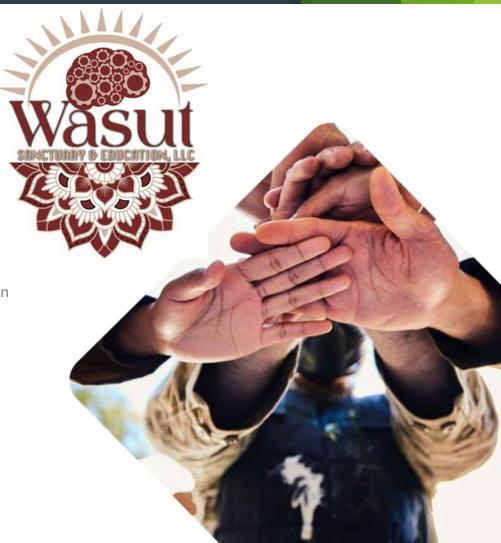
Healing Through Spirit: Integrating Indigenous Healing Practices in Education and Mental Health

Insights and strategies for fostering healing and empowerment in communities.

VARLEISHA LYONS PhD, OTD, OTR/L



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DISCLAIMER:

THOUGHTS ARE MY OWN

Ancestral Honoring Land Acknowledgement

We acknowledge that we are gathered on ancestral lands. These lands are the heartland of numerous Nations and people.



Speaking the Language

of the Haliwa-Saponi Tribe

```
naha:pipi: 'Good day.'
kanahapnapi: 'Good morning.'
tokhé: ya?o:wo 'How are you doing?'
wipi:wa 'I am good.'
kaka yikilá:kewo 'What is your name?
John, mikilá:kewa 'My name is John.'
yipi:wo 'Are you good?'
ohsi:hitepi: 'Good evening.'
tó:kha: yatí:wo 'Where do you live?'
pi:láhuk 'Thank You.'
```

One no:sa: Six aká:spe: sa:kó:mj Two no:pa: Seven Three lá:ni Eight palá:ni kasa:hka Four tó:pa Nine Five kisa:ha Ten púčka

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Red

Blue

Yellow

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- In the quiet fields of the South lived Nanny Gunn, a Native American woman with hair to her feet, and her dark-skinned husband.
- My great-great-grandfather was a sharecropper.
- My mother, a single parent supported by strong grandparents. My grandfather sent me to private school, despite having only a high school diploma.
- My paternal grandmother Lucy was from the Haliwa-Saponi Tribe; her husband, a Vietnam vet, was denied his benefits.
- I grew up straddling cultural lines—teased for being both too light and too dark.
- Today, I hold two doctorates, still learning about my roots—African, Indigenous, and Caribbean.
- Legacy isn't just what we inherit. It's what we *choose* to honor, grow, and pass on.

Learning Objectives

- 1. Understand intergenerational trauma
- 2. Explore Indigenous spirituality
- 3. Apply cultural intelligence
- 4. Create trauma-responsive, culturally responsive environments

Grounding Exercise



Cultural Appropriation



Indigenous Cultures of the United States

An inclusive exploration of Native American and Afro-Indigenous communities.

Defining Indigenous Cultures

- Diverse!
- Peoples and lifeways rooted in the land before European colonization.



Federally Recognized Tribes

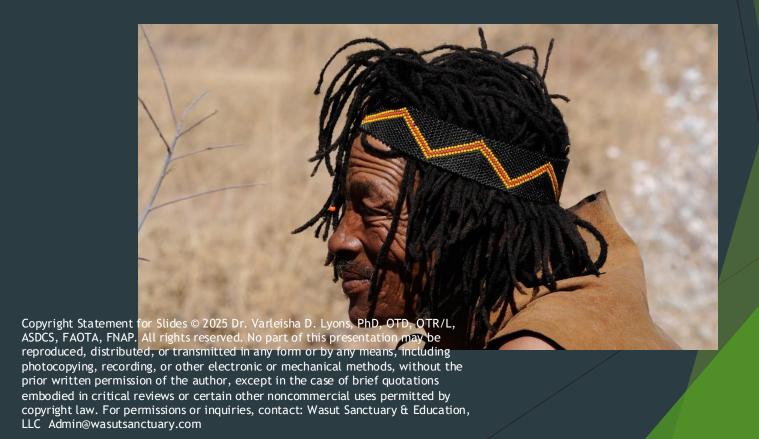
Over 574 tribes acknowledged by the U.S. government.

USA.GOV

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Unrecognized and State-Recognized Tribes

Maintaining identity without federal recognition.



Afro-Indigenous Peoples

Shared lineage and erasure through racial classification laws.



Examples of U.S. Indigenous Groups

- Navajo, Hopi, Pueblo
- Cherokee, Choctaw, Creek
- Wampanoag, Mohawk, Lenape
- Yamasee, Washitaw Muurs, Black Seminoles



Haliwa Saponi!

Indigenous Cultures of Canada

Exploring First Nations, Inuit, Métis, and Afro-Indigenous communities.



Defining Indigenous Peoples in Canada

 634 First Nations, Inuit, Métis: Three legally recognized groups.

Historical Legacy

Colonization, residential schools, systemic discrimination.

Contemporary Communities

Land-based education, cultural resurgence, self-governance.

Afro-Indigenous Identity in Canada

Intersections of African descent and Indigenous heritage.

Examples of Indigenous Nations

- Cree, Mohawk, Haida
- Inuit communities
- Métis Nation
- Afro-Indigenous families in Atlantic Canada
 - https://www.proclaimingourroots.com/

Opening Circle

- Circle practice principles
- Cultural significance
- Participant introductions



GROUP DEVELOPED GUIDELINES



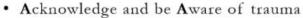


- Facilitated questions:
 - What patterns or wounds show up in your community that you feel called to help shift.
 - What are some strengths or traditions that your community have that support healing?
 - If they were here now, what would they as for those questions?
- Small group breakout
- Sharing insights

Communal Rules

Understanding Intergenerational Trauma

- Definition
- Historical context
- Colonization impacts



- · Create growth from trauma
- Teach neuroeducation and steps toward growth
- · Intergenerational factors
- Organizations and systems re-traumatization
- Now is the time to take ACTION to create growth from trauma



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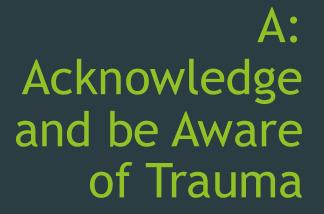
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Part I

