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MEDICINE WHEELS:
TOOLS OF ADAPTATION IN ABORIGINAL AND NON-ABORIGINAL
SOCIETY

by

LEE C. GRIGAS, B.A.Hons.

A thesis submitted to
the Faculty of Graduate Studies and Research
in partial fulfillment of
the requirements for the degree of

Master of Arts

Department of Sociology and Anthropology

Carleton University
Ottawa, Ontario
June 16, 1993
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**Medicine Wheels:
Tools of Adaptation in Aboriginal and Non-Aboriginal
Society**

submitted by Lee Christian Grigas, B.A. Hons.

in partial fulfilment of the requirements for

the degree of Master of Arts

Thesis Supervisor

Thesis Co-Supervisor

Chair, Department of Sociology and Anthropology

Carleton University
June 1995

ABSTRACT

The aim of this research is to survey and interpret how First Nations' Medicine wheels and variations of them (i.e., colour wheels, stone wheels, etc.) are used by both Aboriginals and Non-Aboriginals as an adaptational tool enabling them to confront and overcome an array of problems on both the individual and group level. Furthermore, it will examine how they work, premised on a thorough study of their symbolic significance in a traditional context. For example, how does the relative simplicity of the wheel's design affect its efficacy in terms of relaying specific and possibly psychologically-coded information with the intention of teaching or healing? Or, what are the connections made between the wheel and the surrounding environment? Following this is an examination into how Medicine wheels are used as a contemporary medical model which will illustrate how they can be used on a broader scale, thus extending their use outside of the Aboriginal healing system.

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Chapter One INTRODUCTION

It is perplexing to describe in written form the sacred symbol of the Medicine Wheel. How does one write about the Medicine Wheel when it is part of an oral tradition? Which is the most accurate interpretation or description to use for this ancient symbol? How can one explain the many meanings and teachings of the Medicine Wheel in a limited way, since for many people, they consume a lifetime of study and practice? The Medicine Wheel is more than just a tool. For many aboriginal people, it involves a transmission of ancient knowledge and tradition from one generation to another (Huber, 1993: 358).

When I read this quotation by Marg Huber (1993), I remember thinking, "At last, someone who understands the problems I am facing". I sped through the remainder of her article with the hopes of finding answers to the questions she raised in the passage above. Nevertheless, I was disappointed because like so many other writings on the Medicine wheel, I was given an unsatisfied "surface-scratching" account of the significance of the "Four Cardinal Directions".

Like many authors, I undertook this project founded on genuine interest. For me, the Medicine wheel was an important link to the past. Perhaps it would be the key needed to unlock the countless

questions I had about my Native heritage. Admittedly, this thesis is a personal quest for knowledge and understanding. However, I cannot ignore my other voice; the academic one. During my preliminary research on Native healing and spirituality, it was this voice that demanded to know why there was nothing written on Medicine wheels from an Anthropological perspective. At the outset of this project, I feared that these separate voices would lead to conflict. How could I be true to both the Native and academic viewpoint since history has shown that the two often lie in conflict? Dumont (1976) reinforced my concern with a story told to him by a Mide shaman. The shaman told of a White Man and a Red Man walking along the same path which lead to a fork in the road. The White Man chose the road that offered wealth gained by attrition, the Red Man decided upon the less materially-attractive road which offered instead a whole comprehensive vision, a 180 degree vision versus the non-Native's 360 degree vision. This difference in viewing that causes difficulties, Dumont argues.

Nevertheless, I realized that this potential problem could be turned into an advantage. Dumont speaks about a Red Man and a White Man; two separate entities. Since I am of mixed decent,

arguably I have an ability to be sensitive to both views. As a result, I will be tackling the issues surrounding Medicine wheels using what Deleary (1990) terms a "culture- based" methodology. Using this approach, I am confident that the objectives of this essay can be attained.

The aim of this project is to survey and interpret how First Nation's Medicine wheels and variations of them (i.e., colour wheels, plant wheels, stone wheels, etc.) are used by Aboriginals and Non-Aboriginals as a tool in dealing with an array of problems on both the individual and group level. Furthermore, I will examine how Medicine wheels work, based on a thorough study of their symbolic significance in a traditional context. Does the relative simplicity of the wheel's design affect its efficacy in relaying psychologically-coded information with the intention of teaching or healing? Or, what are the connections made between the wheel and the surrounding environment? Following this, I intend to examine how Medicine wheels are used in healing today.

I do not wish to suggest that the study will be focused on inanimate objects -Medicine Wheels. Medicine wheels, from an anthropological perspective, are useful insofar as they are kept in a

cultural perspective. Traditionally, this would point to the Medicine wheel's significance in Aboriginal societies, but at present, its usage extends far beyond the boundaries of Nativeness. The "New Age" movement, for example, have adopted some of the teachings of the Medicine wheel to combat the stress of daily existence.

I believe that stress is a common factor which can lead people to seek a new spiritual path. I argue that the stress felt by the New Agers results from a lack of centredness and a lack of adequate spiritual grounding that can cause them to grasp at straws in their search for a meaningful sense of spirituality.

It is arguable that this adoption of Native cosmology constitutes a theft of culture. One must take into consideration that Medicine wheels have been in place since pre-contact times. Since then, their simplicity of symbols have endured and are still used in Aboriginal society. I would argue that Medicine wheel teachings have the potential to carry far beyond the boundaries of the New Age movement. They can be adapted to fit education systems, business and social circles and of course the Western Health Care System.

In this chapter I intend to establish the "5 W's" of Medicine wheels, respectively: what they are, where they are located, when

they were used, why they were used, and finally who used them.

Before I relate an account of what Medicine wheels are, I feel it is necessary to first caution the reader. Medicine wheels are many things to many different people. To say that one interpretation is more valid than the other goes against the essence of what the Wheel stands for. The information imparted here about Medicine Wheels constitutes an amalgam of teachings from various indigenous groups, cross-cultural representations of the wheel, perspectives of non-natives who utilize the Wheel and my own personal observations and meditations in my own work with Medicine wheels.

MEDICINE WHEELS: WHAT ARE THEY?

What are Medicine wheels? This seems a straight-forward question. So does, "What is the meaning of life?", or "Is there a God?" The Medicine wheel is often represented as a flat, one dimensional figure. Such a representation assumes both positive and negative qualities. Simplicity in shape and form is often a desirable trait in mnemonic devices, and certainly the wheel is 'simple'. But one must not allow a simplistic approach to inhibit deep, multi-dimensional analysis. This dichotomy is problematic in a wonderfully ironic sense, for within the dilemma, one finds a key lesson on the Medicine wheel; the notion of balance.

In all Medicine wheels, symmetry, simplicity and balance are present. But even in this seemingly static uniformity there are many elements that exhibit dynamic qualities of the Wheel. Consider the following depiction of a stone Medicine wheel (FIG. 1)

FIG. 1

32 Stone Medicine wheel

This Wheel demonstrates a common structure found in Medicine wheels; a circle with no beginning and no end sectioned off into four quadrants representing the four cardinal directions of the universe. Close examination of this Wheel shows the uniform rigidity inherent in most Medicine wheels, but, we must remember the concept of balance. Where the structure itself is rigid, the elements which make the structure are fluid. The fact that no two stones are the same puts emphasis on the lack of structure. Cross-culturally, this point is apparent in such symbols as the Wheel of Fortune and the Yin-Yang symbol.

The Wheel of Fortune is somewhat limited in its symbolism

when compared to the Medicine wheel, but it does illustrate a concrete notion of perfect balance. It is based on a simple dual symbolism which emphasizes contrary forces. The wheel is set in motion by a handle. Once it begins turning, it is unstoppable; this represents the notion of inescapable fate. The Wheel is attached to the masts of two boats joined to one another adrift on the sea of chaos. The principle of activity and passivity are represented on each boat by a serpent. There are two figures on the wheel, one in ascension and one descending possibly representing the constructive and destructive forces of the universe. Above the Wheel is "a motionless sphinx, alluding to the mystery of all things and the intermingling of the disparate"(Cirlot, :372).

Yin-Yang Diagram
FIG. 2

Consider the concepts of balance and harmony in the Yin-Yang symbol (illustrated above: FIG. 2). Two similar forms blended into one circle. Two opposite shades within the circle; the white stands for energy and celestial influences and the black signifies telluric forces, also white and black represent feminine and masculine principles. Balance is also implied through examination of the symbols sigmoid line which," is a symbol of the movement of communication and serves the purpose of implying--like the swastika--the idea of rotation, so imparting a dynamic and complementary character to this bipartite symbol" (Cirlot, 1991:47). This idea of rotation and movement is lacking in the Native Medicine Wheel. I believe that it is not an oversight but rather, an omission stemming from the familiarity with the cyclical process of nature (i.e., agricultural, astrological, seasonal, etc.). They understand that motion is an integral part of all wheels.

The intention of these two cross-cultural examples was to ease the reader into the realm of Medicine wheels by utilizing two examples that are commonly recognized in the Western tradition. I believe that to understand Medicine wheels, one must be open to and somewhat knowledgeable about Native spirituality and cosmology.

The lesson of balances, cause-and-effect relationships, and synchronic representations are represented cross-culturally and therefore, afford common ground on which to start the journey into understanding the Wheel from both a Native and contemporary standpoint.

The following will be an analysis of common representations of the Medicine wheel found in North American Native traditions. In effect I will deconstruct the wheel into its separate components, analyzing each one in terms of symbolic representations and influences and then reconstruct it showing how individual symbols combine to make new symbolic representations within the Medicine wheel. The analysis will be based on the simplest and most common representation of the Medicine Wheel, a circle sectioned off into four equal quadrants (see below: FIG. 3).

Basic Medicine Wheel

FIG. 3

The circle itself is a recognizable symbol, with a multitude of meanings. It is synonymous with wholeness, eternity, and of course, circular movement. As Green (1984:155) points out in her study of the Wheel as a cult symbol in the Romano-Celtic world, the wheel is often associated with a solar symbol. According to Gaidoz (1884:14) this symbolism is obvious since the sun, like the wheel, is circular and moves in space. Associated with the circle is the circumference, and within it, the culmination of all that is in the universe.

The cyclical nature of the circumference in Native cosmology is also reflected in Greek legends by the Ouroboros (the circle

formed by a dragon biting its own tail). Its depiction in the Greek legend *Hen to Pan* illustrates cyclic systems (unity, multiplicity and the return to unity, birth/death, etc.) I find that this symbol is of significant interest to Native depictions of Medicine Wheels because of its animistic attributes; animism is often an integral part of Native mythology. Animals were often depicted as creators of the earth in an anthropomorphic sense throughout the world's indigenous peoples. According to Hausman (1993:189), " the myths vary according to the tribe, but the Animal People are always foremost, primary characters on the plane of life. In some cases an animal appears as the Creator...". Consider *Nanabush*, the Cree trickster figure who often changes its form to that of an animal with the intention of fooling its 'victims' and imparting essential lessons. From this point of creation, the cycle of events which takes place in the cosmos unfolds. The Gnostics also adopted this 'animistic' symbol of creation (the Ouroboros) and applied it to the processes of their symbolic *opus* of human destiny in a similar way to what North American indigenous peoples did. Like the Ouroboros the Medicine wheel becomes the symbol of creation and the universal elements and their corresponding attributes. Therefore, the

Circle/Wheel (utilizing shape as much as intended motion) gives rise to the idea of that which brings into existence, vivifies all forces involved in any given process, carrying along with it forces that would normally act against one another. I have already alluded to this idea in the discussion of the Yin-Yang symbol. The next symbol to be discussed is the cross found in the centre of the circle.

The cross is one of the most powerful concept-evoking symbols in the Western world. Consequently, its application in Native cosmology is often misinterpreted by non-Native reporters. The cross in Aboriginal spirituality is a universal symbol representing the four directions of the Universe, the four primary medicines (tobacco, sage, sweetgrass and cedar), the four ways of perception etc. It has many different interpretations corresponding to the great number of Native Nations throughout the world. Here, the cross does not reflect an acceptance of Christianity; nor does it carry Christian symbolism. Having said this, I wish, nevertheless to draw similarities between the two symbolic representations. This is not an attempt to justify Native viewpoints or to "show that this is what they really mean" but to draw a comparison that is recognizable to non-Natives who are trying to understand the

Native perspective.

Both the Christian cross and the Native Four-Direction cross evoke powerful symbolic images to those who experience them. They both represent an ideology or way of life. The Christian cross represents suffering, compassion, and the love of Christ. Therefore when viewing the symbol, the imagery subconsciously bombards the viewer into recalling the life of Christ. It acts as a reminder of a "right way" to carry on ones life. Similarly the four-directional cross evokes a "right-livelihood" image. Deleary (1990:43) describes each direction as being, "the house of a great human principle"; respectively: strength, kindness, truth, and sharing. He states that these four principles are said to be how Native peoples carry, perceive, speak, imagine, remember, judge and conceive his or her own world to be.

The four directions cannot, however, be regarded as separate entities. Rather they must each be used in conjunction with the others to form an effective model on which to base one's life. The Christian cross is similar in its representation of the Holy Trinity. The Father, the Son, and the Holy Spirit are three separate depictions of one spiritual essence. Although physically they are

seen as distinct figures, spiritually, they are one. In addition to Christian symbolisms, the Native four-directional cross has similarities with other symbolic representations of the cross.

The Tree of Life figures prominently in Native mythology. According to Eliade (1964:270), "Cosmologically, the World Tree rises at the center of the earth, the place of the earth's *umbilicus*..., [and]...the Tree connects the three cosmic regions". Like the Tree of life, the cross represents the *axis mundi*. The cross may even become the bridge or ladder by means of which the soul may reach God (Cirlot, 1991:69). This idea corresponds somewhat to Native cosmology: the centre is the desired place to be on the Medicine wheel since it is the state of perfect balance that does not lean too heavily towards any one direction.

The cross is sometimes depicted with seven steps, comparable with the cosmic trees which symbolizes seven heavens. The number seven plays a significant role in most Native mythologies. It represents the universal directions on a three dimensional scale: the four directions as well as the earth, the sky and the centre or self. This spatial view is well suited to the Medicine wheel and its physical orientation as well as allowing Native peoples a symbolic

representation that also acts as a reminder of the individuals place in relation to the cosmos.

Perhaps one of the most interesting findings I have made in regards to Wheel symbolism is Evola's (1931) quotation which suggests that the cross is a synthesis of the seven aspects of space and time, because it is such that it both maintains and destroys free movement; hence the cross is the antithesis of the Ouroboros, the serpent or dragon denoting the primeval, anarchic dynamism which preceded the creation of the cosmos and the emergence of order. When this notion of antithesis between the cross and the Ouroboros is applied to Native cosmology, it actually *becomes* the Medicine Wheel. It is a unified symbolic representation incorporating two didactically opposed sets of forces; the circle of creation and the seven aspects of time and space: the maintainer and the destroyer.

FIG. 4

Egyptian Ankh

Something similar may be said of the Egyptian *ankh* . It is also a cross of sorts (see FIG 4). It is synonymous with life, health and happiness. The most interesting feature on this symbol is its upper arm which is closed to form a circle. Like the Medicine Wheel, it incorporates two symbols. When combined, they allow for a myriad of additional meanings:

The phonetic significance of this sign is a combination of the signs for activity and passivity and of a mixture of the two, and conforms with the symbolism of the cross in general as the synthesis of the active and the passive principle (Enel,1932:87).

The Ankh could also be a Medicine wheel of sorts when viewing it in terms of earthly and celestial elements. As mentioned, the Native

Medicine Wheel *can* represent the sun, the sky and the earth. So too can the Ankh; the rounded top can be seen as the sun and the intersecting lines can represent the sky and the earth.

