used his artwork to express things to his counsellors about himself and to share his thoughts through the sharing of his artwork.

Art therapy also can be used to help individuals to become aware of their needs and to plan for the future and realize their dreams. Greg began to realize through his drawings that he was searching for his cultural identity (Figs. 3 and 5). While Johnnie began to become aware of his need to rely on others and to be a part of his community (Fig. 13).

With aboriginal offenders, the art therapy may also focus on cultural and community issues, as well as allowing for an expression of spirituality. The topic of cultural differences, community expectations, hunting and fishing practices, communal and personal grief issues, insight from Elders, and environmental concerns, may also be dealt with through the use of art.

I think that the most important part about art therapy with an offender population is that it goes “in the backdoor”. It allows for people to become involved in the therapeutic process before they are even aware that they are doing so. And it uses a holistic approach that is adaptable to all beliefs and fills all needs. While core issues are being dealt with, the individual is usually absorbed only in the idea that they are investing

time in the creative process and are generally surprised that they feel cleansed after the artmaking is over.

Throughout the literature on criminality and the use of art therapy with offenders, much of the discussion has focused on criminality as a pathology. Art therapy has been discussed as a therapeutic method that is, more or less, used in isolation without the consideration of contexts that lay beyond the prison walls. There is, to my knowledge, no literature available on using art therapy with aboriginal offenders. Thus, many of my conclusions have been based on personal observations, the advice and input of Elders, on-site and off-site supervisors, Native counsellors, and a juxtaposing of various elements present in a variety of articles whose information could only in parts be applicable.

It is my belief that communal, societal, and cultural influences play key roles in the use of art therapy with aboriginal offenders. Each offender may or may not display a pathology and the therapist is advised to examine and treat each case individually but to focus on a holistic approach that includes the concept of the importance of cultural and communal influences, and wherever possible, to seek the help and advice of an Elder.

In my own work, I was convinced that I was not treating criminal pathologies but was in fact dealing with issues of socialization, such as cultural, relationship, communal, and self identity issues, while at the same time paying special attention to problems which have arisen from drug, alcohol, and solvent abuse. Relationship issues, such as trust and sharing, were especially helpful to explore through the therapeutic relationship and the use of art.

The literature review indicates that much work needs to be done in this area. Those individuals who have the pathology of a criminal personality must be understood and treated differently than aboriginal offenders who have engaged in criminal activities because of alcohol and drug abuse or maladaptive coping skills. Further research in this area might focus on alcohol and drug abuse, residual effects of residential schooling, and acculturation stress and the use of art therapy as a form of intervention among aboriginal offenders.

I believe that regardless of cultural differences, a culturally sensitive art therapist who feels empathy towards the client can obtain a therapeutic alliance that is strong and effective regardless of those differences. Input from Native counsellors, Elders, the client's family members and friends, may be an important element in the process, as is using culturally sensitive materials and methods. It is also important to keep the lines of communication open between yourself and your client, to help avoid misunderstandings and to stay attuned to your client's needs.

I am thankful for the chance that I was given to be able to do art therapy with the residents at Waseskun. I feel that therapy should be a process where both the client and the therapist feel as if they have benefited from the experience and moved a healthy step forward on their own journeys. I believe that I have learned a variety of lessons from the many residents whom I have come into contact with during my internship. I was fortunate enough to share, through the therapeutic experience, a process that included the removal of layers of strong and experience-hardened exteriors, to inner cores of vulnerability, which were seeking a salve of healing. Each artwork became a map and a

memory in this process and a remnant in time to remind me of the richness of the experiences and the healing power of art.

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APPENDIX A

The Twelve Teachings of the Sacred Tree (Ross, 1996:275)

1. *Wholesomeness*

All things are interrelated. Everything in the universe is part of a single whole. Everything is connected in some way to everything else. It is therefore possible to understand something only if we can understand how it is connected to everything else.

2. *Change*

All of creation is in a state of constant change. Nothing stays the same except the presence of cycle upon cycle of change. One season falls upon the other. Human beings are born, live their lives, die and enter the spirit world. All things change. There are two kinds of change. The coming together of things (development) and the coming apart of things (disintegration). Both of these kinds of change are necessary and are always connected to each other.

3. *Change occurs in cycles or patterns.*

They are not random or accidental. Sometimes it is difficult to see how a particular change is connected to everything else. This usually means that our standpoint (the situation from which we are viewing the change) is limiting our ability to see clearly.

4. *The seen and the unseen*

The physical world is real. The spiritual world is real. These two are aspects of one reality. Yet, there are separate laws which govern each of them. Violation of spiritual laws can affect the spiritual world. A balanced life is one that honours the laws of both of these dimensions of reality.

5. *Human beings are spiritual as well as physical.*

6. *Human beings can always acquire new gifts, but they must struggle to do so.*

The timid may become courageous, the weak may become bold and strong, the insensitive may learn to care for the feelings of others and the materialistic person can acquire the capacity to look within and to listen to her inner voice. The process human beings use to develop new qualities may be called "true learning".

7. *There are four dimensions of "true learning".*

These four aspects of every person's nature are reflected in the four cardinal points of the medicine wheel. These four aspects of our being are developed through the use of our volition. It cannot be said that a person has totally learned in a whole and balanced manner unless all four dimensions of her being have been involved in the process.

8. *The spiritual dimension of human development may be understood in terms of four related capacities.*

First, the capacity to have and to respond to realities that exist in a non-material way such as dreams, visions, ideals, spiritual teachings, goals and theories.

