

THE DREAM CATCHER MEDITATION: A THERAPEUTIC TECHNIQUE USED WITH AMERICAN INDIAN ADOLESCENTS

Rockey Robbins, Ph.D.

Abstract: The following article describes a short-term treatment insight-oriented model for American Indian adolescents, called Dream Catcher Meditation. It is aimed at helping clients' express unconscious conflicts and to facilitate differentiation and healthy mutuality. Though its duration can vary, twelve sessions are outlined here. Session descriptions include goals and sample questions. Also included are anecdotal material and reflections about cultural relevancy.

The purpose of this article is to describe a culturally relevant and useful technique for therapists who work with American Indian adolescents. There is a dire need for creative therapeutic techniques designed specifically for American Indian adolescents. American Indian adolescents report high levels of truancy, delinquency, drug use, and suicide rates (Bee-Gates, Howard-Pitney, LaFromboise, & Rowe, 1996; Red Horse, 1982; Shore, 1988). BigFoot-Sipes, Dauphinais, LaFromboise, Bennett, and Rowe (1992) argue that the emphasis on "being Indian" is very important in the development of self-identity for American Indian adolescents. P. Katz (1981) reports that adolescents have a hard time expressing their feelings and are highly likely to use alcohol as a "loophole" to express anger.

Thousands of American Indians derive spiritual, social, cultural, and psychologically satisfying experiences from the rituals and symbolism of Native American Church peyote meetings (Calabrese, 1997), stomp dances, sun dances, and many other ceremonies. Hammerschlag (1988) and Heinrich, Corbin, and Thomas (1990) have described American Indian rituals and sacred symbols used in rites of passage and ceremonies for religious renewal to effect balance and a proper frame of mind among American Indian participants.

The circle is a common shape used in many American Indian ceremonies (Storm, 1972). One finds the circle used in peyote meetings, stomp dances, teepees, Navajo sand paintings, and medicine wheels to

name a few instances. American Indian people speak of the circle representing wholeness, enhancing communication, promoting equality, mirroring the roundness and symmetry of our spirits, and reflecting the natural cycle.

Carl Jung (1958) suggested that the personality expresses its deepest contents in symbols. He used the mandala, a circle divided into four quadrants as a pedagogical device. He believed the mandala to be an archetypal symbol and claimed that through its contemplation one could contemplate one's self. Through enactment, the process of having his patients represent emotional struggles in painting, drawing, sculpture, and other tactile means, his patients worked to integrate emotional and intellectual, as well as conscious and unconscious contents.

The dream catcher, which is also circular, is one of the most conspicuous American Indian symbols today. Recently while giving a workshop on how to use them in therapy, I was asked about their origin and traditional use. An American Indian elder asked if she might respond. She stated that the dream catcher is a relatively new phenomenon. They are made by tribal people as well as non-Indians from across the country. "They may have been first made by a White crafts person," she quipped, "but whoever first created them, many American Indians value them just the same." Some say they protect children from bad dreams. She concluded by saying that "stories" associated with dream catchers are still emerging.

Theoretical Foundations of the Dream Catcher Meditation

The following is a multi-session process of making a dream catcher during which the symbolism of each state of creation is systematically linked with key therapeutic issues. A cursory overview of the theoretical foundations of the Dream Catcher Meditation may facilitate a better understanding of the actual therapeutic process.

1. Forming the foundation of this treatment is the psychoanalytic notion that unresolved conflicts can interfere with an adolescent's emotional maturation process, while symptom reduction may be a byproduct (B. Katz, 1981). It is believed that a client's recollection and verbalization of certain traumatic events in an emotionally congruent manner can lead to freedom from patterns of reactive behavior, emotional restriction, negative self-image, and manacled social interaction.
2. Nevertheless, insight is not sufficient for successful treatment. Insights must subsequently be translated into plans and altered behaviors (Greenson, 1967.)
3. The use of symbolism in therapy can facilitate more profound self-exploration and behavioral change (Jung, 1958). Duran and Duran (1995)

advocate for the development of a post-colonial paradigm that legitimizes differing cosmologies and for an American Indian psychology that utilizes archetypal psychology.

4. Honoring our ancestors and the earth may facilitate differentiation, mutuality, and promote positive self-identity (BigFoot-Sipes et al., 1992; Bowen, 1966).

