

## Teachings to Support Grief and Loss in First Nations, Inuit and Métis Communities

This section of the toolkit contains general information and resources on grief and loss, as well as personal stories and traditional teachings that might be helpful to individuals and families in First Nations, Inuit and Métis communities who are experiencing grief related to a loved one's cancer or other life-threatening illness.

It lists several online videos with personal stories of First Nations, Inuit and Métis individuals and families' cancer experiences.

It also lists resources that might be helpful for talking about illness and dying.

*Mom fought against cancer for almost five years. First she had breast cancer. Then she developed other kinds of cancer when the breast tumours spread. She was sick during almost all of my teenage years. When she died I felt terrible – really depressed and angry – but I also felt relieved because all her suffering was over. That was hard because I didn't think I had a right to feel relieved.*

- Amanda, seventeen. *Teens, Loss and Grief: The Ultimate Teen Guide*. Edward Myers © 2004

### What is Grief and Loss?

Grief is something everyone experiences, and each person needs to find a way through the healing process after a loss.

There is no one "right" way to grieve, and there is no way to anticipate exactly how the feelings of sadness, anger, loss, and loneliness will heal and resolve. Some have described the grieving process as a roller coaster, filled with highs and lows. Over time the roller coaster evens out so the highs and lows are more manageable, but the big ups and downs can reappear, especially at important family events, anniversaries, holidays, or other special occasions. People who have suffered grief do say that it will get better with time and the support of friends and loved ones.

## Loss of a Loved One

The most intense grief experience usually comes from the death of a loved one. Feeling empty and numb is common. Besides deep feelings of sadness and sorrow, physical symptoms may arise — long- or short-term memory loss or the inability to eat or sleep, for example. Sleeping or eating too much is also common. Other emotions in the grieving process can be profound sadness, longing for the loved one, guilt or regret, anxiety, fear, ambivalence or helplessness. Strange or disturbing dreams can arise. Absent-mindedness is common. In fact, grief and sorrow can lead to a sense of “losing one’s mind.” Such feelings and behaviours are normal and will pass.

### **There is no timetable for the grieving process.**

Over time, the intense grief and sorrow subside. As the National Hospice and Palliative Care Organization states, the “sweet sadness” that arises when you remember your loved one “is simply the acknowledgment that significant loss has occurred. That the loss, and the person who is gone, matters and affects our lives.”

### **Stages of grief**

Many people are familiar with the five stages of grief introduced by Elisabeth Kübler-Ross in 1969. These stages are: denial, anger, bargaining, depression, and acceptance. The model was based on Kübler-Ross’s work with terminally ill patients.

People who work with the bereaved have learned that grief is an active process. Many people find it empowering to know that they are resilient. They take comfort in actively processing their feelings and memories and creating ways to honour and celebrate their loved one.

### **Physical reactions**

Grief and loss affect more than just a person’s emotions and state of mind. They can affect the body. Physical reactions to grief can include:

- Fatigue
- Inability to sleep
- Pain
- Stomach pain
- Gastrointestinal upset
- Chest pressure
- Heart palpitations
- Backache
- Panic attack
- Anxiety

Many of these warning signs, however, also may point to a serious medical condition that must be addressed. If these symptoms are severe, it is important to seek medical assessment from a healthcare provider.

## Anticipatory Grief

**Anticipatory grief comes when a loved one is facing the end of life but the death has not yet occurred.**

Anticipatory grief is both a blessing and a curse. The blessing comes because you have time to emotionally adjust to the impending loss, resolve regrets, and make amends. Another gift is the opportunity to share your feelings of caring and appreciation with your loved one. From a practical standpoint, you may also be able to discuss end-of-life wishes and other preparations.

**The difficulty with anticipatory grief is witnessing the loved one's struggle.**

Seeing someone you love in pain and caring for their needs is extremely stressful. Also, each change for the worse brings a new wave of grief for the caregivers and family members. Depending on the nature of the illness, anticipatory grief can last for months or years. Those who have been through anticipatory grief advise others to avoid feeling guilty about any negative feelings you may have (which are normal) and look for the positive in the time you can spend with your loved one.

## Upsurges of Grief

**The intense feelings of grief can come back, unannounced.**

Even when the intense mourning is over and the loss of the loved one is fully accepted, many "firsts" may touch off a new round of intense and possibly unexpected grieving: the first holiday, birthday, anniversary, and other family events. The grief response may lessen on these particular anniversary days as years pass, but it may not go away entirely.

