Healing at Cultural Crossroads

Comparing and Contrasting Healing in N. Scott Momaday's House Made of Dawn and Rudolfo Anaya's Bless Me Ultima

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1. Introduction

“He whole people can be smashed into pieces and fragments; and this, indeed signifies illness. Healing accordingly, requires gathering and reassembling” (Luckert as quoted by Scarberry-Garcia 92).

As a Registered Nurse and a human being, I have been on both the giving and receiving end of caring, and healing remains one of my special interests. Healing is not just about repairing a broken body or restoring a broken mind, it is a basic human need. According to Maslow, homeostasis, or balance, is one of the basic human needs in the Hierarchy of Needs (372). When the body (or mind) is not in balance, illness ensues. Healing is necessary to restore the body and mind to a state of homeostasis. Addressing the causes of illness, however, is not always straightforward. The causes of illness are sometimes beyond pathogenic, but it is not until the causes of illness are addressed and the basic needs are met, that a person can reach his or her full potential.

In this paper I have chosen to address healing in the context of colonization. Healing affects humans on an individual level as well as on a population level. It has been shown that colonization affected traditional healing practices in the past, but colonization also affects current healing practices, and will continue to affect these practices in the future. Colonialization can be seen as a force that has had the effect of smashing people “into pieces and fragments”, but it has also had the effect of smashing tribes, nations and whole cultures “into pieces and fragments”.

Colonialization was, and to this day is, a very destructive force. In this paper I will explore how traditional healing practices were affected by colonialism, but also how healing practices helped mediate and navigate post-colonial identity. The “gathering and reassembling”
of “broken” people can be done in more ways than one, and the ways we “gather and reassemble” a person are affected by culture. I have chosen to compare and contrast *House Made of Dawn (HMOD)* by Scott Momaday (1969) and *Bless Me Ultima (BMU)* by Rudolfo Anaya (1972) and highlight how these two cultures were affected by colonialization.

*HMOD* tells the story of Abel, a Native American man who grows up with his grandfather on a reservation. Abel goes away to fight in World War II, but returning from the war he feels alienated coming back to the reservation. Abel ends up killing a man and going to prison. He is released after seven years. Because of the Government Relocation Program, Abel is relocated to Los Angeles. Despite his meeting Ben, a fellow Navajo, as well as Native Americans from other tribes, Los Angeles proves very destructive for Abel. It is destructive not only on a physical level, but on an emotional and spiritual level as well. To cope, he ends up being drunk most of the time. The drinking leads Abel to a violent encounter that nearly kills him. Ben emerges as a crucial contact for Abel, and he is instrumental in turning Abel in the direction of healing. In the end Abel returns to the reservation, and that is where his healing can finally take place.

*BMU* is the story of Antonio, a young Chicano boy. Antonio must find his own way while under a multitude of conflicting influences. His parents come from different subcultures within the Chicano culture. Antonio’s mother is from a farming family, while his father is from a family of *vaqueros* (cowboys). Although his parents are traditional and Catholic, his brothers are modern and secular. School provides Antonio with more sources of influences. One of his school friends introduces him to paganism by showing him the secret of the Golden Carp, a pagan god. Antonio’s family also takes in the local *curandera*, and she takes him under her wing. She
teaches him about herbs, spirits and healing. BMU is ultimately a story of Antonio trying to navigate all these different influences and finding his way, while trying to grow up.

I have chosen to compare and contrast these two stories; one Native American and one Chicano, to explain how colonialization has affected, and continues to affect healing in different ways in these two cultures. Abel appears to have to go back to his roots in order to heal, whereas Antonio, although influenced by indigenous healing practices by the curandera, has to create something new in order to heal. In this paper I will look at the issues that affected the coping and healing mechanisms chosen by Abel and Antonio.

_HMOD_ and _BMU_ were published within a few years of each other. They are both set roughly in the same time period and roughly in the same geographic area. But colonialism and its issues with diaspora, conflicted identity and creolization affected healing in the Native American and Chicano communities differently and made, and continues to make, healing more of a personal journey.

2. Literature Review

_House Made Dawn_ won the Pulitzer prize in 1969. The Modern Language Association Database (MLA) yielded 111 academic articles about _HMOD_ written between 1972 and 2013. Most of what has been written about _HMOD_ touches on subjects like symbolism, myths, visions, and importance of landscape. Later articles seem more concerned with the subjects of alcoholism and self-hatred as well as the quest for ethnic identity. The fact that the quest for ethnic identity was not addressed earlier may have had to do with postcolonial criticism not really being recognized as a separate field of study until the early 1990s (Tyson 417).

Since I chose to look at the issue of healing in _HMOD_ from a postcolonial perspective, I found two articles that are particularly pertinent to healing. The first article is “The Artist as
Shaman: Ritual, Healing and Art in N. Scott Momaday’s *House Made of Dawn*” by Bennett.
This article not only describes some of the rituals and traditions that are used in Native American societies to aid in healing people, but it also describes the ritual chant known as the Night Chant. This is a chant that has been passed down by way of oral tradition among Navajos. Momaday not only describes the ritual as it pertains to the main character Abel, but Bennett claims that by making an oral tradition literary, Momaday reaches a broader audience. Momaday includes the healing chant into his book, and by doing so, studying the book becomes more than just reading, it becomes a healing practice. Bennett describes the above as; “…the function of literature as ritual therapy, the role of the reader as co-initiate and the essence of the author as shaman-healer” (159). Bennett’s article is not only relevant to how healing ceremonies have been performed in Native American cultures in the past, but it also shows how healing in the Navajo culture is changing and evolving. The other article of interest and relevant to my paper is “N. Scott Momaday’s *House Made of Dawn* as Socio-Cultural Phenomenon” by J.G. Ravi Kumar. This article is noteworthy for highlighting the importance of landscape for healing. Abel has the ability to return to his roots and become “whole” and centered because “…he has a land vision that preceded the white conquerors” (Kumar 169).

