

Reconsidering American Indian historical trauma: Lessons from an early Gros Ventre war narrative

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Abstract

Professional clinicians and human services providers are increasingly attributing the mental health problems of American Indians (AIs) to *historical trauma* (HT). As an alternative to established psychiatric disorders, AI HT was formulated to explain enduring mental health disparities as originating in tribal experiences of Euro-American colonization. As a result, AI HT has been described as the collective, cumulative, and intergenerational psychosocial disability resulting from massive group-based oppression, such as forced relocation, political subjugation, cultural domination, and genocide. One objective of the HT construct is to frame AI distress and dysfunction in social and historical terms. Given widespread indigenous experiences of colonization, the debilitating effects of HT are presumed to affect most AI communities today. With this background in mind, I explore AI HT with specific reference to a “war narrative” obtained by an anthropologist in 1901 from an elderly Gros Ventre woman. In this account, Watches All described her participation in a historic intertribal battle, and her subsequent captivity and escape from the enemy during the late 1860s. This historical narrative references many first-hand experiences that would today be identified as traumatogenic. Interestingly, however, this account complicates several assumptions underlying AI HT, leading to vexing questions of whether Watches All’s ordeal actually qualifies as an instance of AI HT. No matter how one answers these questions, such ambiguity highlights serious theoretical confusions requiring elaboration and refinement if AI HT is to remain a useful construct in the behavioral health sciences.

Keywords

American Indians, historical trauma, mental health, narrative genres, postcolonial discourse

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My purpose here is to reflect critically on the widely circulating concept of historical trauma (HT) as developed for and applied to American Indian (AI) communities in the United States. It is important to acknowledge at the outset that my exploration on AI HT has been occasioned by the small but increasing corpus of scholarly publications—mostly by health and mental health researchers, many of whom are themselves AI—that has introduced, refined, and promoted this construct as a way to explain and understand the pressing psychosocial problems of AI communities (usually for reservation-based populations). Thus, I privilege the arguments of scholars in this essay, although I readily concede that HT has “taken off”—or rather, been “taken up”—by a wide swath of nonacademic and nonprofessional human services advocates and providers who labor in “Indian Country.” As a consequence, the discourse of HT has proliferated well beyond the rarified writings of scholars and no doubt now encompasses different meanings for different constituencies. No matter how important these nuanced distinctions may be, however, HT generally remains an important alternative—even populist—explanatory model posited to account for pronounced disparities in mental health status among contemporary indigenous peoples in the U.S. In response, I consider in this article several formidable complications of AI HT that arise from consideration of a first-person narrative of a Gros Ventre woman obtained by an anthropologist at the turn of the 20th century.

Reviewing key assumptions of American Indian historical trauma

Prior to introducing the narrative that will serve as the analytical foundation for this article, I first briefly review several important postulated qualities of AI HT. HT first appeared in the mental health literature addressed to AI community concerns in three publications in 1995 (Brave Heart-Jordan & DeBruyn, 1995; Duran & Duran, 1995; Terry, 1995).¹ The term itself was introduced in the AI mental health context by social work researcher Maria Yellow Horse Brave Heart. Brave Heart encountered extant notions of intergenerational trauma and unresolved grief reactions in relationship to the experiences of Jewish survivors of the Shoah (or “Holocaust”) during her psychoanalytic clinical training. Recognizing a link between the genocide of European Jews and the murder of unarmed Lakotas by the U.S. Seventh Cavalry at Wounded Knee in 1890, Brave Heart appropriated and refined this clinical concept for broad applicability to AI peoples as well. Specifically, she described HT as “a deeper and more pervasive communal loss, resulting from genocide, massive human trauma over generations, [and] loss of land to which [AIs] were spiritually and emotionally tied” (Brave Heart-Jordan & DeBruyn, 1995, p. 361). At the same time, Tewa/Apache psychologist Eduardo Duran and Opelousas/Coushatta public health researcher Bonnie Duran (1995) elucidated the term *soul wound*, the alleged “core” of indigenous suffering rooted in histories of colonial oppression. They observed that “the trauma of the loss of land, culture, and people has never been resolved, but has been anesthetized by

alcohol and other drugs. Native American people suffer from post-traumatic stress disorder as a consequence of the devastating effects of genocide perpetrated by the U.S. government” (p. 152).

Since these early introductions of HT (including the isomorphic term soul wound), Brave Heart, the Durans, and others have elaborated and refined this construct as a distinctive *explanatory model* (a set of beliefs, meanings, and expectations associated with a particular form of illness and its treatment [Kleinman, Eisenberg, & Good, 1978]); additional legitimacy for the construct was afforded by the development of an assessment measure for distressing thoughts associated with HT (Whitbeck, Adams, Hoyt, & Chen, 2004). It is beyond the scope of this article to trace these developments in comprehensive detail (for recent promotional overviews, see Brave Heart, Chase, Elkins, & Altschul, 2011; Duran, 2006; Evans-Campbell, 2008; Sotero, 2006; Walters et al., 2011), but instead I summarize here four attributes of HT that are relevant for situating the remainder of this analysis. First, HT is primarily a construct invoked in relation to *health status*—especially, *mental* or *behavioral health status*. This is evident from the professional training of the individuals who have introduced and promoted the term in relation to AI experiences (e.g., professional psychology, social work, public health), the domains of interest in which the construct is invoked for explanatory purposes (e.g., substance abuse, suicide, HIV/AIDS), and the publication venues in which such analyses have appeared (e.g., *American Journal of Public Health*, *Substance Use & Misuse*, *Transcultural Psychiatry*). Thus, at least in its scholarly forms, HT emerged from, depends on, and interacts with conceptual approaches and normative discourses in the health professions and the health sciences—e.g., the construal of grief processes from bereavement counseling, the language of “social determinants” from epidemiology—for its relevance, intelligibility, and appeal.