ACT







ACE Questionnaire

While you were growing up, during your first 18 years of life:	
Did you live with anyone who was depressed, mentally ill, or suicidal?	
Yes No	
Did you live with anyone who was a problem drinker or alcoholic?	
Yes No	
Did you live with anyone who used illegal street drugs or who abused prescription medications?	
Yes No	
Did you live with anyone who served time or was sentenced to serve time in a prison, jail, or other correctional facil	ity?
Yes No	
Were your parents separated or divorced?	
Yes No	
Did your parents or other adults in your home often or very often slap, hit, kick, punch or beat each other up?	
Yes No	
Did a parent or other adults in your home often or very often hit, beat, kick, or physically hurt you in any way? Ever you had marks or were injured? (Do not include spanking.)	hit you so hard th
Yes No	
Did a parent or adult in your home often or very often swear at you, insult you, or put you down?	
Yes No	ACE /
Did an adult or person at least five years older than you ever touch you sexually?	
YesNo Questionna	ire /
Did an adult or person at least five years older than you ever try to make you touch their body sexually?	
Yes No	
Copyright Statement for Slid an adult or person at least five years older than you ever force you to have sex? OTR/L, ASDCS, FAOTA, FNAF	

___ Yes ____ No

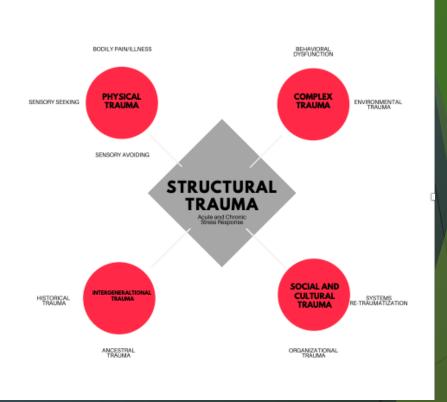
Now add up your "yes" answers. This is your ACE score

ACTION-FROM-TRAUMA APPROACH THE FIVE DIMENSIONS OF TRAUMA MODEL

The condition of trauma is dynamic. An individual, population, or community can be exposed to various forms of trauma. Ultimately, the exposure and experience impacts neurological functioning. Hence, this model proposes that structural trauma (i.e., changes on the neurological level) occurs as a result of the other forms of trauma.

The more exposure to the various forms of trauma, the severity of structural trauma increases.

Each form of trauma has secondary conditions as revealed in the model. Acknowledgment of the complexity provides a platform for addressing the needs of the individual, population, or



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Practitioner Readiness for Trauma Care Checklist

As	a provider, I am able to:
	Tailor trauma assessments and interventions in a way that considers diversity in socioeconomic, organizational, community, population, and intersecting cultural identities
	Employ a biopsychosocial approach to care that considers the complex interactions of cognitive, biological, psychological, and social factors
	Understand the impact of traumatic experiences across the lifespan and between family members (e.g., pediatric providers have knowledge of the impact of trauma on the adult caregiver)
	Acknowledge short-term and long-term effects of trauma (e.g., comorbidities, housing-related issues) and person-environment interactions related to trauma (e.g., running away from home and being assaulted)
	Perform shared decision making with clients and focus on strength, resilience, and areas for growth
	Provide a sense of autonomy, safety, and security with an awareness of how trauma impacts an individual's and organization's sense of trust
	Understand trauma reactions and their implications for assessment and treatment (e.g., able to alter plans in the presence of avoidance behaviors or triggers)
	Acknowledge how society, organizations, and systems can result in the possibility of re-traumatization

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Respect and Empathy Language	Gratitude and Growth Statements		
Children			
"What do you need?"	° "Thank you!"		
"Do you need a break?"	o "I like your hard work!"		
"How can I help?"	"Wow! Look at how you grew today by finishing your work!"		
"All done? Or do you need more?"	∘ "You have grown so much!"		
"I want to help you."			
"What you experienced is not okay. What support do you need?"			
Adolescents, Adult	ts, and Older Adults		
o "That is really challenging, and I see you are upset. Can I suggest	○ "That was brave of you."		
some strategies to assist with your anxiety?"	o "Your sharing shows your strength."		
"Would it be okay for us to discuss how that made you feel?"	 "Look at all you have done since and despite of" 		
"While it may not have been the best choice, your response matches how you felt."	 "That is tough to talk about. I appreciate your openness and trust." 		
"How can I help you grow from here?"			
"Did that make you feel uncomfortable? That was not my intent."			
"I see that may not have been the best way to phrase that. What I meant was"			

Table 4. ACTION Language

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Categories of Trauma

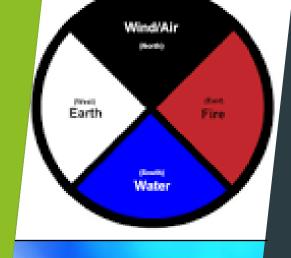
Expected Unexpected Isolated Pervasive

Intentional Unintentional Direct Indirect



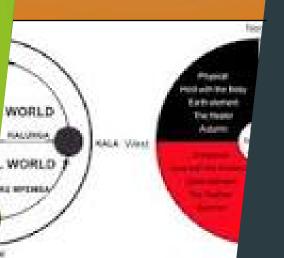
Setting the Stage

□ Creating a Growth Contract and Needs Plan
 □ Grounding Activities and Practitioner Check-Ins
 □ The Sensory Connection
 □ Contextual Sensory Investigation
 □ ACTION Creating Growth Tools
 □ Case Scenario



Mind-Body Connection to Spirit and the Elements

- Earth
- Wind
- Fire
- Water



"I am Offering This Poem" by Jimmy Santiago Baca

IN-SESSION ACTIVITY

MINDFUL FINGER COUNTDOWN

Age Range: Children

Objective: To reorient to the present moment with touch and mindful counting

Directions: Have the child hold up their hand with their fingers separated. As you demonstrate the movements, ask them to imitate you. Take your thumb and second finger, and touch the pads together. With each breath, you will have the child touch the pads of the remaining fingers as described in the script below.

Provider Script: State out loud "four." Take a deep, purposeful breath and have the child do the same. Move to your next finger, touching the pads of your thumb and third finger. State out loud "three." Again, take a deep, purposeful breath and have the child do the same. Continue with the remaining fingers, breathing in between and having the child imitate. Count down to one, repeating the process if needed.

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ACTION Need Assessment Worksheet

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PROVIDER WORKSHEET

ACTION CREATING GROWTH: WHAT I NEED PLAN

Age Range: Children

Objective: To develop a method to communicate needs that supports the client's progress toward growth

Directions: Following a screening or assessment, it is crucial to have a plan to provide safety, set boundaries, and develop autonomy. Use this checklist to identify sensorimotor activities, mindfulness practices, or other methods that best support the child's arousal and that facilitate their participation in required tasks, treatment sessions, and engagement with others. Work with caregivers, and the child as appropriate, to develop these activities. Highlight a way to communicate needs through specified statements or nonverbal options. (Gestures are especially useful for young children.) This should be a starting point for continued strategizing to expand methods of communication.