*Bless Me Ultima*, by Rudolfo Anaya, was published in 1972 and MLA shows 74 works about *BMU* written between 1974 and 2015. Earlier analyses were focused on masculinity, femininity, and exploring gender roles in *BMU*. Later works focused more on Christianity, mythmaking, and the appropriation of indigenous cultures as issues of concern. One of the articles I found particularly relevant to my paper was “The Representation of Curanderismo in Selected Mexican American Works”; an article by Melissa Pabón. This article describes the history of *curanderismo*, and how *curanderismo* was influenced by Spanish explorers and mixed
with Native American practices. Pabón’s article also explores how today’s curanderas tap into Eastern healing traditions and New Age spirituality. Her article concludes that despite all the changes within curanderismo, the goal remains the same: “…to make the ailing person the center of attention, and [keep] in mind that in non-western thinking, the body is never separate from the spirit or mind and all curative recommendations always consider the ailing person as a whole” (Castillo as quoted by Pabón 266). The other article that I found relevant to my paper was “The Heritage of Stories: A Tradition of Wisdom” by Ana Celi and Maria Cristina Boiero. This article emphasizes the importance of not letting the oral indigenous traditions get lost, because “…giving and understanding of our heritage can change our values and belief systems; a return to stories is important to understand the new evolving present” (Boiero & Celi 60). In other words, understanding where we come from helps us understand where we are going. Traditional medicine that have worked in the past can point us in the direction of finding future healing practices.

3. Post-Colonial Framework

Looking at HMOD and BMU from a post-colonial perspective seemed to be particularly appropriate since both the Native American and Chicano communities have been subjected to colonization. Colonialization has not only affected these communities on a political, physical, and psychological level, but it has also affected how these cultures present themselves on a literary level. According to Tyson, “...postcolonial criticism defines formerly colonized peoples as any population that has been subjected to the political domination of another population and that is up to the individual member of specific populations to develop their own body of criticism on the history, traditions, and interpretation of their own literature” (417). In the case of HMOD, Momaday followed in the footsteps of Zitkála-Šá, who was one of the first Native
American authors to translate and interpret what had mainly been an oral tradition into written form. She wrote down the traditional Yankton Sioux’s oral tales in the early 1900s, but she did not describe the particulars of the healing ceremonies of Native Americans (Yancey 2, 4). Momaday continues in Zitkála-Šá’s footsteps but goes one step further by describing the actual healing ceremonies.

Both Momaday and Anaya can be described as groundbreakers; giving a literary voice to Native Americans and Chicanos. Both Momaday and Anaya are instrumental in creating something that had not existed before in literature: Momaday, by making an oral healing tradition available to a larger audience and Anaya, by giving the Chicano culture a literary voice.

In the case of BMU Anaya states, “[We] really had to compose a style of our own, a sense of community, our sense of storytelling and the cuentos corridos (story telling ballads), the give and the take of familia. We had to evolve that model that we would eventually present as our literature” (Anaya and Gonzales 154 as quoted by Pabón 262).

As groundbreakers, Momaday and Anaya address a multitude of topics in their books, HMOD and BMU. I choose to concentrate on healing and healing practices because it addresses the fundamental need for survival. According to Maslow’s Hierarchy of Needs, physiological and psychological needs, such as homeostasis, and indirectly, health and healing, are basic needs (372). I chose to look at how these basic needs were affected by colonialism in HMOD and BMU. Both books were written within a few years of each other, they are both set in the same period, and they both take place in the Southwest of the United States where Native and Latin American cultures have been mixing for centuries. Abel, in HMOD, is of Native American descent and Antonio, in BMU, is of Latino descent. Some of their experiences are different,
whereas others echo parallel truths. The time during which both novels take place is after the Second World War. This is important to note, since what happens in Abel’s and Antonio’s lives is not just a product of individual choices, but also a product of U.S. government policy. Both main characters are affected by the U.S. involvement in the Second World War. Antonio is affected because he becomes estranged to his three brothers who went off to war and came back with different values and different ways of thinking. For him, the reality of the war is a decimated family support system. Abel, who goes off to war, also comes back a changed man. He has been exposed to the violence of war, and most likely suffers from some form of post-traumatic stress when he returns. Other government policies that affected Abel’s life were the federal policies of Termination and Relocation. This was a “...series of policies set in motion by the House Concurrent Resolution 108 of August 1, 1953. United States governmental legislation during the 1950s largely focused on assimilating Native Americans into the dominant culture by terminating Native American reservations and relocating their inhabitants in cities” (Bennett 152). This was not the first incident of colonialism for the Southwest; colonialism had been an ongoing historical feature in this area. In fact, “…the pueblo people suffered several phases of imperial rule by Spanish missionaries beginning in 1598 through Mexico’s jurisdiction with its independence in 1821 and then by American sovereignty at the end of the Mexican-American War” (Douglas 7).

Within the post-colonial framework, I have chosen to look at how the concepts of diaspora, conflicted identity, and creolization affect illness and healing as they are described in *HMOD* and *BMU*. Disease can be seen as an individual’s journey through life, but disease can also be seen on a societal scale and “…disease metaphors have also been used to judge society not as out of balance but as repressive” (Sontag 72). A colonial society can be seen as both
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oppressive and repressive, since it targets specific groups of people and it puts down those within the colonized groups who try to stand up for their rights. Abel's alcoholism can be seen as a metaphor in this sense. Alcohol was introduced by the colonizer and continues to repress Native Americans standing up for what is rightfully theirs: their land and their culture.

