

LAND-BASED MENTAL HEALTH LEADERSHIP TRAINING

ADAPTED FROM INDIGENOUS FOCUSING ORIENTED THERAPY TOOLS FOR LIVING

INTRODUCTION AND BACKGROUND

Land-based Mental Health Leadership was a two-day workshop adapted from the Indigenous Tools for Living training. Over the course of two days, 16 participants were guided through experiential learning derived from Indigenous Focusing Oriented Therapy (IFOT). The workshop was co-facilitated by Alannah Earl Young and Amy Simpson and supported through the presence of two helpers, and two elders that walked alongside participants.



The purpose of this workshop was to act as a brief introductory to IFOT by providing practitioners with a snapshot of practical tools that demonstrate the underlying basis of this modality. Indigenous Focusing Oriented Therapy was developed by Shirley Turcotte to address the need for complex trauma and genocide-informed practices that could be used within Indigenous communities (Turcotte, S., 2012). This specific group was



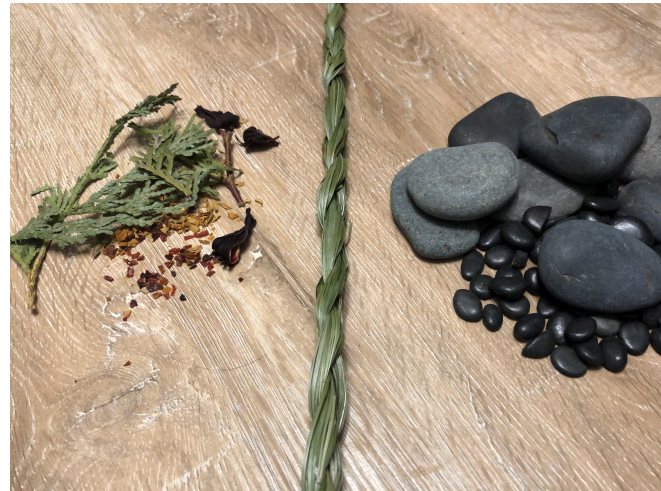
invited by the Truth and Reconciliation (TRC) Task Force, which is a joint effort of the College of Alberta Psychologists (CAP) and the Psychological Association of Alberta (PAA). This workshop was made possible through grant funding in support of the TRC Task Force's ongoing efforts towards equity, diversity and inclusion within the profession.

INDIGENOUS FOCUSING ORIENTED THERAPY

The basis of IFOT is an *all my relations* approach that invites practitioners to view trauma from a holistic and interconnected perspective. This approach positions trauma as an occurrence outside of the individual, relying on collective and generational ways of knowing from a broad-based Indigenous lens. The initiative states: "IFOT heals trauma and has been especially well-received

because it honours core values of each community and respects local traditions. It is rooted in a humanistic, person-centred approach to healing” (Focusing Initiatives International, 2021). Turcotte (2012) explains that IFOT is intended to be used with specific consideration of the client’s own innate teachings, as well as in respect to land-based teaching of that territory. In this way, it can serve as a vessel for therapeutic work that is strength-based and culturally informed by the client.

In developing IFOT, Shirley Turcotte says that she recognized the value in blending Focusing Oriented Therapy (developed by Eugene Gendlin) with Aboriginal Psychotherapy to establish a culturally informed way of working with complex trauma. The intrinsic component of this approach is the collective felt sense of historical and ongoing oppression from a wellness perspective that balances individual and generational experience (Turcotte & Williams, 2018). The intention



is to facilitate a remembering of wisdom that emerges through felt sense and which clients come to know has existed over generations as experiential knowledge. Shirley (2018) explains that the IFOT curriculum is always in flux because decolonization is always in flux. Thus, facilitators must let go of traditional curriculum and be in generational connection. Dara Williams (2018) explains the importance of lived experience as a knowledge source:

People—therapists, counsellors, human service workers—who are not people of colour can certainly learn the techniques and tools of IFOT and be able to engage and utilize those tools in the work with clients. But, in terms of people who are teaching it, I think that the only way that people are able to learn it is by coming through the experience that it came out of.

EXPERIENCING THE WORKSHOP AS A PROVISIONAL PSYCHOLOGIST

Over the course of two days, the group was guided through experiential activities in a condensed version of the Tools for Living training. As a provisional psychologist, I was grateful for the opportunity to share in learning alongside community members at various points in their journey. The majority of participants also identify as Indigenous, which was significant in itself given the lack of Indigenous representation in the field of psychology. The workshop was intended to be

in-person, but was also adapted to be delivered virtually in light of the ongoing restrictions related to COVID-19. As shared by several members of the group, this factor took away some of the felt sense that can come from gathering as a small community and in circle.