Second, HT is an elaboration and extension of an established psychiatric category, posttraumatic stress disorder (PTSD), as applied to AI circumstances and settings. PTSD is a recognized form of individual psychopathology that invokes a causal logic in which a psychologically overwhelming event or experience results in subsequent dysfunction or disability as centrally mediated through processes of individual memory. Since the inclusion of this disorder in the third edition of the *Diagnostic and Statistical Manual of Mental Disorders* in 1980, mental health professionals and researchers have come to presume that PTSD, though only recently “discovered,” has afflicted humanity from time immemorial—such *transhistoricism* has been challenged by cultural critics, however, who see in such claims an unwarranted effort to universalize historically contingent forms of experience (Young, 1995). Of greatest significance for the formulation of HT, however, is professional concern about posttraumatic pathologies that defy ready consolidation with PTSD proper. For example, Herman (1997) advocated for a “new diagnosis” that would capture additional complexity in posttraumatic distress that was overlooked or ignored by adoption of PTSD. So, too, is AI HT routinely described as a (context-specific) elaboration of PTSD (Brave Heart, 1999; Duran & Duran, 1995): in

contrast to ordinary PTSD, AI HT is asserted to be *collective* (i.e., afflicting entire AI families and communities), *cumulative* (i.e., compounding across multiple devastating experiences toward greater disability), and *intergenerational* (i.e., passed along from ancestors to descendants) in its contemporary impacts (for further review, see Gone, 2009, 2013).

Third, with reference to these distinctive attributes, HT is most clearly distinguishable from PTSD by its alleged intergenerational character. More specifically, advocates of HT propose that the traumatic experiences of past generations—when sufficiently intense or overwhelming, particularly for a *group* of people—endure over time to pose unique health risks and vulnerabilities for subsequent generations of their descendants. These risks and vulnerabilities have been described as “unresolved grief” (Brave Heart & DeBruyn, 1998) or the “historical trauma response” (Brave Heart, 2003). Postulated means for transmission of this intergenerational risk include a variety of proposed processes, ranging from the societal (e.g., impaired meaning-making in the face of overwhelming cultural devastation) to the interpersonal (e.g., disruptions in childrearing practices; Evans-Campbell, 2008). At an implicit level, however, some proponents appear to suggest an inherited vulnerability that is readily differentiated from commonplace instances of *overt* behavioral parent–child transmission of risk (e.g., for intergenerational patterns of child abuse, but see Thornberry, Knight, & Lovegrove, 2012); rather, the implication is that such vulnerability is passed along through *covert* processes described in the trauma literature as *secondary transmission*. Again with reference to the clinical literature on Holocaust survivors (Kellerman, 2001; Yehuda, Schmeidler, Wainberg, Binder-Brynes, & Duvdevani, 1998), the assertion is that vulnerability to disability in the face of stress is somehow passed along *independent of* first-hand experience of the stressors themselves (cf. Brave Heart, 2003). Although this phenomenon has yet to be empirically established in the clinical sciences, the recent gesturing toward, say, epigenetic mechanisms to account for intergenerational susceptibility to AI HT indicates clear theoretical interest in these alleged processes of secondary transmission, perhaps via biological mechanisms (Walters et al., 2011).

Finally, proponents of AI HT are unambiguous in their assertions that historical instances of oppression, colonization, and genocide by Europeans are properly designated as the principal causal factors for explaining contemporary AI community-based health and mental health disparities. Indeed, whatever else might be observed about AI HT, the construct was formulated to account for the downstream psychosocial effects in “historically oppressed communities” (Evans-Campbell, 2008, p. 320) of harmful actions that were “perpetrated on a group of people (including their environment) who share a specific group identity (e.g., nationality, tribal affiliation, ethnicity, religious affiliation) with genocidal or ethnocidal intent (i.e., annihilation or disruption to traditional lifeways, culture, and identity)” (Walters et al. 2011, p. 181). In short, proponents of AI HT construct an unambiguous dichotomy between *European perpetrators* of horrific oppression on one hand and *victimized indigenous groups* who have been assailed with malevolent intent on the other. Beyond nearly ubiquitous references to genocide, these

oppressive experiences are further posited to include violent conquest, reservation confinement, religious repression, coerced assimilation, and ongoing poverty and discrimination. The construct of HT consolidates such experiences within an explanatory model designed to make plain the *chain of causality* linking *past oppression* to *current dysfunction*: although the deleterious effects of ongoing domination are acknowledged as well, the construct of HT clearly emphasizes the persecution of *prior generations* (otherwise, historical events need never enter into causal consideration). In my reading of this literature, the causal force attributed to AI HT is asserted by most proponents as not just metaphorical, narrative, or discursive in origin but rather literal, material, and embodied, affording explanatory power beyond the “classic social determinants of health” for a single life course (Walters et al., 2011, p. 180).

With this theoretical background in mind, I will endeavor in the remainder of this article to, first, introduce an illuminating narrative into scholarly consideration of AI HT, and then to trace some formidable complications stemming from this narrative that challenge the coherence and viability of this increasingly popular construct.

