

Candidacy Essay # 3

TRADITIONAL HEALING AMONG ALASKA NATIVES

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Traditional Healing Among Alaska Natives

Introduction

The purpose of this essay is to review the written literature on Alaska Native (AN) traditional healing and healers. Alaska (AK) has a rich diversity of native cultures. Traditional healing is in danger of being lost as elders possessing such knowledge are dying. A great deal of wisdom was already lost from the flu, tuberculosis, and smallpox disease epidemics in the early twentieth century (Fortuine, 1992a; Napoleon, 1996). Repression and denigration of healers by missionaries and the white government further added to this loss (Fortuine, 1992a). The AN population has begun, in the past three decades, to take back control of their destiny. They are using the bureaucratic system to reinstall their cultural traditions and values, especially with regard to traditional healing practices (Bantz, 1978; Benson, 2003; Book, Dixon, & Kirchner, 1983; Dixon, Myers, Book, & Nice, 1983; "Facts about Indian health services," 1997; Freeman, Morgan, & Farquhar, 2001; Indian Health Service, 2001; Kunitz, 1996; Mills, 2003; Morgan, n.d.; Southcentral Foundation, 2004). This essay will attempt to honor traditional healing and highlight the importance of this work. It is also meant to create another reservoir that preserves healing knowledge.

This essay begins with clarification of terms used in this essay: allopathic medicine vs. traditional healing, traditional healing, and shamans vs. traditional healers. A description and explanation follow of the cultures in Alaska and how they are grouped. An overview of traditional healing among ANs is followed by a discussion of types of healers and traditional healing in the specific cultures. A section discussing present-day traditional healers follows.

Clarification of Terms

Allopathic Medicine vs. Traditional Healing

Allopathic medicine is the system of medicine practiced in Western mainstream health care in the United States. Allopathic medicine relies heavily on pharmaceutical remedies to treat symptoms, basing its standards of care on well-run research studies that comply with rigid randomized clinical trial guidelines. Disease is the focus for allopathic medicine (Gerber, 2001, p. 554). The goal is curing more than healing (Kleinman, 1980).

Traditional healing, on the other hand, views disease as only one aspect of a larger field (of the individual) to be addressed. Indigenous traditional healing is person-centered, as opposed to illness-focused, and holistic. Illness in traditional healing is thought to stem from an individual's disharmony with the environment (Fortuine, 1992a; Freeman et al., 2001; Morgan, n.d., p. 7; The New Mexico AIDS Infonet, 2004; Turner, 1996).

Traditional healing creates its standards of care based on success over time and oral tradition.

Traditional ways of healing that withstand the test of time are passed down from one generation to another; their benefit has been 'tested' historically. The 'records' of traditional healing outcomes reside within the oral tradition. The idea that they are unacceptable until 'tested' according to western standards seems irrational to traditional peoples.(Morgan, n.d., pp. 15-16)

Allopathic medicine is viewed as a square in indigenous thought. Traditional healing is viewed as a circle surrounding the square, representing "the spirit-based nature of traditional healing and the acceptance of other systems of healing" (Morgan, n.d., p.15).

Traditional Healing

Robert Morgan, Ph.D. (n.d.), a Tribal Elder in AK of Lakota descent, is the creator of the Circle of Healing Traditional Healing Program at the Southcentral Foundation, a nonprofit health care corporation in Anchorage, AK (Southcentral Foundation, 2004).

Traditional healing [in Alaska] is defined as the culturally established medical treatment utilized by Alaska Native peoples and often delivered by their traditional healers. A traditional healer is an individual deemed a competent healer by the Native Community and respected elders within that community. Traditional healers receive their healing ability in visions or dreams, through consciousness-altering illness, or they may be taught their healing skills through apprenticeship to another traditional healer. (Freeman et al., 2001, p. 6; Morgan, n.d., p. 24)

Traditional healers, as well, believe they are channels for energy from a greater spiritual source (Freeman et al., 2001, p. 7). It is interesting to note that, according to this description, traditional healers receive their ability to heal in very similar ways that shamans are described to receive theirs (Heinze, 1991; Krippner, 1995, 2000, 2002; Winkelman, 2000, to name a few).

Shamans vs. Traditional Healers

Shaman is a Western term derived from the Siberian Evenk tribe's *saman*, representing the universal nature of a role found in indigenous groups world-wide. Shamans are viewed as religious and spiritual leaders in hunter-gather tribes, largely males in hunter societies and females in more agriculturally-oriented groups (Vitebsky, 1995; Winkelman, 2000). Shamans are the mediators between the "sacred and the profane," their primary task being to restore balance and harmony balance between these realms (Heinze, 1991). Shamans provide a service to their communities, existing in

societies that need them, and can enter altered states of consciousness at will (Heinze, 1991, pp. 13, 137). Shamans are also described as “technician[s] of consciousness” (Winkelman, 2000, p. 6). Shamans enter altered states of consciousness, traveling to other realms of existence in order to help members of their tribe (Krippner, 2000). Shamans’ main purposes are healing (Eliade, 1967) and being “vehicles and translators of transcendental knowledge” (Heinze, 1991, p. 156).

Shamans have been viewed as “humanity’s original specialists” (Krippner, 2000, Shamanic technologies section), incorporating the roles of healers, magicians, politicians, psychologists, predictors of weather and good hunts, priests, social workers, and mystics, to name a few (Krippner, 2000; Vitebsky, 1995; Winkelman, 2000). “The shaman [figure] unites areas such as religion, psychology, medicine and theology which in Western life has become separate” (Vitebsky, 1995, p. 154). Shamans coexisted in tribes with other healers. Vitebsky (1995) and Eliade (1964; 1967) distinguish between a shaman and a medicine man or woman. A shaman dealt with illnesses due to soul loss; a medicine person would address illnesses such as object intrusions caused by sorcery. A shaman possessed the ability to trance travel to other realms seeking answers to a person’s illness. Other types of traditional healers existing in indigenous groups might include “diviners, herbalists, midwives and bone setters” (Vitebsky, 1995, p. 25).

Shamans are usually healers of some type, but not all traditional healers are shamans. A shaman was a political leader in nomadic tribes, as well as a psychologist, observer of ritual and taboo adherence, and a consultant to the Elders or Chiefs (Eliade, 1967; Heinze, 1991; Vitebsky, 1995; Winkelman, 2000). The shaman was also an entertainer, who included community members in healing rituals and ceremonies. In

societies that believed in evil spirits, the shaman protected the tribe from this kind of malevolence. Ensuring successful hunting was also the task of the shaman (Ganley, 1996). Accounts of traditional healers do not include such roles.

Shamans primarily operated between the world of humans and spirit. Shamans, in order to heal, commonly placed themselves in an altered state of consciousness and actively moved between the spiritual realms and the physical. They traveled to retrieve the soul of the ill person or sought information on how to heal the individual. They battled supernatural entities in order to heal a person at times. Healing was public and often involved the community. (Heinze, 1991; Krippner, 1995, 2002; Narby & Huxley, 2001; Winkelman, 2000). The shaman's responsibility was to the entire community. A shaman's skills helped others "through healing, seeing the future, altering the weather, finding what is lost, communicating with the dead, and conferring a sense of unity and joy" (Turner, 1996, p. 86). A traditional healer's responsibility, on the other hand, rested solely with the person being healed, perhaps extending to the family or close friends of the healee. Traditional healing was less public, and more focused on the individual and family rather than the community.

Fortuine (1984; 1985; 1988a) distinguished between the types of healing shamans and traditional healers did in AK. Shamans were considered "magico-religious" healers who treated illnesses and conditions that were severe, beyond the ordinary, and mysterious (Fortuine, 1988a, p. 296). Traditional healers were "empirico-rational" healers who worked on common everyday illnesses and injuries. Traditional healers' primary forms of treatment included surgery and the use of plants and animals as medicinal substances. Traditional healers may be shamans, but they could also be

herbalists, massage specialists, surgeons, or a member of the family. Both shamans and traditional healers coexisted among AN groups but varied in their significance in each group (Fortuine, 1984, 1985, 1988a, 1988c).