5. It is believed that acknowledging and discussing American Indian ideas about harmony and wholeness (Herring, 1997) with the client may promote meaningfulness and a more culturally satisfying state of mental health.

6. It is believed that short-term insight therapy as utilized in the Dream Catcher Meditation can be beneficial (Sifneos, 1972; Umana, Gross, & McConville, 1980) with American Indian adolescents. Clients with deeply ingrained issues may need extended treatment.

Session One: Introduction and Self-Reflection

The Dream Catcher Meditation begins with an overview about the technique itself. The client often has questions about the dream catcher and its meaning. The client is shown a dream catcher and asked about his/her knowledge and feelings about it. The therapist explains that the dream catcher's enclosing circle can help maintain his/her attention on his/her inner life; its interconnected web serves as a reminder of the unity of life; and the web's pattern, which weaves itself to the center circle, is a mirror of his/her journey of emotional and intellectual development.

A hoop is given to the client accompanied with the remark, "Tell me about who you are on the inside." Connecting this self-reflective question with the act of handing the hoop to the client prompts an identification of the self with the hoop. A concrete focused attention is brought on the inner domain of the personality. The dream catcher comes to represent the individual identity.

The client holds the hoop throughout the session, though does not work on it. The conversation moves back and forth from casual conversation to deeper reflections. The client is asked about his/her strengths and weaknesses, sense of humor, hobbies, dreams, temper, awkwardness's, finesse, feelings about his/her looks and intelligence, likes and dislikes, and many other questions concerning identity. At the end of the session, the client is told that the dream catcher will be wrapped with leather during the next session. The dream catcher is placed in safe keeping.

Session Two: Respect for Ancestors

I once asked a medicine person and a micco, a counselor at a ceremonial grounds, what they considered to be the essence of their tribe's

spirituality. They answered differently. The medicine person said, “It is respect for your ancestors.” The micco said, “It is an appreciation for the land we live on.” In homage to the wisdom of these American Indian elders, I formed some of the questions that I use in the second, third, and fourth sessions. The questions used during this session focus on ancestry.

Some models of therapy, such as behavioral and cognitive-behavioral therapy, see little value in the historical investigation of the individual client, much less their ancestry. Such a perspective would bewilder most traditional American Indians. To ignore the legacy of those who come before you is to be lost without guides. It may be considered forgetting who you are and may be associated with spiritual depravity. Spiritual health involves thankfulness for the gifts bestowed upon us by previous generations. Seattle said, “Our bare feet are conscious of the sympathetic touch of our ancestors as we walk over this earth... to us the ashes of our ancestors are sacred” (Hifler, 1992, p. 299).

Bowen (1966) has argued convincingly for the consideration of multi-generational transmission in therapy. Bowen became convinced through clinical practice that his clients’ problems went beyond them and their nuclear families to several generations. He often considered his clients in a three-generational context. The adolescent’s attachments to his parents might be considered in the context of his parent’s attachments with their parents. Bowen considered how patterns are repeated one generation after the next. With this knowledge, he attempted to help his clients “differentiate” and break out of unhealthy patterns. The Dream Catcher Meditation incorporates this perspective, but also emphasizes the strengths of past interactional patterns.

In this session, the client takes thin strips of leather and wraps them around the perimeter of the hoop so that they overlap and completely cover the hoop. At this time the therapist says: “Describe ancestors’ from your mother’s side of the family” ...and later, “from your father’s side.” The client is asked to identify ancestors’ struggles. He/she is asked, “How are you like these people you described? How are you not like them? How are your struggles similar or different?”

Session Three: Differentiation

While acknowledging our interconnectedness, differentiation is equally important. Some clients are enmeshed with family members and have difficulty emerging as individuals from the undifferentiated family ego mass (Bowen, 1966). Meanwhile, their own issues are ignored. Participation with others should not be at the expense of losing oneself. It is a mistake for therapists to assume American Indian people have historically ignored individual aspirations. Tecumseh said, “My forefathers were warriors. From them I take my existence... I am the maker of my own fortune” (Hifler, 1992, p.