Desired Action	Key Words, Phrases, or Strategies
End a task	☐ Say "Stop please" ☐ Use pictures with a stop sign ☐ Signal with gestures
Share needs	□ Say "I need" or "I want" □ Say "Give me" □ Use pictures of desired items to select □ Signal with gestures
Express feelings	☐ Use "I feel" statements ☐ Use pictures of emotions ☐ Signal with gestures



Disclaimer

Breathwork



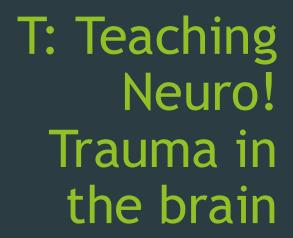
Connection to the nervous system



Diaphragmatic Breathing



Rhythmic Breathing and the Insula Cortex





Teaching Younger Children About Their Brain

- There is a part of our brain that is really smart and playful, kind of like a small dog.
- Sometimes, things happen that make that part of our brain angry, mad, sad, or afraid. It has trouble listening, playing, or learning. We do not feel like ourselves. That little dog starts to get really loud and active.
- That part of your brain tries to get happy and will run around, bark, or jump—whatever it takes to get happy! It loves feeling good!
- Like having a small dog as a pet, you have control. Not only can you train that part of your brain to feel good, but you can feel good too! You have a leash and other training tools we will share.



Intellectual Reactions

- Front Part of the Brain versus Reptilian brain
- Challenges with:
 - Concentration
 - Problem Solving
 - Remembering

Addressing the Impact on Memory

IN-SESSION WORKSHEET

ACTIVITIES OF DAILY LIVING: MEMORY ACTIVITIES

Age Range: All

Objective: To improve working memory, assist in planning to prepare for necessary tasks, and decrease daily stress

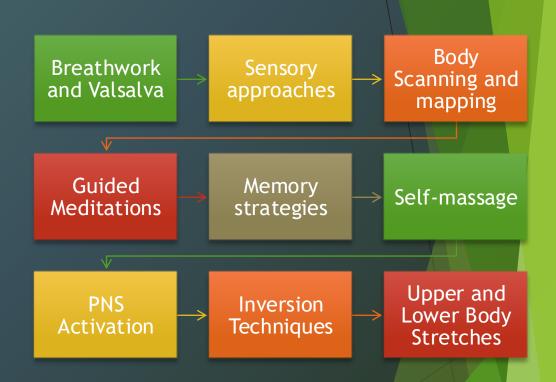
Directions: Identify an activity of importance that may be causing the client challenges. For example, perhaps they are struggling to arrive to work on time or to maintain appointments, which is leading to additional dysfunction and stress. Discuss the needed steps to complete that particular activity, and write down each step in sequential order. As a follow-up activity, write the steps out of order and have your client place them in the correct sequence. Here is a sample memory activity for getting to their therapy appointments on time, followed by blank spaces for you to use with your client.

Counteracting Fear and Anxiety:

Parasympathetic Nervous System

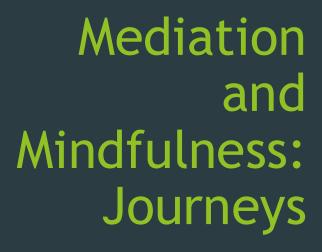


Connection to the ACTION from Trauma Interventions



Breath!
Nasal
Breathing

"Breath of Fire"



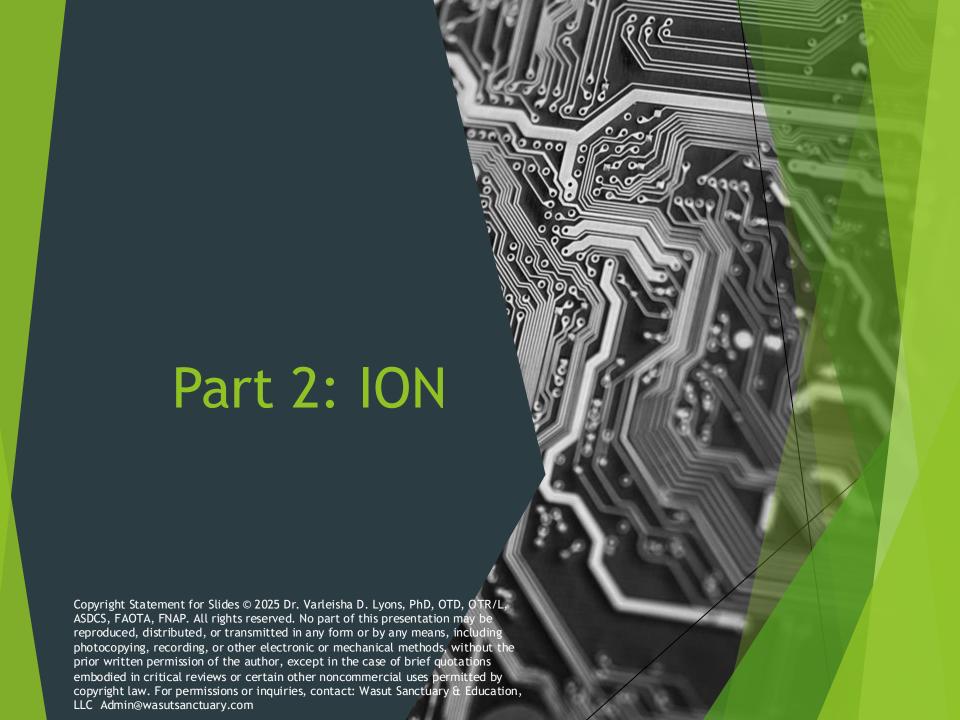
Shiatsu Self-Massage

While sitting down, instruct the client to use their thumbs to provide pressure to the soles of the feet, moving in a circular manner. Then have them use their thumbs to provide a pressure massage to each toe on their feet. Instruct them to apply pressure and to massage the webbed spaces of their hands. Next, have them apply pressure to their palms, using their thumb and working down to the wrist area, continuing with gentle pressure. Then have them use their opposite hand to pull the other hand backward to stretch the wrist area. Lastly, invite them to massage their scalp using their fingertips. (Note to provider: If performing self-massage on the feet, ensure the client is comfortable with removing their shoes.)