The epidemics in the late nineteenth and early twentieth centuries created a lack of faith in the healing abilities and protective role of the shaman (Fortuine, 1992a). Shamans could not protect, save, nor heal their communities from succumbing to the diseases brought by whites. They could not protect the native way of life from destruction from outsiders. When the structure of the community crumbled, the shamans were unable to predict weather or good hunting. The decimation of the population from disease and starvation wiped out most of the elderly members, of which shamans were among them, destroying the repositories of cultural wisdom (Dixon et al., 1983, p. 918; Fortuine, 1992a; Napoleon, 1996).

Missionaries further eroded the shaman's role. Missionaries, especially when they began dispensing smallpox vaccinations, were viewed as having powerful medicine. Missionaries used this knowledge to convert many ANs to Christianity. They discouraged many ANs from practicing their cultural heritage (Fortuine, 1992a; Napoleon, 1996).

To summarize, many indigenous groups across the world included one or more especially gifted individuals. They could heal by virtue of their ability to travel to other dimensions and retrieve souls lost to illness or possession. They performed other tasks beside healing, such as ensuring good hunts, predicting weather, ensuring good hunts, predicting weather, protecting the tribe from outside evil influences and enforcing taboos. The role varied in every group, depending upon the needs of the tribe and the gifts of the individual.

Unfortunately, Western non-indigenous culture has come to label these special individuals using a term derived from the language of the Siberian Evenk Tungus-speaking culture: *shaman* (Cohen, 1998; Heinze, 1991; Krippner, 2000; Vitebsky, 1995; Winkelman, 2000). It is a catchall term that homogenizes rather than distinguishes the uniqueness of this role in indigenous cultures. Each culture had its own name for such individuals. In AK, for instance, someone with this role in the Yup'ik mainland groups was called *angalkuq* (Napoleon, 1996). On St. Lawrence Island, the name was *alginahre* (Murphy, 1964). For the Inuit in Northwestern AK, it was *anatguk* (Ganley, 1996) or *angagok* (Ackernecht, 1948; Freuchen, 1961), or *angatok* (Balicki, 1963). Table 1, on page 29, gives some of the names used to describe AN healers.

For the purpose of this essay, the term *magico-religious healer*, a designation coined by Fortuine (Fortuine, 1988a, 1992a), will be used when discussing healers in the role of shaman (Western vernacular).

Overview of Alaskan Native Cultures

Alaska Natives' survival is not so much a tribute to their technology or physical strength as it is a tribute to the profound human wisdom that permeated Native societies. This wisdom gave Alaska Natives the emotional stability and personal hardiness to withstand the pressure of living at the intense communal level necessitated by the environment and, at the same time, developed the unique cohesive and vigorous personalities that so impressed early recorders of cross-cultural contacts. (Sullivan & Brems, 1997, Traditional Lifestyle section, para 2)

Alaska contains a rich diversity in its indigenous culture. Classifications within the culture have been identified from as little as three (Fortuine, 1992a), based on indigenous origins and settlements in AK (Indian, Eskimo, and Aleut), to eighteen, based on language and geographic region (Krauss, 1982, 1997). Appendix A contains a table of

seven different classification systems. For the purposes of this essay, a discussion of AN culture is structured in the following manner: 1) Tlingit, Haida, Tsimshian, 2) Athabascan, 3) Aleut, and 4) Inuit—Alutiiq, Iñupiat, Yup'ik. This structure fits best with how the descriptions of AN traditional healing are addressed in the literature.

Tlingit, Haida, Tsimshian (Southeast)

The Tlingit and Haida tribes in AK are predominantly located on the Southeast coast of AK. Tlingit and Haida cultures had the “most formal and structured [social organization] of any Alaskan native group” (Langdon, 1993, p. 80). The society was divided into two halves, called *moiety*s. One moiety could only marry someone from the other moiety. The moiety was further divided into clans that identified with a certain animal or mythical spirit totem (Karper & Karper, 1978). Interclan feuding and warfare to gain wealth and slaves were common, with the Haida considered to be “the fiercest raiders of the coast” (Langdon, 1993, p. 83). The class of slaves was a large population; they could potentially be killed or released at potlatches (Langdon, 1993).

The potlatch, a community social and religious event, was the primary ceremony in both cultures. Potlatches were held to honor the dead as well as for namings, marriages, house-raising, totem pole raising, and to eliminate embarrassing or shameful events. Stories, myths, and legends were told at potlatches and other festivals. The potlatch remains an important event despite missionary efforts to eliminate it (Beck, 1989; Olson, 1994).

The Tsimshian came to the Southeast AK coast from British Columbia, led by an Anglican missionary, William Duncan, in an attempt to shield them from white traders

with liquor and to avoid being taken over by the Church Missionary Society. The Tsimshian's primary home is Annette Island (Hayward, 1994).

Aleut (Aleutian Islands)

The Aleut culture, also called *Unangan*, was held in high regard for their maritime survival skills. They lived on a string of islands (Aleutian) that jut out into the Pacific Ocean. Warfare was common between villages. Slaves were thought to be small in number (Langdon, 1993). Social functions consisted of dances and feasts among villages during the winter months.

Athabaskan (Central Interior)

AK is home to nine groups of Athabascans, based on their ethnic and linguistic similarities. Athabascans are the indigenous group that settled the interior portion of AK. Athabaskan language is related to tribes found in Canada (Yukon Territory, Northwest Territories, British Columbia), Navajo, and Apache tribes (Langdon, 1993). Other sources say there are 11 groups linguistically connected, with white contact occurring between 1830-1880 (Fortuine, 1992a). Athabascans tended to adapt practices they observed in neighboring groups that were successful (Langdon, 1993). All but two groups had clan structures. Slaves, usually women and children captured from raids on other native groups, were present among several groups (Langdon, 1993). Like the Tlingit and Haida, moieties structured the community (Simeone, 1994).

The potlatch was a central feature of Athabaskan culture (Langdon, 1993; Simeone, 1994). The stick dance was also a major communal event (Simeone, 1994).

Inuit—Alutiiq, Iñupiat and Yup'ik (Coastal)

The term *Eskimo* is a Native American word that means a person who eats raw meat. In their own language (*Iñupiaq*), they prefer to call themselves *Inuit*, meaning “the people” (Langdon, 1993; Snow Owl, 2003).

Ceremonies before and after hunting were part of Inuit life (Sullivan & Brems, 1997). Storytelling was a part of any ceremony or feast that brought community members together, especially in the winter. Stories and myths were powerful vehicles through which history, morals, values, and wisdom were passed down from one generation to the next (Sullivan & Brems, 1997).

Inuit—Alutiiq.

The Alutiiq culture is also called *Sugpiaq*, with three subgroups attached geographically to certain areas—Prince William Sound is home to the *Chugachmiut*, the lower Kenai Peninsula to the *Unegkumiut*, and Kodiak Island to the *Qikertarmiut*, *Koniagmiut*, or *Koniag*. Anthropologists had also used the designation of Pacific Eskimos in older studies (Pullar, 1994).

Inuit—Iñupiat.

The Iñupiat are the Inuit culture predominantly occupying the northern coast of AK. Langdon (1993) further divides the Iñupiat into four groups, based on their intersocial group patterns: 1) Kotzebue Sound, 2) Bering Straits, 3) North AK Coast, and 4) Interior North AK (p.28). The Iñupiat were last, chronologically, among the AN tribes to have first contact with non-natives (whites), between 1850 and 1870 (Langdon, 1993, p. 4).

The Iñupiat were very competitive and warfare between groups was frequent (Langdon, 1993, pp. 34-35). Competition between men in the same society could be settled by an event called a *song duel*. The Messenger Feast was one of the ceremonies found among all the Iñupiat tribes or groups, occurring in fall or winter (Craig, 1994; Langdon, 1993). In the spring a festival took place where the leader distributed any leftover whale meat to the village. Trading fairs were the major Iñupiat gathering in the spring (Craig, 1994). Special ceremonies and practices, such as the Seal Bladder festival, occurred in order to return the animal's spirit so that it would be born again and continue to provide food (Gillham, 1955; Langdon, 1993).

Iñupiat—Yup'ik.