In preparation for the workshop, we were provided several videos to review on our own. With previous knowledge of IFOT, I was eager to learn. At this point in my journey, I have attended many training sessions that make great claims at their efficacy in “healing trauma.” The fact that this modality says that it is aligned with Indigenous ways of knowing sparked curiosity and many questions that, of course, could not be answered in such a condensed format. Shirley Turcotte (2012) referenced “appropriating knowledge with permission” from the original work of Eugene Gendlin to develop an Indigenized version of Focusing Oriented Therapy. My understanding is that the term Indigenous, in this context, is used as a very broad term to refer to more universal, pan-Indigenous concepts that can be used as a container for more specific teachings within diverse territories.

In the Indigenous community, as a Blackfoot person, it has been my experience that when referring to Indigenous principles, crediting the source of embedded teachings is an important responsibility which reflects the broader systems of knowledge. Dara Williams and Shirley Turcotte (2018) discuss IFOT’s stance on not appropriating Indigenous knowledge, so I imagine that this is why specific teachings are not shared or reflected in the work directly. However, I am left curious about how these concepts came to be within the context of IFOT. I imagine that these roots would be explained within more in-depth IFOT training and am curious to learn more, if given the opportunity to take the full-length training.



Within the field of trauma, there has been a general shift towards more body-centred approaches, which promote a more holistic exploration through practices such as mindfulness, somatic experiencing, sensorimotor processing, etc. These approaches are considered “align” with many Indigenous ideologies in recognition of the person as whole through emotional, physical, spiritual and mental dimensions. We know that is because they have largely been appropriated by

Indigenous knowledge systems within the field of psychology. One of the other participants shared:

“Personally, the land based experiential activities resonated with my experiences in somatic based approaches to healing (believed to have been appropriated from the Indigenous peoples). Thankfully, I have been fortunate to have collaborated professionally with Indigenous Elders since the 1990s, but at the same time, this training highlighted how much further I have to go in terms of understanding and applying my understanding of colonization. This training contributed to deepening my understanding of how/where I can make changes and bring awareness in working with my clients.”

Facilitators guided us through a series of experiential activities to demonstrate key concepts of walking alongside clients, the felt sense of vicarious and collective trauma, utilizing implicit story, flashbacks as portals into dimensions of time, guided visualization and integrating land-based medicines into trauma work. *All my relations* was embedded throughout the workshop in terms of relationship to self, others, land and all life forces across many dimensions of time.

Upon entering the circle, the facilitators introduced themselves briefly and invited participants to situate themselves. Given the time constraints, it was evident that space for circle sharing was a bit compromised. Generally, in circle format building safety and connection is crucial to honour a felt sense of community. An Aboriginal Code of Professional Conduct was sent out prior to the training which outlined the following pillars:

relationship. recognition. reconciliation. responsiveness. respect. redress. representation.

Having elders present in the workshop set an important tone for the workshop. One of the invited elders shared her role:

moving in
and
moving out
with a lens like an owl,

getting a sense of how well this would work
within community.



The non-judgmental undertone of these experiential activities captured the strength based foundation of practice that IFOT embodies. As practitioners, we explored our relationship with trauma through various prompts and containers provided by the facilitators. I noticed that some of the prompts were leading and I wondered if this was a downfall of a more condensed version of the training. For example, we were asked what land-based medicines we could identify in the inner critic drawings of other participants, rather than an open-ended exploration of our interpretation or felt sense that might have evoked a more authentic and true reflection of implicit storytelling.

Titration was a concept that was embedded in all activities through instruction to unpack “a sliver of the trauma.” Examples were provided of ways to work with fragments of dreams, flashbacks and the inner critic. In this way, a relationship is built with the trauma and through a bottom-up approach and clients are able to “get on the other side of trauma.” These foundational concepts felt very accessible as entry points.

Broadening how we view trauma was intended to reflect the medicines not only within the client, but also around them.

CLEAR SPACE
FELT SENSE
HANDLE
ASKING
RESONATE
& RECEIVE



PARTICIPANT FEEDBACK

Participants reflected on how the training will move forward through their professional work and personal journey:

“I have found this training immensely useful for work and personal journey. I have already brought the Inner Critic exercise to my online University class as we were on the topic of Shame and Guilt and it fit in perfectly. Students were able to reflect and connect to their inner strengths and medicines which didn't leave them feeling heavy after class ended.”

“This is very useful as the tools help to focus on land, her medicines and strength based.”