Let us turn to the Medicine wheel's colour symbolism. In fact, colour is one of the most universally recognized forms of symbolism. It has been incorporated into many artistic genres, religious and secular. There are many schools of interpretation for colour symbolism based on optic visualization, psychology, etc. I have chosen to base my perspective on colour symbolism grounded in concepts associated with nature and naturally-occurring principles.

The Native Medicine wheel with its four directions is often depicted as a circle with four quadrants. The related colours are yellow in the east, red in the south, black in the west and white in the north (FIG. 5).¹

Colour Wheel

FIG. 5

Jolan de Jacobi (1951) argues that cultural influences and individual perceptions vary attitudes in terms of what colours mean, but in general, Yellow is the colour of the far-seeing sun, which appears bringing light out of an inscrutable darkness only to disappear again into the darkness. Red is the symbol of fire and blood; it also represents the ebb of emotions. Black is associated with death and lividness. Jacobi makes no mention of white, but in most other analyses it represents purity.

Alchemists used colour to represent earth elements, so too did the Native people (air, fire, earth, water). The alchemists however, view the colours in a hierarchical state moving from black to gold; the latter being the desired, *perfect* element. There is no "perfect"

element in the Medicine wheel. Was the alchemical quest in turning base metals into gold a metaphor for self improvement? That might correspond indirectly to Native Medicine wheel teachings. To the alchemists, black corresponded to penitence. In the Native wheel, water reflects penitence via purification rituals in which this element was used. Red represents the earth in the Native Wheel. The alchemists deemed red akin to suffering and love; white represented ascension and illumination. The corresponding Native element is air and all the mysteries of the skies revealed. Finally, yellow (gold) was the alchemists' desired state or 'state of glory'. It is located in the eastern quadrant, the place in Native cosmology where all things begin. The element here is fire. It is the fire of knowledge, understanding and hierarchical wisdom. Perhaps the alchemists used their colour hierarchy as the Native peoples use their wheel, as a symbolic, mnemonic device which acts as a map to the path of right livelihood. The wheel may also be a mnemonic of a different sort. This brings us to astro-archaeology

When I began my research on Medicine Wheels, the earliest written document I encountered was written by S.C. Simms. It appeared in the January-March edition on the *American*

Anthropologist in 1903. The paper was little more than a traveller's account of perhaps the best known Medicine wheel in North America, the Big Horn Medicine wheel in Wyoming. Simms shed little light on the 'mystery' of the wheel.

George Bird Grinnell was the first anthropologist who actually formed a theory about the wheel. Upon closer examination, he discovered that the wheel had twenty-eight stone 'spokes' radiating from the centre of the wheel. This was the exact number of poles the Cheyenne Indians used in the construction of their medicine lodge. This coincided with Simms' account of meeting two Sioux Indians who, when asked about the wheel, pointed to a diagram of it and indicated that one half belonged to the Arapaho and the other to the Cheyenne. It has been speculated that both used the structure as a model for their medicine lodges.

Since Grinnell's time, more recent investigations uncovered evidence that the wheel had been used over the past few centuries. "From the thin layer of soil between the spokes came a handful of arrow points and beads dating from before white settlement in the West (Eddy, 1977:142). Dr. Eddy's survey found indications of a small cavity in the soil beneath the central cairn. Had it been made by

early pothunters, or by the original builders to make a socket for a vertical pole? Further, a branch in one of the cairns had been dated to about 1760. But was the wheel used in earlier times?

Eddy's position as an astronomer caused him to wonder whether the Indians surveyed were interested in astrological use of the sky. He noticed that the number of spokes on the wheel (28) were close to the number of days in a lunar month. Also, he noticed that two of the cairns (a piling or pyramid of stones) are placed symmetrically on either side of a north-south line, making them likely markers of the horizon. Eddy continued his observations and found that when certain cairns were lined up with one another, they marked the time of the summer solstice. Further study revealed that a 'sighting' cairn when lined up with three others, marked the rising of three of the brightest stars that shine on the Medicine Wheel; Aldebaran in Taurus, Rigel in Orion and Sirius in Canis Major. These stars are also the brightest in the region of the sky through which the sun passes in summer. Interestingly, the sighting of these stars coincided with the number of spokes on the wheel; each star would 'rise' precisely twenty-eight days apart.

It is likely that Eddy's research had shown the original use for the

Big Horn wheel. Nevertheless, on the study of symbolism, it is folly to ascribe a single 'true' meaning to a symbol. I recall Deleary's (1990:118) account of reading Vastokas' book *Sacred Art of the Algonkians*. Deleary felt that Vastokas's attempt at interpreting the petroglyphs was 'valiant' but not based on Anishinabe culture. Deleary, having lived the culture found that the Vastokas's interpretation of some symbols "completely missed the mark". This ever-present risk applies with the same force in the study of the Medicine Wheel. Grinnell's study indicated the continued importance the Medicine Wheel played in the lives of local Native people. It may never have been used as an astrological observatory, but it was still a place of spiritual importance. Wilkinson (1993:92) in his article *Sharing the Sacred Circle* reinforces this idea by stating that the elders from six Indian nations say that for centuries the wheel has been a remote escape where young warriors could retreat in solitude, with nothing but pure thoughts to guide them on their spiritual journeys.

I have devoted a substantial amount of time in dealing with 'what' the Medicine Wheel is. Although it is an important issue in terms of acquainting the reader with the object of the study, it is

more important to realize that what is being dealt with is not a mere *thing*. It is a system used as a key to unlock mysteries, whether they be in the night sky, on the earth or within the self. It is the connotations of the symbol, what the symbol is trying to impart and not the symbol itself that is important here. The symbol is useful insofar as how it acts as a trigger to make one take action, to use the wheel as a tool of discovery. The Medicine Wheel is not just an archaic observatory, or a map of the four directions or a depiction of a medicine lodge. It is all of these things at once, and more. The true magic of the wheel or the 'medicine', lies in its ability to be dynamic and adaptable to fit a number of situations. One must remember the concept of balance and harmony. The wheel is both rigid and flexible. There are cardinal rules and similarities in all Medicine Wheels, but it is their adaptability that makes them powerful.

WHERE ARE THEY?

Joseph Campbell, (1988:colour plates) states that "The whole world is a circle. All of these circular images reflect the psyche". Indeed the circle is reflected cross-culturally as a symbol of healing, power and the divine. Consider depictions of Sun Disks from New Guinea, Navajo sand paintings and Buddhist Mandalas. All of these circular motifs bear similar characteristics and functions, yet they are geographically separated by considerable distances.

In North America, Medicine Wheels span the continent. Natives and non-natives alike flock to Sedona, Arizona each year to draw spiritual energy from power vortices and Medicine wheels built on sacred sites. The Big Horn Medicine wheel has already been mentioned. Of similar importance is the Majorville wheel in central Alberta and the wheel on Moose Mountain in southern Saskatchewan. Other wheels of a less grandiose nature sporadically pock the land. Nevertheless, considerable distances lie between them. The Medicine Mountain wheel and the Big Horn Medicine wheel, for example, are 425 miles apart; a considerable distance even by today's standards. Sedona is even farther from either. Can we still use the 'ripple effect' to explain away similar occurrences in distant

areas"? To be sure, it is plausible the wheel could have been shared or adopted from one group to another. This, however, does not explain wheel symbolism and its appearance cross-culturally.

Campbell (1988:215) states that the depiction of the circle and much of its inherent symbolism is taken from Sumerian mythology. "We've inherited the circle with the four cardinal points and three hundred and sixty degrees." I assume the "we" refers to "we Europeans". But does this include the North American Medicine wheel builders? Recall that some Medicine wheels (like the one at Majorville) date back some 5000 years; the same time the Pyramids were under construction. Campbell has an answer to this question also.

When asked why the circle became so universally symbolic, Campbell replied, "Because it's experienced all the time - in the day, in the year, in leaving home to go on your adventure...and coming back home" (1988:216). Without saying so, I believe that Campbell was alluding to two concepts developed by Carl Jung: the collective unconscious and the archetype. The archetype is often understood as,

meaning a certain definite mythological image or motif. But this would be no more than a conscious representation...The archetype is...an inherited *tendency* of the human mind to form representations of mythological motifs - representations that vary a great deal without losing their basic pattern (Jung, C.W., vol. 18. 1976: p, 228).

Prattis, (1994, personal communication) argues that the wheel is a map of archetypal material. "The various wheel teachings take an individual and their present life situation and connect them to the archetypal power contained...in their collective unconscious." This may also account for the diversity in Medicine wheels themselves. The basic pattern is kept (the circular motif intersected by two evenly spaced crossed lines), but elements like the number of spokes, elements used in its construction, and symbolic attributes placed on it, vary. This illuminates another question, "Why do they vary?". Humans adapted the Medicine wheel to fit the situations that were of primary concern to them.

Stevens (1982:48-49), for example, discusses the reaction of a group of Galapagos finches that were sent to California. The finches had lived without predators on the Islands for thousands of years due to the isolation of their habitat. Nevertheless, when they saw a predatory bird in California, they signalled in alarm.

The predator archetype had lain dormant in the collective unconscious of these birds for something approaching a million years. Yet when the appropriate stimulus was encountered..., the archetype was at once activated....

Jung maintains that the human psyche acts in a similar way. Archetypes are innate patterns of behavior and meaning which, "in accordance with the compensatory needs of the individual, similarly become activated to facilitate human adaptation" (Aziz,1990:53).

Jung's work as an analyst lead him to discover the reoccurrence of innate patterns in the human drama: death and rebirth, spiritual journeys of ascent and descent, the mandala, etc. He noticed that the content of his patients' dreams were often paralleled in religious symbols and mythology. These repetitive themes caused Jung to develop his theory of the collective unconscious. Let us return to the finches. Their apprehension and fear of predators was not based on learning but rather, stemmed from an innate, unconscious conditioning needed to maintain their survival. Jung too had witnessed this emergence of innate patterns of behavior and apprehension. "...patterns that served in times of

crisis to direct his analysands to points of balance..." (Aziz, 1990:53). Perhaps the Medicine Wheel emerges from the collective unconscious and is revived into a concrete representation that can be consulted during times of individual or group crisis thereby restoring the balance that Jung alludes to.

Jung believed as well, unlike classical physics, which is based on the concepts of solid bodies moving in empty space, modern physics [like the teachings of the Medicine Wheel] reveals a basic oneness of the universe.

Jung found that the psyche at times does function outside the normal space and time framework. In the unconscious, space and time appear to be relative, that is, "knowledge finds itself in a space-time continuum in which space is no longer space, nor time time" (C.W., vol. 8:481). Further, Jung states that:

"We conclude...that we have to expect a factor in the psyche that is not subject to the laws of time and space...[and] this factor is expected to manifest the qualities of time and spacelessness, i.e., 'eternity' and 'ubiquity.' Psychological experience knows of such a factor; it is what I call the archetype" (Adler and Jaffe, vol. 2:398).

Furthermore, I believe that the Medicine wheel permits the individual to act as his or her own shaman. The wheel enhances perceptions and makes lessons and interpretation of questions easier to comprehend. Its' simplicity as a mnemonic device is an asset here. As Wolf claims:

The reason shamans can seemingly work miracles is simply because they believe they can, and they base their beliefs on their knowledge of archetypes from the imaginal or mythic realm (1993:175)

WHEN WERE THEY USED?

"When were they used?" This lends the impression that Medicine wheels are a thing of the past, an ancient symbol or rendering that has somehow lost its use in the modern world. I argue that this is not the case. If anything, the utilization of the Medicine wheel is increasing not only in Native circles, but in contemporary ones as well.

The primary obstacle one faces when trying to determine when Medicine Wheels were used occurs in trying to establish their time of origin. *Who first* constructed the Medicine wheel? Recall also that I am examining them from a largely Cree perspective. Unlike the Mesoamericans of Mexico and Central America, the Indians of the plains left no written records, leaving archaeologists to illuminate the reasons for the erection of the wheels. Another problem surfaces when trying to determine what constitute as Medicine Wheels and what do not. Eddy (1977:143) states that, "nomadic people did leave behind a great many-perhaps five million- stone circles, 5 to 30 feet in diameter, which we now call tepee rings". There are circles, made with football-sized rocks dotting the plains from Texas to Southern Canada. Most archaeologists read these as

stones used to hold down the hide covers of tepees, left behind when the camps were moved. The inhabitants also left a few large effigy figures traced out in fieldstone on the surface of the ground, and a number of enigmatic large wheel patterns, of which the Bighorn wheel is a good example.

Closer archaeological examination of the Bighorn wheel has found evidence of its use in the past few centuries. From the thin layer of soil between the spokes came a handful of arrow points and beads dating from before white settlement of the west (Eddy, 1977:142). The same survey found indications of a small cavity in the soil beneath the central cairn. A broken tree branch in one of the cairns has been dated by tree-ring analysis to about 1760. It could not have been put in the cairn before the date; but was it there originally or added later? Let us turn to the wheel on Moose Mountain in southern Saskatchewan. Based on astro-archaeological evidence, the time of its creation dates back some 1700 years. The Majorville Medicine Wheel in Central Alberta has been established as being 4000 to 5000 years old. These dates unfortunately do little in establishing when they were used. Grinnell (1922:305) in one of the earliest anthropological writings on the Medicine wheel states that

"the antiquity of the wheel can not be doubted, yet it appears also that sacrifices have been made there in comparatively modern times". Grinnell also discovered two beads and two pieces of wampum under one of the stones in the spokes. The beads were of European manufacture and had been pronounced Venetian beads of the fifteenth century. Grinnell cites his predecessor to the (Bighorn) wheel, S.C. Simms. Simms declared that the Crows believed that it had been made by people with no iron; in other words, that it was quite old (1903:108).

Medicine Wheels - one can only speculate as to how they were used. Were they used as an ancient observatory, a lodge structure, a teaching device or as variations of tent stakes? Fortunately, my examination of Medicine Wheels does not depend on knowing *when* they were used in terms of the past, but instead focuses on their use in the present. Nor do I wish to suggest a time lag between prehistory and the present in which the Medicine Wheel was not in use. Undoubtedly, its importance was handed down from generation to generation in the oral tradition. In some cases the teachings of the Medicine Wheel were adopted by groups that had lost touch with the traditions of their own peoples. This idea can be extended to

include non-aboriginal people as well. Many of the Elders of whom I have spoken to at the *Kumik 2* in Ottawa noted the re-emergence of interest within their communities in the Medicine Wheel as a tool used for healing and teaching about 'aboriginality'. Wilfred Pelletier, an Odawa Elder and ceremonial Pipe Carrier, spoke with me on this topic. He showed me a copy of a privately-published text dealing with Medicine wheels. The booklet titled *Nishnaabe Bimaadziwin Kinoomaadwinan* (Teachings of the Medicine Wheel), was created for use in a classroom situation. It gave children a text which they could refer to with questions about the wheel and its uses. This coupled with traditional teachings and a work section within the text provides an effective new teaching tool within the Odawa community on Manitoulin Island. This example reflects the increasing attention paid to the teachings of the Medicine wheel in a *traditional* (or re-emergent) context.

It also emerges in non-traditional contexts. Sun Bear (the self-proclaimed founder and 'medicine chief' of the 'Bear Tribe') advocates the Medicine wheel as a tool for healing and a model for a personal way of life. Sun Bear, pictures a vision he had in the late 1970's. He saw a Medicine wheel and people coming to it to sing

songs and "make prayers for the healing of the Earth Mother" (1991:xvi). By 1990, he estimates that about a million people world wide-have danced with the Medicine wheel. Here in Ottawa, I have been involved with groups which use some of the teachings of the Medicine wheel for personal growth and well-being. These groups adopted a syncretistic or New Age approach in their use of the Medicine wheel; I will say more about them in a later chapter.