Langdon (1993) calls the Inuit group occupying the southern coast of AK the *Yuit*, and their languages are called *Yup'ik*. He considered them the AN group with the most diversity. Other sources called this group *Yup'ik* (Active, 1994; Travel Alaska, n.d.) or *Yupik Eskimos* (Fortune, 1992a; Krauss, 1982), based on their language. Dialects differed based on their geographic location. *Yup'ik* will be the term used in this essay.

The mainland Yup'ik were said to “have the most complex ceremonial system of any Eskimo group” (Langdon, 1993, p. 51). The Messenger Feast was common to all Yup'ik groups. The mainland Yup'ik, like the Iñupiat, also held a Bladder Feast (Langdon, 1993).

Overview of AN Traditional Healing

Robert Fortune, M.D., and William Richards, M.D., were the foremost collectors of information regarding traditional healing in AK. Fortune was a physician in the USPHS who came to AK in 1962. Fortune's interests were the history of medicine in AK

and AN medicine (University of Alaska-Anchorage Archives, 1998). Richards was a psychiatrist in the USPHS who came to AK in 1970 to become the Chief of Mental Health in the IHS. He held several positions until his untimely death from an accident at sea in 1995. Richards, at the time of his death, had actively sought and interviewed traditional healers, collecting a large amount of information for future publications and for a study called the Traditional Healing Project (University of Alaska-Anchorage Archives, 2004). To the author's knowledge, Richards' work has not been published. Fortuine and Richards' papers are archived at the University of Alaska Anchorage library.

Traditional healing in AK included both healing done by magico-religious healers (analogous to the general description of shamans) and empirico-rational healers (called in this essay traditional healers). Table 1 (Ackernecht, 1948; Balikci, 1963; Cohen, 2003; de Laguna, 1972a; Fortuine, 1992b; Ganley, 1996; Hild, 2005, personal communication 2006; Murphy, 1964; Napoleon, 1996; Oosten, 1986) describes some of the names given to healers in AN cultures. Whereas Western literature uses the term *shaman*, occasionally *medicine man*, to describe one healing role, the cultures in Alaska had several names. It is likely to be true with other indigenous cultures as well; one name does not capture the variety of roles these special individuals perform.

Table 1
Cultural Terms for AN Healers

CULTURE	NAME	DESCRIPTION
Tlingit	1. <i>ixt</i>	1. medicine person
Inuit	1. <i>anatguk</i> or <i>angakkuq</i> 2. <i>ilisiilaq</i> or <i>ilisiniq</i>	1. trance-jourmeyer (true shaman) 2. clairvoyant/sorcerer—evil intent

CULTURE	NAME	DESCRIPTION
	3. <i>angatkungaruks</i> 4. <i>krilasoktoq</i>	3.identified and localized evil spirits in the body 4.head-lifter
Yup'ik	<i>angalkut</i> or <i>angalkuq</i> or <i>aliginalre</i> (St. Lawrence Island)	medicine person
Iñupiat	1. <i>anatguk</i> 2. <i>inuunniqti</i>	1.medicine person 2.traditional doctor (poking, massage, manipulation)
Aleut	<i>lekarka</i>	female doctor

AN traditional healing originally took place within family group members. Sometimes new skills or techniques were shared with others in the community, eventually spreading throughout the culture; otherwise, they stayed in the family. Over time, certain individuals were identified in the community who seemed more adept at healing others. Their services were often bartered for goods and food. Older healers were perceived to be the most skilled (Fortune, 1988a).

Fortune's research identified four types of empirico-rational traditional healers: 1) healers who performed surgery, 2) healers who used massage for diagnosis as well as treatment, 3) healers that used plants and animal products to heal, and 4) midwives (Fortune, 1984, 1985, 1988a, 1988c, 1992a).

While magico-religious healers coexisted with empirico-rational traditional healers, their importance as healers varied among the groups. A summary of the types of AN healers by culture is found in Appendix B. In Northern AK, magico-religious healers were the predominant healers. In the Aleut and Koniag groups, both were used, with the surgical aspect of traditional healing very advanced. In Southeastern AK, magico-religious healers were more prominent. Plant medicine was used in healing, with surgery

much less significant. The Athabascans in the interior of AK used magico-religious healers and traditional healers, plant and animal medicine, and surgery. Traditional healers were older women for the most part who primarily collected and used medicinal plants (Fortuine, 1988a, 1992a; Langdon, 1993). An outline of the traditional healing remedies and techniques by culture is found in Appendix C.

Surgery

Every AN culture used some type of surgery to varying degrees. Surgery was used for: 1) permanent body ornamentation (for ritual purposes), 2) suturing injuries or amputating limbs (usually from frostbite), 3) lancing boils and abscesses to relieve swelling and decrease pain, and 4) a variety of internal ailments such as shortness of breath, urinary conditions, and eye problems (Fortuine, 1984, 1985, 1988a). Each culture had a need for surgical skills to treat illnesses and injuries, and almost every culture valued permanent ornamentation of the face and body (Fortuine, 1988a, p. 298). Magico-religious healers rarely performed surgery, if at all, limiting themselves to surgeries in the magico-religious category (Fortuine, 1985).

Lancing, bleeding, and piercing (poking) were three surgical techniques used (Fortuine, 1985, 1988a). Lancing and poking involved superficially cutting or piercing (respectively) the skin on certain parts of the body to release “bad humors causing the pain and swelling” (Fortuine, 1988a, p.299). Bleeding highly vascular tissue, and occasionally a vein, was used for the same purpose. Fortuine (1985) also described accounts of removal of foreign objects (Koniag, Iñupiat), dental extractions (Alutiiq, Athabaskan, Iñupiat), removal of kidney stones (Koniag specifically), and cataracts (Koniag).

Healers skilled in surgery could be either a traditional healer, a magico-religious healer, or a family member (occasional) who assisted with procedures such as childbirth and ornamentation (Fortune, 1984). Since healing by surgical techniques was considered (by Fortune) to be an empirico-rational form of healing, surgery was less frequent in AN cultures where magico-religious healers were the predominant healers. Consequently, because the Inuit, Tlingit, Haida, and Tsimshian used magico-religious healers for healing, surgery was not used as much. Among the Inupiat, although magico-religious healers were the main healers, amputation was frequently necessary in cases of frostbite and gangrene. Yup'iks used magico-religious healers more and surgeons less, preferring massage to surgery. The AN culture in Southeast AK practiced very little surgery, except for ritual ornamentation. Athabascans used surgical procedures but varied widely in their techniques. Athabascan tribes used most of the surgical techniques found in other AN cultures. Their splinting techniques, however, were different. Alutiiq literature is scarce with regard to surgery (Fortune, 1984, 1985).

Surgical traditional healers, while known among all of the AN cultures, were more important to the Aleut and Koniag (Alutiiq) communities. Fortune considered the Aleut and Koniag healers “the most surgically sophisticated of Alaska Natives” (Fortune, 1985, p. 29). Among the Aleuts, men were usually the surgically skilled healers, who passed their skills down to the males in the families. They were famous for their knowledge of anatomy, probably because they performed autopsies and mummification. The Koniag culture was the most surgically sophisticated and had the most variety of surgical procedures for certain conditions (Fortune, 1984, 1985). The

Koniag surgical healers were frequently female, which was uncommon in other parts of AK (Fortuine, 1988a, p. 297).

Fortuine concluded that the surgical methods used by AN traditional healers, while potentially hazardous in both procedure and consequences, must have had some benefit. This form of healing, otherwise, would not have continued to the present day (Fortuine, 1984).

Massage

Traditional healers who used massage, frequently female, could be found in differing forms among the Aleuts, Chugachs (Alutiiq), and Iñupiat (Fortuine, 1988a, p. 297). Massage was used to diagnose and treat liver and stomach ailments, constipation, and sprains and dislocations; it was used to set fractures in some cultures (Fortuine, 1985, 1988a). The late Della Keats, a well-known present-day Iñupiat traditional healer, successfully used this method (Fortuine, 1985, p. 31). Cold and heat had therapeutic uses as well.

Plant and Animal Sources of Medicine

Alaska's environment (prolonged snow cover, short growing season, and cold climate) precludes plants from being a primary form of healing. In Northern AK, therefore, animals formed the basis for healing substances, as plants were few and growing seasons short.