Within the post-colonial frame, I first choose to focus on the concept of diaspora. Traumatic experiences such as the colonization and subsequent diaspora affects not only individuals, but whole communities. This trauma can lead to both physical and psychological breakdowns and illnesses (Monteiro 238). Diaspora is a concept addressed in both *HMOD* and *BMU*. The history of colonialism and epidemics led to Abel and Antonio finding themselves in their current diasporic location. Abel and Antonio both feel like outcasts. Abel feels displaced in Los Angeles, trying to assimilate to city life and Anglo-American culture. Antonio feels like an outsider attending an English-speaking school as a Spanish-speaking student. He states, “I had tried hard to learn, and they had laughed at me; I had opened my lunch to eat and again they had laughed and pointed at me” (Anaya 59). Both Abel and Antonio can be described as being part of a diaspora not only on a historic level, but very much on a current everyday level. Sideri addresses this changing use of the word diaspora. Historically the word “diaspora” has alluded to “…trauma, exile and nostalgia” (32). Currently the word “diaspora” has come to refer to changes of location that people make due to political and economic conditions (Sideri 32). Nowadays location changes and moves are often a consequence of the globalized society we live in (Sideri 32). The word “diaspora” has thus obtained a wider meaning, which is interesting because

There is an innate opposition embedded in the etymology of the term diaspora, of Greek origin, which reflects how double-edged the concept can be: dia- (a preposition which,
when used in compound words, means division and dispersion) and –spiro (literally, to sow the seeds). This suggests, on the one hand, the idea of dispersion and on the other, that of stasis and stability (sowing seed, suggesting new life and new roots (Sideri 33-34).

This definition alludes to the next concept I choose to look at, which is conflicted identity. This concept is addressed in both *HMOD* and *BMU*. On the topic of conflicted identity, Tyson states that ex-colonials “…were often left with a psychological ‘inheritance’ of a negative self-image and alienation from their own indigenous cultures, which had been forbidden or devalued for so long that much pre-colonial culture had been lost” (419). Both Abel and Antonio seem to be searching for an identity and a place where they fit. In a way their experience can be seen as an example of “double consciousness”: “…a way of perceiving the world that is divided between two antagonistic cultures that of the colonizer and that of the indigenous community” (Tyson 421). It is telling that both Abel and Antonio feel divided and lost. Bhabha refers to this as “unhomeliness”: “It has less to do with forcible eviction and more to do with the uncanny literary and social effects of enforced social accommodation, or historical migration and cultural relocation” (141). On the subject of conflicted identity and “unhomeliness”, Tysan adds: to be “…unhomed is to feel not at home even in your own home because you are not at home in yourself, your cultural identity crisis has made you a psychological refugee” (421). Abel and Anthony both suffer from the feeling of “unhomeliness” and conflicted identity described.

Momaday puts words to this feeling when he describes Abel after returning from the war,

> He had tried in the days that followed to speak to his grandfather, but he could not say the things he wanted; he had tried to pray, to sing, to enter into the old rhythm of the tongue, but he was no longer attuned to it. And yet it was there still, like a
memory, in the reach of his hearing, as if Francisco or his mother or Vidal had spoken out of the past (53).

One of the coping modalities for conflicted identity that both Abel and Antonio consider is creolization, which is the third concept I chose to highlight. The setting and location in both *HMOD* and *BMU* is the Southwest of the United States. This region and its borderland are “...both arbitrary and fluid”, and in some ways the cultures and traditions have become somewhat arbitrary and fluid as well (Douglas 7). For example, the Feast of Santiago described in *HMOD* is a hybridized Christian-Jemez ritual and *curanderismo*, as described in *BMU*, is a hybrid healing practice. *Curanderismo* was originally influenced by “…medical theories and practices introduced by Spanish explorers and then shaped by Native American healers. Modern curanderos and curanderas have incorporated ‘global elements into their practices, along with modern biomedical beliefs, treatments, and practices’ from Anglo-American culture” (Pabón 259). The healing practices differ between Native American shamans and curanderas, but the lines are blurry and healing practices have evolved over time, both alongside and through interaction with each other. In fact, both practices have undergone a certain amount of creolization. What remains fundamental for both cultures is the focus on the individual patient and putting that individual patient in the center of a caring community. They are the center of attention from a physical, emotional and spiritual aspect. These cultures place the patient in the “now”, not the past, not the future, but the “now”.

4. Analysis

4.1. Diaspora
According to *Oxford English Dictionary*, one of the definitions of “diaspora” is “any group of people who have spread or become dispersed beyond their traditional homeland or point of origin” ("Diaspora" 2018). Looking at the history that precedes both *HMOD* and *BMU*, this definition of the word “diaspora” would apply to both books. As a background for *HMOD*, Native Americans were not just displaced into reservations through government regulations, they were later displaced into cities like Los Angeles because of assimilation policies. Abel in *HMOD* is one example of this; he experienced both the diaspora of the reservation as well as the city.

The Chicano community on the other hand, were not subjected to the same government regulations as the Native Americans. In the case of Antonio’s parents in *BMU*, circumstances force them to choose the displacement in the city of Guadalupe. Their choice was motivated by better opportunities for their children rather than force. In this case colonization is shown as resulting in disadvantages, but also opportunities.