Watches All's war narrative

In 1901, the American anthropologist Alfred Kroeber undertook several months of fieldwork among the Gros Ventres, a northern Plains tribal group then numbering less than 1,000 individuals on the Fort Belknap Indian reservation in north-central Montana. Kroeber's interest during this visit appears to have been comparative: alongside substantial fieldwork among the northern Arapaho of Wyoming, he wished to document the cultural forms—both shared and distinctive—that had emerged over time for each of these closely related peoples. In his subsequent report on the Gros Ventres, Kroeber (1908) included a section addressed to 19th-century warfare. The bulk of this section is comprised of the first-hand war experiences of three individuals, Black Wolf, Bull Robe, and Watches All. Watches All's narrative stands out from the other two—and indeed from the “coup tales” recorded from various Plains reservations throughout these years—because Watches All was a woman. Estimated by Kroeber to be “probably a little older” than sixty years of age in 1901, Watches All recounted her role in the historic 1867 excursion by Gros Ventres and their allies against the Piegans east of the Cypress Hills in present-day Saskatchewan (see also H. A. Dempsey, 2003). Grinnell (1908) recorded additional details about this encounter in 1891 from three Piegan participants of the battle, through which he learned that all but one of the Piegan bands were camped together during late summer when the Gros Ventres attacked. The outcome was a rout in which Piegan warriors killed 300 of their Gros Ventre assailants during their chaotic westward flight. Warfare on this scale and with such one-sided casualties was quite exceptional in late 19th-century Plains Indian conflicts, and the Piegans subsequently commemorated this battle in an elaborate petroglyph that can be viewed today in southern Alberta (L. J. Dempsey, 2007).

Watches All's narrative of her experiences following this encounter—presumably obtained by Kroeber in English (see Kroeber, 1907, p. 59, n. 1)—comes to just under 3,000 words in published form (Kroeber, 1908, pp. 216–221). In it, she recounted her capture and escape from the Piegans, and her eventual return to the Gros Ventre camps. The entire ordeal consumed almost a year of Watches All's life (when she would have been about 30 years of age). Her account began with the explanation that she initially joined the Gros Ventre war party because her mother scolded her for gambling away her beads. The party ventured northward in search of Piegan camps, during which time her mother arrived with a horse for her to ride. On reaching the mountains, the scouts ascended and spotted an enemy camp in the distance, and so the party made preparations for battle. Ignoring the warnings of a “ghost” summoned that night for counsel, the entire party proceeded the following morning to engage the Piegans. A prominent Piegan leader and his wife were discovered outside the camp and killed. Then, two more Piegan men were similarly dispatched, though one first stabbed a member of the party “making a hole large enough to breathe through. We tied him around with gunny sacks.” By this time, Piegan forces had joined the fray: “I saw more people than ever before. They came like ants, and the smoke hung as over a smelter. Two of the Gros Ventre drove all of our party, even the women, against the Piegan to make them fight.” Watches All witnessed a fierce battle unfold, in which the Piegans had the upper hand. Ultimately, the Gros Ventres retreated, with those who were mounted withdrawing quickly even as those on foot were overtaken and slaughtered.

Watches All shared a mount with another woman during this flight. Their horse stepped into a hole, throwing the woman but carrying Watches All forward until it got tangled in its own bridle. A Piegan warrior raced toward Watches All and “struck me with his gun. Then he took my wrist, and I dismounted as he did. Another one came, and, after striking me too, took off my bead necklaces.” Instead of killing her, the first warrior brought her back to the Piegan camp, traversing some 30 miles over which Gros Ventre corpses were strewn. They arrived by mid-day, at which point “Everybody struck me. All day they came and hit me, and one man hit me on the forehead and nearly killed me. A Piegan woman tied up my head.” They stripped her of her elk-tooth dress, and then convened the captives to determine whether Gros Ventres had been responsible for disrespecting the corpse of their prominent leader, “who had been found in an indecent position with his wife.” Meanwhile, Watches All's mother had escaped the battle and returned home without her daughter. Upon learning that Watches All had been captured by the Piegans, her father instructed his wife to “Go and bring my daughter, or I will kill you.” Thus, her mother returned to the Piegan camp in search of Watches All, whereupon the man who had captured Watches All—a warrior named No Chief—declared that her mother's life was to be spared and that he would take Watches All as one of his wives; another Piegan took her mother as a wife. Shortly thereafter, a conflict erupted between the two men who had originally captured Watches All as to which of them held legitimate claim to her. During the dispute, Watches All attested to No Chief's claim: “Then the other one tried to kill

me. Some Piegan women hid me.” Soon thereafter the Piegans broke camp. Under No Chief’s vigilant protection, Watches All was sheltered from the “many people who wanted to kill me.”