320). Holistic self-affirmation entails participation with one's family but also involves unique individual expression. The client may be caught in the emotional chaos of his/her family and have difficulty thinking reasonably for his/her self because of the pressures of emotionality. The client may blame others for his/her problems, when he/she should objectively consider his/her own participation. Helping the client think through issues facilitates his/her work toward healthy differentiation (Guerin, Fay, Burden, & Kautto, 1996).

During this session, the client does not work on the dream catcher, but he/she does hold it. This pause in the actual physical work serves to emphasize the importance of contemplation. The client is handed the hoop and congratulated for having completed the wrap. The therapist notes that balance in our lives may be engendered by our taking time to reflect after actions and work. The client is asked to name the persons they discussed the previous week, and then asked, "In what ways do continued animosities toward these people affect your life? In what ways does continued adoration of these people affect your life? What do you feel is a healthy relationship with those relatives who preceded you? ...with current family members? How are your views different from other family members? ...the same? How much do you need your family? How well do you function when you are away from them?"

Session Four: Respect for Place

As alluded to above in the conversation with the micco and medicine man, American Indian teachings emphasize our connection to the land. To be cut off from the earth is to be estranged from ourselves. Our land is our spiritual mother. In this session, the client begins to tie sinew to the rim of the hoop in such a way that a web is made. Tying the sinew to the hoop, the client is asked to describe in detail the four most memorable places where he/she has spent considerable time. The client is encouraged to use sense of touch, smell, taste, color, and sound descriptions. These concrete descriptions invariably open a client up to memories, both painful and joyous. The client describes the earth on which he/she lived, the grass on the lawns, the trees that offered shade, the houses and rooms in which he/she lived, the pastures surrounding his/her homes, and the roads or streets he/she walked or rode bicycles on.

Client descriptions of place often evoke strong emotions that can be overwhelming. Because of the limited number of sessions the client will have had at this point of the Dream Catcher Meditation, the therapist should be careful about moving too quickly into the depths of the unconscious. Typically, a client takes several trips into the unconscious before he/she retrieves enough past experience to gain the relief he/she seeks. The therapist should be cautious about probing too deeply for emotional content

at this point. Unconditional acceptance and patience from the therapist is primary during this stage of the meditation. At this point, groundwork for congruent expression of emotions is still being laid.

Session Five: Appreciation of Others

During this session, the client is to consider his/her more extended social relations. The client inevitably wishes to recognize his/her friends or teachers. The therapist facilitates the client to look at his/her self from different perspectives. Often the client becomes emotional when thinking about significant others. The emotions are usually tender and warm. The client expresses feelings of being supported. He/she sometimes comments that he/she is never truly alone in his/her struggles. (Traditionalists have sometimes commented that their medicine people call upon ancestor spirits for support during religious ceremonies.) This session serves to help the client feel supported and safe. It also takes the client out of an egocentric point of view. The client is being prepared for the upcoming sessions when he/she will deal with traumatic events.

The client picks about seven beads to represent significant people in his/her life. This is done in silence. The client may put the beads on the string at any time as he/she weaves his/her way to the center circle. The client considers how these significant persons came to be part of his/her life and how their positive interaction continues to live on in his/her life. "How are the significant others, in a sense, supporting them in the session? If these persons heard what had been talked about, what would they say? What would their hope be for them?"

Session Six, Seven, and Eight: Psychological Traumas

Regarding the treatment of psychical traumas, Freud (1960) wrote, "It was necessary to reproduce the whole chain of pathogenic memories, the latest ones first and the earliest ones last: and it was impossible to jump over the later traumas in order to get back more quickly to the first, which was often the most potent one" (p. 111). I too, drawing from clinical experience, hypothesize that neuroses are often clusters of traumas that may have a core in early childhood. When I began doing the meditation, I tried to deal with the early crises first but found that clients were more likely to fully ventilate traumas when we regressively worked through them. Facing avoided past emotional struggles leads to symptom relief and personal growth.