**Many unexpected things can touch off a memory.**

Grief surfaces, too, at the most unexpected promptings: a sight, sound, or smell that reminds you of your loved one; learning about the death of someone you don't personally know; songs on the radio, television programs. Emotional responses to unexpected triggers can be distressing. It can help to know that this is a normal part of the grieving process.

## Common Misconceptions

### **Grieving should not last longer than six months.**

There is no timeline for grief. Again, grief reactions vary in intensity. They can be triggered or worsened by anniversaries and holidays. If someone's grief is severely interfering with daily functioning, it could be a sign of complicated grief, and a healthcare provider should be consulted.

### **Only weak individuals grieve.**

Everyone grieves. After a loss, feelings are unpredictable. They can range from sadness to fear to loneliness to anger. Hiding emotions during grief is not helpful. Processing feelings is extremely important to heal and recover from grief and loss.

### **Not crying following a loss means you are not experiencing grief.**

Lack of crying or sadness following a death does not mean someone is not grieving. Many people are in a state of shock or numbness following a death and aren't able to cry. Others may cry privately. Some who come to terms with the death quickly do not appear as affected by the death compared to others who show more outward signs of grief.

### **We slowly and predictably recover from grief.**

Grief is an uneven process, best thought of as a roller coaster with no timeline. It doesn't have a specific ending point, and recovering does not mean "letting go"; rather, over time most people learn to live with the loss.

### **People who are grieving need to be left alone.**

Social support is extremely important for people who are grieving, for a period long after the loss. People who are grieving need opportunities to share their memories, talk about their loved one and their loss, and receive support from others<sup>15</sup>

## Kinds of Grief

### **Anticipatory Grief**

Grief can occur before a death as well as after. People living with terminal illness often experience what's called anticipatory grief. This grief is generally related to loss of independence or changing roles within the family and the workplace. For families, anticipatory grief involves witnessing these changes and reacting to them. Family members may feel the loss of future plans as well as recognition that the family will never be the same. This kind of "grief

ahead of time” can be quite confusing and painful. We sometimes don’t want to give in to our feelings of loss and want to try to maintain a positive outlook. However, the feelings are there and in a way anticipatory grief is an attempt to prepare us for what lies ahead.

### Disenfranchised Grief

Another kind of grief is called disenfranchised grief, which can occur in these circumstances:

- We are grieving losses that aren’t always openly acknowledged or socially supported. For example, some people may feel unable to seek support or talk openly about death due to suicide.
- The loss is not recognized as significant. The loss of a friend or a distant relative may not be considered as significant as the loss of a parent, child or spouse. Yet, our grief is more related to our connection to the person than to the type of relationship.
- The loss itself is not recognized. A classic example is our grief over the loss of a pet. This can be a very intense emotional experience but we may not share these feelings because an animal has died and not a human being.
- The griever is not recognized as being capable of grieving. Examples include people with dementia or younger children. But, both groups are capable of experiencing grief and it is important to find ways to understand and provide opportunities for expression of this grief.

The recurring theme in all these examples of disenfranchised grief is a sense of isolation. A key to coping is to recognize that you’re not crazy and these thoughts and feelings are very real and normal. Especially when we are dealing with social taboos around what we can be open about, we may feel intimidated or even ashamed. But, your grief is totally justified. If you can’t find the recognition and support you need in your own circle of family and friends, it may be helpful to contact bereavement services in your area<sup>16</sup>.

## Stories and Traditional Teachings

*Everyone has to have a system of belief. If they don’t have this, they walk with fear and anger. When this fear and anger comes in, anger is the emotional expression of fear; fear takes over on all of us... Believing helps the consciousness be strong and not be afraid. If you’re told, you have this and you’re going to die, then they just say, “Oh, O.K. I have this and I’m going to die.” They don’t have the will and they don’t have the belief. A belief system is most important. That’s why I call it the Medicine Triangle. You have to have those three things in balance, spirit, mind, and blood.*

- An Aboriginal Elder, edited from Nashine Ginwenimawazawin, Constant Care. Shelly Vanderhoef.  
©2-Spirited People of the First Nations, March 1998.

*A lot of Métis people will ask for the last rites from a priest, and others will ask for a smudge when it is their time to pass on. Many go back to their old ways; at the end they say, “could you give me some tobacco to hold, and a smudge” – it’s good. They’ve never forgotten the ceremonies. If they are in the hospital, it is important to have communications in place to support these practices.*

- Senator Roland St. Germain, Métis Elder, February 2014

*Within Inuit culture, the person is asked if they have any last words they would like to share, any messages they would like to have passed on to anyone who lives away from them. The last words of the individual are the most important to follow through on.*

- Inuit Focus Group Participants, January 2014

The following stories are told from individuals’ personal experiences with a loved one’s illness and with advanced cancer.