At the new camp, No Chief arranged for Watches All and her mother to flee on horseback, but the plan faltered. The following morning a grieving man called for the Gros Ventre captives to be killed, “crying, ‘Bring out all the captives. I will put them on my son’s grave.’ Then the women hid me. The other Gros Ventre captives were also hidden. Fourteen of them were saved, but four were killed.” The spoils of victory were then publicly displayed and war honors conferred on the Piegans who had earned them. By now, No Chief explained to Watches All that “if anyone wants to buy you from me, I will sell you.” A new man exchanged Watches All for two horses, and kept her safe from those who “still tried to kill me.” The band subsequently arrived at a fort on the Yellowstone River, where U.S. soldiers asked the Piegans to “sell them all their slaves.” In the face of internal disagreement about this prospect, none of the captives were “sold.” Instead, Watches All found a functional role in her new husband’s household: “I always took care of my husband’s little boy, and did my work, and got along well.” A White man offered to buy her from her husband. Watches All dissuaded the man because she “wanted to return home” and, fortunately, her husband did not accede to the sale. During this time, another female captive negotiated for her release, departing “after tanning ten hides” for her husband. Watches All wintered with the Piegans, and recounted various details of her band’s movements and activities. Then, an incident related to the stinginess of her mother’s husband led the man’s Piegan wife to advise her mother that “You and your daughter are living poorly. You had better run off.” The women fashioned an escape plan that was nearly thwarted: “Then my husband whipped me because he thought that I would run off. He told me not to sleep all night, but to sit up straight. Toward morning, while my two sisters slept, I ran out.”

She found her mother and together they journeyed stealthily away from the camp, hiding during the day and traveling on foot through thunderstorms at night. Careful to avoid other people along their eastward journey, they soon reached the Missouri River. They witnessed occasional steamboats moving along the river, one of which was headed upstream to the west: “My mother wanted us to get on it and go back to Fort Benton, as she wanted to sell me to the whites. Then I held my mother fast in the brush, for I did not want to go.” Knowing that Piegans frequented the fort, and fearing recapture, Watches All forcibly resisted her mother’s wishes: “I got out my knife and tried to kill my mother, because I did not want to go.” With one robe between them and their moccasins wearing away, they continued downriver, avoiding a slumbering bear. Then another steamboat arrived, stopping nearby. They saw a Gros Ventre and a Crow woman aboard, and called out. The boat ferried them across the Missouri to a saloon and store where some Crows were camped. The Crow women received them compassionately, and the storekeeper and an Army officer provisioned them with whiskey and food. The Gros Ventre woman they had met on the steamboat was the storekeeper’s

wife, and together they ventured away from the settlement to harvest cottonwood sap. While out, they encountered a party of hostile Sioux and ran for their lives back to the store. The Sioux subsequently killed a White man who was out sawing wood for the steamboats and “laid this man in the fire and burned him up, so that only his legs were found.” Later, once her mother became weary of staying at the settlement, they departed in the company of the Gros Ventre leader Bull Lodge, trailing along the Milk River until Watches All arrived safely home to the Gros Ventre camps.

Clearly, Watches All’s war narrative is rife with happenings that would be readily classified today as traumatogenic. Indeed, contemporary mental health professionals would likely presume that she suffered from PTSD as a consequence of these experiences. With regard to AI HT, however, the interesting question here is not the likelihood of diagnosable PTSD (or even the larger question of the trans-historicism of the PTSD construct), but rather the downstream determinants of current health and mental health disparities among Watches All’s descendants 145 years later (although it is important to note that causal accounts of intergenerational transmission—especially those that are materialist or biological—would seem to actually depend on bona fide ancestral experiences of pathological traumatic reactions). In short, the central question is whether Watches All’s 1867–1868 captivity among the Piegans qualifies as a bona fide instance of AI HT relative to its contemporary impacts.

Implications for American Indian historical trauma

Regrettably, Kroeber (1908) provided almost no sociolinguistic context for grounding an authoritative contemporary interpretation of Watches All’s narrative. He provided no information, for example, as to the conditions that might have occasioned Watches All’s account or the audience that may have been present for the telling (and its reactions as they listened to these words). The only frame suggested in the text is the narrative’s appearance alongside the two men’s accounts of their battle exploits under the heading “War Experiences of Individuals.” Even in the absence of such desirable contextual information, however, Watches All’s account seems surprisingly accessible, perhaps deceptively so. Especially for those engaged with the mental health field, it would be difficult to overlook the salience of various happenings in her narrative that might be classed as *traumatic stressors*. Traumatic stressors are events or occurrences that may result in psychological trauma for those who experience them. One widespread measure of such experiences in state-of-the-art psychiatric epidemiology assesses respondent reactions to 30 kinds of traumatic stressors, including the usual and expected experiences of combat, rape, assault, and disaster, as well as perhaps less obvious occurrences such as exposure to toxic chemicals, stalking, or the sudden unexpected death of someone close to the respondent (Mills et al., 2011). Of course, whether any given individual actually develops posttraumatic pathology in the wake of such experiences varies as a function of multiple intersecting risk factors. Nevertheless,

the best available evidence indicates that AIs today suffer from disproportionately high rates of lifetime exposure to trauma (as high as 69.8%) and lifetime PTSD (as high as 22.5%) relative to the U.S. national population (with highs of 60.7% and 9.1%, respectively; Beals et al., 2005; Manson, Beals, Klein, Croy, & the AI-SUPERPFP Team, 2005; Pole, Gone, & Kulkarni, 2008; for a critique of PTSD diagnoses among AI populations, see Waldram, 2004).