While completing the first inside round of making the web, the therapist asks the client to describe an incident during the past five years that resulted in psychological suffering. The client is then asked to describe

how the suffering was assuaged. He/she may describe the person(s) who helped him/her through the pain and the form in which help was given. These sessions are usually the first time that in-depth probing is used. With each new spiral toward the center of the dream catcher, the client is asked to describe another crisis or trauma from an earlier period of life. There are typically about six rounds of web leading to the creation of a small center circle, depending on how close the ties are on the hoop and the size of the hoop's circumference. Consequently, the pace of the work on the dream catcher and the therapy is influenced by the physical attributes of the hoop, the client's age, and the client's life experiences. Each client determines how many experiences he/she chooses to talk about from any given period of time. For example, a thirty year old may regressively describe six traumas about every five years back until her birth, while a fourteen year old may describe five traumas separated by only two or three years. Others have described many more experiences in more or less sessions. It is important for the therapist to slow the work on the dream catcher to create a reflective rhythm. Often work on the dream catcher will stop though the client typically continues to hold it in his/her hands.

Many of the most emotionally difficult sessions coincide with the sessions that explore the client's crises or traumas. Questions are utilized to help the client tell his/her stories. The client is asked, "What incidents led up to the crisis? Who had parts in the story you are telling? Who were they and what were they like? Where did it take place? Who was missing at the time? How did you feel at the time?" The therapist attempts to help the client express congruent emotions when describing painful events.

Session Nine: Integration

The dream catcher is an enclosing circle. The client concentrates on a symbol, which has been associated with the self. The web represents a long series of experiences that reach back to early childhood. Jung's (1958) description of his therapy is very similar to the Dream Catcher Meditation. He wrote that analytic therapy is "traversing a succession of spheres towards the center of a system, which is at once her own, and the universal system." ". . . a turning in a circle around oneself" (p.322) and that the process of individuation can never do without a symbol (p. 325). The dream catcher spirals toward the center of the hoop. The client's self-exploration moves progressively to the depths of his/her personality.

During this session, the client completes the web spiral. He/she looks at the overall pattern of his/her life. The client identifies regressive patterns of coping with stress. He/she is asked to objectively consider the continued effects of the past. The client attempts to integrate his/her past into a more mature self. Relived traumas have left their wounds, but the

client has transcended them, and has begun to put them in an acceptable order. It is hoped that a more balanced consciousness will be achieved, where the client can feel and think spontaneously rather than being governed by an accretion of chaotic emotions. Ideally the client has moved closer to the point of resolving underlying conflicts.

Before tying off the center circle, the client is asked, "What is your relation to your past in terms of its negative and positive effects on your life now? For you, what are the dangers of clinging too much to the past? ...of rejecting it? If you could have things the way you would like, what would your relationship to your past be and why? What are some of the recurring ways you have attempted to cope with your traumas? How effective have they been? When have you successfully dealt with crisis and trauma? What alternative methods might you use to cope with traumatic and stressful situations?"

Session Ten: Outside Influences

Having worked through unresolved emotional conflicts and reintegrated fragmented aspects of his/her self, the client now considers him/her self in the context of larger society. To focus only on inner struggles can become morbid and unproductive self-absorption. At this point clients are challenged to examine the effects of external influences on their lives. Many American Indian adolescents have suffered from the toxic effects of broader societal influences such as poverty, racism, materialism, classism, crime, and unemployment.

During this session the therapist tries to help the client consider the validity of the values he/she may have assumed without question and become aware of constraining social forces. Discussing social influences provides a client with an understanding that results in greater choice. The client focuses on both the inner circle of sinew within the larger rim and the network of sinew that connects the two circles. The therapist asks, "How is your inner self related to your outer world's environmental and social networks? How are you treated differently because of your sex? How does racial prejudice effect you? How do the limits placed on you by society regarding your age effect you? What are the messages you hear on television and in music? How do they influence you? What may you offer to your family, friends, tribe, or society that could change things for the better?" The process of termination is also discussed at this time.

Session Eleven: Life Goals

The Dream Catcher Meditation serves the creative purpose of giving expression and form to something that does not yet exist, something

new, unique, and healthy. In the new order, the past is translated and brought to a higher level. Instead of having negative past experiences slyly thwart the client's present life, past experiences, good and bad, are courageously accepted and transcended. The client is liberated to live in the here and now.

During this session the client works with four feathers, attaching them to the dream catcher while discussing four personal goals. The number four corresponds with American Indian medicine traditions that connect wholeness and health with the four directions. For instance, during Cherokee tribe's stomp dances, the sacred fire burns in the center of four logs that point outward to the four directions. Though Plains Indian tribes associate different qualities to their directions, many emphasize the number four in their sacred medicine wheels. Each of the directions is associated with different qualities one should integrate into his/her personality in order to attain a healthy balance.