Activity

Aromatherapy

Essential Oil	Potential Uses
Sweet orange	Improves mood, increases alertness, and assists with digestion
Lemon	Improves mood and digestive issues
Sandalwood	Has a calming effect and increases focus
Bergamot	Reduces stress and improves dermatological conditions
Rose	Decreases anxiety and enhances mood
Lavender	Decreases stress and has a calming effect
Chamomile	Improves mood and enhances positive emotions
Peppermint	Increases energy levels and improves nausea
Ginger root	Improves appetite and boosts immunity
Mandarin	Decreases anxiety and improves dermatological conditions
Ylang-ylang	Decreases nausea and improves dermatological conditions
Tea tree	Boosts immunity and improves dermatological conditions
Jasmine	Improves mood

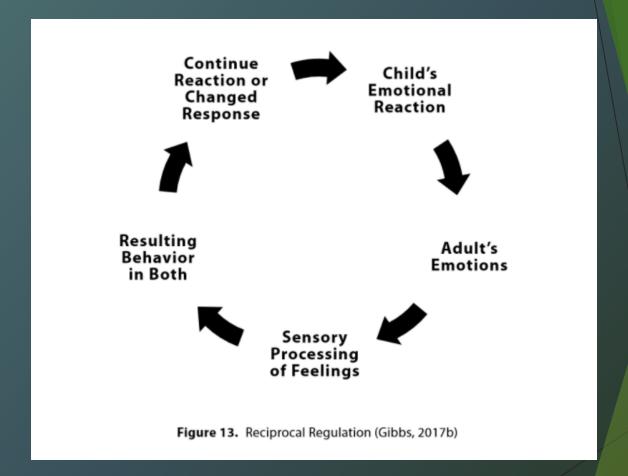




INTEGENERATIONAL FACTORS

Intergenerational trauma, this type of trauma affects generations of a specific group of people and does not require directly experiencing a traumatic event. The hearing of stories, learned behaviors, and subsequent rules that emerge all feed into the well-being of generations that follow. Indeed, there are stories within our history riddled with trauma. Survivors carry that trauma not only in their minds but in their bodies. The cells in their body hold onto the trauma and serve as a history book to be shared with offspring.

Epigenetics



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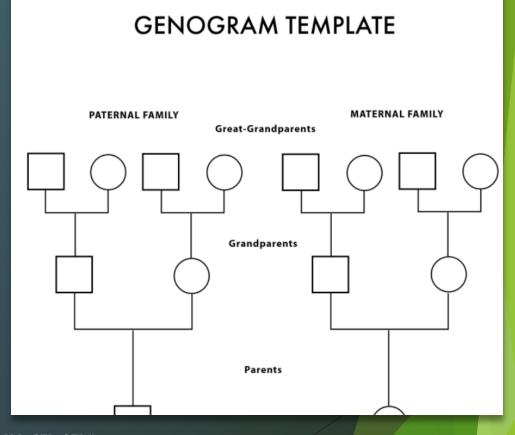
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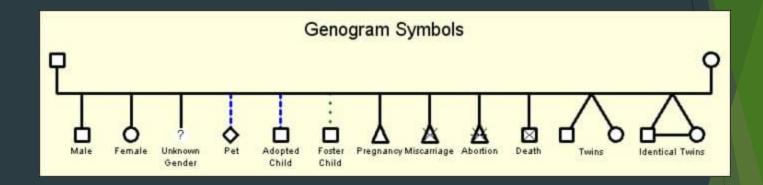
☐ Provide skin-to-skin contact during the first days and months of life.
☐ Perform a caregiver-provided massage, which has been shown to not only calm the infant
but to decrease parental stress and anxiety. Addressing reciprocal regulation prior to such
techniques is vital.
☐ Participate in shared experiences, such as reading to the child.
☐ Ensure consistent play with the child at least once daily.
☐ Feed the child based on their needs rather than doing so at scheduled mealtimes.

Early Intervention

Recognize Risk factors!

Review Family History: Genogram



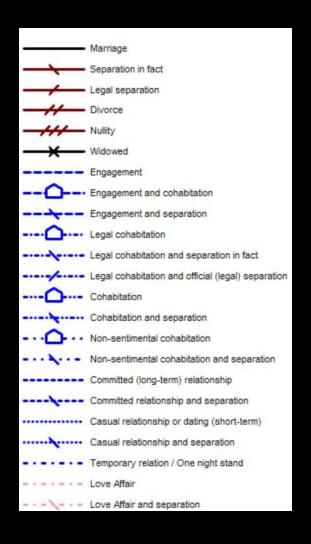


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ORGANIZATIONS AND SYSTEMS

RE-TRAUMATIZATION

Nikki Harley

Emotional Reactions	Temporary feelings of shock, fear, grief, anger, resentment, guilt, shame, helplessness, hopelessness, emotional numbness
Cognitive Reactions	Confusion, disorientation, indecisiveness, worry, shortened attention span, difficulty concentrating, memory loss, unwanted memories, self-blame
Physical Reactions	Tension, fatigue, edginess, difficulty sleeping, bodily aches or pain, starling easily, racing heartbeat, nausea, change in appetite, change in sex drive
Interpersonal Reactions	Feelings of distrust or irritability toward others; conflict, withdrawal, or isolation; feeling rejected or abandoned; being distant, judgmental, or overcontrolling of others

Table 9. Symptoms of Organizational Trauma During a Crisis (Young, Ford, Ruzek, Friedman, & Gusman, 1998)

Collective Trauma

Creating Safe Spaces

- 1. Routinely screen for trauma exposure and related symptoms
- 2. Use culturally appropriate evidence-based assessment and treatment
- 3. Make resources available to children, families, and providers on trauma exposure, impact, and treatment
- 4. Engage in efforts to strengthen the resilience and protective factors of children and families impacted by and vulnerable to trauma
- 5. Address parent and caregiver trauma and its impacts on the family system
- 6. Emphasize continuity of care and collaboration across systems
- 7. Maintain an environment of care for staff that addresses, minimizes, and treats secondary traumatic stress and that increases staff resilience (National Child Traumatic Stress Network, 2016)

Sanctuary Space

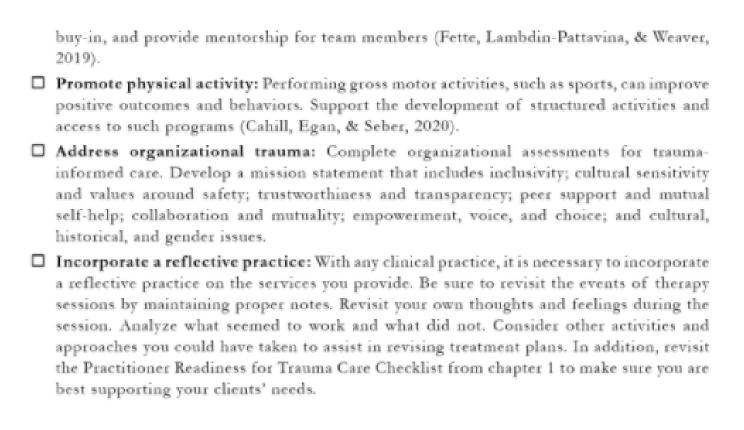
Breathwork	Breathwork is a general term used to describe any type of therapy that utilizes breathing exercises to improve mental, physical, and spiritual health.
Yoga or mindful movement	The gentle movement associated with yoga helps develop body awareness and reduces over-reactivity to internal sensations. These practices recalibrate the threat detection system from the top down and bottom up, giving individuals with trauma control of their healing.
Mindfulness	Mindfulness activities can mitigate symptoms of PTSD by increasing activity in the prefrontal cortex and hippocampus and toning the amygdala. At its core, mindfulness is simply the basic human ability to be present. A simple mindfulness exercise involves the use of a stethoscope to center on the beauty of our heartbeat. For those who struggle with formal meditation or mindfulness practices, you can simply incorporate mindful awareness into your daily routines.
Gentle music	While music cannot cure PTSD, it has demonstrated positive results in helping to alleviate secondary symptoms of trauma, such as depression and insomnia (Blanaru et al., 2012).
Diet and exercise	Good nutrition and physical activity are important parts of leading a healthy and balanced lifestyle, which can dramatically assist in maintaining overall health and well-being.
Regular sleep	Lack of sleep can lead to insulin resistance, cardiovascular disease, mood swings, poor immune function, hormonal imbalances, and lowered life expectancy. Therefore, get on a regular sleep-wake schedule, and keep a journal by your bedside to capture any last-minute thoughts for the day. You can also perform light stretching or yoga before bed to prepare the body for sleep.