Fortuine placed plant medicine in the category of empirico-rational medicine because successful remedies were often a result of trial and error. Plants were used singly as a rule, not in combination with other plants. One plant could be used to treat several conditions. Respiratory conditions were the most common infectious conditions treated

with medicinal plants. Medicinal plants that were frequently and consistently used by all AN groups include stinkweed, devil's club, spruce, yarrow, and Labrador tea. Willow, sourdock, and wild celery were also used across groups. Their use, however, varied among groups (Fortuine, 1988c). A more detailed account of plant and animal remedies can be found in Ann Garibaldi's (1999) book, *Medicinal Flora of the Alaska Natives*.

Cultures differed in their perception of the traditional healer who used plant and animal medicine. The Aleuts, Koniags, Tlingit, and Haida cultures valued herbal healing the most (Fortuine, 1988a, p. 297). Geographic location (milder AK climate, longer growing season in these areas) may have been a major reason. The Koniag and Central Yup'ik cultures held this type of traditional healer in high regard. Most were women. However, women herbal healers were not highly respected in the Tlingit culture (Fortuine, 1988a, p. 297).

Among the Inuit, healing with plants was minimal. However, stinkweed and wormwood are still used today for healing (Turner, 1996, p. 27). The predominant healing substance was seal oil, followed by whale oil in the northern coastal communities (Borre, 1994; Fortuine, 1988a). Seals figured prominently in health and healing for the Inuit. Body warmth was a condition of health and the seal was believed to provide warmth. Seals, therefore, both helped to prevent illness and to heal (Borre, 1994, pp. 5-6). Specific parts of the seal, and whether it was cooked or raw, were used to cure different conditions. Hunters ate seal before a hunt to increase endurance and to ward off weakness, hypothermia, and frostbite. Health maintenance depended on the "fulfillment of the rituals of hunting and food sharing" (Borre, 1994, p. 10). All community members were then able to acquire the seal parts they needed.

Seal is used as a treatment for ear infection, gastrointestinal disturbances, weakness and nausea, headache, hypothermia, fractures, lice, skin rashes, and acne. Seal products are either consumed orally or else applied directly to the ailing body part. The treatment is believed to heal either through relief of symptoms, as in the cases of treatment of lice and fractures, or else through intervention with the spiritual, social, or environmental causes, as in cases of headache, nausea, and weakness. (Borre, 1994, p. 6)

In his article on medicinal plants, Fortune (1988c) noted the importance of remembering that most written accounts are not from ANs themselves but non-natives, many of them untrained in medicine. These scientists and academics possessed variable depths of knowledge. Most of the written information addressed only the local population being studied, so that, along with variations in practice among healers, most of the information could not be generalized or standardized (Fortune, 1988c, p. 189).

Midwives

The first traditional healers were thought to be midwives (Fortune, 1988a). Midwives did not perform surgically invasive procedures but were considered special types of surgeons because of their abilities to manipulate and massage (Fortune, 1985, p. 38). Massage was frequently used during pregnancy and childbirth, and occasionally on the neonate (Fortune, 1988a). Aleut midwives, particularly, were able to turn the fetus in the womb. Yup'ik midwives were known to push down on the pregnant abdomen during labor in order to speed the process. Koniag women in childbirth had their abdomens stretched and pounded (Fortune, 1985).

Magico-Religious Traditional Healers

The most obvious impact of the missionaries on health was in the conscious and unrelenting war on shamanism. The missionaries viewed the struggle as a spiritual, not a medical, one but an important effect was that Christianity and shamanistic healing could not comfortably coexist. Sometimes a major epidemic demonstrated the helplessness of the shaman. Perhaps even more important for the decline of shamanistic

healing was the growing conviction among many Natives that Western medicine in fact was more effective than their own in dealing with medical and especially surgical problems. (Fortune, 1992a. p. 192)

Magico-religious healers (Western term: shamans), or medicine men, were “the tribal elders who ascended to the calling...[they] were the most highly respected and coveted of clan members....Next in the line of power over tribal members were the head men or chiefs” (Gabriel, 1993, pp. 19-20). Historically, magico-religious healers were important, if not the predominant, healers in certain AN cultures. Magico-religious healers were called to heal the more serious illnesses, conditions thought to have supernatural causes, or when traditional remedies failed (de Laguna, 1972a, 1972b; Fortune, 1992a; Karper & Karper, 1978; Turner, 1989, 1996, 2004).

Disease was believed to be caused by loss of the soul, taboo violation, sorcery, or the intrusion of a foreign object into the body (Ganley, 1996; Murphy, 1964). The soul was considered the cause of illness, by either having committed a sin or falling under the influence of an evil spirit. If the soul was healed, the body would also heal (Carroll, 2002; Freuchen, 1961). The person’s soul left the body “through the hole in the top of the head” (“Clem,” an Inupiat traditionalist, quoted in Turner, 1996, p. 29).

Trance journeying was a way to determine the cause of illness and its treatment (Ackernecht, 1948; Fortune, 1992a). The magico-religious healer had the ability enter a trance state, encounter helping spirits and enlist their help while in a trance state, and find, in the case of illness, the individual’s soul or the solution to curing the soul (Freuchen, 1961). Magico-religious healers also used techniques such as bleeding, as well as applying a burning wick onto the area of the illness and blowing on it—likened to the Japanese practice of *moxa* (Ackernecht, 1948).

The magico-religious healer was a powerful, authoritative, prominent member in Inuit society and the most important healer (Fortuine, 1992a). Described by some as more of a priest than a doctor, the magico-religious healer protected the village from the forces of nature and spirits (Ackernecht, 1948). The Inuit magico-religious healer's role in healing included: 1) ascertaining whether a taboo or ritual had been violated, or prohibiting certain rituals or taboos, 2) restoring broken taboos through public ceremonies, and 3) healing by bloodletting, using medicinal plants or animal substances, and manipulation of the body (Ganley, 1996, p. 8). Of the three, only the third is considered to be that of a traditional healer.

Murphy (1964), a social scientist, studied Yup'ik magico-religious healing on St. Lawrence Island. The Yup'ik magico-religious healer on St. Lawrence Island could be either gender. The magico-religious healers used techniques such as "blowing away" or "sucking out" illness from the body (Murphy, 1964, p. 70). Licking the wounds was another technique used on injuries (Murphy, 1964).

Magico-religious healers performed a majority of traditional healing in the Tlingit and Haida cultures. Tlingit magico-religious healers were powerful figures in their culture (de Laguna, 1972a; Karper & Karper, 1978). They used both "herbal remedies and magical rites. Their success depended largely upon the cooperation and personal faith of the patient" (Karper & Karper, 1978, p. 31). Magico-religious healers were generally male. They usually had assistants to help them. Magico-religious healers were typically only consulted to heal when illness or injury was sudden or violent, or when illnesses persisted despite the use of common remedies. Magico-religious healers also lanced boils, wounds, or swollen glands (de Laguna, 1972b, pp. 670-718).

Magico-religious healers were the prominent healers in three Yukon Athabascan groups—Kutchin, Tanana, and Ten'a. Magico-religious healers removed foreign objects from the body by “sucking, blowing, or pulling on the object to the accompaniment of appropriate magical songs” (Carroll, 2002, p.68).

Some disagreement appears in the literature regarding the current demise of magico-religious healers. Magico-religious healers had all but disappeared by 1955, as in many other Inuit communities (Murphy, 1964). Today this role has been considered obsolete, viewed negatively, and relegated to history for the reasons described earlier in this essay (Ganley, 1996). To one Athabascan AN, however, magico-religious healers “represent the greatest hope for the native people” (Gabriel, 1993, p. 44). It is possible, then, that magico-religious healers still exist. “Despite Christian conversion of natives by the missionaries to Alaska, Medicine Men still practice the handed-down skills of spiritual powers. They have performed innumerable extraordinary feats, often considered impossible by the casual observer” (Gabriel, 1993, p.82).

AN Traditional Healing By Culture (Note: See also Appendixes B and C)

Tlingit, Haida, and Tsimshian. McGregor (1981), in her research on animal and plant medicines among the Tlingit, Haida, and Tsimshian, found very little written on native medicine in this region of AK. ANs told her their knowledge was spotty as well, with large pieces of information missing. McGregor noted two sources of knowledge on traditional healing: 1) healers who passed their knowledge to other healers, although they were expected to acquire their innate knowledge, and 2) general remedies that were commonly known and used by most of the community.