### **Story: Speaking My Truth: Anishinaabe**

As a young child, I lived with my mother Mary, my father David, and my brothers and sister on the trapline in the Lac Seul area of northern Ontario. One particular night . . . “Your father is very ill,” Mother said to me. . . Mother was packing all our worldly possessions – blankets, dishes, food, clothing and furs. We were going back to the village of Ningewance Bay to be near help should Father’s condition worsen. At least there we would be close to my grandparents . .

At Ningewance Bay, it became clear how seriously ill my father was; he went to bed and there he stayed until the warm winds of spring arrived. Extended family members and others would help us a great deal that winter. We were so grateful whenever someone arrived with a fresh catch of fish or moose meat to feed our hungry stomachs. There were many nights we went to bed hungry and tired. Help from others was always very much appreciated.

Throughout that winter, I watched my father fade into a deep unknown illness. I was often scared. I had involuntarily become the man of the house and had to assume a lot of responsibility. I got firewood, hauled water from the waterhole down at the lake, and went for help at times when my father’s condition worsened. Many nights Mother would rouse me from bed to seek help from neighbours and relatives. I would walk through the bush in the middle of a winter’s night to tell people that Father was very sick and that he might die very soon. Walking along the bush trails of Keesic Bay Island with my coal oil lantern was an eerie experience. . . The walk home was such a relief because someone always came back with me to sit beside my ailing father.

Father sought help from two highly regarded Elders from the community . . . [h]e would faithfully take the medicines they gave to him and soon he began to feel better<sup>17</sup>.

## Stories About Cancer: Woodland Cree, Northern Saskatchewan

The first case of cancer here was in 1944, a long time ago, my father was the first to have it in his stomach. But now today, there's got to be something to that, that they are catching it. But this is the worst thing (pointing at snuff). Those that smoke are the ones that are most likely to get cancer too. It's mostly their smoking that causes it, so they say, or so I've heard. There was nothing a long time ago. I was told that when I could afford something for myself, only then could I use it. My father used to tell me that tobacco served no purpose; it's just a distraction, takes money away from one. When you can afford it, you can smoke, he told me. So I didn't even steal his tobacco even though I wanted some (laughing). I smoked for a little while, when I was outside, when I was chopping wood, when I would rest that's when I would have a smoke. I quit smoking a very long time ago. Long ago, people didn't smoke cigarettes, and only the old people smoked and they smoked pipes. And they didn't use pure tobacco either, they would add leaves and some roots, they would dry those and mix them in the tobacco. Oh, the smell was so aromatic when they smoked. Young people didn't smoke then, but today, even those still in their baby blankets are smoking. It's not surprising that they catch that disease, their bodies aren't strong...and they smoke bad stuff as well.

A person has to tell as soon as possible if they feel that something is wrong with them, perhaps something can be done for them. I go and visit the sick people that are in the hospital, these cancer patients and they are very happy when they get visitors, maybe it distracts them and they don't feel the pain that much. I don't like it at all when I hear that someone has those.

It is true that it's very difficult when one is told that those things have been found in their relative. Hopefully one can be treated so that they can be better a little longer, that's what I think, but there aren't many that survive...but yet there are many people that live for many years after they have been found to be like that, many are still active, like they are healthy. I don't know how I would feel if I was told I had munchoosuk, I would probably be pukwati (sad, unhappy) but then again, we aren't meant to live a really long time as we get older. Besides I have raised my children to adulthood, only my grandchildren are little and I would miss them and they would miss me. I was 'given' many children, and I'm thankful that I've been able to raise them.

It's probably not for a long time until someone begins to feel it there, but for me, I didn't know it was that. It's difficult, having that illness. I used to be sick, for a long time and I didn't know what was making me sick. And, I never felt like doing anything. Then one night I was sitting on the chesterfield, lying down and I couldn't figure out how I was feeling in my back and I went

like this (feeling breast), it was like an egg. 'Come look at this my daughter', I said, and she was feeling it too, it's just like an egg. 'Wa-wa, make an appointment, seemak (right away)' she said. But I didn't jump to do her bidding, so she starting giving me hell, 'seemak'. So I called my doctor and she told me to go down there the next day. 'I have to send you away, to Saskatoon,' she told me. And it wasn't even one day that they called me back, telling me that I had to leave, to go see another doctor in Saskatoon.