Diaspora can be caused by different types of events; one of these events is epidemic illnesses. In *HMOD*, Francisco (the grandfather of Abel) refers back to the immigrants who arrived from an outside town stating, “It was not a human enemy that overcame them at last; it was a plague. They were struck down by so deadly a disease that when the epidemic abated, there were fewer than twenty survivors left” (Momaday 14). Historical documents from the 18th and 19th century show that this was a common occurrence. Not only did the United States’ government physically take away land from the Native Americans, but epidemic diseases such as measles, cholera, and smallpox were introduced; and according to Sundstrom, population losses within the Native American community were as high as 85 to 90 percent (306). Research and literature between 1714 and 1920 describe different attempts by Native Americans to deal with
epidemics. These attempts included, among other things, dispersal of the population in one form or another (Sundstrom 305). Statistics are not the only place to find references to epidemics as a cause for Native American diaspora. Epidemics are alluded to in fiction as well. In The Story Catcher, Mari Sandoz refers to how pervasive the epidemics were and how they contributed to the diaspora, stating that the Native Americans “…fled from the first curious sweetish smell of the sickness, but it traveled with them everywhere, always with them like a second shadow” (134).

In BMU illness is not described as a major contributor to diaspora. Antonio’s parents remove themselves from their “home landscape” to offer their children more opportunities. It is the health care provider, the curandera, who is subjected to a forced diaspora due to peoples’ prejudice. A curandera has knowledge of herbs and ancient remedies, but Antonio in BMU also states, “I had heard that Ultima could lift the curses laid by brujas, that she could exorcise the evil the witches planted in people to make them sick. And because the curandera had this power she was misunderstood and often suspected of practicing witchcraft herself” (Anaya 4).

Epidemics and reservation systems affected Native Americans in an obvious way, but the forced assimilation policy affected Native Americans on a much more insidious and individual level, since it separated them from their tribes and families and forced them to adapt to a totally different culture on their own. The clash of cultures is made clear in HMOD when Ben (Abel’s friend) takes Abel to the hospital after he is beaten up. Ben gives words to the feelings of separation and loss when he states, “After a while it got light outside and one of the nurses came up to me and started asking me a lot of questions. They were silly questions all about his family and his medical record and insurance and everything like that” (Momaday 163). There is a feeling that Abel himself is not noticed. Abel is not being addressed and he is not being put in the
center of what is going on. Abel appears to be in the periphery somewhere, without a voice, lost in a healthcare diaspora. Pabón states that one of the differences between indigenous medicine and modern medicine is that “…the goal of ethnomedicine is to make the ailing person the center of attention whereas biomedical health systems have a tendency to make the doctor the center of attention” (261). The physicians in modern medical systems have also become very specialized; each looking at the symptoms of their smaller specific area of the patient’s body. These physicians can be anything from cardiologists and urologists to pulmonologists and hepatologists, each an expert in their own field. Sometimes this specialization comes at the expense of seeing the patient as a whole, from a holistic view. Being so specialized, modern medicine has also become symptom focused. Navajo healing culture, on the other hand, remains patient focused. Abel experiences this very clearly when he is in the hospital and finds that the doctors and nurses are all aiming at treating his symptoms (Momaday 162). In contrast, Navajo medicine is a healing culture where diagnosis “…is directed toward the causes not the symptoms of illness. Also, in Navajo culture ‘illness is a shared phenomenon.’ Illness is not a strictly personal matter, because it is seen to be part of the larger sociocultural environment” (Scarberry-Garcia 90). Unlike Western medicine where the patient is in the periphery alone in a healthcare diaspora, in Navajo medicine the patient is at the center of a group that performs complex symbolic healing ceremonies. One of the ritual elements performed in Navajo cultures are prayer songs (Scarberry-Garcia 9). One song specifically, “The Night Chant”, puts the ill person back in the center, where life can get back in balance and where the ill person can move from diaspora to home. When Abel, in HMOD, is “lost” in Los Angeles, relying on alcohol to self-medicate, he talks to Ben and together they make plans for Abel to go back to the reservation. Ben finishes the conversation by singing “The Night Chant” to help Abel heal; “…May it be beautiful before me,
May it be beautiful behind me, / May it be beautiful below me, / May it be beautiful above me, / May it be beautiful all around me, / In beauty it is finished” (Momaday 130; Scarberry-Garcia 93). “The Night Chant” is part of a traditional Navajo healing ceremony that aims at putting the patient on the path of healing. The chant helps the patient restore balance and it helps the patient gain control and responsibility. Even though Abel is in a diaspora, the talk-therapy with Ben and this song gave him the language to “create a new reality”, “…confidence and hope in healing”, and helps to “…put him back in balance” (Scarberry-Garcia 105).

To be in diaspora is also to be removed from the landscape that is “home”. In the case of Native Americans, the “…land cannot be separated from the people who inhabit it” (Martin 133). Martin states that according to Allen:

[Native Americans] …are the land…The land is not really the place (separate from [them]selves) where [they] act out the drama of [their] isolate destinies. It is not a means of survival, a setting of affairs, a resource on which we draw in order to keep their own act functioning. It is not an ever-present ‘Other’ which supplies with a sense of ‘I.’ It is rather a part of their being, dynamic, significant, real (Martin 133).