WHY WERE/ARE THEY USED?

This section will reflect on the uses, past and present, of the Medicine wheel. At the outset of this paper, I mentioned that the Medicine wheel is many different things to different people. Nevertheless, I have found common elements exhibited by wheel 'participants'.

The wheels were and still are ceremonial centers of culture, astronomical laboratories, and places where people could go to mark changes in their own lives as well as the collective life on the earth. They are places to meditate, contemplate and pray. Medicine wheels serve as sacred places where one could strengthen their connection with the natural surroundings and realize their place and the inherent responsibilities one has to the self, the other and the world that surrounds them.

Traditional uses of the Medicine wheel include use in ceremonies and rites. Usage of the wheel was not limited to indigenous peoples of North America. Consider the Aztec's use of the sun calendar (a circular motif that formed the crux of their religious life), the druidic circular formation at Stonehenge (also a place of spiritual worship, ritual and astronomy) the Buddhist

mandalas and Bardic circles. All share similar properties which revolve around healing, spiritual affirmation and ritual drama. But let us turn to the Cree. Recall that Grinnell (1923) found the Medicine wheel to be a representation of a medicine lodge. I believe that the Cree *Kwashapshigan* or 'shaking tent' follows a similar blueprint.

The *kwashapshigan* is a tent-like structure using different types of wood for each pole. The branches are left on at the top of each pole where the axis is formed. The structure is held together by a circle of wood circumventing the outside and another lashed to the inside. A tarp covers the structure. The use of various woods for each pole can mean a number of things. It may simply acknowledge the variety of different species that possess certain helpful properties i.e., the active ingredient in aspirin is also found in the bark of the willow tree. I have a different theory which becomes clear when considering the positioning of the two rings. When viewing the structure from an aerial perspective, one perceives the centre surrounded by a smaller ring and a larger one on the outside. The wooden poles radiate outward from the middle. The structure now conforms to universal depictions of the circle of life

or wheel of existence - the Medicine wheel.

The wooden circles represent the cycle of life; each moving in a converse relation to the other but always striving to reach a synchronicity (recall the first 'lesson' of the wheel-balance). The poles running through it represent the various levels of consciousness which can be navigated and reached using *normal* conscious reality as a starting point with the centre as one's ultimate goal. These ideas correspond directly to the stories of the Medicine wheel that have been passed on to me by various elders. Furthermore, the theme of the centre or main column is an important theme in this type of sacred architecture.

The *axis mundi* is echoed throughout many myths of the world. As Eliade (1986:99) asserts, "the axis supports the sky and is also the means of communication between heaven and earth". When one is close to the axis mundi, one gains the means to communicate with the divine powers. The purpose of the kwashapshigan (and similarly, the Medicine wheel) is to gain access to the spirit world and have the spirits actually converse with the shaman within. The Cree shaman seeks to exact the same effect sought by Medicine wheel participants. Both use the structures as a means for gaining insight

into problems faced by individuals or communities. The similarities are indeed uncanny. The use of different elements, the axis mundi, the placement of both structures in correspondence to the four sacred directions, the desire for 'other-worldly' assistance. They *all* reflect similarities to one another illustrating traditional uses for the Medicine wheel, in addition to why they were used in aboriginal communities.

Many non-native people have adopted the Medicine wheel teachings and formed their own rituals and ceremonies around it. Why do they use the Medicine wheel? Is it part of a "revitalization Movement"? Anthony Wallace, (1966) in his work on revitalization movements argues that cultures can change within one generation: the process by which such transformations occur is the revitalization process. He further argues that the common denominator necessary for this to occur is stress. Wallace defines stress as a condition in which some part, or the whole, of the social organism is threatened with more or less serious damage.

Stress in this context can result from a number of agents; dissatisfaction with domestic or working atmosphere, fear of personal illness or fear of environmental events that threaten our

existence. In the past, religious organizations, professional medical care and self help groups were used to combat these stress inducers. Although still used to some extent, a growing majority have grown dissatisfied or even wary of these institutions. We will return to revitalization movements in a later chapter. The growing number of Medicine wheel publications within the last ten years pays testimony to this fact. The *Medicine Wheel: Earth Astrology and Dancing with the Wheel* by Sun Bear, *Sedona: Power spot, vortex and Medicine Wheel Guide* by Dannelley, and *Wildfire Magazine* decisively attest to the increased interest paid to Medicine wheels and their use as tools of adaptation aimed at healing the group, the self, and the environment.

Participating in Medicine wheel ritual in the contemporary or *New Age* genre often means engaging in 'spiritual workshops' and classroom-like experiments. Participants engaging in counter-cultural Medicine wheel rituals are indeed using the teachings as an adaptational tool to promote healing. For example, Sun Bear (1991:17) instructs readers to "centre themselves" within the Medicine wheel and to allow the healing energy to flow through the body. In a related ceremony he instructs practitioners to send

healing energy to the earth and its inhabitants by placing ones hands on the earth, raising them to the sky, etc.

Dannelley's (1991:104) ceremony, "calls out to those who are in positions of power, in government, and in business...specifically to those who can directly affect the destiny of the rainforests". Contemporary use of the Medicine wheel is not restricted to environmentalists, would-be mystics, or the spiritually challenged. The wheel is also used as a mnemonic device or tool that takes its place in grief counselling, mediational services and other more 'professional' pursuits. These will be elaborated in a later chapter.

WHO USED/USES THE MEDICINE WHEEL?

This final section in the introduction to Medicine wheels is somewhat of a 'carry-over' of the previous section. It will also return to an earlier discussion of the Big Horn Medicine wheel

Again, we turn to the writings of Grinnell and Simms. Grinnell(1922:306) alludes to a myth that was recorded by W.A. Allen in the book, *The Sheep Eaters*. This book stated that the Medicine wheel was built by the Sheep Eaters and that the twenty-eight so-called spokes represent the twenty-eight tribes of the Sheep Eaters. The Sheep Eaters were a small band of the Shoshoni, estimated in 1863 to number about one thousand, but now extinct as a group and absorbed by the Bannocks. They were called the Sheep Eaters by the other bands of Snakes, because they subsisted chiefly on the flesh of the mountain sheep. "Mr. H.H. Thompson tells me that Sheep Eater Indians have told him that the wheel was built by their people" (Grinnell, 1922:307).

On the other hand, Simms (1903) reports his meeting with two Sioux Indians. After inspecting a diagram that Simms drew of the wheel, "...each of the two Sioux drew a diametrical line through the wheel and, pointing to one half, said 'Arapaho', and then pointing to

the other half said, 'Cheyenne' " (1903:n.s. 5; 103). I came across an interesting myth that the Cheyenne told about the Medicine wheel. It is worth repeating here because I believe that it acts as a set of oral directions that instruct people on how to build a Medicine wheel, thereby ensuring its continued use in generations to come.

The myth revolves around the Cheyenne culture hero, *Sweet Medicine*. On one occasion, Sweet Medicine came from the East and went toward the opening in the circle; but, when near the opening, he turned to his left hand and went south to the southeastern part of the camp where he marked a circle. then he passed on around to the southwest corner of the camp and marked another circle; then to its northwest border where he made another circle; then to the north side and made another circle; then to the northeast side where he made the last of these circles.

During each appearance, he came from the east and proceeded in a similar direction around the camp making the same turn and indicating the same circles; therefore, he marked five circles without the camp and the five small stone circles or enclosures found without and not far from the border of the Medicine Wheel may possibly represent these circles which Sweet Medicine inscribed

(See FIG 6). The circles on the wheel seem to correspond to how the circles were placed in the myth.

Bighorn Medicine Wheel

This story suggests that the Medicine wheel was used by the Cheyenne (and neighboring tribes) and that its use was deemed important by the creation of a myth that explains the wheel's origin. It is probable that the story was created to ensure that the participation around the wheel would continue, even if the wheel was destroyed or that this particular wheel could no longer be used.

In some way, the story succeeded in its goal to ensure the wheel was used in the future. In addition to the New Ager's, the Medicine wheel is also used in a professional capacity. Mary Loomis, a practicing Jungian analyst, uses the teachings of the Medicine

wheel to assist her patients. Her techniques and applications of Medicine wheel teachings are outlined in her book *Dancing the Wheel of Psychological Types*. Similarly, Rhinehart and Engelhorn use the Medicine wheel in their capacity as art therapists at the Eagle Rock Trail Art therapy Institute. Jane and Jack Ross (1992:291-302) use the Medicine wheel model in a paper that addresses native health promotion. Marg Huber (1993:335-365) and Rainey Jonasson (1993) recommend using the Medicine wheel in a capacity that directly involves the mediation process and conflict resolution.

The recurring theme associated with Medicine wheel use is healing in one form or another. Russell Willier is a Cree healer from the Sucker Creek Reservation in Alberta. Willier uses the Medicine wheel as a medical device. He uses it as both a preventative and a cure for many problems faced by Natives and non-natives alike. The following is an account of Willier's beliefs and uses surrounding the Cree Medicine Wheel.

Willier believes that each of us is surrounded by colours of light. We emit different colours at different times; this is their Medicine circle. The colour being radiated depends on where they are

in terms of closing the circle. This idea corresponds to the idea of wholeness. If the person is not whole or 'balanced', there is a noticeable break in a person's aura where light emanates from. Willier believes that this can only be seen when tobacco is offered during a healing ceremony.

According to Willier, the four cardinal directions are of considerable importance in understanding the Medicine wheel. "The four directions divide the Medicine Circle into four quadrants, each symbolizing a component necessary for a person's life" (Young et.al. 1989:37).

The first quadrant represents education, occupation, or a special skill; the second, far-sightedness and the ability to plan ahead. The third stands for material possessions, home, and spouse, and the last symbolized the happiness that comes from family life and having children.

The association between these qualities essential to self-fulfillment and specific animals is obvious to Willier. The four animal spirits associated with Willier's Medicine wheel are the eagle, the mouse, the buffalo, and the bear. The eagle flies high and has the ability to see great distances. The mouse is known for its

abilities of collecting. The bear is recognized for its maternal qualities, and the buffalo exemplifies the ability to learn. Each section of the wheel is important in its own right, but the parts must work in harmony if the circle is to be closed and fulfillment reached.

At a very early age, a child cannot have the Eagle Spirit's ability to plan ahead, but it does have the Buffalo Spirit's ability to learn. the child of course will roam a little and will begin to develop the Eagle Spirit. Eventually, the Mouse Spirit will become active, and the child will acquire a few possessions. The child may also begin to develop a good heart, a quality that will become important later when she or he grows up and raises a family. The child thus begins to develop qualities associated with all four segments of the Medicine Circle, even though these qualities will not attain their full potential until later in life (Young et.al. 1989:36).

There can be any combination of the four quadrants of the Medicine wheel in someone's life. The segments are ultimately connected, and an imbalance in any one section affects the whole person. Willier cites two examples of different lifestyles and how they pertain to the Medicine wheel.

The first example deals with a man who loves to chase women. He will spend all his money on women, failing to acquire possessions

(Mouse Spirit). He refuses to plan ahead (Eagle Spirit), and will not have a family (Bear Spirit). The circle is not closed. According to Willier, this will affect the man's job and at the age where he should be enjoying fulfillment, this man will be unhappy.

Conversely, Willier demonstrates an unbroken Medicine circle in his father. He attained a balance of the four essential spirits and corresponding elements. He raised his children according to the Sweetgrass Trail³ and could therefore turn to them in times of need. He had nothing to fear in this life or the afterworld. He had reached fulfillment.

Willier's use of the Medicine wheel captures the essence of what it is and how it is used. It is not just an object of worship or place of spiritual peace and power. It is a lifestyle to be adhered to and followed. It corresponds to a cosmology which preaches balance and respect for all things in the world.

Chapter Two

THEORY AND METHODOLOGY

The methodology which I have adopted for this thesis stems from the work and 'desire' of one man. Nicholas Deleary, in his study of the *Midewiwin* , gave voice to a methodology which studied Native life from an aboriginal perspective or what he termed a culture-base. Deleary maintains that a fundamental presupposition of a culture-based approach is that a person must practice, participate and live the culture.

A culture-based perspective arises from the core principles of Native peoples' ways of knowing. A culture-based approach must be cohesive and consistent with Native world view. Therefore, it should be able to embrace but not to limit, making room for the tangible, the intangible, logic and illogic; it should be comprehensive and pervasive, having a multiplicity of meanings and symbolism (Deleary, 1990:v).

Deleary's methodology was perfectly suited to my study since its foundation lies within the structure of the Medicine wheel. The cultural-based learning model was actually illustrated as a Medicine wheel, (Deleary & Dumont, 1985:4). According to Deleary (1990:49),

The model was designed specifically to encourage qualitative research and knowledge.... The model is a further extension and translation of the concept of the Four Directions....

Deleary (1990) used the four quadrants of the Medicine wheel to form the crux of a cultural-based methodology. I believe that it is imperative for me to use a similar methodology in this study for the same reasons Deleary did in his study.

By directly stating Native world view, cultural expressions, and mythologies, we can witness the growth of a whole new epistemological framework from which to view the world (Deleary, 1990:54).

I have applied Deleary's model of Aboriginal thought, relationship, learning, and development to my own study of the wheel. I started with a vision. I wanted to provide a written account of the Medicine wheel from an academic perspective with the hopes of clearing up some of the misconceptions surrounding it and to re-establish its importance outside of a New Age framework. Vision is associated with the East; the metaphorical quadrant pertaining to the emergence of life, and a new beginning. Proceeding sun-ward, one is lead to the south representing renewal. According to Deleary (1990) it is the direction of sharing and generosity. Renewal is important

in this methodology because it epitomizes a key lesson of the Medicine wheel; that of a continuous, cyclical nature. In the preparation of this thesis, self-renewal was essential. Many times I went to my own Medicine wheel in the Gatineau Hills to seek answers to my questions and to give me strength when I faced problems and pitfalls inherent in my work. I always left feeling rejuvenated and, as a result, was able to face and overcome the obstacles in my path. Knowledge reflects the western quadrant of the wheel. The production of this thesis lead me to a greater understanding of what I was trying to relay as well as what I was being taught in the process. With increased knowledge comes increased responsibility. This methodology has forced me to remain true to the teachings of the wheel, the countless people who have assisted me in the preparation of this thesis and mostly, to myself. The final step in the wheel is movement. It is a spiritual act more than a physical one. It is the joining together of the other three elements. It is a mental "weeding-out" process designed to assist one in putting forth those aspects of life that are most meaningful. This has obvious repercussions on the formulation of a thesis.

Deleary (1990:54) hoped that his study "will provoke other

native people to pursue the articulation of a cultural-based methodology". I think that he is limiting the scope of this methodology. He seems to focus his attention on a largely aboriginal audience. I wish to avoid doing him a disservice but he seems to promote the idea that a culture-based methodology is for Natives only. Deep down, I do not believe that this was his intention, since clearly this methodology is applicable on a much grander scale. Deleary stated that in order for a culture-based methodology to work, one must practice, participate and live the culture, but to what extent? It was not until five years ago that I discovered my aboriginal ancestry. When I did, it explained much; my fascination with Native peoples, my intrigue with Native art, dance, and music. I recall being the only one of my friends to side with the Mohawks during the Oka crisis. Does this then qualify me as an Aboriginal able to write from a culture-based perspective? I qualify as a status Indian but I did not grow up in a Native world. When I was young, I did not hear the stories of my people, nor did I share in their problems. I was not subject to ridicule and stereotyping that many of my Native friends faced. I never lived on a reservation. Admittedly, I did not *live the culture* when I was young, but I am

trying to live it now. I believe that a culture-based methodology is important to the study of anthropology, but I do not believe that it is limited to a specific cultural group, nor do I believe that one must be exclusively from 'that' culture to report on it with just representation.

