



Paddling toward shore

Northwestern tribe takes a new/old approach to stemming the Native health care crisis

KITSAP PENINSULA, WASHINGTON

Near the shore of Agate Passage, where the silver waters of Puget Sound narrow, five Suquamish girls sit in a circle stringing glass beads. Red, blue, white, blue: A necklace slowly forms. The teens wear dark eyeliner and hooded sweatshirts, but they bead much as their great-great-grandmothers did, 150 years ago. The words of their conversation, however, are harder and sharper than beads, and they are strung on the dark wire of experience.

“She cut herself three times with a paper cutter,” says Lauren, age 14. Her hair shines like crow feathers as she casually describes what happened today at Kingston Middle School — another suicide attempt by a tribal member. “The blood was all dripping everywhere, and then she went to the office.”

Sixth-grader Ashley adds that her older brother took a bunch of pills recently in an effort to “suicide himself.” Another girl mentions her time in foster care, her mother who lives in Montana and the aunty with whom she lives now. Eventually, the talk rises above such heaviness, turns into teenage giggles about boys, cell phones and the preppy kids at school. But the reality these girls face is tough — harder than the ground they sit on here, at their tribe’s historic winter village in the heart of this scattered reservation.

Young Native Americans today grow up in the shadow of staggering health statistics. In-

dians are two to three times more likely to commit suicide and six times more likely to die of alcoholism than the general population. Native youth are twice as likely as other Americans to die before the age of 24. If and when they do get sick with a mental or physical illness, the health-care services available to them are mediocre at best.

The Indian Health Service is underfunded and dysfunctional. In late July, congressional investigators discovered that the government agency had lost at least \$15.8 million worth of equipment and tried to cover it up by falsifying documents. The report reiterates what is common knowledge: The agency often spends its budget far ahead of schedule and simply can’t provide adequate health care.

As a result, the Health Service can provide little more than emergency care and is unable to provide ongoing, quality psychiatric treatment, according to a 2003 report by the surgeon general. Some Native Americans must travel over 90 miles one-way to see a professional; waiting lists can be six months long. Since Native Americans are twice as likely to live in poverty as average citizens, few can afford private health insurance. Government reports describe the state of health care in Indian Country as “inadequate” — “a quiet crisis.” Others use stronger language.

“This is a black eye on the face of the country,” says Michelle Singer of the Portland, Ore.-based One Sky Center, Indian Country’s first national substance abuse and mental

health center. The federal government, she points out, agreed to provide health care to Native Americans as part of treaty agreements. “There’s this very wrong perception in America that all Indians are rich because we have these great casinos and shouldn’t get funding for our programs, but Indian gaming isn’t the panacea. The U.S. has a legal and moral obligation to provide quality and adequate health care to the first Americans.”

Yet the lack of funding has inspired some creative thinking. Sick of waiting for federal help, a handful of Northwestern tribes have spent the past several years working to improve young people’s health using a novel approach: bolstering immunity to addiction and mental illness with traditional values and tribal customs. A genuine connection to their culture, something that money can never buy, might prove the best defense for Native youth like these Suquamish girls.

IN THE SOUTHERN Lushootseed language, “Suquamish” means “place of clear salt water,” which serves as a sort of verbal map to Agate Passage by canoe. For decades, however, the map was lost; federal laws created to assimilate tribes into white culture made it illegal to speak Lushootseed or even carve a canoe. Native children from reservations were shipped off to boarding schools to learn English and Christianity — to “kill the Indian, not the man,” as Capt. Richard Pratt, the founder of one of the

first boarding schools, put it.

Most Suquamish children, many as young as 3 or 4 years old, were sent to the Chamawa Indian School in Salem, Ore., nearly 250 miles to the south. If they spoke their language or practiced traditional ceremonies, the nuns who ran the school would slap their hands with rulers, beat them or lock them in the basement, according to Suquamish elders whose stories are now displayed in the tribal museum.