Midwives generally assisted pregnant Tlingit women during birth. Birthing was generally solitary among the Tsimshian, without pain medication or assistance. If the community had a midwife, she would manipulate the abdomen to place the baby in a better birth position (McGregor, 1981).

Devil's club was believed to cure cancer and treat arthritis in the Tsimshian culture. Other arthritis remedies include skookum root and bearberries. Skookum root was also used for scalp conditions (McGregor, 1981). Medicinal animal substances included " 'hooligan' oil, rendered from the eulachon fish...bear gall, which was thought to be especially effective against arthritis...The Tlingit often resorted to the warm mineral springs south of Sitka for the treatment of skin diseases" (Fortune, 1992a, p. 20). Any mention of surgery was related to ornamentation.

Aleut. Fortune (1992b) based some of his information on Aleut healing the written description by Russian Orthodox missionary Ivan Veniaminov (1797-1879). Aleut traditional healers were highly skilled and knowledgeable about the human body. They acquired their knowledge by performing autopsies on deceased slaves and enemies. Much of the healing knowledge was lost after the arrival of the Russians. Veniaminov attributed this loss to the fact that early Russian explorers could not differentiate between traditional empirico-rational healing and magico-religious healing and therefore prohibited both. Healing techniques included "*patience* [terpenie] and a *strict diet*," with the technique of puncturing or poking considered a last resort (Fortune, 1992b, p. 139). Aleut traditional healers also utilized lancing (bloodletting) for conditions ranging from swelling and boils to general lethargy to extremity weakness or headaches. Healers also

used manipulation and a massage of internal organs to return the organs to their proper places (Fortuine, 1992b).

Fortuine (1988b) also described Aleut traditional healing observed by German physician Carl Merck during a Russian exploration in 1790. Merck described the taboos associated with pregnancy and childbirth. He also noted that the Aleut healers' only cure for diseases was bloodletting. Otherwise, the Aleuts relied on the magical skills of their magico-religious healers. Angelica root was used to treat both internal and external wounds. Merck's account conflicts with those of Veniaminov and Fortuine's other works (see AN Healing in General section of this essay).

Athabaskan. Elderly women or family members did most of the empirico-rational traditional healing in the Athabaskan culture. The most popular plant remedy was white spruce. Animal products employed for medicinal use included bear gall, wolverine liver, ravens, and fish products. "Among the surgical techniques were bleeding, scarification, lancing of abscesses, cauterization, dental extractions, and the reduction and splinting of fractures (Fortuine, 1985, 31-36)" (Fortuine, 1992a, p. 24). Carroll (2002) provided information on traditional healing among the Athabaskan groups along the Upper Yukon River (Kutchin), middle Yukon river region (Tanana), and lower Yukon (Ten'a).

For the Kutchin, a poultice concocted from the anemone was used for cuts and wounds. Juniper berries were used for chest pains. Arctic dock was used for colds. Boiled alder buds were used for venereal disease. Steam baths were only used for individuals who were sick. Tattooing around the ankles was said to help "bad legs." Bloodletting was used for aches and pains (Carroll, 2002, p. 66).

Among the Tanana, spruce pitch was used for cuts and wounds. Fractures were splinted with bark made into a tube, and a spruce pitch-covered cloth was placed over a fracture after the splint was removed. Macerated tea leaves were ingested for stomach upsets (Carroll, 2002).

The Ten'a used spruce sap and resin for cuts and wounds. Boiled spruce bark was used to heal sore throats, and boiled spruce needles were used for stomach upset. Large burns were treated with red ochre; small burns were coated with nasal mucus. Fish eggs were also used in a variety of remedies (Carroll, 2002).

Inuit—Alutiiq. Empirico-rational traditional healing techniques used by the Alutiiq included surgery, in which they were highly skilled, bleeding and piercing (often used by the females), and massage (Fortune, 1992a, p. 11).

Inuit—Iñupiat. There were few traditional healers in the Iñupiat culture of Northern AK; magico-religious healers were the prominent healers. Iñupiat and Yup'ik traditional healing practices were generally the same. Relatives and other members in the community were responsible for most of the empirical healing. Few plant remedies were used, due to the harsh climate. Seal oil and whale blubber were the most popular animal substances used in healing (Fortune, 1992a).

Inuit—Yup'ik. A family member or skilled elderly female usually treated the minor illnesses and injuries (Fortune, 1992a). Plants used for healing included stinkweed and willow. Animal sources of medicine “included seal oil, human milk, urine, and the anal glands of the beaver (Lantis, 1959,89)” (Fortune, 1992a, p. 14). Although surgery was not highly developed in this region, surgical healing existed. Lancing or poking was

used to treat internal conditions. Suturing cuts were sutured and occasional amputations occurred as well (Fortuine, 1992a).

Among the stories about traditional healing in the Yup'ik culture, Carol Jolles (2003), an anthropologist, recounted the experiences of a midwife on St. Lawrence Island. The midwife was able to tell when a birth process began by hearing the cry of a baby, accompanied by an "unusual ringing" in both ears (p. 96). She was able to tell if the birth would be smooth (ringing in only one ear) or rough (ringing in the other ear). The following account shows how Christian thinking influenced traditional healers. The AN midwife, realizing she possessed a healing gift, went to an older woman in the community for spiritual advice. The older woman held strong Christian beliefs.

[The older woman] told Elinor [the midwife] to pray to God about her unusual talent. If her power came from the old spirit forces, she would lose it. If it came from God, she would keep it. Elinor lost her power. I repeat this because Elinor accepted the spiritually charged power of the universe and her story is one of many that circulate in the community and which the community accepts. (Jolles, 2003, p. 96)

Charles Gillham (1955) was a biologist with the U.S. Fish & Wildlife Service. He related a series of stories told to him by a Yup'ik medicine man near Hooper Bay. The stories he was told were of the feats of the medicine men in Yup'ik history. These stories had been passed down through generations.

Harold Napoleon (1996), a Yup'ik man from Hooper Bay, provided a history of the Yup'ik culture, the nature of spirit from a Yup'ik perspective, and the types of ceremonies that were held. In the Yup'ik culture, the shaman, called *angalkuq*, was only used for serious illnesses or those conditions with unknown causes. The *angalkuq* was the village doctor, judge, mediator, historian, and interpreter of the village way of life. Some were said to "have performed surgeries, amputations, and autopsies" (Napoleon, 1996, p.

9). Plants, herbs, and animals were used for medicinal purposes for minor conditions that didn't require the *angalkuq*'s attention.

Summary

A great deal of AN traditional healing knowledge may have been lost because it was not written or passed down (Fortune, 1988c). Reluctance by traditional healers to share their knowledge with non-native "outsiders," along with the loss of their cultural heritage from historical trauma and epidemics are also contributing factors.

Fortune (1988a) believed that traditional, or empirico-rational, healers were highly developed in the AN cultures. Because of the diverse circumstances, traditional healers developed their skills mostly by trial and error, depending on the experiences they encountered and their communities' needs. Fortune, as a physician, approved the skills of the traditional healers, believing them to be rationally based according to the healers' understanding. Yet he also found some practices were harmless and useless (Fortune, 1988c).

Magico-religious healers historically were the predominant healers among the Inuit, Tlingit, Haida, and Yukon Athabaskan groups. They primarily healed illnesses of supernatural origin, those that did not respond to traditional remedies, or illnesses related to violation of taboos. Such healings involved trance or shamanic journeying to other spirit realms to find solutions. Magico-religious healers were respected in their societies, often holding high positions in their tribe.