I believe that my views are shared by other anthropologists as reflected in Goulet and Young (1994). They stated that recently, anthropologists have come to realize that they are as much responsible for "inventing" or "writing" the cultures they study as their informants, and so have come to cast their reports in the form of dialogues and even multivocal conversations that more accurately reflect the dynamics and pragmatics of the fieldwork process. My methodology is therefore similar to that outlined by Goulet and Young (1994) in that it focuses on the anthropologists' 'lived experiences' in the field and reports these extraordinary phenomena as credible and are regarded as such.

There are two approaches that Goulet and Young (1994) outline that are relevant to my thesis; the rational approach, and the experiential approach. The first found its beginnings rooted in the enlightenment of the eighteenth century where spirits, apparitions,

etc., were dismissed as fantasies of the mind. Evans-Pritchard (1965:15) noted that early anthropologists were atheists or agnostics in their adult years despite their having been raised in strongly religious homes. He speculates that many studied religions (especially 'primitive' ones) so they could be used as a weapon against Christianity by drawing similarities between them and showing how they could both be discredited. Admittedly, I too follow this pattern. I was raised to be a devout Roman Catholic, but upon realization of my Native heritage, I renounced my faith and adopted the religion associated with my Cree background. I did so by discovering similarities which made the transition easier and demonstrated that there are important teachings in all religions that are valuable. It was this transition and acceptance of the benefits of all religions which lead me to incorporate my methodology into this thesis.

The experiential approach is important to my methodology because I believe that it picks up where Deleary left off. It is similar to Deleary's culture-based methodology in that it incorporates a lived experience based on personal involvement with and understanding of the cultural other.

Anthropologists participated more willingly in rituals designed to induce extraordinary experiences and/or ingest native hallucinogens known to open the mind to 'extraordinary' visions....Anthropologists did so to gain firsthand experiences of the range of phenomena reported by their informants (Goulet and Young, 1994:303).

The above quotation reflects the importance of participation within a culture to increase the understanding of an experience. This is not to say that full understanding will be achieved but it is plausible to think that one may better report on something if it is approached with the same cultural knowledge and subtleties of understanding as shared among actual members of a cultural group. What springs to mind to further illustrate this point is Chagnon's report on the Yanomami's use of psychotropic substances. In his first report, the question of validity was raised in his account of the ritual drug use. In a later edition of the book, Chagnon admitted to ingesting the hallucinogen, making his report on the ritual *more* valid since he experienced it directly. That is not to say that he fully understood the meanings behind the drug-induced vision, but it brought him closer to 'verstehen' than had he not participated in the experience.

The above quotation and the account of Chagnon seems to

indicate that the anthropologists underwent these 'ordeals' in order to understand the 'Native' point of view for the purpose of their research. I approached the teachings of the Medicine wheel with the desire to learn about the culture - my culture, and only later did I decide to report on the experiences in an academic format. I believe that this, coupled with my methodology allowed me to produce a more useful thesis that spoke from experience and desire based on personal experience. I was still faced with an uncertainty. Would my own dealings with the Medicine wheel reveal knowledge from which I could base an anthropological study? The Beaver Indians told Riddington (1988:xi) that,

...knowledge would reveal itself...from within personal experience. It might even come through myths and dreams.

This is true of my own experience in working with the Medicine wheel. My desire to utilize the teachings of the Medicine wheel for personal interest crosses over the boundary of empirical science. Bateson and Bateson (1987:186) saw their investigation as "a path to self-knowledge as well as a way of understanding what is strange and foreign".

In reporting my experiences, as well as others, in relation to

dealings with the Medicine wheel, I realized that they could be perceived of as fraudulent. Nevertheless, I concur with Goulet and Young (1994) in their belief that as an anthropologist, my inclusion of such accounts serves to add to the anthropological record. "This record effectively captures important dimensions of a people's cultural life" (Goulet and Young, 1994:306). My experiences are as valid as far as I believe they are. But, are they convincing? My experiences could have been affected by external events and surroundings, as well as psycho-cultural dispositions, etc. To an extent, this is a valid point. Science demands that experiments be reproducible. I am arguing that both my methodology and experiences *are* reproducible, but others' experiences may not be *exactly* the same. If one considers extraordinary experience as nothing more than psychological projections of the anthropologist's personality, they do not constitute useful ethnographic data.

If, however, these extraordinary experiences are the result of in-depth participation in those aspects of the local culture considered most meaningful by members of that culture, extraordinary experiences provide data that could not be obtained in any other way (Goulet and Young, 1994:315).

I concur with Goulet and Young (1994) and insist that a study of Medicine wheels could not have been undertaken unless the anthropologist's experience was included as a necessary and important source of data. This, coupled with a culture-based methodology as outlined by Deleary presents Medicine wheels from a necessarily Aboriginal perspective, while not excluding input from non-Aboriginal sources.

Chapter Three

LITERATURE REVIEW, PROBLEMS AND OBSERVATIONS

When I began doing research on Medicine wheels, I was somewhat daunted. I had tremendous difficulty in finding information on the Medicine wheel. The majority of academic information on the topic consisted of uninterested 'blurbs' or ultra-basic explanations of 'the great circle of life' and 'the four directions'. When I did find something of substance that was related to the Medicine wheel, it never matched my thesis goals. I realized that the majority of academic texts that I would refer to would do little more than support some of the theories and observations that I made. Much of the research in this paper was acquired through discussions with various elders, interviews with Medicine wheel participants and my own personal experiences with the Medicine wheel.

One of the most influential texts I use in this paper comes from Laughlin's work on biogenetic structural theory and, *The Cycle of Meaning*. Laughlin's model is tailor-made to fit studies dealing with many indigenous peoples, because it takes their cosmologies (usually different from the 'western' way of thinking) into account.

It perfectly suits this study because it is non-dualistic in modelling the mind and body, is at the same time not reductionistic in the positivist sense, and it remains open to all reasonable sources of data about human experience, consciousness and culture. Laughlin's model is useful in that it also cognizes experiences that are difficult to express in terms of ordinary language. For example, it is far easier to relate an account of how one performs a ritual in terms of participation with the Medicine wheel than it is to explain the actual *experience*.

Let us turn to the importance in Laughlin's Cycle of Meaning (FIG. 7). To paraphrase Laughlin, it is the process of integrating knowledge, memory and experience, especially within a polytheistic society. In the cycle, a society's cosmology is expressed in its mythopoeic symbolism (myth, ritual performance, drama, art, stories, etc.) in such a way that it evoke direct experiences in alternative phases of consciousness. The experiences that arise, resulting from this participation, are interpreted in terms of the cosmology in such a way that they verify and vivify the cosmology. A living cycle of meaning would seem to be a delicate process requiring change and revitalization to continue a meaningful

dialogue between worldview and experience. The social construction of knowledge and individual experience are involved in a reciprocal feedback system. The properties of this system may be changed by circumstances whereby the link between knowledge and experience may be hampered, and even lost. In other words, a religious system may become moribund due to the failure of dialogue between worldview and direct experience.

The problems that I foresaw in this approach were ones of initiation. Although my acceptance into New Age Medicine wheel teachings was without incident, my inclusion in the Native circle was slightly more problematic. I was granted access to some of the teachings with the help of various elders from different aboriginal

communities. Admittedly, I was never sure whether I was receiving traditional teachings. I then realized that my uncertainty was caused by my own pre set limitations. The Medicine wheel, as I have mentioned, is an extremely complex system of how to live one's life. It is different for each individual and because of this, I was told that the teachings differ too and are also perceived in different ways.

Another reason for choosing a transpersonal anthropological approach lies in credibility. I believe it helps me to naturally overcome a significant obstacle when engaging in this type of research - *disbelief*. Laughlin (1994:23) argues that the ethnographer must "suspend disbelief" in the native world view to an extraordinary extent and must participate actively in these native procedures that guide one to extraordinary experiences. Garfinkel's work on ethnomethodology also seems suited to my thesis.

Garfinkel (1986) sees ethnomethodology as the study of phenomena which seeks to describe members' accounts of formal structures wherever and by whomever they are done, while abstaining from all judgments of their adequacy, value, importance, necessity, practicality, success, or consequentiality. This is

'ethnomethodological indifference'. Garfinkel's approach contrasts with that of present social sciences. His "indifference" is provided by studying everyday activities as practical ongoing achievements.

With regards to a symbolic analysis, let us turn to Eliade's thoughts on symbolism of circles and perhaps more important, sacred structures. For Eliade (1986:106), "...the symbol delivers and fulfils its function when its significance escapes the conscious level". This holds true when considering sacred structures of Medicine wheels since to understand symbolism of sacred sites is to understand the "religious value of space". Constructed space, (e.g., a tent, a cloth print, or a sacred circle) is detached from the 'real' environment; but it is still there - tangible and concrete. Nevertheless, this sacred space has a 'buffer effect' on our consciousness. By this, I mean that a Medicine wheel acts like a shield which deflects the intruding boundaries imposed on us by normal waking reality, or at least it momentarily suspends it, allowing one to achieve an altered state of consciousness in which the 'magic' can happen.

What I draw from Eliade's work is his notion that symbols reveal deep structure of the world and spirituality of humans.

Symbols can then be seen as a sort of meta-language by how and what they trigger in the thought process. This may help to explain the tenacity of the Medicine wheel's existence as well as its lure for non-aboriginal groups. In adopting a symbolic framework, I am careful in my interpretation. Symbols often carry with them a multiplicity of meanings which are expressed simultaneously. This is not a problem in and of itself, however, it becomes problematic when attempting to explain the primary meaning of the symbol. Indeed if one admits to a main or fundamental meaning, they risk not grasping the true message.

I realize that understanding symbolism is like learning a language. It takes time, lots of work, and practice. It is not merely something that can be grasped through mechanical application of, for example, Jungian phenomenology or any other prefabricated conception of the universal mind. I believe that my realization of these points leads to a more accurate description of the symbols, their multiplicity of meanings, and their inherent problems.

Discussions about the Medicine wheel and my research on it often led to the question, "...is it a religion?". My answer was based on what the person meant by 'religion'. The question forced me to

confront this dilemma, and in doing so, I largely referred to Wallace's (1966) landmark text, *Religion: An Anthropological View*. Of particular interest to the issues related to my thesis were Wallace's notion of revitalization movements: these could be applied to my study on contemporary use of the Medicine wheel.

Revitalization movement is a term used to:

denote any conscious, organized effort by members of a society to construct a more satisfying culture. Since many revitalization movements are religious, the concept of revitalization becomes central to the analysis of the development of new religions, new denominations, new sects, new cults (Wallace, 1966:30).

Wallace supports my view that stress is a common driver that sends people seeking a new spiritual anchor. Wallace (1966:30) states that:

...religious belief and practice always originate in situations of social and cultural stress and are, in fact, an effort on the part of the stress-laden to construct systems of dogma, myth and ritual which are internally coherent as well as true descriptions of a world system and which thus will serve as guides to efficient action.

Wallace reminds us that "Anthropologists in particular have

traditionally been interested in those enthusiastic religious movement which seem to develop so frequently among primitive peoples after contact with European civilization" (1966:30). My work focuses on the converse case. I am interested in the religious and ritual movements of 'European civilization' after their contact with Native North Americans.

And what of ritual? Ronald Grimes' works are helpful here. Grimes' writings assisted me in finding the difference between ritual and theatre. As a critic of anthropological theatre, my responsibility is to *inform*. In doing so, I must ensure that it is theatre and not ritual that I would be commenting on since ritual carries a different set of psychological meanings. Grimes cautions the ethnographer to realize the difference between politically based performance of ritual and culturally based performance.

Recall the Medicine wheel's use by New Ager's. This is explained by Grimes in terms of a *criticism by rites*. For example, Gandhi's non-violent satyagraha protests were not merely effective political strategies but highly stylized, mythically-inspired actions, with a distinct ritualistic quality. Perhaps the New Age application of Medicine wheels to heal the planet can be seen as a form of silent

protest to entities which continue to harm it.

Grimes is also helpful dealing with rites in the field. I was encouraged to exercise caution since I may have been preoccupied with my own 'motivations and purposes'. I kept in mind that participants and ritualists have their own purposes for inviting or allowing observers. So, as Grimes (1990:18) states:

consultation, though it aims at mutuality, can be conflictual...The attendance of an outsider at sacred function in esoteric traditions threatens to compromise the integrity of the rites.

Grimes (1990:123) was additionally helpful in his analysis of countercultural ritualizing - New Age ritual. Nevertheless, invented rites, like authorized ones, have their liabilities. One of them is spiritual consumerism. The spiritual consumer hungers and thirsts after ritual, drifting from workshop to workshop, event to event, without ever being satisfied.

Since I am examining the Medicine wheel as an adaptational tool, let us turn to models of adaptation proposed by Yehudi Cohen (1974). I see adaptation as a unifying theme that enables one to compare different cultural groups. What I find most useful in

Cohen's work is not what he says, but what he does not say. Cohen talks about physical adaptation but never mentions *spiritual* adaptation. Nevertheless, his models are applicable in the spiritual realm as are Wallace's.

He contends that a population is adapting when it is altering its relationship to its habitat to make that habitat a more fit place in which to live. I argue that the Medicine wheel is used in a similar way. The habitat does not necessarily need to be a physical place but can be a mental construction - an inner sanctum of the psyche. Therefore, one who is unhappy with their mental state can change it. that is essentially Wallace's message concerning "revitalization" (see above).

Cohen talks about adaptation in terms of physical surroundings. The anthropologist must also consider another type of adaptation, that of the mind-set carried into the field. the following authors are used when considering issues of cultural sensitivity.

Dumont (1976) focuses on 'seeing' from a native perspective. Dumont contrasts Western 'vision' as a 180-degree forward spectrum to the Native view of things incorporating a 360-degree

circle which offers a whole, comprehensive spectrum of vision. Dumont attempts to bring, what I call, Native *mytho-reality* into the realm of western or non-native understanding. He does this by showing how Ojibwa myths can and are re-enacted in modern day rituals like the vision quest. For the Ojibwa/Cree, dreams and visions are real, but they are experienced on another level of consciousness. The article's significance and importance are realized when considering Native history.

Non-native historians ultimately encounter difficulty when recounting a native event of historical interest that bears supernatural ties. To present a supernatural event as a metaphor or a simile would, in Native eyes, distort the facts. If we are to accept Native history, we must first accept the Native 'way of seeing'.

This article is beneficial to my research in that it emphasizes the need to be critical of the way I view the cultural other. The tragedy here is that most accounts of native people were written by people with a "linear vision". The time has come for those who chose the straight-ahead vision to recognize the ultimate value in the 'all-around' vision, and in doing so, see the necessity of acknowledging this primal and total way of seeing the world.

Chapter Four

MEDICINE WHEEL FIELDWORK AND INTERVIEW FINDINGS

Fieldwork, and how to conduct it, has always been a topic of debate amongst anthropologists. Before I engaged in this pursuit, I consulted a number of texts on the topic. I finally concluded that an open-ended interview, as outlined by Spradley (1980), would be best for my purpose.

I had an understanding of Medicine wheels and how they worked, but admittedly, was ignorant of how the Cree people use them. Naturally I assumed that there were common factors inherent in all Medicine wheel teachings and their use, and believed that I would learn more from the informants' spontaneity, and pursue specific areas of interest that *they* raised rather than potentially miss something due to a highly structured interview. Also due to the potential sensitivity to the subject matter, I believed it would be better to approach the interview with my own genuine interest in learning about Medicine wheels rather than as a fact-finding academic.