So I went to Saskatoon, to go see the doctor that I was supposed to go see. Not even a week after I got back home, he called me and said, 'you got cancer and we'll set a schedule for it, to operate.' and I started crying eh, I don't know why. So I went to Saskatoon and that thing was taken out. The doctor told me that they had to cut it off, my breast, one of them, and they put something inside, only my skin, it was all right and I'm using that artificial breast. I was almost in disbelief, because I never felt any pain, just that pain, on my back eh. So I went and they operated on me right away but it didn't hurt, you know, after they cut me open, it didn't hurt, I prayed. I had the surgery and then I came home.

About a week later, I left again, to go have radiation over there, at the University Hospital; I was there for 6 weeks of treatment. They gave me radiation and that other treatment, I don't know what it's called, they would inject the medicine in me. I was there for 6 weeks. I was so, so lonely...although my children came to visit me.

But I knew I wasn't the only one going through this because I even saw kids that were going through this, poor kids, they are so small when they get it, but me, I knew I shouldn't feel sorry for myself, I knew I wasn't the only one that had it and I started to get over it, after seeing that many other people had it as well eh.

And when my treatment was done, I came home. All my hair fell out and I was so skinny, I was gaunt, even my eyelashes were off and my eyebrows...and the doctor said your hair will grow back, it may be white or you could have curly hair, but I didn't get any curly hair, just getting white hair (laugh). I didn't feel a thing when they shone the light on me. It was only after the treatment, when I came home, although they did tell me that I would get fatigued, oh, did I get fatigued! Sometimes it still hurts so much especially when I'm doing something, like when I'm outside; it hurts when I have to lift something. But it never reappeared again, so, I was quite happy about that and I just keep on praying.

When I first found out, I was just, I didn't know what to think, I was extremely pukwutamun (upset), I just stayed home, I locked myself in the house, didn't go anywhere. I felt very bad, I wondered why; I thought I was going to die because I had heard of so many people who had died from cancer. That's what I heard and I would think that I would never get well again. But my family talked to me, they said I should go ahead with the operation.' And I said, 'no I don't

think so', I wasn't gonna, I didn't want to go but they said 'your life is, you might get a few years, a few years of your life will be extended if you go for that operation,' so they talked me into it. But there was something else, I began to remember that I had a lot of faith in Munitou before and I thought why wouldn't I have faith in Him now and I also know that everyone is going to die, not necessarily from cancer. I believed that Munitou could cure me, because these doctors, they are given the power from the Munitou to cure people. Munitou uses the doctors and then when people pray for you, Munitou hears and helps them and then they have the ability to cure you. One more thing that I believe in, even if I am healthy, there will still be a day when I leave this earth. I also believe that every day, I pray for myself, you understand?

I'll tell you one more thing; when one has faith in Munitou, there is no confusion. Your soul works for you, fights for you. I'm not saying I'm holy or anything, but that's just my belief, I can't change it.

But I hated it, losing my breast; it was like they took my womanhood away. I couldn't even look at myself for two months. Even when the dressings were changed, my old man was the one who changed them, I never, I couldn't change my own dressing and he was the only one who looked at me when I had my stitches out, I couldn't look at myself. And today it's still hard for me to take off my breast and put my breast in a box and go around with one because I feel so lopsided; my cancer is so visible while others are not. I didn't go for help, to talk to anyone, I didn't want to complain, so I thought, just one day at a time, I took it. It was very hard on me. I shed a lot of tears, my husband, my husband was really supportive.

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Two years ago I lost my Dad on March the 21st, which is 2 days after my birthday, of cancer. It's still hard for me to talk about it. Dad had prostate cancer; he suffered for quite a while, quite a few years. I think he was sick for a long time but he didn't tell anyone. It wasn't until the pain was too much that he agreed to go to the doctor. He was having lower back problems that maybe we should have questioned it more, rather than accepting it as a bad back.

But then because he had a very physically hard life that I thought, sure he would be bound to be wearing, stressing his body too much, that's what I thought it was. But then later on, before I knew he had cancer, when I had to start doing heavy lifting for him and stuff like this, then I knew something was going on but he never admitted it until later because I also don't think that maybe he even fully knew.