Present-Day Accounts of AN Traditional Healing

Alaskan traditional healers employ one, or a combination of the following practices: energy center, cleansing, manipulation and massage of the abdomen, liver, intestines and womb; application of heat and exercise of limbs at hot springs, manipulation and massage of the muscular,

circulatory and skeletal systems, correction of dislocation and sprains, maternal care, preventative counseling on healthy living practices, the administration of herbal medicine, journeying out of the body to gain healing insight, journeying through the body of another to diagnose causes of mental and physical dysfunction, drumming and dancing; singing grieving songs, bone setting, poking (lancing infection), unblocking energy flow (a technique somewhat like acupuncture), healing through storytelling and culturally-derived forms of psychotherapy and the use of prayer and ceremony (M.Schaeffer, personal communication April 28th, 2000). The healer may practice one or many of these gifts of healing but is always aware that healing does not come from him or her (or from the herb, for that matter), but from a higher source. The traditional healer is merely a conduit of this restorative energy. (Freeman et al., 2001, pp. 6-7; Morgan, n.d., p. 25)

Traditional Healers Today

Among the Iñupiat, one of the most well-known present-day healers was Della Keats. She was from Noatak but came to work as a healer, and teacher for other healers, at Maniilaq in Kotzebue. Keats was self-taught. She used her hands, prayer, and herbs, particularly stinkweed. Her hands could “feel” what was wrong with someone who was ill. She was a tribal doctor for Maniilaq until her death at the age of 80 in 1986 (Brew, 1992; Juul, 1979; Mauer, 1986; Murkowski, 1981; Pender, 1987; Perrigo, 1986; Turner, 1989). Her descriptions of how she healed closely parallel Turner’s (1989; 1996) descriptions of other Iñupiat healers, including the ability to “know” someone’s condition at a distance (nonlocally, clairvoyantly). Keats was observed to use the following healing techniques: manipulation of the aorta, organs in the abdomen, joints, and fetuses (her predominant technique); application of steady continuous pressure to joints; exercise prescriptions, herbal and traditional medication prescriptions internally and externally; bloodletting by “poking” and drainage; applications of bandages, heat, and cold; and enemas (Juul, 1979). From her interactions and observations of Keats, Juul (1979) pointed out the importance of touching in both diagnosis and treatment.

Kirchner (1982) described another healer and tribal doctor, Andrew Skin, Sr., from the village of Selawik, on the inland coast of Kotzebue Sound in northwestern AK. Skin trained primarily under Della Keats, took courses in healing at Maniilaq, and was also self-taught. Skin's healing techniques included organ manipulation, with abdominal conditions a frequent symptom treated in this manner. Blocks to blood flow, relieved by massage, could result in abdominal or lower back pain, enlarged inguinal lymph nodes, hypertension, and halitosis (bad breath). Kirchner (1982) spent three weeks with Skin and provided detailed descriptions of the techniques Skin used for specific conditions. A majority of the treatments involved massage and manipulation. Kirchner (1982) also noted that Skin, along with other healers, washed his hands after any treatment involving the hands in order to prevent the illness from transferring to the healer or back to the patient. This practice illuminates the Inuit philosophy of illness as something that can be mechanically removed from the body.

Brew (1992) explored the lives of six Inupiat healers—five female, one male, ranging in age from 26 to 80. Brew identified themes among the healers such as displaying a gift for healing, being chosen or asking to receive training by other healers, and feeling a responsibility to help their community. Hands were the primary instruments for assessment. All performed abdominal massage and manipulation of organs, muscles, and joints, as well as realignment of joint dislocations. Half were midwives who manipulated fetuses in utero. Two could “poke” or bloodlet. Praying, both before and with the patient, was common. Many believed that God did the healing through the healers' hands.

Lisa Dolchok (2003), a Tribal Doctor at Southcentral Foundation in Anchorage, AK, learned healing from her grandmother. Her background is Aleut and Filipino, and she grew up in a Yup'ik community. Dolchok emphasized the need for healing the other parts of us beyond the physical, to heal the spiritual and emotional parts as well.

So healing comes with a soul wound, and the solace requires a different way. We have to find them [wounds] (sic) because the physical, emotional, spiritual—they all have to heal. And once they've all come together, you become a human being....in our world we're not human beings until we've reached those places. (Dolchok, 2003, p. 22)

Individuals are seen as having the ability to heal themselves. Oral communication and teaching are how her culture operates, not through writing or reading. Hearing is a finely tuned sense among her people. Dolchok explained what it is like to have healing gifts to help others.

It disturbs me when someone calls me a healer, because I am not that. I am just like a reed, a conduit. When God chooses to move energy (or whatever it is called) for hands on, it occurs. It's not something I can call, it's not something I go through a technique to do. I just recognize when its coming and it has a price that you pay. Everyone who works in that field knows this. The scary part is, you don't want to be out there known as that, because then people think all you've got to do is show them how to heal. It isn't that way. The recipient has to be in this frame of mind, just as the conduit has to be in that frame of mind and somehow they come together. God decides whether that person is going to smile at you, and say thank you, or you go to their funeral services. That's the reality. (Dolchok, 2003, p. 21)

Walter Porter (2003) is from the Raven moiety of the Tlingit tribe and is a traditional healer at the Maniilaq Association (Native Health Care Corporation) in Kotzebue. Porter stresses the importance of myths and storytelling in passing on values and knowledge, and in providing guidance for self-healing.

Our Elders not only knew about the other world or spirit world, but they also knew how to access that world, and the importance of doing so while

here on earth. Tribal people created successful communities because of their knowledge of how to do this. They were aware of these things because they knew how to read the symbols in these mythologies. Without mythologies to guide them our world and our communities today are troubled. (Porter, 2003, p.15)

Lou Ann Benson (2003), a traditional healer who has worked with the well-known tribal doctor Rita Blumenstein at the Southcentral Foundation in Anchorage, is from the Tlingit Chookaneidee tribe. She believes it is important that programs incorporating traditional healing hire indigenous people who know as well as practice traditional values. Other tribal doctors mentioned in the literature include Charlie Gregg and Auggie Hoffman from Kotzebue, and Sam Staheli from Kiana (Mendenhall, 1983).

Rachel Craig (1998), a traditional healer in the Northwest Arctic Borough in Kotzebue, states that tribal healers existed for thousands of years. Some were magico-religious healers able to practice and cure others, before Christian missionaries labeled such practices evil and set about to erase them. Healers still exist and, using only their hands, prayers, and massage, are able to: shrink enlarged livers, set fractures and dislocations, return internal organs to their correct position and function, “stretch shrunken stomachs,” turn a fetus in the womb to the proper birthing position, remove the umbilical cord from the neck of a fetus in the womb, and remove blocks in the fallopian tubes in order to facilitate pregnancy (Craig, 1998).

In present-day AK, and in traditional healing programs, the role of a magico-religious healer (shaman) is not seen. Indeed, whether such healers still exist has not been decided. Controversy remains as to whether this role is extinct or hidden and a well-kept secret (Carl Hild, Associate Director, Institute for Circumpolar Health Studies, University of Alaska Anchorage, personal communication).

Unique Accounts of AN Traditional Healing

Examples of the ambiguous nature and inadequacy of Western-applied boundaries to AN traditional healing are found in Turner's account of Iñupiat healing (Turner, 1989; 1996) and Brew's (1992) research findings with six Iñupiat healers. Edith Turner (1989; 1996; 2004), anthropologist, spent 11 months in an Iñupiat village on the northwest coast of Alaska. Brew studied the experiences of six healers, who spoke of using prayer and channeling healing energy along with using traditional techniques of poking, manipulation, and massage. Brew concluded that the healers worked "within realities not currently recognized in Western medicine" (Brew, 1992, p. 95).

Turner (1996) provides the most detailed descriptions on the mechanics of traditional healing. She also describes an aspect of traditional healing rarely mentioned in the written literature: the use and movement of energy. Her descriptions blend the types of healing performed by magico-religious and empirico-rational healers. The traditional healers described by Turner primarily used the techniques characterized by Fortune as empirico-rational healing, calling themselves simply healers. These healers also described opening themselves to channel universal healing energy rather than traveling in altered states of consciousness. Turner's accounts are discussed and quoted extensively in the essay for this reason.

Magico-religious healers (shamans) still existed one generation back in the Iñupiat village where Turner spent time. Her journal describes discussions where this type of healer was said to have manipulated organs, sucked and blew away troubled spirits from the body, and delivered babies. Such healers, trance-traveled to find the sick person's lost soul and bring it back in order for healing to occur (Turner, 1996).