This chapter will be divided into three sections. The first will examine teachings from a traditional standpoint. The second will

incorporate interviews based on contemporary Medicine wheel practitioners' experiences. The final section will focus on my own activities associated with the Medicine wheel.

Ernestine Buswa, of the Ojibwe Cultural Foundation when asked about the Medicine wheel had this to say, "Many First Nations use the term Medicine wheel to refer to [1] The Circle of life, [2] The Sacred Circle, [3] Cycle of life, [4] The Sacred Hoop. All are used synonymously." When asked how the Medicine wheel came about, she alluded to the use of symbols. "Symbols", she said, "are used to help show meaning. This meaning helps us to see purpose and understanding in our lives. Living without symbols, would mean experiencing life without its full meaning."

Native Aboriginal people of North and South America have always used this age old symbol. This basic symbol is expressed in various different ways throughout the Americas, like the Four Grandfathers, the Four Seasons, and the Four Races. Like a mirror that can be used to see things that are not normally seen, the Medicine wheel helps us to see and understand things that we can't readily vision or understand because they are ... ideas or thoughts that are not physical objects that we can see or touch.

When asked, "what are the teachings of the Medicine Wheel?". she replied,

The Medicine wheel teaches us the Four Directions, the Four Grandfathers who are the spiritual guardians of the Four Directions. We receive spiritual and physical strength from the Grandfathers.

She proceeded to give an account of the attributes of each direction.

EAST is the direction of birth and rebirth. Rebirth meaning new things to learn on a new level of understanding. It is the direction where the light comes into the world. So it also stands for illumination. It represents guidance and leadership. Some of the gifts of the East are light, joy, spontaneity, the ability to believe in what's unseen and others. The SOUTH is the direction of the sun at its highest point. It's a place of summer, youth and vigour. It is also the time where people work to prepare for the Fall and Winter. Symbolically, it's a time of preparing for the future. The South is a difficult place on the wheel because it represents an ability to express feelings openly in a way that doesn't hurt other people. It can be a pretty hard lesson to master.

The greatest lesson to be learned from the teachers of the WEST, is to accept ourselves as we really are: both spiritual and physical beings, and to never cut ourselves off from the spiritual part of our nature. We ask to stay on the Path of Life (Sweetgrass Trail) in a good way with our thoughts and actions. If we do wrong, then we need to pray to the West to help us get back on the right path.

The NORTH is the place of winter, of white snows that remind us of the white hair of our elders. It's the place of *true* wisdom. The white polar bear teaches us strength and survival. We pray for the strength that will keep us all well. Keep up from sickness. Survival sometimes means physical survival, that there's enough food and wood to keep us warm. We also need to pray that we survive emotionally and mentally, against loneliness, depression and the like, and that our spirit and heart is strong."

When asked, "why are these colours (yellow, red, black, white) used on the wheel?", she said that the Medicine wheel teaches us that there are four symbolic races on the earth. Aboriginal (red), Asians (yellow), Blacks (black) and Caucasians (white). She explained that they are all part of the same human family,..."brothers and sisters living in the same Mother Earth". She then told me how we can all live in harmony. I could not help thinking that her ideas reflected the essence of anthropology. "To live in harmony", she said, "we must become aware of each others cultures and ways. We shouldn't impose our ways on another culture, and we should share the 'good' of ones culture with others".

When asked about the elements that accompany each quadrant of the wheel, she said that each of them (Earth, Wind, Water, Fire)

"are distinct and powerful and each are part of the physical world. All require equal respect because of their gift of life". She believes that the Creator's plan was for us to use these gifts for our own survival. And at the same time to show respect by thanking the Creator for each new day for these gifts.

The Medicine wheel also teaches us about the Four Sacred Plants. Ernestine says that they are for us to use to help keep us in balance and harmony-physically, mentally, emotionally, and spiritually.

TOBACCO in the East is offered each day to the Creator in thanksgiving and prayer. "It is offered at the roots of plants and trees for their medicines and use. A pinch of tobacco is put in each moccasin so dancers will do well and dance for the proper reasons at Pow-wows" (Buswa:1994). It is said that tobacco is offered to the animals of the air, water, and ground when they are killed for their food or for their use.

In the South, CEDAR is used for prayer, and burned for smudging. Ernestine says that a daily drink of cedar tea keeps one in good health. She also states that "cedar is hung in our homes and vehicle for protection and good health.

SAGE is used for prayer in the West. It is used to smudge the area prior to any event or meeting. Ernestine says that all ceremonies include sage.

Finally in the North, SWEETGRASS is burned as a daily smudge. According to Buswa (1994), "We smudge our head to clear our minds of negative thoughts. Our eyes, ears and mouth to see, hear and say only good things. We smudge the rest of our body and pray to keep it in good health. That our hands, arms and legs will work towards the benefit of our people".

The last set of teachings that were imparted to me reflected the Medicine wheel's depiction of the aspects of our nature. Specifically, the spiritual, the emotional, the physical, and the mental.

These four aspects must be developed equally so that a person will be healthy and well balanced. This is done through the use of one's will. It is your own will that determines whether you will be happy today. No one else decides that for you. If you are emotionally upset, then it is only you and your will to do something about it. When you have resolved anything negative in your life and put things back into perspective - then your own Medicine wheel with the four aspects are in balance (Buswa:1994).

One of the questions I had about the Medicine wheel teachings was the concept of the Seven Grandfathers. The number seven, if you recall, is a significant number in Native cosmology. I was given the following account of the story by Don Abel from West Bay, Ontario.

The Seven Grandfathers

Once I was told that before entering the Sweat Lodge, you have to listen. When you learn why it was put here on earth, then you can go in. Do not go in just to find out something or to look around and find out about Aboriginality.

Long ago, when Native people first came, they had a hard time. there was all kinds of sicknesses and bad things around. The messenger was told, "Go down there, look around and find out what is happening. Bring back someone who we can tell about what life should be, with our people.

He left immediately, and went to all places in the North, South, West and East. He could not find anyone. On his seventh try, while he was looking, he saw a baby. The baby's parents were out working. So, he picked up the baby. Before taking the baby, he offered tobacco, he also left a little bit of cloth, so that the parents would not think that the baby was taken for a bad reason.

He took the baby back to where the Grandfathers were sitting in a circle. He was still very small and still wrapped inside the cradleboard.

One of the grandfathers looked at the baby very carefully. "This is the one. Messenger, pick up the baby. Take him all over, teach him carefully the way Native people should lead their lives". The messenger took him, they went around the earth.

When they came back seven years later, the little boy again saw his Grandfathers. He was already a young man. The Grandfathers noticed that this boy was very honest. He understood

everything that was taught. One of the grandfathers took a drum and started singing. He took a piece of cloth of every colour which represented all the teachings. Each direction had a colour of its own. "I'm not finished yet ", said the messenger as they left.

When they came back, each of the grandfathers gave the little boy a teaching. "These are the ones you take with you", he was told.

He was given wisdom in order to better his life through knowledge of life. Next, was love, so that he may take it to his people, to be able to teach them to speak well of each other.

They started to talk about respect . "Show respect for all things here on earth, all people, regardless of race or language. and then, this is bravery. There will be a time when you have problems. so never let go what has been given to you. Then one grandfather picked up honesty . To live the right, honest way, to speak well of your fellow man - think through whatever life brings. Humility - that man, tries to live in harmony and balance on earth.

The last grandfather took truth. This was given to the people when all of these teachings are understood. Then the messenger and his student got up. Already the boy became a man as he left.

When he came back to us, he brought these teachings, before we enter the Sweat Lodge, so that the people would remember and not lose them. Every place we go and see life, we should be able to pass on these teachings to our people.

It was good, we as Native people were given the pipe so that the Creator can help. We have to speak of these carefully as we walk this road. Every Native person speaks of these teachings differently. Every time we hear them, we should be able to take the knowledge given, as we understand and take them with us. Sometimes, it is not time to teach you, to talk of these speakers, that take these into their heart, as they speak of them.

This is how little I know, of these, that were given to this little boy, the Seven Teachings.

My questions about the Medicine wheel's traditional use showed my lack of understanding. I came to understand that the

Medicine wheel and what it represents is not a casual thing that one does or goes to or thinks about 'once in a while'. It is a way of life. A system of rules and explanations that afford a better understanding of how the world works and how we as individual and groups interact with this world. I recalled going to church on Sunday in my youth. I often wondered how the congregation could come together one time each week and be so pious and repentant, yet when I saw many of these people later on in the week, it seemed that nothing that was said on Sunday mattered. It was a 'one day a week' religion; what Campbell (1971:389) referred to as "religious pantomime", a "sanctimonious exercise for Sunday morning". This concept is a complete 180 degrees from the Native view surrounding the Medicine wheel.

The fieldwork I conducted on contemporary groups using the Medicine wheel was staged here in Ottawa. The group is relatively small and somewhat conscientious about their practice. I agreed that I would keep the interviews confidential to a point. I agreed not to use "real names", and in keeping with the responsibilities of the interviewer/ other relationship, allowed any participant to review what I had recorded for accuracy and/or further

clarification.

I had found, during my fieldwork, that much of the same symbolism used in Native wheels was also found in contemporary use. In fact, it seemed more defined in terms of exactly what went where and how things were done. This surprised me since it did not seem to adhere to the traditional teachings of the wheel which promoted individualism and dynamic application according to the individual practitioner.

How was it used? Unlike the Native application of the wheel in terms of a livable philosophy, the contemporary use was used as a tool in healing. It seemed to ignore the various levels of understanding that a Native wheel incorporated and 'settled' for a surface account of each stone on the wheel, what it represented (plant, animal, spirit, etc.) and how it could be used to exact the desired healing an individual sought.

THE CEREMONY

This account of a healing ceremony using the wheel was gained through round table discussion with three participants. It is an amalgamation of what each individual said that has been put into a reader-friendly form.

The ceremony is used to promote individual healing and the internal balancing of energy. It may help one get in touch with any number of spirit guides in the form of animals, humans or other 'supernatural' being. It is also used as an enhancement technique for heightening the awareness to the senses, and as an avenue for closer examination of the wheel itself.

Healing can occur at various levels. For some, it is "...quite pleasing to the senses, filling me with a real calmness and inner peace" ('Susan' , interview:1995). For others, the healing can exact real physical responses. "I was in real pain", stated 'David', "and could feel something in the center of my chest trying to get out. It was like someone put a weight there. I continued my visualizing and the feeling began to....disperse." Some stated that they felt nothing within themselves but did report an awareness to a change in energy.

To begin the ceremony (usually done in small groups 5-10 people), you need to build a Medicine wheel from the natural elements that surround you. This consists of using rocks in an area that are arranged so that the participants can fit inside the wheel to feel the full effect of its power.

1. Place whatever items you have brought (stones, fetishes, etc.) on a blanket to act as your altar.
2. Smudge all that is to be a part of the ceremony including individuals, their belongings and the wheel. (use both plant medicines and sound as a smudge, ensuring you ground all negative energy).
3. Light candles and place them at each of the Four Directions.
4. The participants enter the circle and join in prayer acknowledging the elements used and the spirits involved in the ceremony. They ask for personal assistance in their separate prayers.
5. Serve tea made from Medicine wheel herbs and allow all to drink emphasizing the sense of taste.
6. While they drink, the sense of sight should be brought to attention and thought about.
7. Instruct all to lie down and experience touch in the form of Mother Earth that lays beneath them.
8. Ask each participant to tap out their own heart beat. While doing this, there is a drummer that is circling the wheel trying to establish a rhythm which corresponds to a collective heart beat.
9. After the participants are accustomed to the pattern of drumming, aromatherapy begins. A helper enters the wheel with a certain fragrance and allows each participant to inhale it a few times, allowing the healing power of the substance to be absorbed.
10. Next a 'medicine tool' (dream catcher, rattle, dream pillow, medicine bundle, etc.,) is placed at the head of each participant and a prayer is recited asking that the objects enhance the dream state.
11. Smudge the participant with sound again, starting with quiet instruments and progressing to louder ones.
12. Repeat aromatherapy.
13. Repeat the placement of Medicine tools using a different tool.
14. Repeat the sound smudging.
15. Remove the Medicine tool.
16. Repeat aromatherapy, and remove medicine tools and instruments creating sound except a rattle.
17. Smudge with plant medicines (or, if qualified, perform a pipe ceremony)
18. Perform a final rattle smudge.
19. Ground all energies in the participants by placing hands on them and gently brush the energy away.

20. After grounding, the leader joins hands with the participants and finishes with a prayer of thanks and acknowledgment.
21. Finish with each individual expressing their experience to the rest of the group.

This is one of the types of healing ceremonies used by this Medicine wheel group. It is the one that they most commonly use since it is versatile in its adaptability to the individual participants.

Paul Paquette, one of the founders of the Stone Angel Institute advocates a more 'relaxed' use of the Medicine wheel. The Institute is focused on using the Medicine wheel as a model for how to live ones life. The members do not ascribe to a New Age label. They believe that the New Age has a negative stigma attached to it. Paquette can not understand how someone can ascribe to a New Age philosophy that symbolizes love and harmony with their environment yet "make money as a real estate agent and hurt people by perpetuating existing problems inherent in our society" (Paquette, interview:1994).

The Institute itself is described as, "an independent community center created by a small group of unemployed, low-income people" (Stone Angel Institute Handout:1994). They view the

Institute as a place where people come to gather on a social level and to also seek help from the many obstacles that face people each day. It is done under the structure of a Medicine wheel motif. As stated by members of the organization, "The greatest strength of our group has been the concept of the circle. [Especially its] non-hierarchical [structure]" (Stone Angel Institute Handout, 1994:2). I would like to begin my recounting of an interview with Paul with an anecdote he told me.

A woman who had 'booked' the hall for a 'spiritual workshop' upon entering asked Paul if he would remove the Medicine wheel he had created from the area since she wanted a 'pure' atmosphere. Paul replied, "No, the Medicine wheel is this place. It represents our way of life and how we choose to live!". The lady, not knowing what it was asked for an explanation of it. After Paul had told her about it, she wanted him to incorporate it into her workshop. Clearly the power and appeal of the Medicine wheel teachings became apparent to the woman.

The Stone Angel Institute uses the Medicine wheel as a model for how to live, run daily affairs and work together. As Paul states,

"People *are* the Medicine wheel". When the initial members began to live there (as a sort of experiment to see if their way of life could be realized) they realized that their ultimate goal was the same, but each had a different agenda in terms of the path followed to achieve it. "We used the example of the Medicine wheel as a model to incorporate and accommodate each of our different ideals" (Paquette, interview:1994). An example of this is illustrated in their attempt to raise money. When they applied to various organizations for funding, they would have had to conform to a bureaucratic system of 'red tape' to achieve any type of assistance. At first they agreed that they would do it "on paper only", that is, follow the guidelines imposed by government institutions. Paul's visit to Six Nations made him realize that they could not do this.

He saw an elder painting a part of the building and talked to him about his plan. The elder told him about the Iroquois tradition that had no system of 'real' hierarchy. Each person ultimately made their own decisions not allowing anyone to tell them how to do something. If it were allowed or permitted, it would weaken their system. Paul applied this idea to their grant applications and decided that this would go against their principles of living the way

of the Medicine wheel. Rather, they would use the wheel and its teachings to overcome their problems. "The institute is trying to live the Medicine Wheel", stated Paul, "We must realize that the circle is only as strong as its individual members. We'll keep this dream alive as long as we can". The final account of Medicine wheel fieldwork will relay my own personal work with Medicine wheels.