But he knew there was something wrong because the one time he took off up to the trapline, he used the bush as a place to escape and as a place to relax and get away from things. The cancer clinic had phoned that day and had told my mother, but for some reason she hadn't told

my father but my father knew so he spent a couple of days at the trapline and when he came back he was ready to begin his treatments. My father was a very physically active, healthy person, so they went ahead with every single treatment. He had chemo and radiation, but he didn't mind going to Saskatoon because he spoke English well.

The first chemo that he went through, it wasn't too bad. The second chemo, was the worst one, I believe, the second one because his body was just saying, whoa, what is this coming into my system. He was puking up a lot more blood, he was fainting, and he had a bit of memory loss. Living with somebody that had chemo, some days he'll be really, really grouchy, some days he'll be really depressed and some days he's just like his old self. When he lost his hair, the doctor told him 'your hair might grow back.' 'When it grows back can I have it blonde (laugh),' he said. He was so joking about it, can I have blonde hair and the doctor said, that's asking a little too much. It was 2 weeks between each chemo treatment and it was just for 2 days. Mom went with him on his trips south and when they would get home we would phone Mom first and ask her what was Dad like that day and depending on how he was feeling would determine whether he could handle visitors or not.

When he went for his radiation treatments, he was in Saskatoon for a week at a time. There were a lot of things he would not do, like he would not stay at the Cancer lodge, that place where they stay because he didn't want to be with a bunch of sick people, so Mom and Dad stayed in a hotel with a kitchenette during the week while he was here for treatments. It was for a six week period and they would bring down all his favourite food, smoked muskrats, moose meat, all sorts of stuff, smoked fish, and also chocolates. My Dad and I were really bad for eating chocolates. So he tried to maintain a quality of life all along and he had a very good quality of life; he was well for 4 years after he completed his treatments.

And then it came back. 'It's back' he said, 'that feeling is back'. That was the only time I saw a tear in my Dad's eye, when he said that, but it's okay he said, he accepted it. So it wasn't until the last two years that things, the second round of chemotherapy was really wearing him out. I told Dad at the time if you find that you cannot tolerate the treatments anymore, you can tell them to stop, it's your body.

So one day at the hospital, he said, "take me home, I don't want to die here", so we brought him, we looked after him here, right to the end. I think if a person is happy where they are and relaxed, and is able to move around, well then that way they don't feel weak, they feel stronger, and they grow stronger, when they like a place where they're living.

My kids were there, they would come and go, anytime they wanted to go and see him. My mother did tell me that when she would take care of him; she would rub his back with medicine, maybe when he was experiencing pain. She told me that she would cry when she did

that and my father would tell her not to do that, to not cry when she looked after him. Another thing was we always tried to make sure that he didn't get colds and stuff like that. We would wear those masks around him and made sure anybody who was sick would not come to visit. But he did get a bad cold, which turned into pneumonia and he must have been getting more ill, because he never recovered from the pneumonia. I don't know if the cancer had traveled to his lungs. When he was hurting on his chest, we'd give him wachuskomitisowin, I would crush it, and then I would boil water and put that powder stuff on his cup and he would drink that hot. He preferred to drink that, than those Tylenols 3s, that's what they gave him for pain. He used to say that they caused too much pain in his stomach, so that's why he didn't like it.

I really miss him but I always remember what he taught me, it keeps me going, when things are looking down. I miss him. Looking back, I think we could have questioned his aches and pains more. They always say that people go to the hospital for any little old thing but I think now, any little old thing I would question, more thoroughly rather than it being just a fear.

Mom and Dad talked about his insurance and his will before he started his treatments, he had everything all covered, because he didn't know how fast his cancer would progress. Because like he said, "I don't know if the chemo will work or it might get worse. I have to get this in order because it might affect my memory." I don't think he was scared; he had talked to the doctors. He told them that he didn't want them to beat around the bush with him or us, he wanted everything straight out. The first time he got pretty sick, and the second time it killed him, I'm sure it was the chemo that killed him, because he couldn't fight off any infections, and he got pneumonia. That's what got him, was pneumonia.

He had told us not to put him on life support, you know, he had told us that in the end; he said "don't put me on life support, whatever you do." And I think that was the hardest decision we had to make, was telling him, "Dad, we have to put you on life support, you know, we can't just let you go." And we put him on life support, but he had agreed to it. We had said "until all the family get here and we said we'll take the life support off as soon as everyone gets here." And as soon as we were all there, and the nurse and the doctor just basically told Dad that they were going to take the life support off and he squeezed our hands, and he went peacefully, very peaceful, like, he took a deep breath just like he was really tired.