“The thought was to send them far enough away so that they didn’t know how to get home,” says 50-year-old Barbara Lawrence, whose father was sent away with all 12 of his siblings. Nine of them died at school, most likely from flu and tuberculosis epidemics. Lawrence, whose dad died when she was 4 years old, believes boarding school broke her uncle. “He struggled with alcoholism his entire life. Truly he suffered greatly. He did not raise his children well. But what comes before drugs and alcohol is despair. The truth is, they decimated the culture, and now we have the pieces to pick up.”

Though the last of the residential schools closed by the 1950s, their traumatic legacy has been passed down by parents who never learned how to properly care for their children or cope with their experience.

“They didn’t learn how to create boundaries, they don’t teach boundaries to their kids, there’s not consequences for actions and then, well, instead of a 2-year-old having a temper tantrum, you have an 18-year-old raping a neighbor,” says Lawrence, her voice collapsing. She believes that her home is one of about three on her block that is alcohol-free. “Multigenerational dysfunction makes it a very scary place to grow up. There’s a basic uncertainty in children’s lives. Is my mom gonna be happy or sad tonight? Are the lights going to be on or off?”

For Native youth, instability at home is often compounded by the racism that still thrives outside the reservation. Fueled by conflicts over tribal rights to salmon fishing and geoduck hunting, negative stereotyping persists in Kingston, the mostly white community near Agate Passage where Suquamish children go to school.

“These white girls at my school, I used to be friends with them, but they make fun of me and my culture. They said, ‘Natives are so dumb,’” says Cara, 11, looking down at her hands. “I’m a good student, but it made me feel so sad. I don’t hang out with them anymore.”

Racism makes kids feel separate and erodes their self-esteem, says Chuck Wagner, who grew up on the reservation and who once headed the Suquamish Wellness Center. In the late 1990s, Wagner realized that Suquamish youth, looking for a way to belong, had begun mimicking gang culture. Alcohol and drug use became a rite of passage into adulthood. Wagner was desperate to find a way to help these at-risk kids, but the medical literature only offered programs that had nothing to do with the specific circumstances of rural reservation life and its history.

“We needed something that came from our community,” says Wagner. “It’s about getting back to the roots of the tribe. It’s about sovereignty. It’s about the same reason why people in Montana can better manage their lands than

someone in D.C. telling them how to do things. We can develop something better right here in the community.”

And there, staring Wagner in the face, was a thousand-year-old solution.

FOR CENTURIES, THE WATERS of Puget Sound were the highways of the Northwest’s tribes. Canoes — used to fish, travel and hunt whales — were the tools that sustained life. It requires more than good paddling abilities to steer a canoe through fog, rain and the inevitable swells: You also need the inner strength to manage a stressful journey. Before you harvest the cedar to build canoes, you have to know the prayers and ceremonies to ask permission of the tree spirits. When you travel to other tribes’ lands, you must bring stories and dances and songs to share upon arrival. And the kicker: You would never paddle a canoe drunk or high and risk endangering everyone in the boat. Traveling by canoe, in other words, requires the skills necessary to navigate life as a Northwest Native American.

Over the past two decades, in order to reconnect to the old ways, tribes throughout the Northwest have held annual intertribal canoe journeys. In late 1999, Wagner and a handful of other Suquamish joined in the annual paddle; he was struck by the pride and sense of belonging he witnessed in the kids who participated.

“I realized we had this practice that was thousands of years old to keep us healthy. It just hadn’t been recorded by the Western world to say, ‘Hey, this works,’” says Wagner, who now lives on Saint Paul Island, Alaska. “But the canoe journey only happens once a year, and we’ve got 12 months of problems. We needed to keep it going all year round.”