In this sense the diaspora is not just a change of scenery, but a change of who the person removed is. Consequently, Abel is unable to start healing until he returns to his native landscape where “[h]e [can] see the canyon and the mountains and the sky. He [can] see the rain and the river and the fields beyond. He [can] see the dark hills at dawn” (Momaday 185). Notice that this is the second time that Abel returns to the reservation after the war. The first time he returned, he was unable to connect to the landscape, to his ancestors, or even to his language. He needed to start “talk-therapy” with Ben and the traditional healing ceremony of “The Night Chant” in order to begin his healing journey.
Traditional medicine seems to have developed because of several different influences during diaspora. Like the Native Americans, Antonio’s parents have great respect for traditional healing. However, unlike the Native American healing described in *HMOD*, the *curandera* takes the main stage as healer in *BMU*. According to Antonio in *BMU*, a *curandera* is “…a woman who knew the herbs and remedies of the ancients, a miracle-worker who could heal the sick” (Anaya 4). Unlike the Native American healing practices, *curandrismo* is “…a Mexican folk healing tradition with a history that is shared with other Latin American cultures” (Pabón 258). For Antonio’s parents, as different as they are in their diasporas, the respect and love for Ultima (the *curandera*) is one thing they have in common. Their love and respect for the *curandera* is exemplified by Antonio’s mother exclaiming, “Gabriel, we cannot let [Ultima] live her last days in loneliness-” ‘No,’’ [Antonio’s] father agreed, ‘it is not the way of our people” (Anaya 3). It is interesting to note that the mere presence of the healer brings healing into the diasporic family of Antonio.

The diaspora in *HMOD* is described very differently. After the beating in Los Angeles, Abel is taken to the hospital. It is important to notice that he is not going there by his own choice. Although he is being cared for, he does not really start his healing process until he is exposed to “The Night Chant” and after he returns to the reservation. Unlike in Chicano healing culture, the diaspora seems to have influenced Native American healing culture less. The fact that “The Night Chant” helps initiate Abel’s healing and the fact that he goes back to the “old ways” is a testament to this.

4.2. Hybridity and Conflicted Identity

The diaspora caused by colonialism has affected healing practices, but healing practices have also been affected by the conflicted identities caused by hybridity and the need to respond
According to *A Dictionary of Literary Terms and Literary Theory* by John Anthony Cuddon, hybridity “…is produced by the interaction of two (or more) separate ‘parent’ cultures or forms” (2013). One example of hybridity is intermarriage between different cultures. Intermarriage has the potential to be a source of growth, but often hybridity produces conflicted identities. Both Abel and Antonio are products of mixed relationships. Research has shown that “…intercultural relationships can help provide a degree of stability between different groups of people” (Wunder 601). However, what provides stability for a population on a larger scale probably leads to a lot of conflicted identities on a personal scale. Momaday describes this conflicted identity when he states, “They have assumed the names and the gestures of their enemies but have held on to their own secret souls; and in this there is a resistance and an overcoming, a long outwaiting” (52-53). Antonio in *BMU* is also a good example of hybridity because his parents are from different backgrounds; his mother is a Luna and his father is a Marez. The Lunas were known for being earthbound farmers while the Marezes were known for being restless *vaqueros*. Antonio does not understand why two people so opposite would even marry, especially since “[t]heir blood and their ways had kept them at odds.” (Anaya 29). His background makes Antonio feel conflicted and he feels like he needs to choose to become a Luna or a Marez. It is obvious when he confides in Ultima, “Please tell me which is the water that runs through my veins’ he moans, ‘Please tell me.’ The agony of pain was more than he could bear” (Anaya 120). Research has shown that people “…who are not firmly grounded in their identities, cultural standards and values.... people who perceive their bicultural situation as a threatening conundrum may indeed be prone to developing psychological problems. They may feel confused when they internalize the incongruences in worldviews, values and standards” (Dvorakova 9).
This is true of both Abel and Antonio. Antonio relies heavily on Ultima to help him navigate the different cultures in and around him and Ultima, the curandera, is able to assist him by listening and guiding him to find his own strength. Abel also experiences the pain of a conflicted identity. After returning from the war, Abel does not really feel “at home” on the reservation nor does he feel “at home” in Los Angeles. For Abel this conflicted identity leads to a downward spiral. His friend, Ben describes it as everything “…had gone too far with him you know, and he was already sick inside” (Momaday 146). It seems like Abel is trying to self-medicate his conflicted identity and anxiety with alcohol. Abel is far from the only one trying this form of self-medication. Conflicted identity is one of the explanations for the high rate of alcoholism among Native Americans. Duran claims that according to most experts, loss of culture, discrimination, and poverty contribute to alcoholism (100). Duran notes that “…the susceptibility of various Native American groups to alcohol-related problems is correlated with the amount of social disintegration of culture. Tribes with high traditional integration and low acculturation stress experience much lower levels of alcohol and drug-related problems than tribes with high acculturation stress and low traditional integrations” (105). In HMOD, Ben explains the use of alcohol as, “You’ve got to put a lot of things out of your mind or you’re going to get all mixed up. You’ve got to take it easy and get drunk once in a while and just forget about who you are” (Momaday 140). But whereas Ben gets drunk once in a while, Abel cannot stop drinking. As his time in Los Angeles progresses, he is drunk most of the time. For Abel, self-medicating with alcohol does not work and it makes him sicker physically, psychologically and socially. “The liquor didn't seem to make any difference; he was just the same, sitting around and looking down like he hated everything like he hated himself” (Momaday 160). Alcohol provides only a temporary relief and when tolerance builds up, the small amount of alcohol that
helped in the beginning does not seem to help later. It instead “…requires more alcohol to anesthetize the reality of the situation confronted. Thus, the problem becomes a complete cycle in and of itself” (Duran, 143-144).