In the specific case of *Watches All*, her account of captivity and escape contains references to multiple classes of currently recognized traumatic stressors. Combat, of course, is a prototypical traumatic stressor, which she experienced first-hand once the outnumbered Gros Ventres drove “even the women” to fight against the Piegan onslaught. Captivity is also classed as such an experience, which she endured for around nine months or so. During her captivity, *Watches All* was physically assaulted on multiple occasions (e.g., on her arrival to the camp, “everybody struck me; all day they came and hit me”) with one man rendering her a blow so forceful that she nearly died. She lived in mortal danger for some time following her capture, so much so that her first Piegan husband evidently grew weary of trying to protect her. She was married to men who obtained that right through capture or purchase; although *Watches All* did not mention sexual violation, this was not unheard of among captive women on the northern Plains during this period (H. A. Dempsey, 2003). Her eventual escape in the company of her mother many months later placed her at the mercy of the elements in the face of increasingly desperate deprivation (with food, water, and clothing in short supply). During this sojourn, serious conflict erupted between the two women when it became clear that *Watches All*’s mother wished to “sell me to the whites”; her attempt to kill her own mother likely prevented her return to captivity. When at last they enjoyed the relative security of a trading post, she was nearly chased down by a Sioux war party that subsequently murdered and mutilated an associate of the settlement. Thus, upon her eventual return home, *Watches All* may well have contended with psychological difficulties in the wake of these experiences from then until her death some four decades later.

Again, however, the construct of AI HT is superfluous for reflecting the post-traumatic distress evident in the lifetime of a single individual; indeed, the mental health professions already recognize PTSD as an established means for identifying and describing this. Rather, HT was intended to delineate the contemporary impact on living AIs of the traumatic experiences of their ancestors. Thus, if the legacy of the Holocaust might be passed along to children of survivors as evidenced by increased vulnerability to psychiatric problems—above and beyond the usual “social determinants” experienced first-hand by these descendants through unspecified processes of secondary transmission—then based on the formulation of AI HT as described by its proponents it is at least reasonable to consider what intergenerational impact a 9-month period of captivity may have had on *Watches All*’s living descendants some five to seven generations later. In sum, the case of *Watches All*’s war experiences—regardless of how anomalous these may have been relative to the lives of Plains Indian women more generally at that time—invites scrutiny *at the*

conceptual level as to whether such experiences, taken together, might indeed qualify as an instance of HT that merits serious consideration as an explanation for contemporary distress among AIs today. In this regard, Watches All's ordeal appears to depart in substantial ways from the stock exemplars of AI HT, complicating extant conceptualizations of this construct in formidable ways (at least as it has been formulated and promoted thus far by its scholarly advocates). In the remainder of this article I will consider four domains of AI HT in which these complications arise, subsequently tracing the resultant implications of these for the coherence and viability of the construct.

Contingency

The first complication for extant conceptualizations of AI HT to emerge from Watches All's captivity raises the question of the *historical and cultural contingency* of traumatic stressors. More specifically, it is possible that the various experiences described by Watches All—despite their seemingly obvious detrimental impacts when viewed from the perspective of contemporary mental health professionals—were perhaps much less traumatizing than present-day theorists might imagine relative to what may have been considered the range of usual human experience in that time and place. After all, indigenous existence on the northern Plains during the 19th century was well acquainted with adverse climate, intermittent hunger, epidemic disease, and routine warfare. In short, life was difficult. As a consequence, cultural values associated with demonstrations of endurance, fortitude, hardiness, mastery, and vitality were shared by many AI peoples, including Gros Ventres (Fowler, 1987; Gone & Alcántara, 2010). In response to the question of traumatic sensibilities, then, I propose that substantial historical and cultural contingency shapes the interpretive significance of these kinds of events for one's life: just as proponents of PTSD commit a transhistorical error by projecting the diagnosis back into human history (Young, 1995), so too do proponents of AI HT when projecting psychological trauma back into the experiences of people from earlier centuries. One avenue into the implications of this contingency for the construct of AI HT can be accessed through a ready comparison of recognizable narrative genres.

Certainly, one can frame Watches All's account as an instance of trauma narrative akin to the clinical vignettes solicited by modern psychotherapists. On this reading, report of her captivity and escape exemplifies a genre of first-person narration of traumatic experience that emerged from and depends on psychiatric understandings of PTSD and dominant global discourses surrounding psychological trauma (Fassin & Rechtman, 2009). Other indigenous examples of this genre include the emerging "residential school survivor" narrative among some Canadian First Nations communities (Darnell, 2006). But, of course, other interpretive frames are available for making sense of Watches All's account, including the one suggested by Kroeber (1908) himself, namely, the war narrative or "coup tale." Whatever additional purposes these first-person accounts of war exploits

might have served (see Gone, 2011), such coup tales were unmistakable celebrations of mastery and survival in the face of overwhelming dangers. Interestingly, even in their modern-day form, such tales of triumph over the enemy have been analyzed in terms of their therapeutic functions (O'Neil, 1999). Thus, two kinds of readings immediately suggest themselves for *Watches All's* captivity narrative—and both have been associated with therapeutic benefit—but each has radically divergent implications for selfhood vis-à-vis agentic mastery and personal vulnerability. Such interpretive relativity as it intersects with the construct of HT suggests that the very grounds for alleging or inferring traumatic experience in AI historical contexts is shifting and unstable, undermining confidence in post hoc attributions of traumatization as reliable explanations for contemporary AI community problems (unless one adopts a metaphorical or discursive account of HT that truly emphasizes contemporary meaning-making rather than historical transmission of intergenerational risk). Unfortunately for proponents of AI HT, the prospects for circumventing the historically and culturally myopic projection of what appear to be contingent sensibilities about the nature of traumatic experience into the past are so limited that it remains unclear when and how to validly apply the construct.