The Christian missionaries suppressed this type of healing. Today, the villagers view magico-religious healers with suspicion and their graves with caution. Despite the suppression, the village in Turner's study still had people who were "good practitioners of the old art" (p. 70). As one village practitioner, "Jim," described it, " 'You'd better know, there were two kinds of shaman, the good and the bad. When they tried to abolish shamanism, they got rid of the bad magico-religious healers, and the good ones turned into the healers. The healers use spirits'" (Turner, 1996, p. 71). "Clem," grandson to the healer "Netta" and a traditionalist, called magico-religious healers "the masters of the ancient science" (Turner, 1996, p. 40). He asked to publish oral histories of *anatuks* but the elders refused, stating the Christians in the community disapproved to the point of not even allowing ritual dances to take place in the community (pp. 45-46).

Healing gifts tended to run in families and teachings were passed down to each new generation of healers. Present-day traditional healers use their hands to massage and manipulate organs (Turner, 1996). One healer told of being able to feel the pain of someone they heal, possessing something called "second sight" ("Claire, " and Inupiat healer, quoted in Turner, 1996, p. 31). During the healing of another healer ("Netta") with severe stomach pain, Turner (1996) described how Netta's stomach was blocked and that her spirit tried to leave through the top of her head (fontanel) several times while the healer ("Claire") continuously unblocked the stomach and pulled her spirit back.

Two things are done with the hands: there is a *near* and a reaching to something *beyond*, the one hand holding the drum handle firm, the other moving. Not only is this dual activity a picture of Inupiat awareness of levels of consciousness, but it may be compared to what the two hands do in healing, as well. The left hand holds the healthy organs in position while the right hand manipulates the displaced organ until it is correctly aligned and in its right position....The healers at their tasks often put their hands on the opposite member of the patient's body, that which is healthy,

so that they can more easily sense how the sick one is different. Then the hands know which part should be brought into its right place, what the sickness is. One hand holds firm, the other bridges the gulf. Because the hands know what dead or sick tissue feels like, the live is empowered, and the hands restore the communication. (Turner, 1996, p. 33)

Healing is based on faith and intention. In healing, the healer removes the pain and bad spirit, and the person who is ill must let it go; he or she must “hand them over” (“Jim,” quoted in Turner, 1996, p. 71).

When the feelings are open (they cannot be forced), the channels to the other person are open. Somehow nothing happens if the person is not sick; it is the hands’ sympathy with the person’s sick tissues that opens the way. The “sympathy” that passes is not only “energy” and heat; it is too personal for that. Whatever it is, it is the cause of the “opening” that takes place at the hands’ contact with the sickness. That rushing of one’s consciousness into the other person—that sigh—I think is exactly the spirit in Iñupiat parlance, alternatively “the good Lord,” to whom the healers pray. It is not one’s own doing, it is one’s own allowing. It cannot be forced but is prayed for; “prayer” is of that nature and is rather mysterious....The practical part of Iñupiat healing is to create a conversation between the two bodies by means of the hands’ work....The hands thus intimately work at the pain, repositioning the organs and attracting the pain into the hands, which are “Jesus’ hands.” The healers sometimes say: “They are God’s hands, not mine.” The trouble can enter as far as the elbows, where the healer blocks it off. Then she washes out the bad things she has drawn into them. (Turner, 1996, p. 75)

Another traditional healer, “Netta,” described how she heals.

I would never say anything....Just *see* enough before I cure. I say my prayer in my mind: “I want to see Jesus’ hands for healing.” If you trust and believe, it really works....In the old days it was just like that with a shaman. There was no song. They talked to the person that was sick. (Turner, 1996, p. 119)

In observing the healer, “Claire,” working on her, Turner said, “Her hands seemed to interact with the body much more immediately, more effectively, and more gently, than pills. They *felt how* the body *felt* pain; they knew it just as one knows one’s mother’s face or one know how to talk. It was like seeing” (Turner, 1996, p. 129).

As for the associated craft of healing various spirit ideas were concerned....One had to begin to see illness as some kind of substance—then the healing worked....Thus, the illness appeared to be a kind of spirit stuff, offending inside the body of the sufferer, telling lies to the afflicted and infecting her—not only with those germs seen under a microscope but with spirit germs in a sense, quite palpable. There were useful ways to get rid of such bad intrusions—by means of bodily treatment by the healers and by soul retrieval. (Turner, 1996, pp. 227-228)

Magico-religious healers and traditional healers used their own spiritual guidance when they healed.

Many of the successes of these and Iñupiat practitioners come about because both allow themselves to be guided by their own spirit tutelaries, whether this spirit is Jesus or an ancestor spirit. The spirit's guidance is what matters to these healers, not whether they are theologically or theoretically correct. (Turner, 1996, p. 229)

Conclusion

In Alaska, there has been a resurgence and revitalization of traditional ways....Traditional healing programs in many Alaskan communities have become an accepted part of regular medical care. Elders are once again teaching the traditional ways to the children in the community. Traditional healers who practiced 'underground' for fear of reprisal from communities and churches now practice in the open and present professional gatherings and conferences. Carried on by the message of the drum and the revival of ceremonies long forgotten, the power of traditional healing in Alaska is growing. (Freeman et al., 2001)

Traditional healing in AK, historically, existed in every culture. Traditional healers (as empirico-rational healers) used their knowledge and skills in surgery, midwifery, plant and animal medicine, and massage to treat their communities. Magico-religious healers (Western term: shamans), when they were used as healers in their cultures, used rituals and ceremonies to travel to spirit realms. In the spirit realms they retrieved souls, battled evil spirits, and received information in order to heal individuals.

The need for traditional healers, always present to some degree, surged in the latter part of the twentieth century when the AN population began to reconnect to their

cultural roots. AN people began to seek more people with special gifts of healing rather than allopathic health care providers. In taking control of their destiny through political action and legislation, including the management of their health care, traditional healers were incorporated into the health care organizations that provided health care to the AN population (Bantz, 1978; Dixon et al., 1983; "Facts about Indian health services," 1997; Freeman et al., 2001; Kunitz, 1996; Mills, 2003; Morgan, n.d.; Southcentral Foundation, 2004).

Traditional healers, although acknowledged and protected by their culture and community, must also walk a fine line in their communities. Many AN people are Christian and therefore believe the "magical" types of healing are evil. Traditional healers continue to serve the AN community in greater numbers today. Their work is an important component of the goal to heal the AN nation.

Fortune (1988a; 1992a), Juul (1979), (Kirchner, 1982), and Lucier et al. (1971) provide excellent descriptions of the mechanics of the empirico-rational techniques for traditional healing. The knowledge and skills of 1) massage, manipulation, 2) "poking" or lancing (bloodletting), and 3) herbal and animal remedies were important, contributing to the traditional healers' repertoire. Such skills represent the tangible qualities of traditional healing.

Fortune's empirico-rational healing did not include, at least as reported by Fortune in the literature, the nontangible abilities described by Turner (1989; 1996; 2004), Brew (1992), and Keats (Lucier et al., 1971; Perrigo, 1986). The magico-religious forms of healing included such abilities. Intangible healing abilities of seeing and knowing, along with the assistance of spirits or God, are also included in AN traditional

healing. Turner provides the best description and exploration of such nontangible abilities found in AN traditional healers. Freeman et al. (2001), Morgan (n.d.), and Dolchok (2003) incorporate similar attributes, such as being a conduit of healing energy from a higher source, in their descriptions of traditional healing.

Fortuine's distinction between the healing performed by the magico-religious healers (shamans in Western terminology) and empirico-rational healers (designated as traditional healers in this essay) is probably a Western reductionistic framework and may not reflect true AN traditional healing. In reality, it may be very difficult to distinguish between magico-religious healing and traditional healing among AN cultures in present-day Alaska.

It is hard to imagine that the magico-religious healer role, so important and respected in most AN groups, no longer exists. Controversy remains as to whether Fortuine's magico-religious type of healers still exist in present-day Alaska, whether they are "underground," or whether they are integrated into the empirico-rational traditional healer role. While the role is thought to have disappeared, some believe they continue to exist. If they exist, they are not publicized or known—Christian religious demonization of these healers would place them at risk. They may have been "absorbed," possibly, into the title of current traditional healers, with their method of healing remaining a secret. It is also possible that magico-religious and empirico-rational healing are more integrated than generally believed in Western culture, defying a reductionistic separation that Fortuine discerned in the past. Both forms of healing were never separate, perhaps, but since non-native Whites authored most written accounts, true traditional healing was never holistically understood.