Table 13. Practical Ways for Practitioners to Re-Center

Person first: We must focus on the person first—not the trauma that happened to them. Individuals are resilient and have strengths that supersede trauma. Therefore, include strengths-based and evidence-based strategies in your work. While we have presented a multitude of activities in this book, make sure that your treatment plans are person- and family-centered as well.

- Advocacy: Attending expensive workshops and trainings is a beginning, not an ending. Reading this book is a start. The real work is in advocacy at every level. Advocate for your clients by acknowledging their unique needs and by aligning resources that fit those needs. Educate those who work with individuals with trauma. Advocate for resources to decrease the financial and social impacts of trauma. Establish mentorship programs and training for primary care, childcare, and eldercare providers.
- Avoid re-traumatization: Employ the use of de-escalation techniques versus the use of physical restraints. Many of the challenges individuals present with occur when they do not feel validated. Start by acknowledging their perspective and by recognizing the trauma lens of protection through which they view the world. Listen to what they have to say! Avoid making assumptions and judgments. Ask for and provide clarification by repeating and rephrasing statements. Apologize for any misunderstandings or misinterpretations. Provide choices rather than dictating rules.
- ☐ Assess your knowledge of trauma: Be aware of your personal experiences. As you work

NOW is the time to take ACTION



Now is the time for you to call others to ACTION!

Group activity

- Circle
- Pass items clockwise
- Keep with the rhythm

Juggling Thoughts

- Represents mental chatter
- Mindfulness can help focus
- How did the "chatter" feel when it moved quickly vs. slowly?

Understanding Intergenerational Trauma (Discussion)

- Facilitated questions
- Small group breakout
- Sharing insights

Mechanisms of Trauma Transmission

- Psychological
- Cultural
- Social pathways

TRAUMA AND THE BRAIN

How complex trauma impacts the hippocampus, amygdala, prefrontal cortex. Neuroplasticity: The brain can heal.

▶ Memory

ACE STUDY (FELITTI ET AL., 1998)

- The Adverse Childhood Experiences (ACE) Study revealed strong correlations between childhood trauma and long-term physical, emotional, and mental health challenges.
- Key Concept: Trauma alters brain structure (e.g., hippocampus, amygdala) and increases risk for chronic illness.
- Suggested Activity: Reflect privately on ACE score (optional), then journal on resilience factors.
 - Downloadable ACE Questionnaire: https://acestoohigh.com/got-your-ace-score/

ACE QUESTIONNAIRE

The ACE study showed childhood trauma has lasting health impacts.

Find your ACE score (optional, private use):

https://acestoohigh.com/gotyour-ace-score/

#	Experience	Yes	No	Not sure
1	Did a parent or other adult in the household often swear at you, insult you, or put you down?			
2	Did a parent or other adult in the household often push, grab, slap, or throw something at you?			
3	Did an adult or person at least 5 years older than you ever touch or fondle you or have you touch their body in a sexual way?			
4	Did you often feel that no one in your family loved you or thought you were important or special?			
5	Did you often feel that you didn't have enough to eat, had to wear dirty clothes, or had no one to protect you?			
6	Was a biological parent ever lost to you through divorce, abandonment, or other reason?			
7	Was your mother or stepmother often pushed, grabbed, slapped, or had something thrown at her?			
8	Did you live with anyone who was a problem drinker or alcoholic, or who used street drugs?			
9	Was a household member depressed or mentally ill, or did a household member attempt suicide?			
10	Did a household member go to prison?			П

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Polyvagal Theory explains how the vagus nerve supports our ability to feel safe or threatened.

POLYVAGAL THEORY (PORGES, 2011)



Chronic trauma impairs this ability.



Neuroception of safety is the unconscious scanning for cues that tell us we're secure.



Cultural rituals (e.g., drumming, singing) activate the ventral vagal system and promote healing.

Suggested Activity: Group drumming or 5-4-3-2-1 senses grounding

Spirituality in Healing

Indigenous spiritual traditions These traditions incorporate ceremonies that foster play a vital role in healing.

connection to culture and nature, enhancing the healing process.

Spiritual practices foster resilience and recovery.

Engagement in spiritual activities can boost mental health, leading to improved overall well-being.

Ceremonies serve as a communal support system.

Gathering for traditional practices can strengthen bonds within the community, promoting collective healing.

Connection to culture aids in identity reclamation.

Reconnecting with cultural roots through spirituality enhances personal identity and self-worth, essential for healing.

Storytelling and Traditional Knowledge

The power of storytelling is vital in preserving cultural knowledge.

Storytelling serves as a vessel for passing down traditions and wisdom through generations.

Oral traditions are crucial for healing and resilience.

These traditions provide a sense of community and support, fostering emotional healing.

3 Cultural narratives strengthen identity and belonging.

Engaging with stories helps individuals connect with their roots and culture.

Storytelling can serve as a therapeutic tool.

Sharing personal and communal stories can aid in processing trauma and promoting wellness.

Preservation of traditional knowledge through storytelling can combat cultural erosion.

In a rapidly changing world, storytelling keeps cultures alive and relevant.

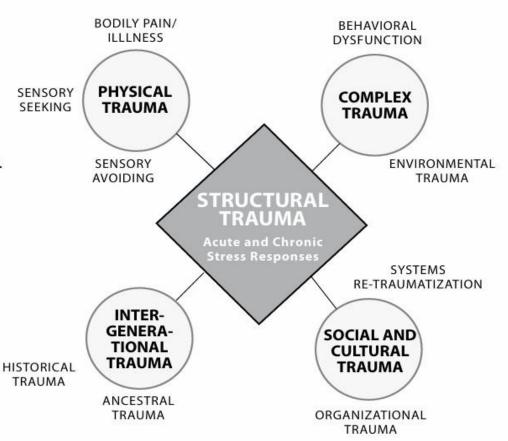
ACTION-FROM-TRAUMA APPROACH

THE FIVE DIMENSIONS OF TRAUMA MODEL

The condition of trauma is dynamic.
An individual, population, or community can be exposed to various forms of trauma.
Ultimately, the exposure and experience impacts neurological functioning.
Hence, the model proposes that structural trauma (i.e., changes on the neurological level) occurs as a result of the other forms of trauma.