PERSONAL ENCOUNTERS WITH THE MEDICINE WHEEL

In my study of Medicine wheels I was advised that the only way to fully understand a Medicine wheel was to use one. I have been consciously referring to the teachings of the Medicine wheel for about five years. It was not until the realization of my Aboriginal ancestry that I really delved into my heritage. From this point forward, I slowly learned more about this spiritual system.

I engaged in discussions with various elders about the Medicine wheel teachings some of which I have included here. I attended healing circles that used the Medicine wheel as a model for what took place at these gatherings. I desired to learn more and was instructed to build my own wheel and use it.

In the summer of 1994, I (along with two good friends) constructed a wheel in the Gatineau Hills (FIG. 8). It was a simple stone circle with four spokes symbolic of the Four Sacred Directions. In the centre a fern grew symbolizing life and the Great Mystery.

The wheel was constructed with reverence and respect to the elements, the power of the wheel and ourselves. I have gone there many times for a number of reasons. I sit by the wheel when I need to work out a personal problem. I go there to seek help and understanding of myself and the world around me. I visit the wheel to say prayers and to give thanks for all that is. It has brought me profound senses of joy, sadness, determination, and fear.

What follows is an account of how I use the wheel and some of the experiences I have had. I must stress that these are my experiences based on ways I have been taught to use the wheel.

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PRECISIONSM RESOLUTION TARGETS

Some of the techniques I use are verbatim suggestions from elders. Others are variations of them that work for me. The Medicine wheel is a personal thing. There is no right or wrong way of using it. This is my way.

When I desire a vision or need assistance in solving a problem, I fast before visiting the Medicine wheel. The length of the fast varies. On average I will consume no food for 1 to 3 days prior to my visit, drinking only water or tea. I go to the wheel either very early or very late in the day when no one is around. For me, my time at the wheel is a very private affair. Upon my arrival, I smudge myself with a combination of the sacred Medicines of the four directions. I then acknowledge the wheel, the elements, my spirit helpers, and the Great Spirit. In doing so, I asked to be kept safe and express my hope and willingness to receive the guidance and wisdom to help me with my problem.

I enter in the East and circle sun-wise, placing an offering of tobacco beneath each cardinal stone of the four quadrants. I continue to circle the wheel while centering myself using breath and visualization. When I was very young I discovered that some of the trees near my grandparents home would speak to me. I later realized

that they could all speak, but like people they sometimes chose not to. The first time I worked with a Medicine wheel I believed that the rocks could do the same, and they did. I often feel reluctant to share these ideas; in my youth I recall being ridiculed by my peers or had my experiences dismissed by adults as 'childhood imaginations'.

When a rock would call to me, I would go and sit near it and shift my consciousness into an altered state that allowed me to become more aware and accepting of this new reality. Here I would wait for an answer to my question. I would concentrate on nothing but the sounds around me, the rhythm of my breath and the beat of my heart. These were my 'drivers'. Sometimes I would get a vision. Many times I would not. An 'experience' could last scant seconds, or several minutes. Admittedly I am seldom concerned with time. I regard everything that happens as a lesson.

During an experience in this altered state, I would often transcend the bounds of normal waking reality. I would be approached by mythical beings, anthropomorphized animals, relatives that have died before me, etc. On the few occasions that I have 'meditated' on the wheel itself, I sometimes see the wheel unraveling before me. Levels of understanding, and ways I never

perceived about how to use the wheel peel away like psychic layers.

I have confronted elders about this experience. They usually just sit there, nodding and smiling, while they listen to my experiences. I want to know more, but I know to wait for a time when they think I am ready. I realize that it will take longer than a lifetime to understand the Medicine wheel, and equally as long to gain the intended experiences. As Jorgensen (1972) concludes concerning the Sun Dance, "It is not uncommon for practitioners to have to repeat a ritual activity numerous times, and perhaps for years, before the intended experience arises".

In addition, because experience develops over the course of life, rituals may be repeated over the course of years with the experiences intended by the guide...changing with the maturation of the practitioner (Laughlin, 1994:17).

In writing this abridged account of one type of experience I have with the Medicine wheel, I realize that it may be difficult for the reader to accept. There are many people who pose as shamans, mediums, spiritualists, etc. I am none of these. My goal is not to convince the reader of my experience nor to prove its efficacy. I am simply one person who uses teachings that are part of my heritage

to exact a desired effect. This system has been used by others, sometimes with success, other times not. It is a system that I understand because it is based on a cosmology that I ascribe to. It is just as valid as a catholic's experience with Catholicism or a Buddhists experience with Buddhism.

Again I must stress the purpose of this chapter. It is a compilation of different teachings, uses, and adaptations of the Medicine wheel. It is not all of them; as I have pointed out it cannot be. This chapter serves as a source of data concerning different uses of the Medicine wheel. It is not a structured analysis: that would have detracted from the purpose of my study. The essence of the wheel is the people who use it.

Chapter Five

CONTEMPORARY APPLICATIONS OF THE MEDICINE WHEEL

This chapter will focus specifically on non-Aboriginal utilization of the Medicine wheel. In this section, I will examine why people are turning to the Medicine wheel as a type of spiritual cure-all. In doing so, I intend to contrast the *New Age* representations of Medicine wheels with the Aboriginal ones to determine what differences there are and, if so, why there are differences. Can the Medicine wheel be altered and used to fit specific problems inherent in a particular cultural group? If it can be, are there dangers in doing this? What are the potential hazards in altering the Wheel, or, what are the effects of receiving different teachings or incomplete teachings? Can teachings from traditional contexts apply to modern concerns? Can they be used as an adaptational device?

A population's adaptation is its *relationship* to its habitat. This implies that we alter our relationship to our habitat, making it a better place to live, or adapt it to make it more 'livable'. Something is considered adaptation when it alters the groups *relationship* to its environment. As Cohen (1974:3) states,

The adaptation achieved by a population of mammals is the result of genetic mutation. In man, however, adaptation is achieved by means of culture...[H]uman adaptation is the result of the energy systems that are harnessed by a group and the organizations of social relations in the group that make it possible to use its energy systems effectively.

For Cohen, energy systems, referred to physical entities like water, and the production of crops. I employ his term with a somewhat different view. Energy systems used in practice with the Medicine wheel are, or can be, both physical energy emitted from the wheel itself (i.e. magnetic variances and static energy encountered and recorded at such locations as Sedona). Or, the mental energy emitted from participants who use the wheel either in individual propensities or as a combined consciousness and feeling of 'psychic unity'. Since the emphasis of this section is on non-Aboriginal use of the wheel in terms of cultural adaptation, I must clarify my understanding of this term. One view is that culture in the anthropological sense refers to the full range of behavior in a group: music, drama, art, kinship, law, language, and of particular interest to my paper, religion. Yet, as Geertz (1974: in Cohen) stresses, every culture is a set

of symbols. Furthermore, people in their daily lives respond to cultural symbols rather than to objective reality. For example, people respond in particular ways to *flags* rather than to pieces of cloth that are cut to specific proportions and decorated with specifically arranged colours. Cohen (1974:9) suggests that:

...symbols are more than objects to which people respond; they are also ties that bind people to each other. Examples of ties that bind are religious rituals...which is the most complex system of symbols in any human group.

In the study of cultural adaptation, the social group must be regarded as the adaptive unit. "All cultural adaptations-moves of acquiring a livelihood, family organization,...and religion-refer to complex group relationships even though they are acted out by individuals"(Cohen,1974:10-11).

With this understanding of 'what cultural adaptation means', it is necessary to examine why it happens. Specifically, "why are people turning to the Medicine wheel as a type of cure-all?". In answering this question, I must state that I am focusing on human actors who try to realize objectives, satisfy needs, or find peace

while coping with present conditions. Therefore, I maintain that Medicine wheel rituals are used as an adaptational tool in the way they help people to cope with their surrounding *and* internal environment. In their coping, Bennett (1993:25) argues humans create the social future.

If, for example, the teachings of the Medicine wheel were applied and adhered to on a global scale, an equilibrium of environmental forces would result. Proof of this on a smaller scale exists in "traditional societies". Young (1989:70) states that "anthropologists with a functional orientation have explained the relationship between Native people and land-use as one in which Indian rituals and practices have beneficial ecological consequences". The Waswanipi Cree, for example, have a hunting and trapping system which regulates the amount of animals harvested. Within this system they keep careful records on which animals are in abundance and which are on the decline. Undoubtedly, Cree Medicine wheel teachings like those outlined by Cree healer Russell Willier are applied with success, indicating the wheels' success as a model of adaptation to a changing environment.

Bennett (1993:31) elaborates on another idea that gives

credence to the "Medicine-wheel-as-adaptational-tool" theory. He states that humans, with their impressive symbolic capacity, have the ability to perceive the self in relation to the environment, which is of course the basis of human ecology. He argues that tribal societies especially, perceive the self as largely in symbiosis with the environment. This is quite true of indigenous cultures who utilize Medicine wheel teachings. But why have non-aboriginals adopted the Medicine wheel? In answering this question, Wallace (1966) provides many theories. One of them regards religion as a projection of, and therapy for, emotional problems.

Psychoanalytic theory credits some individuals as working through emotional problems by means of belief and ritual (Wallace, 1966:13). Similarly, Kardiner and Linton (1939,1945) developed the concept of religion as a 'projective system'.

A projective system is a body of beliefs and rituals which ventilate and more or less adequately resolve those tensions of the typical individual that his [or her] society, particularly by its child-rearing methods, has built into him [or her] during the process of enculturation (Wallace,1966:14).

Carl Jung viewed religion as an experience which at once integrates the personality and unites the individual with society and

its traditional values. Jung...

looked upon behavior (and *especially* religious behavior) as instrumental in the striving of the personality to grow, mature, and achieve integration" (Wallace, 1966:22).

Wallace's work on religion as a revitalization movement fits perfectly my study on Medicine wheels. He addresses the emergence of new forms of religious expression and ritual. This melds with my focus on the use of 'traditional' Medicine wheels in a non-traditional arena and by a non-traditional or 'contemporary' audience.

Wallace (1966) reminds us that societies are not stable entities. Political revolutions and civil wars tear them apart, culture changes turn them over, invasion and acculturation undermine them. Reformative religious movements often occur in disorganized societies. These 'new' religions are drawing increasing attention from anthropologists. Wallace (1966) has come up with a 'catch-all' phrase which recognizes these contemporary religions: *revitalization movements*. By this term Wallace refers to any conscious, organized effort by members of a society to construct a more satisfying culture. Since many revitalization movements are religious, the concept of revitalization become central to the

analysis of the development of new religions, new denominations, new sects, and new cults. Wallace further speculates that all religions and religious productions, such as myths and rituals, "come into existence as parts of the program or code of religious revitalization movements" (1966:30). Wallace precedes Bennett's idea that religious belief and practice always originate in situations of social and cultural stress and are, in fact, an effort on the part of the stress-laden to construct systems of dogma, myth, and ritual which are internally coherent as well as true descriptions of a world system and which will serve as guides to efficient action (c.f. Wallace: 1799 Iroquois Revitalization Movement).

Wallace believes that the revitalization theory depends partly on psychological and partly on socio-cultural consideration. Psychologically, it recognizes the integrative power of religious experience for the distraught and disillusioned individual in search of salvation. The search is not for a new religion per se but rather a new religion for them. The Medicine wheel teachings are timeless and have always been a part of Native cosmology. It is only recently that traditional teachings have worked their way into the New Age movement and have been adapted to fit the time constraints of

weekend seminars and for spiritually desperate people in search of a quick fix, hoping that "this would be the one". This last statement smacks not of a religion itself, but of religious ritual; another valid aspect of revitalization movements.

Persons involved in the process of revitalization perceive their culture, or some aspects of it, as a system. They must then feel that this system is unsatisfactory and must therefore, innovate it specifying new relationships and traits which are often adopted from other groups through drift, diffusion , acculturation, etc. In studying revitalization movements, Wallace (1956:265) regards human society as a kind of organism. It behaves as such demonstrated through its maintenance of a life-supporting matrix that will "take emergency measures to preserve the constance of this matrix" when it encounters stress.

Stress is the primary trigger in revitalization movements. Indeed it can be viewed as a common denominator of the panel of 'drives' or 'instincts' in every psychological theory. Arguably, the goal of any revitalization movement is the reduction of stress caused by a possible myriad of external forces. Here, Wallace (1956:266) refers to an individuals *mazeway*. It is a mental image

of the society and its culture as well as its behavioral regularities. When stress ensues, this mazeway is what gets attacked. The individual is then faced with a choice.

...he must choose between maintaining his present mazeway and tolerating the stress, or changing the mazeway in an attempt to reduce the stress (Wallace, 1956:267).

I believe that stress is the key that motivates many non-Natives into adopting the teachings of the Medicine Wheel. They are unhappy with their present system of religion or spiritual beliefs and therefore import the beliefs of others. It is not an uncommon occurrence. Wallace terms this type of revitalization movement as a '*vitalistic movement*'.

Vitalistic movements emphasize the importation of alien elements into the mazeway but [unlike *cargo cults*] do not necessarily invoke ship and cargo as the mechanism (Wallace, 1956:267).

Wallace (1956) refers to a processual structure in his discussion of revitalization movements. It is useful in its adherence to cases where "the full course is run". I do not believe it applies however, to

all contemporary Medicine wheel groups since they lack the extremism associated with other groups that seek far-reaching or even global change. This may be true with Medicine wheel groups but on a more passive scale that reflects the teachings of the Medicine wheel. Wallace (1956) also explains that all revitalization movements must perform six major tasks. In my discussion of them, I will show how they are applicable to the contemporary Medicine wheel movement initiated by Sun Bear.

1. *Mazeway reformulation.* This refers to a restructuring of ideas which may already be in limited use in a society. They usually are conceived of by an individual and often through dreams, hallucinations, etc. The experience brings about a positive inner change in the individual's personality which starts the wheel of change in motion. This is quite true of Sun Bear's experience. He had vision of the Medicine wheel in which he 'heard' the leader say,

Let the Medicine of the sacred circle prevail.
Let many people across the land come to this
circle and make prayers for the healing of the
Earth Mother. Let the circles of the Medicine
Wheel come back (Sun Bear, 1991:xvi).

From this point, Sun Bear writes that he knew the vision had to be

realized, so he had his ideas distributed throughout the world and reports that thousands of wheels have been created globally in realization of his vision.

2. *Communication.* Here the 'dreamer' begins to preach his or her revelations. The doctrines promise the converts care and protection by supernatural beings as well as material benefits resulting from the new system. The 'preaching' is carried out in different ways with the 'disciples' assuming responsibility for passing on the teachings during later phases of organization. These ideas are true in Sun Bear's practice. He relays the power of the spirits and their assistance to practitioners. The wealth he speaks of is derived from the healing of the planet. His preaching goes out in the form of books, seminars, and retreats.

3. *Organization.* Converts are made by the prophet. Some experience visions, others are convinced by more rational arguments. A small group of special disciples cluster around the prophet. A hierarchy is formed consisting of the 'prophet', the 'disciples', and the 'followers'. This is a common pattern that emerges in Sun Bear's group. Arguably, his statement that,

...close to 1 million people in the world have danced with the Medicine wheel of my original vision (Sun Bear, 1991:xvi).

attests to the conversion of people. He also seems to be 'surrounded' by close friends (disciples, if you will) that he mentions often and continuously refers to and thanks throughout his book.