Turner (1989; 1996; 2004) and Brew (1992) describe current traditional healers who use the abilities of both of Fortuine's magico-religious and empirico-rational classifications. Della Keats (Lucier et al., 1971; Murkowski, 1981; Perrigo, 1986) also described her healing in similar ways. Perhaps, then, traditional healers today have found a way to fuse the very best abilities of their ancestral healing roles. Perhaps there have never been clear-cut distinctions between the two types of healing. Perhaps traditional healing has always contained amorphous boundaries that defy pigeonholing; traditional healing simply maintained its holistic and integrative foundation.

If magico-religious healers exist in AK presently, it is feasible that their healing practices may be integrated into the skills of current traditional healers in AK. Turner (1989; 1996; 2004) provides the most thorough account of the noetic skills of Iñupiat healers—those abilities that defy conventional allopathic logic. Such skills seem to form the bridge between the magico-religious healers of the past and traditional healers of today. These practices include the ability to “see” and “know,” with the use of the hands, what is wrong with an individual, the objectification of illness so that it can be literally “blown away” from the individual, and the aid of spirits, either Christian or non-Christian in nature, in the healing process.

What emerges from this essay is the rich diversity of cultures and traditional healing practices in AK and the small amount of written information available on traditional healers and healing. Even less is known, if it exists at all, about how their healing works. When the intangible qualities of traditional healing are viewed within a conceptual framework of the human energy field, it appears that traditional healing and

the human energy field are linked; sources point in this direction. Further study regarding this connection potentially opens a new avenue of research.

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Appendix A: Alaska Native Groups

Adapted from:	<u>Fortuine</u> (Fortuine, 1992)	<u>Fortuine</u> (Fortuine, 1992)	<u>Arctic Environmental Information & Data Center</u> (Arctic Environmental Information & Data Center, 1994)	<u>Davis</u> (Davis, 1994, p.xxxvi)	<u>Travel Alaska</u> {Travel Alaska, n.d. #458}	<u>Langdon</u> (Langdon, 1993)	<u>Krauss</u> (Krauss, 1982, 1997)
Based on:	Traditional	Geography & Climate	Language & Geography	Tribes & Groups	Culture	Culture, Language, & Geography	Language & Geography
1.	Eskimo	Aleuts	COASTAL: Inupiat	Alaskan Athabaskans	NORTHWEST COAST INDIANS: Eyak	Aleuts	
2.	Indian	Pacific Eskimos	COASTAL: Central Yup'ik	Alutiiq	NORTHWEST COAST INDIANS: Tlingit	Northern Eskimos-- Inupiat	
3.	Aleut	Yup'ik Eskimos	COASTAL: Unangan (Aleutian Islands)	Haida	NORTHWEST COAST INDIANS: Haida	Southern Eskimos-- Yuit	
4.		Inupiat Eskimos	COASTAL: Alutiiq	Inupiat	NORTHWEST COAST INDIANS: Tsimshian	Interior Indians-- Athabascan	

Adapted from:	<u>Fortuine</u> (Fortuine, 1992)	<u>Fortuine</u> (Fortuine, 1992)	<u>Arctic Environmental Information & Data Center</u> (Arctic Environmental Information & Data Center, 1994)	<u>Davis</u> (Davis, 1994, p.xxxvi)	<u>Travel</u> <u>Alaska</u> {Travel Alaska, n.d. #458}	<u>Langdon</u> (Langdon, 1993)	<u>Krauss</u> (Krauss, 1982, 1997)
5.		Southeastern Alaskan Indians	INTERIOR/CENTRAL: Kutchin	Tlingit	Aleuts	Southeast Coastal Indians-- Tlingit	
6.		Athabaskan Indians	INTERIOR/CENTRAL: Koyukon	Tsimshian	Athabaskan	Southeast Coastal Indians-- Haida	
7.			INTERIOR/CENTRAL: Holikachuk	Unangan (Aleut)	ESKIMO: Yup'ik		
8.			INTERIOR/CENTRAL: Ingalik	Yup'ik	ESKIMO: Cup'ik		
9.			INTERIOR/CENTRAL: Upper Kuskokwim		ESKIMO: Inupiaq		
10.			INTERIOR/CENTRAL: Tanana				
11.			INTERIOR/CENTRAL: Han				
12.			INTERIOR/CENTRAL: Tanacross				
13.			INTERIOR/CENTRAL: Upper Tanana				
14.			INTERIOR/CENTRAL:Ahtna				
15.			INTERIOR/CENTRAL: Tanaina				
16.			INTERIOR/CENTRAL:Eyak				

Adapted from:	<u>Fortuine</u>	<u>Fortuine</u>	<u>Arctic Environmental Information & Data Center</u>	<u>Davis</u>	<u>Travel Alaska</u>	<u>Langdon</u>	<u>Krauss</u>
	(Fortuine, 1992)	(Fortuine, 1992)	(Arctic Environmental Information & Data Center, 1994)	(Davis, 1994, p.xxxvi)	{Travel Alaska, n.d. #458}	(Langdon, 1993)	(Krauss, 1982, 1997)
17.			SOUTHEAST COAST: Tlingit				
18.			SOUTHEAST COAST: Haida				

Appendix B: Types of AN Traditional Healers Historically by Culture

CULTURE	MAGICO-RELIGIOUS HEALER	TRADITIONAL HEALER—SURGERY	TRADITIONAL HEALER—MASSAGE	TRADITIONAL HEALER—PLANT & ANIMAL USES	TRADITIONAL HEALER—MIDWIFE	PREDOMINANT HEALER
Tlingit, Haida, Tsimshian	Prominent	Used very little, only ritual ornamentation -- Less used than plant/animal & magico-religious		Used more than surgery + Tlingit, Haida	Tlingit—present Tsimshian—might be present	Magico-religious
Aleut	Present	Very advanced and important Mummification, autopsies	Present	+ Present	Present	Magico-religious & Traditional Healer
Athabascan	Present	Present Used different splinting techniques from other groups	Present	Present		Magico-religious & Traditional Healer
Inuit—Alutiiq (Koniag)	Present	* very advanced—literature scarce	Present	+ Present	Present	Magico-religious & Traditional Healer
Inuit—Inupiat	Prominent	Present--amputation often necessary	Present—used for many remedies		Present	Magico-religious
Inuit—Yup'ik	Prominent	Present but less than massage	Used more surgery than massage	+ Central Yup'ik	Known to push down to speed labor	Magico-religious

KEY:

+ valued herbal medicine the most

* most surgically sophisticated, with the greatest variety of procedures

Appendix C: Traditional Healing Remedies & Techniques by Culture

CULTURE	MIDWIFE	PLANT & ANIMAL*	SURGERY	MASSAGE
Tlingit, Haida, Tsimshian	Tlingit—Used Tsimshian—Could be used—birth often solitary	Hooligan oil, bear gall, hot springs for skin conditions Arthritis: Devil's club (also for cancer), skookum root, bearberries		
Aleut	Used—able to turn fetus in womb	Angelica root	Skilled with autopsies, lancing (boils, lethargy, extremity weakness, headaches)	Used—manipulation of internal organs
Athabascan		White spruce, bear gall, wolverine liver, ravens, fish products—Kutchin=anemone, juniper berries, arctic dock, alder buds, steam-baths; Tanana=spruce pitch, tea leaves; Ten'a=spruce sap/resin/bark/needles, red ochre, fish eggs	Lancing, poking, tattooing, scarification, dental extractions, splinting fractures, reduction of dislocations	
Alutiiq	Used—abdomen stretched and pounded		Highly skilled—bleeding, piercing/poking, foreign object removal (kidney stone included), dental extractions, cataract removal	Used
Iñupiat	Manipulation of fetus	Seal oil, whale blubber, stinkweed, wormwood	Foreign object removal, dental extraction	Diagnosis and treatment of gastrointestinal ailments, sprains and dislocations, manipulation of internal organs and joints, cold and heat application
Yup'ik	Abdomen stretched to push fetus down and speed labor	Stinkweed, willow, seal oil, breast milk, urine, beaver anal glands, wormwood	Lancing, poking	

* Generally used: stinkweed, devil's club, yarrow, Labrador tea, spruce, sourdock, wild celery, and willow