The client "ties," or wraps the stems of four feathers, and ties them to the hoop. Working with the first feather, the client discusses a spiritual goal; with the second, a mental goal; with the third, an emotional goal; and fourthly, discusses a physical goal. Each goal is discussed thoroughly.

Session Twelve: Evaluation and Termination

Gaining feedback from clients both during and upon termination helps the therapist to improve the Dream Catcher Meditation. The client has input into the therapeutic process. This session is a time for evaluation of the therapy process, a discussion of the client/therapist relationship, and a time to consolidate the positive changes made during therapy. Termination issues should be sensitively approached at this time as well. At the end of therapy, the client takes the dream catcher with him/her.

The client is asked, "How has this counseling experience been helpful or not helpful? How has it been difficult? What insights did you gain about yourself? What changes have you made in your life since beginning therapy? How might this therapeutic approach have been made better? What alternative paths might we have taken during therapy? Do you feel like your therapy should end for the time being? What do you feel about this being our last session together?"

Case Study

The American Indian community where I worked during the last two years was very appreciative of the Dream Catcher Meditation approach. Many parents, adolescents, and elders made affirming remarks about the

use of this American Indian symbol to help clients. Further, the use of American Indian symbols expanded considerably while I worked at the Indian Behavioral Health Clinic. Many American Indian people came in specifically to utilize this approach. A few clients wanted to use medicine wheels and staffs as their symbols of meditation.

One client with whom I used this approach was a seventeen-year-old American Indian male, who was required by the court system to come to therapy due to a long series of charges dating back from when he was twelve. Several therapists who had worked with him previously said that he had “no conscience” and would not talk in therapy. Still, he was required by the court to come to four sessions for a psychological evaluation. After his evaluation sessions, he chose to attend 12 sessions of the Dream Catcher Meditation. Glancing references to his experiences and comments may flesh out the benefits of the Dream Catcher Meditation.

Session 1 - Self Reflection: Making a dream catcher was especially interesting to him because his deceased father had made Indian articles. (I considered how his journey was like at least a dozen American Indian myths that have plots involving a boy who begins a search for his father but ends in the discovery of his own identity.)

Session 2 - Respect for Ancestors: He described a litany of ancestors and relatives addicted to drugs or alcohol who had wonderful senses of humor. His grandmother was the only person he considered as a role model. He described her as “the one truly caring person I know” and as a “survivor.”

Session 3 - Differentiation: He said he was like those relatives who had destroyed themselves on drugs and alcohol but that he wished he was more like his grandmother. I worked with him to differentiate his actions from many of his relatives’ destructive actions as well as to draw on their strengths. He reported that his mother was addicted to crank and had been very neglectful and that he felt he would be “better off not living with her.” He eventually chose to move in with his grandmother.

Session 4 - Respect for Place: He shared with me later that remembering the places where he had lived had been difficult because of painful memories. He recalled playing lots of baseball with his father in his back yard and at the city park.

Session 5 - Appreciation of Others: Sadly, he was able to pick only two beads in appreciation of significant others. He said he appreciated his grandmother for coming to his baseball games and for the good food she cooked for him. He recalled that he quit baseball at age nine after his father died. He commented that his father had taught him to draw and had left him several pictures. During this session, he said it still hurt to talk about his father and deflected questions concerning him.

Sessions 6, 7, and 8 - Psychological Traumas: He was very prepared to ventilate his feelings by the Psychological Trauma sessions. Against my advice, after the sixth session he visited the cemetery where

his father was buried. He viewed the traditional Creek grave-house from a distance. During those three sessions, he grieved and expressed anger. He was only able to remember experiences back to the age of five. Some of the most cathartic moments of therapy occurred when he described early positive experiences with his father and his father's unexpected death. He chose not to explore his relationship with his mother. I suspect he may benefit from such exploration later.

Session 9 - Integration: During the integration session, he discussed his use of drugs to cope with the anger and sadness that he felt over losing his father. He claimed to have never cried about the event and was pleased to have been able to during therapy. He said he was ready to let his father go (in one sense he meant this literally having heard that his deep pain may be hindering his father from making his journey to the spirit world), but was determined to always be appreciative of his love.