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I was shocked when I heard it was cancer, like I didn't believe it at first, because he always worked and took care of himself. He would go walking every evening, just out of habit and he'd chop his own wood still. It was kind of weird to hear that he had cancer and we of course thought the worst, we thought he was going to die real soon. I think we were all in denial as

well. We didn't want to talk about it, you know, we were going to beat it, regardless how long it took, we were gonna beat the disease, we were gonna beat it. My emotions were just all over the place.

But after the second time, people said that I was being a real cold hearted bitch because I accepted that he had cancer and I accepted that he might die, especially near the last 2 years because of the chemo. But I always had hope; I had hope until 3 days before he died. I also knew that he was 70 by that time and that he did live a very good healthy life. One of the hardest things is to have to watch a family member die, and I watched my Dad die and it's just so painful, and here I was taking a university class, we were taking that death and dying class, so it kind of helped me understand the stages that my Dad was going through ...but you want to hope. That's what we did, we would hope.

Throughout my father's illness, he didn't want to be treated like he was sick and so we didn't and it wasn't until near the end that I wished I'd babied him. When he went into the later stages of cancer, was where I had the most problems. I guess the most regret I have is that I never told my father enough that I loved him. But it wasn't something that we did while I was growing up, was show a lot of physical affection and a lot of verbal affection. We would praise each other if we did a good job, but we never really hugged a lot or kissed, but we did do things for each other and so that's the way I was raised. But I wish that I had told my father that I loved him more, but I never did, he probably would wonder what the heck was wrong with me if I went around telling him. My father was proud of me; I know that, even though he wasn't very expressive, I knew that he was proud of me.

It was really rough towards the end; it was really, really hard. It's amazing how grief affects you, because you know, you don't ever think you're ever going to get past it. I did see a counsellor for anxiety and depression and that helped. I went to see the doctor and right away, he says 'oh you got to go on antidepressants, you need these to help you get through this'. I think antibiotics were the strongest medication I'd taken, and I did try taking them but I think they almost drove me nuts. They did the opposite (laugh) I was this hyper woman running around town. I think I took them for 5 days and I quit taking them. The counseling worked better, for me anyway. But you know, the loss, to deal with it, it's hard. I still cry but I pray a lot and that helps, it's healing when you cry too. There I said it and I didn't cry (chuckle), but they'll always be there anyway, you never forget them, they're there all the time.

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It was rough, rough on all of us, but I dealt with it, the best way I knew how. My father was never comfortable with me providing certain parts of his care, because he'd always wait for my mother to help him go to the bathroom and stuff. I would say no it would be okay because I

won't think of you as my Dad, I'll think of you as a person, you know, and help you go to the bathroom. It's hard for a family member to provide personal care of somebody who's ill. I wanted to help my Dad more with the personal care but he wouldn't let me<sup>18</sup>.

## **Traditional Approaches to Supporting Loved Ones in Sickness and Death**

### **Haudenosaunee (Iroquois) Funerals**

Every nation around the world has their own way of dealing with the loss of loved ones. For the Haudenosaunee (Iroquois) death is the natural transition from the earthly world to the sky world. Upon leaving the body, spirits ascend to the sky world by way of the Milky Way.

The method of dealing with death was adopted in part after a young man named Ro'nikhrowá:nen, meaning "he has great ideas" suggested a system of dividing the nation into clans. At the time, before the Peacemaker visited, the nations of the Haudenosaunee faced death every day with the warring of the nations. Because the custom was to mourn for the dead for a period of one year the people were in constant mourning. With everyone mourning the nations could face social economic breakdowns.

The young man divided the nations into clans and then again into moieties (a collection of clans). With this system, a plan was in place that if a person within a clan has passed on, all the people of the immediate family and clan would be in mourning and all those in the clans of the opposite moiety would console the mourning. It would then be the responsibility of these clear minded people to handle all preparations for the ceremony including wake, funeral and burial for those consumed with grief.

This system was lost over time but was renewed upon the arrival of the Peacemaker with the addition of the *condolence ceremony*. The condolence ceremony acknowledges the Chiefs from the past and helps the people who have lost a family member to overcome their grief and continue in their lives. As well a condolence ceremony is performed to raise-up a Chief to succeed the deceased Chief. The first condolence ceremony was performed on Hayehwa:tha after the loss of his family. The Peacemaker knew that it must be performed to help heal his mind and make it clear again. Using wampum strings and a speech with each string the Peacemaker removed the tears from his eyes so he could see clearly, cleared his ears so he could hear again and removed the lump in his throat so he could communicate clearly.