The conflicted identity is not just internal, it is reinforced from the outside world as well. The fact that America was colonized and “…the experiences with colonization- such as loss of land, language and cultural practices-contribute in important ways to current psychological distress” (Gone and Hartman 275). In his book, The Location of Culture, Bhabha describes this conflicted identity as “…the indeterminacy of diasporic identity” (302). Abel’s encounter with Western medicine reinforces his sense of conflicted identity. After Abel is beaten up in Los Angeles and he is taken to the hospital, Abel’s physical wounds are taken care of, but his wounded psyche is ignored. This again supports the different viewpoints of Western medicine versus traditional Navajo healing practices. One of the main differences between Western medicine and Native American healing is the fact that in “Western experience it is common to separate the mind from the body and spirit and the spirit from the mind and body” (Duran 15). Whereas the “Western approach to the world is one in which everything is categorized and named, the Native American way of being in the world involves a relationship and moving in harmony with the seasons, the mind, and all of the creation” (Duran 16). When a person like Abel tries to assimilate these very different world views, it is sure to cause a conflicted identity to some extent.

Violence can be another trigger for a conflicted identity. Violence occurred both during the colonization and later on throughout history. Looking at HMOD, Abel’s family has experienced the historical aspects of colonization violence and Abel himself has experienced violence on the battlefield at war, on the reservation, and in Los Angeles. The violence of those
places is very different from the violence of the hunt that marked what he experienced when coming of age. Unlike the hunt of his youth, the violence on the battlefield and in Los Angeles is random and without meaning. It is a violence that makes him feel like there is no safe place for him. The later traumas of colonization are also addressed by Duran who claims that “...a deep psychological trauma of identity loss occurs. The roles that were familiar are no longer there, and he becomes alienated within his own internal as well as external worlds. The alienation becomes compounded when the conquering armies become the ongoing colonizers” (36).

Both Momaday and Anaya use landscape as a mirror for conflicted identity. In BMU, Anaya “...uses two variant landscapes (the river valley and the plain) to represent the dual conflicting aspects of Antonio's cultural environment. Each landscape represents one of the two cultures in conflict: the farmers in the river valley versus the vaqueros on the plain” (Martin 132). Abel’s conflicted identity is also mirrored in the environment by juxtaposing “...the white man’s world, represented by a hostile urban environment, and the Indian world of his forefathers, which is closely linked to nature” (Kumar 161). By setting the main characters in these different landscapes, the landscape itself depicts the internal and external alienation. The opposing landscapes also aid the main characters in becoming aware of their own conflicted identities and take steps toward healing. Momaday describes this when Abel first returns to the reservation after the war and he shows signs of conflicted identity: “…he could not say the things he wanted” and “…he could not enter into the old rhythm of the tongue” because “…he was no longer attuned to it” (53). The landscape intensifies this feeling for him, because as he is walking into the land, he “…wants to make a song out of the colored canyon…but he had not got the right words together” (53).

4.3. Creolization
If diaspora and conflicted identities are products of colonial societies, creolization can be seen as a coping mechanism to deal with them. According to Mayhew, one of the definitions of creolization, is “... the hybridization of a culture, as it absorbs and transforms forces from outside; the production of new local forms in response to globalization” (2015). According to Voicu, “[w]hen creolization takes place, the individuals select particular elements from incoming or inherited cultures, investing these with meanings different from those they owned in the original culture and then merge these to create totally new varieties that replace the first forms” (997).

The very fact that HMOD is a book written in English is a product of creolization. Navajo culture is to a large extent built on oral tradition. Momaday uses “…the techniques of parallelism, circularity, and repetition from oral tradition” and “…presents sacred songs and stories as models of the process of composition and reassemblage of inner energies” (Scarberry-Garcia 16). Not only does Momaday move the old oral traditions into a written form, “…he has shaped his narrative as a modern expression of oral tradition by drawing on the conventions and content of old sacred stories” (Scarberry-Garcia 7).

Momaday makes the old stories available to not just the tribe or nation of Navajos, but to people whose realities include other different cultures and heritages. That is not to say that oral stories are not important because they seem to help Abel the most in HMOD. Abel’s friend, Ben states, “I used to tell him about those old ways, the stories and the songs, Beautyway and Night Chant. I sang some of those things and I told him what they meant. What I thought they were about” (Momaday 129). According to Harman and Gone, in the Native American culture, “[w]e have always had what the dominant society coined .... talk therapy...so...if you encountered some type of trauma, you go into the sacred sweat lodge...and you talk about it, and it helps you to heal
in that sense…not only [from] personal trauma, but the historical trauma also” (280). Ben provides Abel with the opportunity for talk-therapy. It is not exactly the traditional Navajo nine-day healing ceremony, but it is what they are able to do in Los Angeles. Another example of creolization in *HMOD* is Ben’s and Abel’s participation in the ceremonies of the Sun Priest and his community in Los Angeles. This community is not only a blend of different Native American tribes, but it also blends wisdom from other cultures, for example Judeo-Christian culture, with Native American wisdom to achieve healing.

Although both Ben and Abel are Navajos, Abel, in *HMOD* is an example of an intercultural relationship as “[h]e did not know who his father was. His father was a Navajo they said, or a Sia, or an Isleta” (Momaday 11). The lines for culture and heritage are not as clear cut as they appear to have been prior to colonialism. In a sense, each person carries their own individual history and heritage. Antonio too, in *BMU*, deals with a mixed heritage and when he turns to the *curandera*, Ultima, she states, “As you grow into manhood you must find your own truths” (Anaya 119). Ultima also knows that nothing stays the same, so she tells Antonio, “[Y]ou are growing, and growth is change. Accept the change, make it part of your strength” (Anaya 245).