Recency

The second complication for extant conceptualizations of AI HT to emerge from *Watches All's* captivity raises the question of temporal *recency*. More specifically, it is possible that the events of 1867–1868—recollected and recorded in 1901—are too historically distant, such that the intergenerational impact of these experiences would be expected to have attenuated substantially during the ensuing 145 years. If the comparison is the index traumas of victims of the Holocaust during the 1940s (some of whom are yet living), or even of survivors of Wounded Knee in 1890 (some of whose grandchildren may yet be living), then the ordeal of *Watches All* is at least another generation earlier, with any living descendants likely counting her as an ancestor from 5–7 generations back. In response to the question of intergenerational proximity, then, I note that the attribution of HT is usually applied to AI communities *in general*, with reference to the entire period of European contact and colonization and without concern for specifics such as historical distance or timing. Indeed, Pequots in Connecticut are implicitly classed with Gros Ventres in Montana as subject to the vulnerabilities of HT, despite distinctive histories of European encounter that unfolded in entirely different centuries. For example, at the height of the Pequot War in 1637, a Puritan militia massacred this group at their fortified village of Mystic, selling off the survivors as slaves. These events nearly eradicated the Pequots as a people, leaving only a few score of identifiable descendants by the turn of the 20th century (Cave, 1996). In contrast, the Gros Ventres never experienced armed suppression by European or Euro-American military forces, and succumbed to reservation life only after the northern bison herds faltered in the early 1880s (Flannery, 1953). Thus, although nearly 250 years passed

between some of the most calamitous events in these respective peoples' histories, both populations today—simply by virtue of their identifying as AIs—are presumed to suffer from AI HT.

As a consequence of the paradoxical a-historicity that thus seems to characterize AI HT, two opposing conundrums become clear. First, the events of 1867–1868 as reported by Watches All do not appear to be all that historically distant after all, at least in comparison to the tribulations of more eastern tribal groups who confronted European colonizers much earlier than did the Gros Ventres. In short, if Watches All's captivity is too historically removed to yield intergenerational impacts on her descendants today, then the same must be accepted for perhaps the majority of tribal communities throughout the present-day United States that have grappled with the devastating impacts of colonization for much longer than the Gros Ventres. This "statute of limitations" concerning the intergenerational impacts of HT suggests the need for a fairly radical refinement of the HT construct that would appear to limit its applicability to only a subset of AI populations with more recent histories of conquest and subjugation; however, none of its proponents has yet to suggest such a sweeping qualification. Second, if anything, these proponents theorize the opposite: namely, that the impacts of colonization are likely to reverberate through subsequent generations *more or less indefinitely* until *active healing* from these traumas eventually occurs. For example, Brave Heart (2003) noted that "generations of *untreated* [emphasis added] HT victims may pass on this trauma to subsequent generations" (p. 9), while Evans-Campbell (2008) observed that "trauma, like a wave, continues to roll forward over generations. . . . To stop this forward momentum, some form of social healing in which the loss is mourned and perhaps replaced by something new. . . . may be called for" (p. 329). Unfortunately, proponents of AI HT have yet to propose any plausible causal mechanisms that could even in principle result in increased risk and vulnerability over time without acknowledgement of finite limitations on the number of subsequent generations presumed to be impacted.

Complexity

The third complication for extant conceptualizations of AI HT to emerge from Watches All's captivity raises the question of *traumatic complexity*. Such complexity—one of the original criteria driving the need for an alternative disorder to PTSD—is perhaps best conceived of as the intersection of frequency, intensity, and duration of traumatic experiences that, in the context of AI HT as theorized by its proponents, would be expected to compound over time and across generations into formidable legacies of disability and distress. More specifically, it is possible that the traumatic stressors described by Watches All were not complex enough—that is, intense, frequent, or chronic enough—to place subsequent generations of her descendants at risk for mental health problems. After all, she recounted the happenings of less than one year of her life and, despite reports of a variety of seemingly distressing experiences during this time, perhaps these in and of themselves would not

be expected to have compounded in the manner designated by the HT construct. In response to the question of intensity/frequency/duration, then, it is important to contextualize Watches All's life more deeply. For one thing, the variety of presumed traumatic stressors to which she was subject during her captivity and escape, as well as the many-month duration of this experience in total, already stands in marked contrast to many of the prototypical "one-off" traumatic experiences familiar to PTSD experts, such as natural disasters, sudden unexpected death of a loved one, and so forth. In comparison, then, the travails of Watches All certainly seem *relatively* complex. For another thing, despite the fact that additional details of her experiences do not appear in the historical record, it is possible to reconstruct other presumed traumatic stressors that she—and her Gros Ventre kin—were subject to during her lifetime. In this regard, the decade of the 1860s appears to have been particularly devastating for the Gros Ventres.