“It will for sure impact my work because I work in an Indigenous community and I am Indigenous (personal journey). I have not done any training or personal work in the collective, only individual pain/hurt, so that alone has impacted me tremendously.”

“I am very grateful for the teachings. I am glad to learn the Indigenous ways of knowing in healing practices. I have always had that as my foundation throughout my journey and my work...this just gave me the tools (exercises) to bring forth in working with intergenerational trauma.”

“I feel like this training provided me with some invaluable experience in working from an Indigenous perspective.”

“Those two days were such an amazing experience. The connection and learnings that were shared were so powerful. I personally felt that the session provided great healing for me, and I am looking forward to continuing these practices. The learnings had me thinking about the inner critic in ways I hadn't previously conceptualized before, and it was very impactful. I am so grateful I was included and able to share with such an amazing group of people.”

TWO WORDS:

Sharing. Rocks. Excited. Tired. Refreshed.
Connected. Protected. Community. Curiosity.
Empowered. Our relatives.
Wondering. Thank you. Listening. Grateful.
Joining. Resonate. Interconnectedness.
Guided. Setting aside. Connectedness.
Validation. Remembering. Contemplation.
Reconnection. Appreciation.

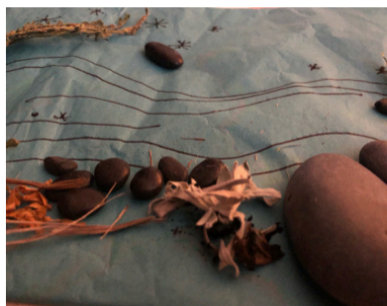


Participants shared highlights from the training:

- Expressive arts component to facilitate non-verbal storytelling
- Experiential aspects which allowed participants to engage in their own process
- The lemon exercise which was a helpful visual in recognizing how trauma can be felt by others
- The bringing in of the two grandmothers to the training and sharing space with elders
- The sharing of songs and cleansing ceremonies
- The active way the facilitators taught and demonstrated concepts
- The videos provided to elaborate on concepts and facilitate diverse ways of learning
- Being able to work with the medicines, the stones, and the dream work
- Idea of helping versus healing which acknowledges that we all need help and there is not necessarily a right/wrong way of doing/feeling
- Didn't have to step out of being Indigenous to experience the workshop or work this way (familiarity)
- Entering circle on a number of planes, invited to be a participant in own body
- Being able to look at this new experience through old eyes

“I look forward to expanding my understanding of medicines and deconstructing my own understanding and experiences of colonization in order to better serve the profession and my clients.”

"One of the things that I liked about the whole experience is that I was allowed to shape shift, that there was a recognition that in our worldview, everything is always changing and that means that we're not stuck in our own body in one way and our spirits have room. I like the idea of being able to move in and out of what was going on—concentrated more on remembering what was being said, falling into guidance given “



CONSIDERATIONS MOVING FORWARD

The Land-Based Mental Health Leadership training was well received by participants who shared immense gratitude and alignment with many of the foundational aspects of IFOT as shared through experiential activities. The practical tools shared throughout demonstrated an understanding of diverse and paradoxical ways of knowing as a foundational framework in which practitioners could work in relation to their own lived experience. Numerous participants expressed grief in not being able to meet in-person, which was described as an important basis of forming trust, safety, and connection. However, it was evident that those involved in planning the workshop were intentional in mediating any of this loss through the thoughtful gifts, plentiful breaks and intentional pacing of the content.

Given the nature of this specific group, cultural competence may have been assumed but I think that it would be important to consider where participants are at in their own decolonizing journey. The tools presented were very accessible and practical. However, taken out of context, or practiced without responsibility, there is always a level of risk of harm to the client. As in all professional practice, the practitioner is responsible for practicing ethically, within their scope and cultural competence. These tools can be beneficial as entry points for exploration. However, used at a surface level, could be misleading if a practitioner is not able to deepen or embody underlying concepts of a holistic approach. Frameworks that are spiritual in nature often attempt to make spirituality theoretical, but it is important that the process of coming to know is not bypassed through the ever-present colonial lens and need for accessibility and skill-based training.

Several participants described the moral and ethical obligation of practicing in a way that is honouring their own cultural teachings, authenticity, and continual movement towards decolonizing. The snapshot that was provided through this workshop felt true to an intersection where western psychology meets Aboriginal psychotherapy but should not be viewed as an endpoint by any means. One participant shared that the workshop left them “feeling empowered, dignified, and like I could still do this and be Indigenous... This way of thinking and doing is movement toward reconciliation.”

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