Antonio’s father reinforces the importance of Antonio finding his own way and his own identity when he tells him, “Ay, every generation, every man is a part of his past. He cannot escape it, but he may reform the old materials, make something new-” (Anaya 247). Creolization also affects healing practices and, according to Pabón, research has shown that “…although Mexican American participants relied on modern medicine to treat serious injuries and major health problems, they still considered traditional folk healing a viable alternative in situations in which modern healthcare was unsatisfactory or ineffective” (260). Looking at it from a
worldwide perspective, “[w]orldwide, only an estimated ten percent to thirty percent of human healthcare is delivered by conventional, biomedically oriented practitioners. The remaining seventy percent to ninety percent ranges from selfcare according to folk principles, to care given in an organized healthcare system based on an alternative tradition or practice” (Pabón 260 quoting Garon). A worldwide view makes *curanderas, shamans* chanting, herbs, and sweat lodges more mainstream than Western medicine.

Although both Native American and Chicano healing practices have changed and are changing over time, the focus on the patient as a whole person has remained the same in both cultures. According to Pabón, “…*curanderismo* is distinct from modern Western medicine and psychology in its holistic approach to healing the mind and the body, placing it in a category that is closer to contemporary alternative medicine” (258). The history of *curanderismo* itself is a creolization:

The practice of curanderismo was historically influenced by the medical theories and practices introduced to the Americans by Spanish explorers, who based their knowledge on Greek, Roman, and Arabic customs and practices…From these past influences, two basic beliefs surfaced the form the practice of curanderismo. The first belief is that good health is “based on a balanced state of being that was also in balance with the environment in both spiritual and physical terms” (Castro 84).

The second belief is in the power of plants and animals as a direct source for medical remedies (Pabón 259). This seems to be similar to Native American beliefs regarding health and healing, which is not surprising since Central and South America has a long history of indigenous healing practices. However, unlike Native American health beliefs, “[a] curandero or curandera is usually only consulted when after all other remedies, including simple home remedies, fail”
In BMU, Anthony's uncle, Lucas gets sick and his “…other uncles have tried everything to cure their youngest brother. But the doctor in town and even the great doctor in Las Vegas had been powerless to cure him. Even the holy priest at El Puerto had been asked to exorcise el encanto, the curse, and he had failed” (Anaya 83-84). Although it may seem that many problems are new, unique, and beyond a curandera like Ultima, but “[t]he solution of the conflicts generated by human actions and the use of new technology demands the ancient collective knowledge and mythical thought of a shamanic healer like Ultima who involves herself in the healing of men suffering from war-sickness” (Anaya 248). In Anaya’s novel, “Ultima has sympathy for people and it is so complete that with it she can touch their souls and cure them. That is her magic” (248).

Creolization involves much of what is happening psychologically, but the use of landscape gives the reader a visual image of what is happening internally and has an important role to play in healing as well. According to Martin, the landscape in BMU “…extend[s] beyond symbolic purposes” (147). Antonio learns from Ultima that there is “…a beauty in the time of day and in the time of night, and that there was peace in the river and in the hills” (Anaya 15). Antonio learns to reconcile the beauty of the Ilano of his father with the beauty of the farmland of his mother. But he also learns to find “…the peace in the river and the hills” by Guadalupe, where he currently lives (Anaya 47). In a way the land (the Ilano, the farmland of the town of Guadalupe, the river with the Golden Carp and the Catholic Church) helps Antonio reconcile the different parts of his identity. By reconciling these different parts of himself, he becomes a “whole” person, and consequently the place where he currently lives becomes, even if it is in diaspora, home.
It seems that current research on healing is less concerned about a complete mix of culture, but rather supports a complementary approach to healing. Mullen quotes O’Connor stating, “[M]uch of the use of vernacular healing systems accompanies, rather than replaces, the use of conventional Western medicine” (98). Martin echoes the same sentiment when she states, “Although the reconciliation may not be a complete integration of both cultures, the character comes to an understanding and acceptance of both aspects of his heritage” (134). Dvorakova goes as far as to claim that disidentification with a culture is not a solution; instead it has been found that “…navigating two incongruent socio-cultural contexts instead of one could indeed be perplexing”, but “…based on the inclusive outlook”, “…the ability to be part of ‘two worlds’ (instead of only one) was rather seen as an advantage” (8). Dvorakova also notes that “[m]any Native Americans believe that their traditional tribal worldviews facilitate inclusiveness and flexibility, which enables the integration of differences instead of experiencing them as dichotomies and contradictions” (8). This seems to contradict Abel’s experience in HMOD. It is important to note, however, that HMOD takes place after the Second World War, at a time of forced assimilation was heaped on top of post-traumatic stress. Dvorakova’s research was based on forty Native American academics from twenty mainstream universities across the US. Given the ability to choose empowers people, while forced assimilation disempowers them. Dvorakova addresses this when she notes that “…people who perceive their bicultural situation as a threatening conundrum may indeed be prone to developing psychological problems” (9). However, for people that have successfully internalized more than one culture, Dvorakova brings up the concept of “cultural frame switching” where people “…shift between their two cultural interpretive frames in response to cues in the social environment” (as described by Cheng Lee and Benet-Martinez 742). Both Ben and the Priest of the Sun seem to be able to do this. They are
both able to hold on to tradition while also working and getting by in Los Angeles. Cultural frame switching seems to be a more viable idea than the original “melting pot” idea of creolization. It may be that they are both valid ideas that can exist side by side. When it comes to medicine, one idea has been to “…integrate the best of complementary and traditional (indigenous) medicine with conventional Western medicine” (Grand 475). This may sound easy but there are many hurdles to overcome. Grant claims that one of the hurdles of integrating the two is that “…we identify deeply with our culturally derived senses of health and disease” (477).