For example, in a population estimated at less than 3,000 individuals prior to the late 20th century, it is documented that 160 Gros Ventres died of measles in 1865, 300 died at the hands of the Piegans in 1867, and another 741 died of smallpox in 1869 (Fowler, 1987). That sums to a loss of some 1,200 people—over a third of the population—in a single 5-year period. Moreover, by 1895 (when Watches All was still living on the Fort Belknap reservation), the Gros Ventre population declined to just 595 people as a function of desperate living conditions (Flannery, 1953). Presumably, the sorts of tragedies reflected in such precipitous population decline over these decades—considered in their totality—reach the threshold of frequency, intensity, and duration to have resulted in the intergenerational compounding posited by the HT construct. Alternately, to the degree that the compounding of AI HT additionally depends on ongoing instances of traumatic experience for subsequent generations of descendants, then likewise there is no shortage of the kinds of candidate stressors explicitly mentioned by proponents of AI HT during the Gros Ventre reservation period as well (e.g., economic exploitation, religious suppression, mandated boarding school attendance). By this account, Watches All's captivity and escape—taken as a single set of events from an individual life that nevertheless both expresses and constitutes a *pattern* of community hardship over time—would appear to qualify under established descriptions of AI HT as sufficiently complex to have impacted her descendants over time. Nevertheless, this conclusion remains debatable, revealing a substantial problem with the criterion of complexity for the construct of AI HT. Specifically, proponents of AI HT have invoked these experiences without bothering to differentiate the various combinations and qualities of historical stressors that respectively would and would not be expected to predispose subsequent generations to increased risk and vulnerability (as opposed to confining their impacts to a single life trajectory as currently codified by PTSD proper).

Colonialism

The final complication for extant conceptualizations of AI HT to emerge from Watches All's captivity raises the question of imputation of *colonial oppression*.

More specifically, it is possible that Watches All's ordeal should not be construed as an instance of AI HT because her captivity by the Piegans—in stark contrast to the Mystic village massacre or Wounded Knee—was not a clear-cut instance of mass violence inflicted by colonizing Europeans. Rather, Watches All's captivity resulted from an aggressive campaign by the Gros Ventres against the Piegans for which the Gros Ventres were obviously accountable agents. In response to the question of colonization impact, then, it is important to recognize certain interpretive ambiguities that emerge from two separable issues, one concerned with the nature of “perpetration” and the other concerned with the nature of colonialism. Regarding the nature of perpetration, it must be acknowledged that Watches All appears to have made an intentional decision to join the Gros Ventre forces as they rode to war against the Piegans. As a consequence, some might hastily dismiss Watches All's captivity as a source of bona fide traumatic stressors that could be folded into an account of AI HT. Nevertheless, it is only fair to acknowledge that Watches All's personal role in this battle was not one of decisive responsibility relative to its prosecution. Moreover, even if it had been, modern psychiatric understandings of posttraumatic pathologies recognize that active instigation of violence—including the actual perpetration of atrocities—can be a potential form of traumatic stress for violent agents, particularly in warfare (see Young, 1995, for examples among U.S. veterans of the Vietnam War). In short, there remains marked ambiguity about whether Watches All—and by extension, Gros Ventres more generally—can be properly construed as having been traumatized by the outcome of their failed attack on the Piegans during the late summer of 1867.

Regarding the nature of colonialism, it is ambiguous whether the Gros Ventre battle with the Piegans qualifies as an instance of Euro-American colonial oppression. Irrespective of whether one concludes that the resultant Piegan slaughter of the Gros Ventres was warranted in any way, this was obviously *Native* warfare on all sides. Indeed, in Watches All's narrative, Euro-Americans did not perpetrate the killing of AIs but were in fact only referenced as having been killed by AIs; in contrast, Euro-Americans—alongside a few Crow hosts—appear to have afforded Watches All significant provision and safety during her arduous return home. And yet, warfare between the Gros Ventres and Piegans was clearly occasioned in several ways by Euro-American colonization, including, for example, the press for territorial control vis-à-vis a dwindling land base and the contest for dominance of the robe trade along the upper Missouri (Lewis, 1942). Thus, there remains a clear sense in which Watches All's captivity might meaningfully be construed as the result of colonial oppression after all because the disruptions of colonization routinely extended *well beyond Euro-American action, attendance, or intent*. Certainly, the trade in horses—originally circulating to the northern Plains from the Spanish in the south—and firearms—originally circulating to the northern Plains from the French in the east—resulted in grave power imbalances that rendered some AI groups such as the Gros Ventres more vulnerable to their indigenous neighbors than others (Fowler, 1987; cf. similar impacts among the Great Basin peoples discussed by Black Hawk, 2008). And yet, for much of this early period on the

northern Plains prior to the mid-19th century, genocide was not in contemplation by European interlopers but rather safe passage and commerce (which actually depended on stable intergroup partnerships). Likewise, the epidemic diseases that so ravaged AI populations were far and away historical accidents of encounter, with Euro-Americans even embarking on humanitarian campaigns of vaccination in various AI communities during the early 19th century (Pearson, 2003).

As a result, the problem with emphasizing colonial oppression—and especially genocide, which would appear to require *collective intent* and *coordinated action* in pursuit of *comprehensive elimination* by a *dominant group*—in the formulation of AI HT is that so much devastation for AI communities over the centuries occurred secondarily to colonial policies and practices. Indeed, the degree to which AIs were subject to overt national U.S. policies of genocide, as opposed to intermittent and emergent genocidal moments, is at least debatable (Jones, 2011). Thus, in many cases the obvious distinctions between unambiguous colonial and noncolonial traumas prior to the 20th century quickly evaporates in light of these historical nuances. Moreover, it is entirely unclear with reference to AI HT—which was formulated as an explanatory model to account for contemporary AI health disparities—why traumas perpetrated by European colonizers would be expected to harbor greater causal force in the lives of contemporary AI descendants in comparison to traumas perpetrated by rival AI groups (either in the context of European colonization, or even preceding it when AIs themselves forged empires that were the terrors of their times). In any case, the only campaigns of extermination ever brooked by Gros Ventres—who never engaged the U.S. military—would have been at the hands of other AI peoples (including perhaps the slaughter of 400 Gros Ventres by allied Crees and Assinboines at the Sweetgrass Hills in 1834 [Flannery, 1953]). In sum, proponents of AI HT have emphasized European and Euro-American perpetration of traumas upon AI communities throughout the history of colonization, but in a great many instances there remains pronounced ambiguity surrounding whether it makes sense to attribute these to colonial oppression. Inattention to such nuances reveals these imputations to be oversimplified and overgeneralized interpretations of history that undermine rather than advance the explanatory endeavor.