4. *Adaptation.* Since the movement is relatively new, it will undoubtedly encounter some form of resistance. As a result strategies of adaptation may have to be used: doctrinal modification, political and diplomatic maneuver, etc. The original vision may have to be slightly altered to make it more acceptable to certain groups thus giving it a better 'fit'. In Sun Bear's case, the application of this tenet is obscure. Sun Bear has been monitored and attacked by various Native "watch-dog" groups. Also, since his vision is based on a Native concept and modified somewhat to exact one particular focus (healing of the earth), it encounters resistance from both Native and non-Native groups alike. I do not believe that criticism stems from his varied application of the wheel since teachings make provisions for exactly this. What I think people object to is the availability of these largely non-traditional teachings and, more importantly, the economics surrounding this venture. If you recall,

teachings of the wheel are the property of everyone and any fee charged for the imparting of this wisdom is frowned upon. Whether or not it is intentional, Sun Bear seems to compromise the passing on of Medicine wheel teachings by accepting monetary retribution.

5. *Cultural Transformation.* When the participating population comes to accept the new system, a noticeable social revitalization occurs signalled by the reduction of personal deterioration symptoms expressed previously. I am unable to speak on the behalf of all of Sun Bear's followers, but I can speak for myself. My own adoption of the Medicine wheel teachings has lead me to realize a more contented existence with my surroundings.

6. *Routinization.* This refers simply, to the establishment and normal functioning of the new system. Again, it is difficult to speculate the adherence to routine among Sun Bear's followers. I would imagine that the degree to which individuals follow the teachings or apply them in their daily lives varies from person to person.

The example used to illustrate the above functions is similar to others' contemporary use of the Medicine wheel. Arguably, they all demonstrate traits associated with importation movements.

These movements which profess to abandon ancestral ways manage to leave elements of the ancestral culture intact. And,

...movements which claim to present an absolutely new conception of culture are obviously blinding themselves to the fact that almost everything in the new system has been modeled after traditional or imported elements or both (Wallace, 1956:276).

The above quotation is certainly applicable to contemporary Medicine Wheel participants who often adapt the Medicine wheel to fit their own problems and personal situations.

It has been illustrated here that revitalization movements both provide personal salvation to the presently afflicted, and reorganize culture so that a better way of life is introduced to replace the old system. This analogy is not limited to the Medicine wheel. Consider the Ghost Dance which offered salvation by possession, the peyote cult which is still in operation, and the Handsome Lake Movement (re: Appendix 1). Wallace's discussion of revitalization movements lead me to consider a very controversial question. Can the teachings of the wheel altered to suit the needs of non-Native participants and if so, are there potential hazards in doing so? It is difficult to ascertain the extent of how different

traditional versus contemporary teachings are. It is exceedingly difficult for me to comment on this problem since, admittedly, I am ignorant of the complexities of all the teachings of the wheel from both points of view. I believe that I can best answer this question with a personal anecdote.

Wilfred Pelletier, an Odawa Sacred Pipe Carrier who is familiar with the concept of the Medicine wheel, during an informal discussion about his role as an elder and a pipe carrier told me about his experience at a pipe ceremony which lends insight into the issue I have raised. He stated that there are fundamental similarities in any ceremony: giving the proper respect, the direction of the pipe's circulation (in a pipe ceremony), etc., but the rest is based on personal taste and style. The way a prayer is said, the language used, the order and speed to which acts are performed all vary. I can only speculate that this is true of all ceremonies, *traditional or otherwise*. Especially when considering the wheel and the fundamental lessons it strives to impart. The wheel can be suited to fit an individuals' personal needs. Since the needs differ, so too must the accompanying ceremony. The question that needs more attention is whether there is any harm done by adopting and/or

altering the wheel's structure and ceremonies.

Wallace (1966:209) states that "it is difficult to demonstrate the actual, functional consequences of revitalization movements". Some are considered positive, like the Handsome Lake religion, and others negative and often incurring horrible ends, like the Ghost Dance religion.

Medicine wheel teachings that have been adopted by non-Natives are often viewed with contempt by Aboriginal peoples who view this "adoption" as a theft of their culture. Andy Smith, a Cherokee and co-founder of Women of All Red Nations (Warn), takes a bitter stand against this cultural appropriation of Native spirituality.

They sell sweat lodges or sacred pipe ceremonies, which promise to bring individual and global healing. Or they sell books and records that supposedly describe Indian traditional practices so that you, too, can be Indian.

She sees Indian spirituality, with its respect for nature and the inter-connectedness of all things, as the "panacea" for all individual and global problems. As a result, many see the opportunity to make a great profit from this interest in Aboriginal spirituality. She

believes that on the surface, it may appear that this 'interest' is based on a respect for Native spirituality. In fact, the New Age movement is part of a very old story of white racism and genocide against the Indian people. Smith restates the point I made earlier by saying that true spiritual leaders do not make a profit from their teachings, whether its through selling books, workshops, sweat lodges, or otherwise. Spiritual leaders teach the people because it is their responsibility to pass what they have learned from their elders to the younger generations. They do not charge for their services. Smith wonders why non-Aboriginal people are turning to Native spirituality for assistance instead of their own, especially since pre-Christian European cultures were earth-based and contain many of the same elements that non-Natives are ostensibly looking for in Native North American cultures.

Smith believes that while New Age practitioners may think that they are escaping white racism by 'becoming Indian' they are, in fact, continuing the same genocidal practices of their forefathers/foremothers. They trivialize Native practices so that these practices lose their spiritual force. "They have the white privilege and power to make themselves heard at the expense of

Native American" (Lynn Andrews' books, for example, have sold more than all books by Native writers combined). Smith is worried about this theft of culture and its ramifications and concerned for the younger generations of Indian who are trying to find their way back to the Old Ways and become lost in the morass of consumerist spirituality.

The decision seems left up to the individual whether some New Age Medicine wheel practitioners approach the teachings with sincerity or are merely doing so for profit or the Native stereotype of being a mystical figure that is 'at one with nature'.

Chapter Six

PRACTICAL APPLICATIONS OF MEDICINE WHEELS

This chapter will deal with present day applications of the Medicine wheel with a focus on non-Aboriginal society. I will demonstrate, through an examination of others' use of the Medicine wheel, that it can be used as a mnemonic device in different areas of work, education systems, and mediation services. This will demonstrate that the simplicity of the Medicine wheel's structure is adaptable in that it can be 'adjusted' to fit a variety of different agendas.

The Medicine wheel, arguably, is a powerful tool that is used in aboriginal society. Only recently is it being recognized as a significant force in the Western Health Care system. Jane Ross and Jack Ross (1992), in using the Epp Health Promotion framework, identify strengths for Native Health Promotion that are found in Native Culture. They maintain that learning to integrate Native culture with professional practice is an ethical responsibility and that "in the context of bioethics, biomedical schemes for Native health must be based in bioethics which have cultural knowledge at the core" (1994:291). Ross and Ross base much of their research on work done at the Blue Quills School in St. Paul, Alberta. In a course

which they co-taught at the school, they encouraged Native students from several tribal groups to identify, learn, and integrate the Native traditions about health, maintenance and disease prevention as a base for health promotion. As Turpel (1989) states, "[E]thical Native health and medical care also requires the alternative approach of 'First Nations Human Rights and Responsibilities Laws'." As recipients of professional programs and approaches in which the Native peoples have not been part of the decision-making process, their experience of western biomedicine is foreign, impractical, and often, extremely invasive. Use of the Medicine wheel eases these concerns.

Ross and Ross (1990:299) state that an increasing number of programs involve Native participation and planning and traditional medical models. There are a number of cases-in-point that can attest to this. In Alberta, they include: (1) a joint research project between the Blood Tribe at Standoff, Alberta, the University of Lethbridge, and the University of Alberta, and (2) the Urban Natives Health Project. There is also national participation in Native health care, like the Native Health Careers project.

At long last a cultural approach to health and medical care is becoming valued. Easier to say than to do, however. After decades of the marginalization of Native medicine and "top-down" health and medical care for Native people, biomedical access to traditional medical knowledge and practice of Native people is difficult. The integration of two systems, in many ways vastly different, does not come easily...individual in the earlier contact periods...failed to study the merits of local medicine...Now, when an in-depth knowledge of culture and health is being sought and is becoming trendy, Natives are often (and understandably) reluctant to grant public access to the ancient and private knowledge that remains (Ross and Ross,1992:300).

As Nancy Milio (1986) asserts, health policy is necessary for effective health promotion. Clearly, strategies to achieve health for Native people must be mounted and coordinated in ways that are cross-cultural, cross-sectoral, and cross-functional. Joint planning and cooperation must occur within Native groups and among Native and non-Native groups, with agencies, and the community at large. Above all, public policy must include Native people and be based on their all-encompassing ethos that is symbolized by the circle and its multifarious expressions. Ross and Ross, in their article, illustrate the importance that Native models play in the health care

system. The following accounts will enforce this premise.

Dr. Elaine Childs-Gowell is a grief and loss specialist who works in Seattle, Washington. My correspondences with her gave me insight into how she incorporated Medicine wheel teachings in her practice. She informed me that,

The Medicine wheel offers a structure and a set of rituals by which persons in Recovery may refer to the first step expectation of a Higher Power in their lives to assist them in their recovery, and it offers us rituals we may carry out for each of the steps of our healing process. The teachings of the Medicine wheel provide a spiritual structure which is compatible with most modern religions. It is not itself a religion, nor does it compete with religious practices, instead it supplements and supports whatever religious practice you may follow (1994:personal correspondence).

As a psychosocial nurse and an anthropologist, Childs-Gowell has found that the process of recovery is filled with 'Grief issues'. She maintains that each step forces us to face issues which "cause us to cycle and recycle deep feelings". The 'Good Grief Rituals' which she has developed assist with 'clear tools' and rituals. She believes that they show us what to do and moreover, what we may do

outside of therapy to deal with these feelings. "When we combine the teachings of the Good Grief Rituals with those of the Medicine wheel, we have a very powerful set of tools to help us come through the process of leaving our addictions behind, and moving ahead with our own healing" (1994:personal communication). When asked specifically how she uses the Medicine wheel in her therapy, she had this to say:

In the Medicine wheel, we honour the Four Directions of the compass. In each direction we are offered tasks to fulfill in coming to recognize our soul's purpose, and to further our vision for ourselves, our family, our community and our planet. The Four Directions and the spiritual aspects of these directions and of the center offer us symbolic ways to face the problems we have in life. We are able to find ways to deal with those problems and to solve them. In the Medicine wheel we are offered specific tasks, and specific helpers to accomplish these tasks. The outcome is often that we are able to move to another level of being in our relationships, and in our lives. Each of the Four Directions offers an initiatory process and structure for seeing the rituals through to their completion. The tasks of each of the Four Directions provide us with a structure for confronting those events in our lives which stand in the way of or fulfilling our vision and of being in our soul's purpose. The Four Directions remind us that our Mother the

Planet is at the center. Along with our Mother are those energies which are of higher symbolic value to us, such as the Grandfather Sun, Grandmother Moon, the Great Spirit, and our ancestors among other healing and helpful energies. We are taught that we can draw upon all of these energies in symbolic ways to guide us and to heal us from our pain. The Good Grief Rituals provide specific processes we may undertake at each of the directions as we confront the demands of our teachers in each of the directions, and our own demand of our own integrity.

Childs-Gowell demonstrates that the Medicine wheel is a valid tool in contemporary society. She has shown its effectiveness as a mnemonic device in assisting people in overcoming problems faced in daily life, or those brought on by past personal conflicts or traumas. Rhinehart and Engelhorn are art therapists who use an adaptation of the Medicine wheel in a similar fashion.

They use the *Full Rainbow*, a Medicine wheel-based tool which has its foundations deeply rooted in Native American heritage. It is a tool that aids clients in their search for individuation or 'wholeness'. The Full Rainbow is an individuation process or healing way that parallels the message of the Native American culture. It symbolized a goal of living in harmony with 'Mother Earth, and Father Sky'. Rhinehart and Engelhorn (1984) believe that the Full Rainbow

offers a way toward greater individuation through colour.

We can say that each of us comes into the world a given colour of the Rainbow. This colour is where we begin our journey...We can walk the path of our given colour until we understand the personal meaning of each shade within the colour (Rhinehart and Engelhorn, 1984:38).

When this is accomplished, a person can then travel the circle back to another lesser known colour and begin the process of knowing more about themselves through the new colour, bringing greater consciousness and a stronger connection with another 'spirit colour' until all are connected forming the full circular rainbow. This idea is similar to Jung's idea of individuation in that he believed that one entered the world as a particular *type*, (introverted or extroverted) and with a particular function which gave us a beginning place in individuation or on the Medicine wheel or colour of the Rainbow wheel.

Rhinehart and Engelhorn (1984) use their version of the wheel by observing what choice of colour a client chooses over a prolonged period of time. They conclude that "people, more often than not, through colour preference selection, can identify their personality

function" (1984:39). By gathering information concerning colour, they realized that the opposite personality function could be introduced to the client through colour. The ultimate goal of introducing the qualities of the opposite personality function to the client is to enhance the process of individuation. For instance:

...if a client repeatedly rejects the colour red and prefers to use blue, we can assume one of two possibilities, which we explore through the art process: (1) The client's primary function may be thinking; or (2) the client's primary function may be feeling that is masked by blue, a cool colour of the spectrum. One of our therapeutic treatment goals would be to introduce the colour red into the client's visual graphic statement in the hope of inviting the client to begin, gradually, to express feelings (Rhinehart and Engelhorn, 1984:40).

By this, it is understood that through the introduction of opposite psychological colours into the client's visual vocabulary, the therapists are employing colour directly as a way to individuation. Further, the degree to which one stays in contact with the Full Rainbow as a process of individuation depends on continued participation. Both negative as well as positive aspects of the individual must be realized and accepted for individuation to be

successful. Based on traditional teachings of the Medicine wheel, this application is a valid and accurate one. The concept of individuation and the Medicine wheel is not uncommon in the spectrum of therapeutic disciplines. Mary Loomis, a Jungian analyst, also uses the Medicine wheel as a mnemonic device and therapeutic aid.

Loomis (1991:47) uses an adaptation of the traditional wheel titled *Medicine wheel of the Eight Cognitive Modes*, based on the works of Carl Jung (FIG. 9).

FIG. 9

Medicine Wheel of the Eight Cognitive Modes

The four functions on the model: thinking, intuition, sensation,

and feeling, represent the compass points on our inner mindscape. Depending on which function one associates with, it is indicative of where one is on the road to increased consciousness. The wheel's purpose is to allow one to recognize what function is used most frequently and which one is considered to strike uneasiness within ourselves. Loomis asserts that in order for one to recognize the potential of human consciousness, they must have all four functions working in harmony.

Loomis maintains that people habitually go with one main function, but until the other side of one's personality is grasped, and the Jungian concept of *transcendent function* is engaged, one cannot possibly have a preference for one psychological function over the other. Problems arise when the persona attaches itself to one function thereby repressing the others. The persona acts as an obstacle to development. The need for the Medicine wheels' teachings becomes apparent. The notion of balance and harmony amongst the four functions is used as a tool which facilitates the dissolving of the *persona*, or more accurately, the ego's identification with it.

The concept of balance also applies when examining the

outlying qualities of judging and perceiving. For example, if one purports to cease being critical of others, what they are really doing is relegating judging faculties to their *shadow*. Typologically speaking, one limits extroverted thinking and sensations while denying introverted feelings. Loomis' adaptation of the sacred teachings of the Medicine wheel and Jungian psychology is an excellent example of both the usefulness of the wheel in contemporary, non-Aboriginal society as well as demonstrating the adaptability of the Medicine wheel. The applicability of the wheel is not limited to the medical profession alone. I have found that its structure is well suited to mediation and conflict resolution.