Today condolence ceremonies do the same though there are differences depending on the person who has passed on. In the case of a Chief there are 15 wampum strings placed over the Condolence Cane with a speech of 15 affirmations intended to console the grieving. Those in mourning appoint a speaker who responds on their behalf and expresses thanks for the messages of condolence.

These messages are:

1. Wipe away the tears of grief
2. Clear one's eyes of distress
3. Resume the breath of peace
4. Relieve the twisting within the body
5. Wipe away red marks from one's space
6. Bring life over the darkness of grief
7. While the sky clears - let's watch for peace
8. Restore the sun - remember peace
9. The grave cover restores the mind
10. Elevate the mind through the land
11. The council fire rekindles the peace
12. The Faithkeepers' tent
13. Calm the insanity of the mind
14. Replace the torch of the community
15. Installation of the good mind

A typical Haudenosaunee funeral consists of a wake held in the family home. During this time a speaker addresses family, guests and the body of the deceased. Members of the opposite clan are appointed to stay awake and stay with the body until burial. During this time a midnight lunch is held and games like the bowl game, dice game or other guessing games are held to keep the attendees awake.

Following the wake an address is given at a longhouse funeral similar to but shorter than the condolence offered for a deceased chief. This condolence helps the family deal with their grief.

Ten days after someone has passed on a feast is held to help the spirit on its journey to the sky world. Food prepared for the family, for those that helped with the wake and funeral, as well as for the spirit of the deceased. Tobacco is often burned to aid the spirit in its journey to the sky world. During the month of March most longhouses have a special dance dedicated to all of the dead to assure that they are properly taken care of in death<sup>19</sup>.

## Haudenosaunee Mutual Aid Societies

Remember when our ancestors had no hospitals, welfare offices, old age homes and daycare centers. Our people played an important role in our community. They were helpers of all ages and sizes conducting some kind of aid in their village. Everyone knew how to help and where help was needed. Nowadays everyone has to be told what to do. Young, big, strong men would perform strenuous tasks for the young and elderly. Our communities back then could handle any problem that arose in the village whatsoever!

At the time of the Peacemaker and the coming of the Great Law, young warriors were directed to once again take up their role as aid givers and to give up their warring ways. Their weapons were buried under the Tree of Peace for all time and communities that formerly had only time for weeping began to sing again.

For before the dark times of the Rotinohson:ni\* when young men were encouraged by war chiefs to take up arms, young men and women had formed the mutual aid societies of their communities. They helped out those who were in need, especially the elders and families that were grieving. They worked in bees and put up buildings and other large community projects.

As they spent time with the elders they would learn the songs and traditional teachings. Clanmothers had a chance to watch the conduct of individuals and choose those to be groomed as titleholders or for the key positions in the community.

Once again we need to bury the weapons of war and begin to aid those who are in need. The act of giving creates in us a good mind. The act of giving enables the proud spirits of the young to receive the teachings of the leaders. The act of giving and burning tobacco enables us to be thankful and it is the thankful heart that sings best to the Creator. . . With both good mind (leadership) and good heart (mutual aid) the community will have the essentials for meeting whatever disasters it might have to confront<sup>20</sup>.

## Traditional Inuit Healing Therapies

At a conference in 2007, Inuit Elder Thomas Ootook from Pond Inlet shared traditional Inuit approaches to healing from trauma. His message was that healing comes when trauma is faced head on and discussed.

He used a picture of a food cache as an analogy. “There is caribou meat in there,” Ootook said. “It is covered with rocks to keep the animals out. There is nutrition in there but the rocks have to be taken off to get to it. I will look for help to release that rock. It comes out through my mouth. Some are small, some are large. The biggest ones on the bottom are the toughest. They have to come out through our mouths.”

He said, “Sometimes men cry with the sound of the snowmobile and release their pain. We just have to get rid of those rocks one by one to release all of that good food.

“The biggest one is right inside your stomach. Problems keep piling up on top. Without releasing all of that pain, we pile them up very high. We need to speak. What saved my life was my mouth. I had the courage to talk about my pain and it saved my life.<sup>21</sup>”

### **Story: Métis Cancer Survivor**

‘How do women who do not speak English communicate about their illness?’ This question was asked by an elderly Cree woman while sharing her experiences with breast cancer.