When there is more exposure to the various forms of trauma, the severity of structural trauma increases.

Each form of trauma has secondary conditions as revealed in the model. Acknowledgment of the complexity



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- Acknowledge and be Aware of trauma
- · Create growth from trauma
- Teach neuroeducation and steps toward growth
- · Intergenerational factors
- Organizations and systems re-traumatization
- Now is the time to take ACTION to create growth from trauma



HISTORICAL TRAUMA RESPONSE (WEAVER & BRAVE HEART, 1999)

- Brave Heart introduced Historical Trauma Response (HTR) to describe grief and loss passed across generations in Indigenous communities.
- It helps explain collective symptoms of unresolved mourning, shame, and spiritual disconnection.
- Suggested Activity: Invite elders or cultural leaders to tell intergenerational stories of strength

THE BODY KEEPS THE SCORE (VAN

DER KOLK, 2014)

- Emphasizes that trauma is stored in the body. True healing requires somatic interventions like yoga, movement, and breathing - not just cognitive work.
- Suggested Activity: Body scan meditation, walking meditation, or movement-based group ritual.

INDIGENOUS MENTAL HEALTH

(GONE, 2013 2018) Dr. Joseph Gone critiques Western frameworks and highlights the value of culturally specific Indigenous healing.

Healing is not just psychological - it is also spiritual, social, and political.

Suggested Activity: Co-create a Community Wellness Wheel with participants. Use 4 quadrants (mental, emotional, spiritual, physical).



NATURE AND RESILIENCE (HARTMANNET AL., 2019)

Natural environments support regulation and belonging. Nature exposure is proven to reduce stress and improve healing outcomes - especially for people impacted by social or historical trauma.

Suggested Activity:
Mindful walk. Reflection
prompt: 'What healing
message does the land
hold for you?'



Neuroception is our nervous system's automatic ability to detect safety or threat.

NEUROCEPTION OF SAFETY



Stephen Porges' Polyvagal Theory shows how trauma can cause us to misread safety cues as danger.



Cultural practices like drumming, chanting, and ceremony help reestablish safety and co-regulation.

THE
VAGUS
NERVE
(10TH
CRANIAL
NERVE)



Primary nerve of the parasympathetic nervous system



Influences heart rate, digestion, respiration, and social engagement



Key player in **polyvagal theory** (Stephen Porges)

DORSAL VAGAL PATHWAY (BACK BRANCH)

Origin: Dorsal motor nucleus

State: Shutdown, dissociation, immobilization

Functions: Slows metabolism, digestion; freeze response

Trauma Implication:
Overactivation can lead to chronic fatigue,
dissociation, numbness;
seen in early, overwhelming trauma

VENTRAL VAGAL PATHWAY (FRONT BRANCH)

Origin: Nucleus ambiguus

State: Social engagement, calm, connection, safety

Functions: Facial expression, vocalization, eye contact, prosocial behavior

Trauma Implication: When active, promotes healing and co-regulation; trauma recovery often aims to **restore ventral vagal tone**

HEALING IMPLICATIONS

- Trauma-informed practices (e.g., mindfulness, rhythmic movement, safe relationships) can help shift the nervous system from dorsal
 - shutdown to ventral engagement
- Somatic therapies often work to increase ventral vagal tone and interrupt chronic dorsal states

NEUROCEPTION

Neuroception is our subconscious "safety surveillance" system—a
fast, automatic process that scans internal and external cues (body
sensations, facial expressions, tone, environment) to detect safety,
danger, or life-threat—without conscious awareness

The Vagus Nerve and Trauma: Ventral vs. Dorsal Pathways

- The Vagus Nerve (10th Cranial Nerve)
 Primary nerve of the parasympathetic nervous system
 Influences heart rate, digestion, respiration, and social engagement
- Key player in polyvagal theory (Stephen Porges)
- Ventral Vagal Pathway (Front Branch)
 Sràrin: Secial engayner, calm, connection
 Functions: Facial expression, vocalization, eye contact, prosocial behavior

Trauma Implication: When active, promotes healing and co-regulation; trauma recovery often alms to restore ventral vagal tone

Healing Implications e..g., mindfulness, rhythmic movement, safe relationships) can

Ventral Vagal PATHWAY Origin: Nucleus ambiguus Dorsal State: Social engagement; VAGAL calm; connection, safety PATHWAY Functions: Facial expresion, Dorsal motor vocalization, eye contact, nucleus prosocial behavior Trauma Implications Overactivation can lead to chronic fatigue, dissociation, numbness; seen in early, overwhelming trauma Input Gathering: Brainstem receives signals from internal (heartbeat, gut) and external sources (faces, sounds, surroundings).

NEUROLOGICAL MECHANISMS

► Instant Classification: These signals are swiftly categorized as safe, danger, or life-threat—without active thought.

- Response Activation: Depending on the result, the body
- switches between three states:
 - Ventral vagal → Social Engagement (calm, connected)
 - ► Sympathetic → Fight/Flight (mobilization)
 - Dorsal vagal → Shutdown/Freeze (immobilization)

VENTRAL VAGAL

SOCIAL ENGAGEMENT SYSTEM

Social bonding, feelings of harmonious connection with others and environment, feeling safe in body, joy, peace, mindful, open and curious to present moment

SYMPATHETIC

MOBILISATION SYSTEM

Fight and flight, freeze - responses to danger: emotions of rage, anger, irritation, frustration, fear, terror, panic, restless, anxious and worried

DORSAL VAGAL

IMMOBILISATION SYSTEM

Fainting, freeze, shutdown, dissociation, surrendering into death, energy conserved for vital organs

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law.

Safety (ventral): You feel present, open, socially connected.

THE CONTINUUM OF STATES

Danger (sympathetic): Alert, aroused, may feel anxious or angry.

Life-Threat (dorsal): Shut down, numb, dissociated, or frozen. This spectrum is fluid, allowing natural movement between states

DISTORTION OF SAFETY

Our neuroceptive system evolved to **keep us alive**, but **trauma can distort it**, triggering defensive states even in safe situations

Increasing "glimmers"—small signals of safety (a kind voice, warm lighting, gentle presence)—helps shift us toward ventral vagal and social engagement (Aldebaran Healing).



Mindful Awareness: Notice bodily signals like tightness or racing heart—these are neuroceptive cues.