Marg Huber, a mediator in private practice, advocates the use of the Medicine wheel during conflict resolutions. She was interested in providing a mediation model that would be culturally relevant to Aboriginal people. She found that they already had such a model in their midst - the Medicine wheel. Huber and her colleagues identified values important in dealing with conflict: sharing, equality among people, harmony, consensus decision making, non-interference in individual matters, privacy, patience, and modesty. Values inherent in communications included moderation in speech,

careful listening, physical communication (non-verbal), and quietness. Other values important in the aboriginal way of life included family and community, cultural heritage, self-determination, respect for elders, a holistic approach to life, relativity of time, and spiritual connectedness. All of these values and lessons are inherent to the teachings of the Medicine wheel.

Huber conceptualizes the mediation process surrounding the wheel by mapping four stages of the actual process in conjunction with the Four Directions. "In this way, the wheel serve[s] as a visual and spiritual map to orient clients to the process" (Huber,1993:358). Aspects of the Four Directions are incorporated thusly: the East sets the climate and represents opening and orientation. Tasks include conducting an opening circle to bring everyone to the present, "establishing the purpose of the meditation, and describing roles and process [, also] they may ask the parties where they currently see themselves on the wheel" (Huber, 1993:359). The South is the place of the heart. Here, sensitivity to feelings of others, loyalty, and flexibility are stressed. The West symbolizes reflections and introspection. One listens to ones own inner voice. It is the place of testing. The West emphasizes honesty, humility, and sacrifice,

where one learns to "accept both spiritual and physical aspects of oneself, to give and take, to understand oneself in terms of others, and to respect the vision of elders" (Huber, 1993:360). The North is the next step on the 'mediation wheel'. It represents intellect, wisdom and farsightedness. It is here that the capacity to solve problems, think and imagine, synthesize, discriminate, and organize, lie. When the parties reach this stage of their journey, the mediators symbolically take them to the center of the wheel for a holistic perspective on the situation.

This model seems to 'speak' only to aboriginal participants. Although the Medicine wheel is set up in a way that reflects aboriginal cosmology, it does have the ability to be adapted to fit inter-cultural applications. As Huber (1993:364) maintains, "Many mediators in urban settings across Canada and the United States comment on the need for processes to address the individual in a more holistic way, and they see in this model the potential for doing so." Some community members currently engaged in multi-party processes believe that a culturally relevant model can more fully engage, include, and empower aboriginal parties at the table. Huber alludes to cautions in the use of the wheel by non-Aboriginal people.

The use of the aboriginal mediation model at the initiative of the non-Aboriginal party in an inter-cultural context could constitute a disrespectful appropriation of cultural heritage. Granted, for centuries, First Nation peoples have borrowed each other's traditions and rituals for the betterment of their community. But this practice is viewed differently from the non-Aboriginal use of the same tradition... Many of aboriginal descent have found that their survival depends on their ability to be bicultural. However, if an Aboriginal mediation process were to be considered for inter-cultural purposes, its use would need to be determined by and acceptable to the aboriginal party. Those involved in the process would be required to have great respect for the spirituality associated with it and be willing and able to use it as a spiritual process (Huber, 1993:364).

Jonasson (1993) also advocates the use of the Medicine wheel structure in the conflict resolution process. She states that "Conflict resolution, from an Aboriginal cultural perspective, is peacemaking or healing" (1993:125). By peacemaking she is referring to the application of human intelligence which reflects kindness, strength, honesty and vision, towards restoring balance and harmony in relationships. Jonasson states that,

The concepts of peace and peace-making are reflected in many ways in Aboriginal cultural teachings. One of the most commonly understood is the Medicine Wheel. The Medicine Wheel can be conceptualized, as are many other Aboriginal teachings, as containing seven degrees of complexity. Each degree is represented by one cardinal point: north, east, south, west, sky, earth and centre (1993:126).

Jonasson advocates the use of the clan system in conjunction with the Medicine wheel teachings. In this system, disputants are organized into clans; each being responsible for a particular task. Once the training of the groups is complete and the clans are organized, the conflict would be brought into the clan for resolution. As Jonasson (1993:126) states:

Resolution by the Clans proceeds in four phases, as outlined in the Medicine Wheel...Each direction, or doorway, of the Medicine Wheel provides guidance to participants for one phase of the conflict resolution process, which is conducted in meetings of the lodge contained in that doorway of the Medicine Wheel. The human aspects, of Mental, Physical, Emotional and Spiritual health and balance, both for individuals and for groups involved in the conflict, are considered in working to achieve the tasks of each phase of the resolution process.

In addition to conflict resolution, Medicine wheels have been used in the school system and other academic pursuits. Robert McFarland (1993) in his article in the *Journal of Psychohistory* makes an interesting connection between Medicine wheels and Placentas. He fails to see why no one ever made the connection between the two before. He explains that the placenta resembles "a thick pancake so that to the fetus it looks like a circle with a thick tree trunk in the centre" (1993:456).

He further goes on and states that:

The Big Horn and Majorville medicine wheels look more like the placenta than any of the other religious symbols derived from intra-uterine life, including the tree of life, the pagan cross, and the sacred pole. These other symbols look more like the umbilical cord extending from the center of the placenta to the navel of the fetus. The blood vessels on the surface of the placenta resemble the roots of a tree or snakes... The fact that the placenta looks more like the medicine wheel than other religious symbols is consistent with the observation that Indian people live closer to Nature or the Great Mystery than more complex or sophisticated groups (1993:456).

McFarland (1993:462) believes that the circle, being of major

importance to Native peoples as reflected in their myths and stories, could be derived from either the placenta or the sun (also commonly worshipped). He favors the placenta as the origin of the sacred circle, because "everyone starts life dependent on their placenta for nourishment and life's blood, long before we see the sun..."(1993:462). McFarland takes this realization one step further and uses his findings to explain and support the work of Lloyd de Mause's essay, *The Fetal Origins of History*. McFarland directly applies the experience of the Medicine wheel as placenta to de Mause's three conclusions.

1. That mental life begins in the womb with a fetal drama which is remembered and elaborated upon by later childhood events.
2. That the fetal drama is the basis for the history and culture of each age, as modified by evolving childrearing styles, and
3. That the fetal drama is traumatic, so that it must endlessly be repeated in cycles of dying and rebirth, as expressed in group-fantasies which even today continue to determine much of our nation political life (deMause, 1981:1-90).

This work supports my premise that the Medicine wheel is a mnemonic device capable of being used on a variety of levels in terms of development, age, gender, and personal or group agendas.

Further support of this hypothesis is found in a paper by Mailick and Vigilante (1987).

In their study of establishing a common knowledge base for students, they have adapted the Medicine wheel and its teachings and incorporated it into the curriculum of the Human Behavior and Social Environment (HBSE) sequence. They have constructed a 'developmental wheel' (FIG. 10) which encourages a broad range of data. It allows for more dynamic integration of social and psychological phenomena and helps to ground discrete methods of intervention in a common theoretical framework.

FIG. 10

Developmental Wheel

The 'Developmental Wheel' illustrates a conceptual approach to teaching the HBSE sequence. Like the Medicine wheel, it endeavors to unify social and psychological concepts. Also, it may be used as an aid for assessment by offering a means for selecting from a wide range of knowledge, those salient factors which integrate and focus our understanding of "person-in-situation". Similar to the Medicine wheel, the Developmental wheel has four major sections. The outer rim of the wheel describes universal basic aspirations for an adequate quality of life that all people strive for, within their own individual and cultural definitions, such as employment and economic security, social justice, and physical and emotional health. The hub of the wheel, equally universal, describes developmental needs.

Two intervening sets of variable occupy the remaining discs within the wheel. These are the social pathologies...reflected in negative societal conditions which affect all people, either directly or indirectly" (Mailick and Vigilante, 1987:42).

Whereas the spokes of the Medicine lodge were of considerable importance, so too are the spokes in the Developmental wheel. The spokes are used to particularize experience by considering the

impact of the variables, such as: genetic, individual developmental, family/environmental, culture and values as well as access to institutional resources. As Mailick and Vigilante, (1987:43) maintain:

The spokes of the wheel allow for differential response to both developmental needs and societal conditions simultaneously... In time, the student will master the process and be able to telescope it, using focused data for the assessment by more quickly recognizing relevant factors.

I have endeavored to demonstrate the effectiveness of the Medicine wheel as a mnemonic device, teaching aid, and cultural model that can be used in a myriad of situations. Its efficacy has been established both in Aboriginal and non-Aboriginal society to varying degrees. Nonetheless, I wish to caution the reader that my intention is not to blatantly promote the Medicine wheel as an all-powerful problem solving device. Just as it has played an important role in the past, it has potential for the future. The Medicine wheel's diversity makes it an adaptable and recognizable instrument with a source of virtually unlimited applicability.

Chapter Seven

CONCLUSION

When looking back on this work, I again asked myself, "Why did I write about Medicine wheels?" In retrospect, I have come up with three primary reasons. Firstly, my work evolved from the simple dissatisfaction with what was written about Medicine wheels. I failed to understand how something that was so vibrant and important to Aboriginal culture could, in the past, be reported on so dryly. There has been so much written about other philosophies, religions, and paths of existence. I wanted to know why this was not true of the Medicine wheel. To an extent I understand why this is so. The sacred teachings of the Medicine wheel are difficult to come by. There are no libraries that carry the teachings, nor can they be found in spiritual "weekend workshops". The Medicine wheel is a *lived experience*. It exists all the time and is constantly being re-created by those who feel its power. Traditional teachings are in the possession of a few elders and are not to be easily given. Indeed it seems, through my understanding, that they must be earned.

The second reason for my writing stems from the notion that I knew that there was more to Medicine wheels than what could be found in

New Age bookstores. By this I am referring to the history, origins and uses (both past and present) of the Medicine wheel. I was determined not to make this thesis into another "how-to" book on the Medicine wheel like so many authors have done in the past (Dolfyn:1985, Eaton:1989, and Sun Bear:1991). I endeavored to illustrate the richness that Medicine wheels have to offer, including how they were perceived in the past and how they are viewed in the present by Aboriginals and non-Aboriginals alike.

The final reason I wrote this thesis is the most important one. I did it to seek a greater understanding of myself and my heritage with the desire to pass on what I have learned. In doing so, I am reminded of the words of Ratu Noa, a Fijian healer who worked closely with anthropologist, Richard Katz. "It's an exchange" Ratu Noa said, "We've taught you, and now you must teach others what you've learned (Katz,1993:3). In applying these words to my own research I am also mindful of the words of a Cree shaman with whom I have spoken to. "Tell only what you know and understand, and it will be enough" (Personal communications, 1993). These words that kept me on a true path towards knowledge, truth, and understanding.

The first chapter was an introduction to the topic and endeavored to

familiarize the reader with the Medicine wheel. I made no assumptions in the readers knowledge with the topic and, as a result, laid out a progressive 'mapping' of what the Medicine wheel was, who used it, when and where it was used, and why the wheel was used. In doing so I stressed the importance of the Medicine wheel in the present, attempting to verify that the wheel still has a place in contemporary society.

The second chapter outlined the methodological approaches I worked from. It re-articulated the necessity of adopting a cultural base from which to launch a study on Medicine wheels. I also took this concept based on Deleary's (1990) work and demonstrated its efficacy outside of Native issues. In doing so, I drew similarities between Deleary's work and the works of Goulet and Young (1994) which discussed anthropology in terms of a *lived experience*. I also expressed my personal views and feelings, and how they affected the presentation of this thesis.

In chapter 3, I focused on some of the theorists I would be referring to in the body of my thesis. Again, the purpose of this chapter was not so much to discuss the different theories but instead, to point out the pitfalls and inadequacies that most texts presented in the

study of Medicine wheels. This chapter was strategically placed, so that the chapter on fieldwork and interviews followed.

The fourth chapter took over where the third one left off. It was necessary to juxtapose these two chapters since it reinforced the idea that the Medicine wheel teachings were largely from an oral tradition, *and* that academic texts were useful insofar as they acted as support material. In the chapter that dealt with fieldwork, I reduced my interview findings into three distinct voices that were representative of the different views in which the Medicine wheel was held. Respectively, they included thoughts stemming from a more "traditional" perspective, followed by a largely 'New Age' approach and finishing with a contemporary viewpoint utilizing both a Native-based outlook and a modern application. To this I added my own experiences with the Medicine wheel. This was a necessary inclusion since it followed with the growing anthropological focus towards a responsible account of reporting on a *lived experience*. Only by being involved in the Medicine wheel and experiencing what it has to offer can one even begin an attempt at understanding it and relaying it to others.

The fifth chapter formed the crux of my thesis. It was here that I

discussed the use of Medicine wheels in two culturally distinct societies. I examined how Aboriginals and non-Aboriginals utilized the wheel in both the past and the present. In doing so, I answered pressing questions that often struck a sensitive note when dealing with the Medicine wheel, indeed, many Native topics that deal with cultural appropriation. Specifically, I strove to find out why non-Aboriginals were turning towards the Medicine wheel as a source of spiritual salvation. Also, in their 'adoption' of a Native cosmology, were there potential problems in their alteration of Medicine wheels to fit their western method of understanding?

In chapter six, I brought the discussion full circle. At the outset of the thesis, I described the past uses of the Medicine wheel. This final chapter outlined the uses of the Medicine wheel in present day society. I illustrated the effectiveness of the wheel's application in both modern Aboriginal society as well as its use outside of Native culture to include psycho-therapy and the education system. My intent here, was not a blatant promotion of the Medicine wheel but rather an effort to show that the Medicine wheel can play a significant role in society, and that perhaps the western world should pay more attention to the Native way of thinking; each

culture could take the positive attributes from their own society and the others to create a new approach to problems akin to both.

As Katz (1993:324) argues,

...simply learning...is not enough...the learning must emerge from a respectful relationship, and must be put into practice in order to serve the people.

Katz (1993:331) advocates "a search for meaning, balance, connectedness, and wholeness; in short, a process of transformation." In Katz, I found a 'kindred spirit' with whom I shared his uncertainties and understood his responsibilities.

Like Katz (1993) I found that my 'search and research' became one. The research that I engaged in was only part of my thesis. The passion lay in the 'search' - my own personal quest for understanding. In this thesis, they ultimately became co-dependent on each other and actually fused with the teachings of the Medicine wheel. My research, in effect, was like my personal work with the Medicine wheel in that it became an activity bound by the rules of "truth and honesty" in its effort to reach an understanding.

In writing this thesis, it was my intention to provide the reader with an account of Medicine wheels from an anthropological

perspective. A perspective that, judging from the available literature, was long overdue. I aspired to examine this topic within an academic framework while still holding true to the beliefs and showing respect to the people from where the Medicine wheel is associated. I believe that this was accomplished due to my adherence to a culturally based methodology and one of a *lived experience*.

I hope this thesis will inspire questions about the Medicine wheel. I believe that the Medicine wheel is a tool that contains within it, the power to be used as a healing device, a model for education or conflict resolution, a driver in psycho-therapeutic practice; the possibilities are quite endless. As long as one approaches such a topic with curiosity, genuine interest and above all, respect for its traditional guardians, the Medicine wheel teachings can assist the individual with an understanding of their own cosmology and provide a path in which one can live their lives in balance and harmony with the universe.

¹There are some variations in the colour wheel spectrum (ie. blue in the west) but this representation is the most commonly used and recognized.

²The Kumik is a place where Elders may gather and speak about Native spirituality and other issues affecting aboriginal life. Re: DIAND Council of Elders Kumik Information sheet.

³The Sweetgrass Trail is the path one takes in a lifetime. It is like a tree with many branches.

If the proper road is adhered to and an individual reaches the age of eighty or more, the trail has been successfully followed and fulfilment has been achieved.

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