Second, the capacity to accept those realities as a reflection (in the form of symbolic representation) of unknown or unrealized potential to do or be something more or different than we are now.

Third, the capacity to express these non-material realities using symbols such as speech, art or mathematics.

Fourth, the capacity to use this symbolic expression to guide future action – action directed towards making what was only seen as a possibility into a living reality.

9. *Human beings must be active participants in the unfolding of their own potentialities.*

10. *The doorway through which all must pass if they wish to become more or different than they are now is the doorway of the will (volition).*

A person must decide to take the journey. The path has infinite patience. It will always be there for those who decide to travel it.

11. *Anyone who set out (i.e.: makes a commitment and then act on that commitment) on journey of self-development will be aided.*

There will be guides and teachers who will appear, and spiritual protectors to watch over the traveller. No test will be given that the traveller does not already have the strength to meet.

12. *The only source of failure on a journey will be the traveller's own failure to follow the teachings of "The Sacred Tree".*

APPENDIX B

The Bitterroot (Caduto and Bruchac, 1995)

It was the time just after winter in the valley in the mountains. There was no food and the people were starving. The fish had not yet returned to the streams and the game animals had moved far away into the mountains. The men had gone out to seek game and they had been gone a long time. It was not yet time for berries to ripen, and the women had gathered what plants they could find that could be eaten, but the ones that were left from the winter were tough and stringy.

In one of the lodges, an old woman was grieving because there was no food for her grandchildren. She could no longer bear to look at their thin, sad faces, and she went out before sunrise to sing her death song beside the little stream which ran through the valley.

"I am old," she sang, "but my children are young. It is a hard time that has come, when children must die with their grandmothers."

As she knelt by the stream, singing and weeping, the Sun came over the mountains. It heard her death song and it spoke to that old woman's spirit helper.

"My daughter is crying for her children who are starving," Sun said. "Go now and help her and her people. Give them food."

Then the spirit helper took the form of a redbird and flew down into the valley. It perched on a limb above the old woman's head and began to sing. When she lifted her eyes to look at it, the bird spoke to her.

"My friend," the redbird said, "your tears have gone into Earth. They have formed a new plant there, one which will help you and your people to live. See it come now from Earth, its leaves close to the ground. When its blossoms form, they will have the red colour of my wings and the white of your hair."

The old woman looked and it was as the bird said. All around her, in the moist soil, the leaves of a new plant had lifted from Earth. As the sun touched it, a red blossom began to open.

"How can we use this plant?" said the old woman.

"You will dig this plant up by its roots with a digging stick," the redbird said. "Its taste will be bitter, like your tears, but it will be a food to help the people live. Each year it will always come at this time when no other food can be found."

And so it has been to this day. That stream where the old woman wept is called Little Bitterroot and the valley is also named Bitterroot after that plant, which still comes each year after the snows have left the land. Its flowers, which come only when touched by the sun, are as red as the wings of a red spirit bird and as silver as the hair of an old woman. And its taste is still as bitter as the tears of that old woman whose death song turned into a song of survival.

APPENDIX C

Words to the poem by Johnnie (in Figure 10)

The Word of God

Salvation...

God loved the world so much that he gave his only Son, so that everyone who believes in him may not die but have eternal life.

Guidance...

you guide me with your instruction and at the end you will receive me with honour.

Courage...

“the Lord is my helper. I will not be afraid. What can anyone do to me?”

Peace...I have told you this so that you Will have peace by being united to me. The world will make you suffer. But be brave! I have defeated the world!

Forgiveness...if we confess our sins to God, he will keep his promise and do What is right: he will forgive us our sins and purify us from all our wrongdoing.

Inspiration...“I am the light of the world,” Jesus said. “Whoever follows me will have the light of life and will never walk in darkness.”

Comfort...“I will be with you always to the end of the age.”

Let us give thanks to the God and Father of our Lord Jesus Christ. The merciful Father. the God from whom all help comes! he helps us in all our troubles, so that we are able to help others who have all kinds of troubles. Using the same help that we ourselves have received from God.

APPENDIX D

Consent Form

This is to state that I voluntarily agree to participate in a program of research being conducted by Diane Gattermann of the Creative Arts Therapies Department of Concordia University under the supervision of Dr. Pierre Gregoire.

A. Purpose

I have been informed that the purpose of this research is to investigate the process of art therapy with an aboriginal population within a correctional institution. I have been informed that this material will be used for a research paper in accordance with course requirements for the Creative Arts Therapies Department of Concordia University. It may also be used for educational purposes and presentations.

B. Procedures

The procedures will consist of a series of art therapy sessions lasting between 50 minutes (for individual sessions) and 2 hours (for group sessions) using visual (I.e.: artmaking) and verbal communication. I understand that the artwork will be photographed and the case material will be used for the purpose of the research and will be included in the final research paper. This research does not involve any deception or coercion.

C. Conditions of Participation

I understand that I am free to withdraw my consent and discontinue at any time without any negative consequences.

I understand that the results of the research will appear in a published format as a master's research paper of Concordia University and that I have the right to contact the Creative Arts Therapies Department of Concordia University for the research findings. The research may also be used for educational purposes and presentations.

I understand that my identity will remain confidential.

I understand the purpose of this study and know that there is no hidden motive of which I have not been informed.

I HAVE CAREFULLY READ THE ABOVE AND UNDERSTAND THIS AGREEMENT. I FREELY CONSENT AND AGREE TO PARTICIPATE IN THIS STUDY.

Name _____

Signature _____

Date _____