Concluding reflections

Drawing on the warfare and captivity narrative of Watches All, I have endeavored to examine the assumptions and assertions of those who have articulated and promoted the discourse of AI HT for basic clarity and coherence in their theorization of these postulated posttraumatic processes. In so doing, I have asked a seemingly straightforward question: does Watches All's 1867–1868 captivity among the Piegans and harrowing escape to her own people qualify as a bona fide instance of AI HT relative to its contemporary impacts? Owing to a host of complications that Watches All's narrative poses for the construct of HT as currently theorized, the answer to this question is far from self-evident and remains

debatable either way. If we allow that her experiences do in fact qualify in terms of their contemporary causal impacts as a legitimate instance of AI HT, then we necessarily expand the domain of the construct well beyond what its proponents had in mind when attributing its origins to genocide and other forms of colonial perpetration. Alternately, if instead we accept that her experiences do *not* in fact qualify in terms of their contemporary causal impacts as a legitimate instance of AI HT, then the interpretive grounds for reliably differentiating between historical experiences that respectively do and do not yield intergenerational vulnerability to health disparities appear to be arbitrary (with wholesale dismissal of any intergenerationally transmitted risks that might result from mass violence between AIs). In sum, on the basis of the foregoing analysis, it appears indisputable that AI HT as currently conceived serves as a *poor explanatory model* for contemporary AI health disparities. This is so for at least two reasons.

First, the construct appears to lack coherence in the face of simple but critical consideration. Specifically, in examining questions of contingency, recency, complexity, and colonialism, I have reviewed four sets of complications surrounding the construal of Watches All's captivity experiences as an instance of AI HT relative to their contemporary impacts. Taken together, these complications reveal a striking dearth of theoretical diligence that has resulted in oversimplified and overgeneralized uses of history to account for present-day realities in AI communities (an unfortunate trend noted in the mental health literature about AIs in Waldram's [2004] book-length analysis). Second, as a result of this lack of coherence, the construct necessarily fails to provide incremental explanatory power for contemporary AI health disparities. More specifically, *we need not reference colonization history to account for contemporary trauma in Indian Country, just as we need not invoke psychological trauma to account for the ongoing impacts of colonization history*. With regard to the former, no one has thus far persuasively demonstrated that the visibly prevalent traumatic pathologies of Indian Country actually require *historical* explanation when the prevalence of violence and trauma remains disproportionately high in far too many AI reservation communities (Gone & Trimble, 2012; Manson et al., 2005)—in fact, such attention to historically distant events and affairs actively threatens to displace our current focus on these epidemic levels of violence. With regard to the latter, it is perfectly possible to account for the contemporary impacts of colonization on AI communities (in specific, local, and historically nuanced terms, of course) without centering or privileging traumatic stress as the most interesting, important, or enduring outcome of these complex processes of historical subjugation—in fact, such attention to the psychosocial sequelae of traumatic experience necessarily constrains the range of AI subject positions to those associated with vulnerability, distress, and disability (Maxwell, 2014; for a nuanced alternative, see O'Neil, 1996).

If the viability of AI HT for explaining contemporary health disparities in Indian Country is negligible, then what precisely is fueling such enthusiasm for AI HT? I propose that, rather than offering additional explanatory power, the construct of AI HT instead appears to function as a powerful *moral rhetoric* of

rather recent refinement that implicates Euro-American conquest and colonization in the onset and maintenance of pervasive and ongoing AI psychosocial problems. In principle, I do not object to this framing; indeed, I have routinely attempted to carefully—and with specificity and nuance—substantiate this critical (and political) attribution in my own work. I strongly object, however, to the essentialist implications that many or most contemporary AIs are *traumatized*—wounded, weakened, disabled—by history, and that many or most AI experiences of colonization—including adjustment to and resilience in the face of these processes—were more uniform than diverse in terms of their past impacts on indigenous communities throughout North America. Moreover, I worry that locating the sources of AI distress in past generations displaces vigilant attention—and resultant action—from the ongoing *structural inequalities* that systematically disadvantage Indian Country today (effecting what sociologists refer to as a *medicalization of the social* [Conrad, 1992]). Finally, I wonder what is to become of future generations of AIs who, as a consequence of our current rhetorical tactics, may similarly persist in lambasting the stock figure of the colonial oppressor in service to simplistic and polarized race relations, in which all previous generations of Euro-Americans are presumed to have been guilty of oppressing AIs, and in which no previous generations of AIs are presumed to have been guilty of oppressing others throughout their own histories. In the end, no matter how useful historical context might be for properly explicating AI mental health problems today, the construct of AI HT appears to caricature and distort more than it illuminates and explains, and at probable cost to future AI promise and potential.

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Note

1. Duran and Duran (1995) adopted the term *soul wound* in their book, but the particulars accord with the construct of HT as advanced by Brave Heart. Duran (1990) introduced his concept of the soul wound somewhat earlier, but Maxwell (2014) has described how this idea evolved during the early 1990s to more closely resemble HT as discussed in this article.

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