Session 10 - Outside Influences: Most of his discussion of outside influences focused on ceasing to "hang out" with former friends who were "into drugs and crime."

Session 11 - Life Goals: His goals included - spiritual, attending stomp dances more regularly; mental, graduating from school; social, finding a nice girlfriend who he could share his feelings with; and physical, staying off drugs.

Session 12 - Evaluation and Termination: He claimed that the sessions helped him to grieve for this father who had been murdered, to feel proud of the wisdom of his cultural heritage, and open up to new relationships.

Over the next six months, he periodically checked in with me. During that time he reported no trouble with the law. He established a romantic relationship with a young woman that lasted six months. He got a part-time job and worked there for several months. His grandmother reported that he was very responsible about helping her with house chores and by being home early each night.

Discussion

Variations/Modifications

The Dream Catcher Meditation has many variations. Looking over my charts, I see that with adolescents, we typically took ten to fourteen sessions to complete the meditation. With adults, the meditation was used less frequently, and the time it took to complete was typically longer. For most adolescents, twelve sessions seems to be an adequate number of sessions to selectively work on developmental issues. If warranted, renegotiation for additional sessions is an option.

Modifications of the Dream Catcher Meditation have been reported as successful. One therapist said that he used the technique with an eleven-year-old boy who felt alienated from his mother. He chose to have the mother and child make one together over the course of three sessions. Each said the process was a bonding experience. The boy commented that the experience helped him to feel proud of his American Indian heritage. The mother said that she never thought her son could concentrate long enough on such a task and felt proud of him for his hard work. The therapist emphasized that the process helped build the boy's self-esteem.

Risks

I have encountered problems of client emotional flooding after the fourth session (Respect for Place). During the fourth session, a young woman recalled Raggedy Ann pictures on the walls of a house where she lived when she was about four or five years old. She said she had not thought of "that room" for years. The next week following that session, she thought she glimpsed her grandfather at a baseball game. But her grandfather died when she was four years old, when she lived in the house she described. She recalled that after he had died, her beloved grandfather had lain in a casket in their living room. She was having recurrent dreams of falling through an abyss and said she had been very depressed. If left to itself, the unconscious, once set in motion, can be overpowering. Jung wrote, "Whenever the narrowly delimited individual consciousness meets the immense expansion of the collective unconscious, there is a danger because the latter has a disintegrating effect on the consciousness" (1958, p. 330). The Dream Catcher Meditations offer an avenue into dark events hidden in the unconscious.

After a few instances of similar flooding, I developed a technique to help prevent flooding outside therapy. After each session, I began to have clients wrap the excess sinew around the rim, symbolically wrapping up the discussion until the next session. We talk about how in the next session we will enter back into a safe realm where we can comfortably discuss painful memories. We also discuss how the rim, like the confidential and secure counseling setting, symbolically protects us from negative outside influences when we reenter its realm. Jung, in describing his use of the mandala, argues that the outside of a circle rim has the function of symbolically marking off a boundary around the center of the client's unconscious. The rim symbolically contains the client's unconscious and acts as a symbolic guard against any flowing out (Jung, 1958). The symbolic "wrapping up" device helps keep clients from flooding after they leave the therapy session. I assure clients that I will keep the dream catcher safe in my drawer session and we can resume our discussions about the memories the next session.

Contradictions

Developing a deliberate-standardized approach to the Dream Catcher Meditation appeared contradictory at first. I was reluctant about such a deliberate approach because I thought it would not be acceptable to the unconscious. Would such a directive circumscribed approach limit the free associations clients might express? However, I learned that I can be flexible with the Dream Catcher Meditation. Though structured, I observe that each session provides clients with universes of possibility to explore. Further, the meditation's structure helps adolescents cope with the ambiguity of the counseling situation and offers concrete, tangible support as they explore their inner selves.