Working with researchers at the University of Washington and a grant from the National Institutes of Health, the Suquamish have spent the past three years developing a life-skills curriculum modeled on the canoe journey. The manual teaches communication skills, goal setting, and how to lead mentally and physically healthy lives by weaving in traditional Suquamish stories and cultural values. Kids like Ashley and Lauren learn more than beading; they build drums, identify native medicine plants, and learn the Lashootsee language and traditional storytelling. Each youth also chooses a mentor to help guide her through the rough waters of life.

Before federal and state agencies agree to fund other tribes to adapt the Suquamish framework for developing life-skills programs, the curriculum will need to be scientifically proven effective. Last July, the National Institutes of Health gave the Suquamish and the University of Washington another five years of funding to empirically evaluate it. While it’s too soon to know whether the program achieves its desired outcomes — supporting Native teens’ sobriety, confidence and cultural identity — the academics and tribes involved put great stock in its unique formulation.

“In the past, we saw a lot of helicopter research where researchers would drop in, gather data and leave, never to be heard of again, without taking the time to understand the community or their specific values and



Canoes from a number of tribes (left) rafted together as they arrived at Point Julia near Port Gamble as part of the 2008 Tribal Journeys Canoe Voyage. Franklin Joe, 15, center (above), from the Tsawout nation of Victoria, British Columbia, Canada, is among the crew members raising their paddles to be welcomed onshore at the Suquamish boat ramp for the 2006 Intertribal Canoe Journey. CAROLYN J. YASCHUR AND LARRY STEAGALL, KITSAP SUN

traditions,” says Lisa Rey Thomas, a scientist at the University of Washington’s Alcohol and Drug Abuse Institute. “In this case, we’re here to partner with the tribes for the sake of what they think will bring the most benefit.”

THE TULALIP RESERVATION nestles on a purse-shaped bay, about a daylong paddle across Puget Sound from Agate Passage. The Tulalip and a half-dozen other Northwest tribes have adapted the Suquamish’s Healing of the Canoe curriculum to reflect their own specific stories and artwork.

“This isn’t just for Northwest tribes,” says June LaMar, a psychologist who helped write both the original manual and adapt it for the Tulalip. “All tribes have stories around journeys that can be adapted. Some, like the Sioux, have horseback journeys. My tribe in California is a high-desert people, and we took annual journeys to the mountains to find food and water to sustain us through the winter. We can fit this framework for other people; we just need to know their stories.”

In the meantime, Portland’s One Sky Center
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has posted the various class materials on its Web site in hopes that the framework will be adapted by other tribes throughout the West.

“If we don’t learn our culture and values and incorporate them into our life, we won’t be a tribe anymore,” LaMar says. “That’s what this is about. We have to make sure we don’t lose that because it’s who we are.”

Native drums and chanting spill out the door of a trailer not far from LaMar’s office on the Tulalip. Inside, people gather to prepare for this summer’s upcoming canoe journey: An older woman sits at a sewing machine, adults cut vests and dresses from red and black cloth, while a handful of teens and younger kids sort through stencils and hold out their arms to be measured. Shaula, 13, did the life-skills course after school two years ago. Today, she’s cutting red fabric for

the regalia she’ll wear to dance and sing during this summer’s journey. Self-assured, she says that even though a lot of kids at her school — the one off the reservation in Marysville — smoke pot and take pills, she has no interest in such things.

“It’s a thing of pride to be able to say you’re drug and alcohol free,” says Shaula, as she considers whether to use a sun or hummingbird symbol to decorate her dress. An enrolled member of both the Tulalip and Suquamish tribes, she spends a lot of time after school practicing her dance steps for the ceremonies and training for the long hours she’ll spend paddling a canoe later this summer. “When you’re involved in cultural activities, you’re connected to something bigger than yourself, and it helps somehow. I mean, when you’re putting your heart and soul into something, why would you want to mess it up?” □

The names of all minors in this story have been changed.



Edgar Martin, 11, of Suquamish carries a paddle ashore at Point Julia in Little Boston during the 2008 Tribal Journeys Canoe Voyage. CAROLYN J. YASCHUR, KITSAP SUN