Her words brought memories of my 97-year-old kokom who passed away several years ago. She had come to spend a month with me and on this particular morning I was going to take her to Eaton’s to buy a new dress for a great grandchild’s wedding. I was finishing the breakfast dishes while she took a bath when she called me in to help her. I stopped mid-way into the bathroom.

The facecloth she was holding in front of her had slipped away. She was breastless, covered with thick ugly scar tissue and around the place where her breasts had been, there were what looked like huge black stitches.

“Oh my god kokom, what happened?” I was horrified. She grabbed the cloth and held it in front of her. “The doctor cut them off a long time ago,” she said. “I went to the hospital and after a few days they took me to this room and gave me a needle, when I woke up the first one was gone.”

Three years later she got sick again and went back to the same hospital and the other breast was removed.

Sensing my guilt she explained that she didn’t call us because she didn’t want to bother anyone and that my uncle who looked after her was away working. Then later she said she was too ashamed to tell him because “it was woman’s stuff and she didn’t want him to get mad at the doctor.”

My kokom didn’t speak English and so she didn’t understand what was happening until she asked a Native cleaning woman at the hospital to speak to the doctor who told her she had breast cancer and that it was a good thing she was old and didn’t need her breast anymore.

“He was right of course,” she said, “but it was still very hard because I’m not a woman anymore, not even an old lady. I’m just nothing.”

I remember she laughed as she said this but even today my eyes fill with tears at the memory of the pain in her voice<sup>22</sup>.

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## REFERENCES

- <sup>15</sup> Public Broadcasting Service, "This Emotional Life." This Emotional Life is a co-production of the [NOVA/WGBH Science Unit](#) and [Vulcan Productions, Inc.](#) A Film by [Kunhardt McGee Productions](#). ©/™ 2009 [WGBH Educational Foundation](#) and [Vulcan Productions, Inc.](#) All Rights Reserved. <http://www.pbs.org/thisemotionallife/topic/grief-and-loss/what-grief-and-loss>
- <sup>16</sup> Canadian Virtual Hospice. Excerpt from Grief Work by Fred Nelson. [http://www.virtualhospice.ca/Html2PdfHandler.ashx?vlink=en\\_US-Main%20Site%20Navigation-Home-Topics-Topics-Emotional%20Health-Grief%20Work](http://www.virtualhospice.ca/Html2PdfHandler.ashx?vlink=en_US-Main%20Site%20Navigation-Home-Topics-Topics-Emotional%20Health-Grief%20Work)
- <sup>17</sup> Excerpt from Garnet Angeconeb, "Speaking My Truth: The Journey to Reconciliation," in "Speaking My Truth": Reflections on Reconciliation & Residential School, Selected Readings. Selected by Shelagh Rogers, Mike DeGagné, Jonathan Dewar. Aboriginal Healing Foundation, 2012. [http://speakingmytruth.ca/downloads/AHFvol1/18\\_Angeconeb.pdf](http://speakingmytruth.ca/downloads/AHFvol1/18_Angeconeb.pdf)
- <sup>18</sup> Roberts RA. Stories About Cancer From the Woodland Cree of Northern Saskatchewan. A PhD thesis submitted to University of Saskatchewan, Saskatoon, Saskatchewan, 2005. <http://www.collectionscanada.gc.ca/obj/s4/f2/dsk3/SSU/TC-SSU-01042006163028.pdf>
- <sup>19</sup> Haudenosaunee Confederacy, the League of Nations. Funerals. <http://www.haudenosauneeconfederacy.com/funerals.html>
- <sup>20</sup> Akwesasne Notes: A Journal of Native and Natural Peoples. 26<sup>th</sup> Anniversary Issue, Spring (April, May, June) 1995. Volume 1, #1, p. 36-37.
- <sup>21</sup> Mamisarniq Conference 2007: Inuit-specific Approaches to Healing from Addiction and Trauma. Inuit Tapiriit Kanatami. Prepared by Tungasuvvingat Inuit. June 14, 2007. Ottawa, Ontario. [file:///C:/Users/owner/Downloads/Inuit\\_Specific\\_Approach\\_to\\_healing\\_Trauma\\_Addiction.pdf](file:///C:/Users/owner/Downloads/Inuit_Specific_Approach_to_healing_Trauma_Addiction.pdf)
- <sup>22</sup> "We Need to Share Information about Breast Cancer." ©Maria Campbell, Eagle Feather News, November 2005. <http://www.metismuseum.ca/media/document.php/12646.pdf>