PRACTICAL APPLICATIONS



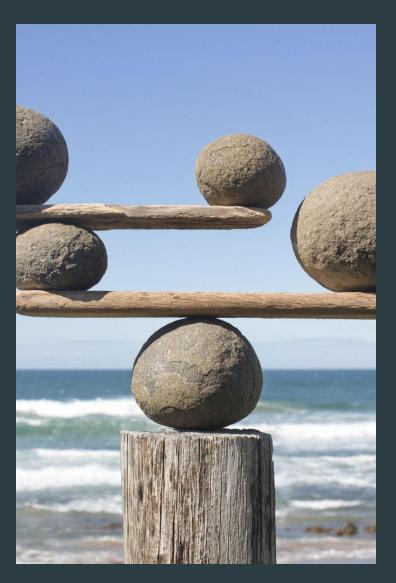
Create Safe Environments: Use glimmers—music, supportive presence, caring space.



Regulation Exercises: Breathing, co-regulation (safe social contact), grounding to re-balance when triggered.

Neuroception Outcome	Nervous System State	Core Response	Regulation Work
Safe signals	Ventral vagal	Social, calm	Engage, connect
Danger signals	Sympathetic	Fight/flight	Soothing breaths, movement
Threat signals	Dorsal vagal	Freeze/shutdow n	Grounding, gentle touch

CORE CONCEPTS



UNDERSTANDING BALANCE IN HEALING

 Indigenous models of wellness emphasize balance between mind, body, spirit, and emotion.

Balance means respecting cycles of rest, community, ritual, and nature.

In practice: honoring both personal healing and collective responsibilities.

PAN-AFRICAN + INDIGENOUS MEDICINE WHEEL FOR HOLISTIC HEALING INDIGENOUS MEDICINE WHEEL

- Represents balance among four realms: mental, emotional, spiritual, physical
- Kongo Cosmogram (Yowa cross)
- Symbolizes life cycle (birth death) and realms (celestial ancestral)
- Intersection
- These frameworks overlap at a central hub representing balance between self and ancestors.

4 Corners

- 4 directions
- 4 seasons
- 4 times of day
- 4 elements
- 4 medicines

INDIGENOUS QUADRANTS & COLORS:

- East (mental/spring) Yellow
- •South (emotional/summer) Red
- West (spiritual/fall) Black
- •North (wisdom/winter) White

Overlay: Cosmogram cross aligned east–west and north–south axes

COLOR & ICONOGRAPHY

Quadrant colors guide seasons/emotional states

Overlay the cosmogram cross at the circle's center

Surrounding symbols may include: Sankofa bird, Kongo spiral, eagle feather, herbal motifs

USING THE WHEEL FOR HEALING

Self-Assessment:

Journaling prompts per quadrant/axis (e.g., mental clarity, ancestral connections)

Goal-Setting: Assign holistic goals—physical, mental, emotional, spiritual, ancestral

Ceremony Integration:

Indigenous: talking circles & seasonal ceremonies

African: ring dances & ancestor invocation

RITUAL & PRACTICE STEPS

Constructing the Wheel:

- Draw circle + quadrants
- Add cosmogram cross
- Apply color & symbols

Routine Usage:

- Regular journaling & reflection
- Weekly/seasonal ceremony practices

CULTURAL RESPECT & GUIDANCE

1

This is a **template**, not a replacement for cultural traditions

2

Practice cultural humility: engage with elders/healers, seek permission, respect protocols

Element Indigenous

Tradition

Mental, emotional, Circle + Quadrants

spiritual, physical

Balance & self-Central Hub

awareness

Talking circles, Ritual Practice

seasonal

ceremonies

African (Kongo)

Tradition

Birth-Death,

Celestial-

Ancestral axes

Ancestral

convergence

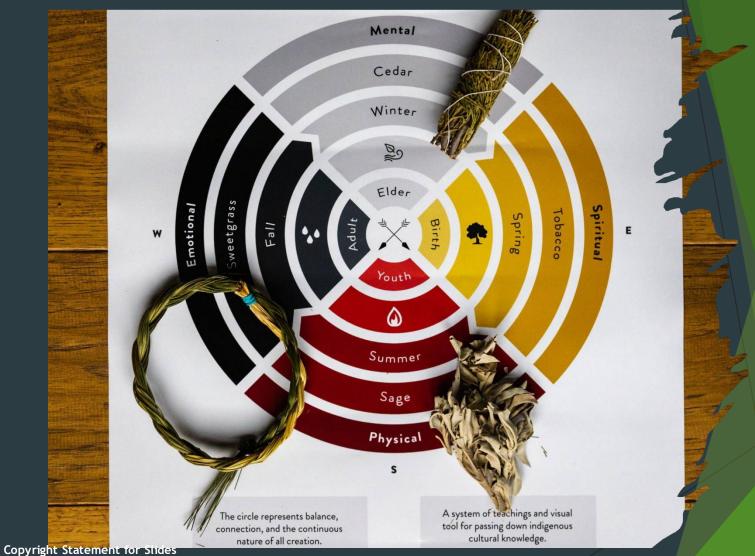
point

Ring dance &

ancestor

invocation

SUMMARY



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PRACTICE

Build your own version (paper or digital)

Customize: colors, prompts, language, symbols

Engage: connect with local Indigenous/African elders or knowledge holders

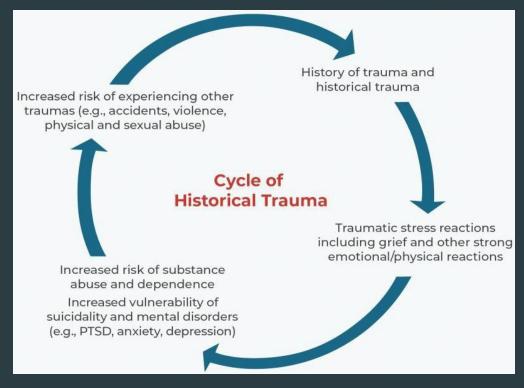
Practice regularly: journaling + ceremony



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GROUNDING EXERCISE

Body Scan



CYCLE OF HISTORICAL TRAUMA

BEHAVIORAL HEALTH SERVICES FOR AMERICAN INDIANS AND ALASKA NATIVES: FOR BEHAVIORAL HEALTH SERVICE PROVIDERS.

ADMINISTRATORS, AND SUPERVISORS [INTERNET].

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WHAT HAPPENS NEUROLOGICALLY?

Trauma-Responsive Approaches

Understanding the impacts of trauma on individuals and communities is crucial for creating supportive environments that foster healing and recovery.

GONE: COMMUNITY WELLNESS WHEEL

A Community Wellness Wheel includes four dimensions:

Mental • Emotional • Spiritual • Physical

Group creation of a wheel with healing actions in each quadrant.

Example: Drumming (Spiritual), Talking Circle (Emotional).

COMPONENTS OF THE COMMUNITY WELLNESS WHEEL



Four key dimensions that contribute to overall well-being: (<u>University of New Hampshire+4Crisis & Trauma Resource</u> Institute+4swc osu edu+4)



Spiritual Wellness: This dimension involves finding purpose and meaning in life, which can be derived from religious faith, personal values, or a sense of connection to something greater than oneself.