Many may feel that such an insight-approach demands more than twelve sessions. I have been fortunate enough to have worked at an Indian Behavioral Health Clinic where clients have not had to pay money for counseling services and are thus not limited by scarce financial resources. For some clients, the Dream Catcher Meditation has extended to over one hundred sessions. Still, the vast majority of adolescent clients I counsel would not be classified as "long term." Whether in short- or long-term therapy, adolescents have shown appreciation and have grown emotionally having been able to talk about crises in their lives within the structure of this meditation. They are often surprised by their ability to articulate the pains they have suffered, and they eagerly discuss their struggles to cope with the pressures and crises of growing up. Hopefully the above standardization of the Dream Catcher Meditation will serve as a loose guideline for clinicians and may be beneficial for those who wish to research its efficacy.

Benefits

The Dream Catcher Meditation for adolescents appears to contribute to increasing the likelihood of their remaining in therapy long enough to make a difference. Few clients leave therapy before they complete the dream catcher. Clients stay in therapy because: they want their dream catchers; the physical proximity of working on the dream catcher appears to contribute to trust building and client/therapist rapport; their parents and grandparents are very supportive of such an approach; they feel pride in what they consider a cultural experience (several have brought their dream catchers to medicine men who doctored them and added feathers, bones, arrowheads, and rocks); and they gain psychological benefits from the Dream Catcher Meditation.

Rockey Robbins, Ph.D.
 Department of Applied Health & Education Psychology
 Oklahoma State University
 1406 Amherst
 Norman, OK 73071

References

Bee-Gates, D., Howard-Pitney, B., LaFromboise, T., & Rowe, W. (1996). Help-seeking behavior of Native American Indian high school students. *Professional Psychology: Research and Practice, 27*, 495-499.

BigFoot-Sipes, D. S., Dauphinais, P., LaFromboise, T. D., Bennett, S. K., & Rowe, W. (1992). American Indian secondary school students preferences for counselor. *Journal of Multicultural Counseling and Development, 20*, 113-122.

Bowen, M. (1966). The use of family theory in clinical practice. *Comprehensive Psychiatry, 7*, 345-374.

Calabrese, J. D. (1997). Spiritual healing and human development in the Native American church: Toward a cultural psychiatry of peyote. *Psychoanalytic Review, 84*(2), 1987.

Duran, E., & Duran, B. (1995). *Native American post-colonial psychology*. Albany, NY: State University of New York Press.

Freud, S. (1960). *Introductory lectures on psychoanalysis* (J. Starckey, Trans.). New York: W. W. Norton and Company, Inc.

Greenson, R. R. (1967). *The theory and technique of psychoanalysis*. New York: International Universities Press.

Guerin, P. J., Fay, L., Burden, S., & Kautto, J. (1996). Working with relationship triangles: The one-two-three of psychotherapy. New York: Basic Books.

Hammerschlag, C. A. (1988). *The dancing healers*. San Francisco: Harper & Row.

Heinrich, R. K., Corbin, J. L., & Thomas, K. R. (1990). Counseling Native Americans. *Journal of Counseling & Development, 69*, 128-133.

Herring, R. D. (1997). *Counseling diverse ethnic youth*. Fort Worth, TX: Harcourt Brace.

Hifler, J. (1992). *A Cherokee Feast of Days*. Tulsa, OK: Counsel Oaks Books.

Jung, C. G. (1958). *Psyche and Symbol* (V. S. Laszlo Trans.). New York: Anchor Books.

Katz, B. (1981). Separation-individuation and marital therapy. *Psychotherapy: Theory, Research and Practice, 18*, 195-203

Katz, P. (1981). Psychotherapy with Native adolescents. *Canadian Journal of Psychiatry, 26*, 455-459.

Red Horse, Y. (1982). A cultural network model: Perspectives for adolescent services and para-professional training. In S. M. Manson (Ed.), *New directions in prevention among American Indian and Alaska Native communities* (pp. 173-184). Portland, OR: Oregon Health Sciences University.

Sifneos, P. E. (1972). *Short-term psychotherapy and emotional crisis*. Cambridge, MA: Harvard University Press.

Shore, J. H. (1988). Introduction. *American Indian and Alaska Native Mental Health Research: The Journal of the National Center, 1*, 3-4

Storm, H. (1972). *Seven Arrows*. New York: Ballantine Books.

Umana, R. F., Gross, S. J., & McConville, M. T. (1980). *Crisis in the family: Three approaches*. New York: Gardner Press.