As mentioned earlier in *HMOD*, it is Ben, not Abel, who is able to somewhat integrate the cultures he is faced with. Ben says Abel “…didn’t want to change, or he didn’t know how” (Momaday 131). Ben can function in Los Angeles without forgetting the old ways. In fact, he is the one who is able to sing “The Night Chant” for Abel. Ultima puts it best when she states, “The waters are one, Antonio…you have been seeing only parts and not looking beyond the great cycle that binds us all” (Anaya 121). Like “The Night Chant” in *HMOD*, Ultima’s words express a vision of interconnectivity. It sounds easy, but we often run into roadblocks because “…when we interact cross-culturally we run into the underlying social principles with which we identify” (Grand 479). We find ourselves with tunnel vision and the question becomes “…what kind of skills do we need as we move into the future to deal with fundamentally different ways of being and different ways of construing self, other, community, and discourse” (Grand 479). Maybe Ultima in *BMU* and Ben in *HMOD* as well as palliative care chaplain Rebekah Schmidt, described by Cooper, are on the right track. What they all have in common is their ability to listen and hear another person’s story. They are all “story catchers” (Cooper 155). According to Cooper, “[t]he emphasis on intentional empathic listening unquestionably aids the chaplain (or
friend, or curandera) ‘to really hear’ and thereby assist the care recipient to access their own wisdom to cope” (156).

Interconnectivity between cultures and people is important when it comes to successful creolization. However, interconnectivity between a person and the landscape is important as well. In both HMOD and BMU, the landscape itself seems to have a healing effect and an ability to provide clarity. When Abel runs in the canyon at the end of HMOD, the scene is described as “…there was no reason to run but the running itself and the land and the dawn appearing. The sun rose up in the saddle and shone in shafts upon the road across the snow-covered valley and the hills, and the chill of the night fell away” (Momaday 185).

5. Conclusion

House Made of Dawn and Bless Me Ultima have many similarities as well as differences. Colonialism affects both the Native American and Chicano culture. In fact, Chicano culture has elements of both colonizer and colonized with aspect of indigenous culture as well as Spanish culture and Anglo-American culture. Both cultures are affected by historical as well as current diaspora. Where HMOD and BMU differ is in the fact that the diaspora in one case is chosen, and in the other case forced. The diaspora that affects Antonio’s family is at least partially a diaspora by choice, since Antonio’s parents choose to move and make a life in Guadalupe. Abel, on the other hand, is a victim of the forced replacement policy of the time. Regardless of how diaspora happened, it affected how the practice of healing developed within the Native American culture as well as the Chicano culture. In HMOD, Abel starts his healing journey by going back to his roots, by first connecting to other Native Americans and later by going back to his physical roots: to his grandfather, ancestors, and the land where he grew up. At first glance it may seem that HMOD is just a story about going back to the old ways, but HMOD shows a new
development for healing within the Native American culture. In the case of Abel, Native Americans from other tribes than his own prove instrumental in his quest for healing. In *HMOD* the banding together among tribes is exemplified by the cooperation known as the “Los Angeles Holiness Pan-Indian Rescue Mission” (Momaday 79).

The view on healing practices is different in *BMU*. *Curanderismo* is a healing practice developed over centuries, due to different colonial influences. Although affected by the diaspora of colonialism, Chicano culture has moved toward creating new forms of healing practices that include old as well as new elements. Modern *curanderismo* includes elements of new biomedical findings, as well as influences from other cultures and elements of new age.

Not only are Abel and Antonio affected by the diaspora caused by colonialism, they are also affected by the pain of conflicted identity that follows colonialism. For Antonio, who is a child, the issue of conflicted identity is anxiety producing. The way he finds relief is through talk-therapy with Ultima. Abel on the other hand is an adult. He may feel the pain and anxiety of conflicted identity, but he chooses to self-medicate with alcohol until he starts his road to healing by talking to Ben and going back to his roots.

Creolization is the third issue regarding colonization that affects and contributes to Native American and Chicano healing culture. *HMOD* may seem to just be about going back to the old roots. However, by Momaday marrying the oral traditions of the different Native American traditions with the written tradition of the European culture, the Native American healing traditions have become available to a much larger audience of both Native American and non-Native American people.
Antonio as well does not just go back to his roots or the culture of his parents. He instead looks to his brothers, the pagan culture of the Golden Carp, and the curandera, and he realizes he needs to create something new, a new culture in a way, that fits who he is.

When I started writing this paper, I wondered if colonialism had had any positive contribution to healing practices. In my analysis I show that colonization has had much negativity attributed to it. Greed, death, destruction, and alcoholism are but a few of the negative issues linked to colonialism. However, colonialism also led to globalization. With a world that is getting “smaller” and “closer” through faster travel and communication, there are very few cultures today that exist independent of other cultures. The different results of colonialism point us toward a future where we realize that, as Grand states, “[T]here are no easy and no universal solutions”, we must simply “…learn to collaborate” and hopefully end up in a place where “…difference is celebrated, and overreaching commonalities participated in” (484). Palliative care is one healing practice that marries different cultural practices. Palliative care does not only use Western medicine practices for the physical needs of pain relief, but “…the hallmark of palliative care has also been the attention to the emotional, spiritual, and social needs of the patient and caregivers” (Cooper 157). Palliative care, holistic health, and individualized care plans are some of the positive outcomes of integrated health care. In the end, colonization and its effects on healing practices affect everybody because “[i]llness is the nightside of life, a more onerous citizenship. Everyone who is born holds dual citizenship, in the kingdom of the well and in the kingdom of the sick. Although we all prefer to use only the good passport, sooner or later each of us is obliged, at least for spell, to identify ourselves as citizens of that other place” (Sontag 3).
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