Emotional Wellness: Emotional wellness refers to understanding and managing one's emotions, coping effectively with stress, and maintaining a positive outlook on life. (Edwards Ar Edwards Resear University of New Hampstrees 1)



Physical Wellness: This area focuses on maintaining a healthy body through regular exercise, proper nutrition, adequate sleep, and routine medical care.



Social Wellness: Social wellness emphasizes the importance of building healthy relationships, having a supportive social network, and contributing to the community. (University of New Hampshire+7shcs.ucdavis.edu; University of Delaware+7)

INTERRELATION OF THE FOUR DIMENSIONS

Engaging in regular physical activity (physical wellness) can improve mood (emotional wellness), foster social connections (social wellness), and provide a sense of purpose (spiritual wellness)

Additional wellness models:

- Incorporating additional dimensions such as intellectual, occupational, financial, and environmental wellness.
- Dependent on programmatical goals and context



SOMATIC, SENSORY-BASED ACTIVITIES



To support healing and regulation through the vagus nerve



Activities are aligned with the ventral (social engagement) and dorsal (shutdown/freeze) branches of the vagus nerve.

VENTRAL VAGAL PATHWAY ACTIVATION



- Humming or gentle chanting calms the nervous system.

Eye Gaze,
Eye Yoga &
Mirroring:

- Partner activity that builds co-regulation.



Inhale 4, exhale
 6–8 seconds to promote calm.

Safety
Anchor Mandala:

Draw a symbol of safety to foster grounding.

DORSAL VAGAL RELEASE ACTIVITIES

Weighted Sensory or Blanket Wrap: Deep pressure helps restore body boundaries Selfshiatsu Massage.

Grounding Through Movement:

- Gentle stomping or heel drops reengage the body.

Sensory Scan (5-4-3-2-1):

- Reconnects with the environment.

Co-regulation Circle:

 Share regulating strategies in a group setting.

REFLECTION PROMPT

How did your body respond to each activity?

What surprised you? What felt safe? What didn't?

This builds awareness of neuroception — the body's detection of safety or danger.



Application, Collaboration, and Moving Forward

Develop Community-Based Healing Initiatives

Collaborate on creating actionable, community-driven projects.

Reflect and Commit to Ongoing Healing

Commit to applying workshop teachings in personal and community healing efforts.

Participate in a Communal Healing Ceremony

Celebrate shared growth and reaffirm commitment to cultural reconnection.

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Reconnecting to Ancestral Wisdom



- Participate in group storytelling sessions.
 - Engage with others to share and hear stories that connect to our heritage.
- Learn about the significance of spiritual rituals and traditional knowledge in healing.
 - Understand how these practices contribute to holistic healing and well-being.

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Youth Engagement in Cultural Preservation

Explore ways to involve youth in cultural preservation and healing practices.

Create action plans for mentorship programs.

EMPOWERING YOUTH IN HEALING



MENTORSHIP AS A HEALING TOOL

Youth can act as mentors, guiding peers through challenges and fostering resilience. This peer support enhances community bonds and encourages personal growth.



LEADERSHIP OPPORTUNITIES

Engaging youth in leadership roles empowers them to take charge of community healing initiatives, fostering a sense of responsibility and ownership.



CULTURAL PRESERVATION INITIATIVES

Youth involvement in cultural preservation helps maintain traditions and practices that are vital for community identity and continuity, promoting healing through heritage.



INNOVATIVE SOLUTIONS FROM YOUTH

Young people often bring fresh perspectives and innovative solutions to healing processes, addressing community issues in unique and effective ways.

Elders share knowledge.

Elders support the healing journeys of younger generations.

Role of Elders in Healing

Elders play a vital role in guiding cultural practices.

Impacts on Identity

- Loss of language
- Disconnection from traditions
- Stigma and internalized oppression

Impacts on Identity (Discussion)

- Facilitated questions
- Small group breakout
- Sharing insights

Mental Health Implications

- ► High rates of PTSD, depression
- Suicide and substance use trends

Mental Health Implications (Discussion)

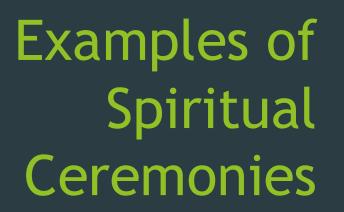
- Facilitated questions
- Small group breakout
- Sharing insights

Spirituality in Indigenous Healing

- Role of ceremony and ritual
- Belief systems
- Holistic worldviews

Spirituality in Indigenous Healing (Discussion)

- Facilitated questions
- Small group breakout
- Sharing insights



Examples of Spiritual Ceremonies (Discussion)

- Facilitated questions
- Small group breakout
- Sharing insights

Healing Through Connection

- Connection to land
- Ancestors
- Community

Healing Through Connection (Discussion)

- Facilitated questions
- Small group breakout
- Sharing insights

Trauma-Responsive Care

- Core principles
- Safety and empowerment
- Trust and collaboration

Trauma-Responsive Care (Discussion)

- Facilitated questions:
 - What Happened to You?
 - What do You Need?
- Small group breakout
- Sharing insights

Aligning TRC with Culture

- Adaptation of models
- Use of traditional concepts

Education & Healing Practices

Classroom integration

Mental health support

Role of school counselors

Education & Healing Practices (Activity)

- Interactive exercises
- Role plays
- Peer feedback

Working with Elders



Protocols



Building trust



Inviting collaboration

Tools for Culturally Intelligent Plans



Lesson plans



Community events



Curriculum redesign

Cultural
Intelligence
vs.
Competency



Self-awareness



Contextual knowledge



Dynamic learning

Cultural Intelligence vs. Competency (Activity)

- Interactive exercises
- Role plays
- Peer feedback

Blending Traditions and Therapy



CBT and mindfulness with ceremonies



Examples of integrative models

Blending Traditions and Therapy (Activity)

- Interactive exercises
- Role plays
- Peer feedback

Community-Based Healing





FEASTS

WELLNESS CIRCLES



LAND-BASED EDUCATION

Sustainable Healing Models

- Train-the-trainer
- Capacity building
- Evaluation methods



Closing: Storytelling

Closing Circle



Final reflections



Commitments to action

Closing Circle (Activity)

- Interactive exercises
- Role plays
- Peer feedback





PERSONAL PLANNING

PROGRAM DEVELOPMENT

Next Steps



ONGOING EDUCATION

Acknowledgements



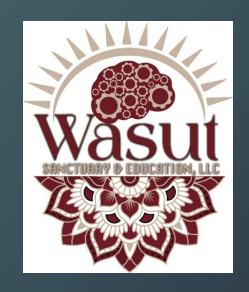


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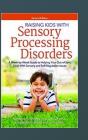
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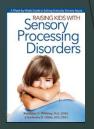
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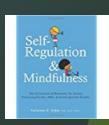
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