A survey and interviews examined the beliefs of traditional and contemporary Navajos concerning individuals with disabilities. Participants were 30 staff members from the Kayenta and Pinon Unified School Districts (Arizona), of whom 21 were Navajos, 8 Anglos, and 1 Hispanic; 1 Anglo and 8 Navajo community professionals; and 15 Navajo parents, including 3 medicine persons. Eleven staff members and seven parents were interviewed; the rest completed surveys. Responses indicate that varying beliefs about individuals with disabilities exist. Traditional views about the cause of disabilities often centered around the breaking of taboos or not obeying traditional cultural ways. Other traditional views supported the belief that individuals with disabilities had a special "gift" or were "blessed." Contemporary views of individuals with disabilities highlighted social and environmental influences as primary causes of disabilities. The overwhelming majority of respondents felt that both traditional and contemporary interventions were appropriate for individuals with disabilities. Nearly all respondents felt that as services became more available on the reservation, attitudes toward individuals with disabilities became more positive. (TD)
Traditional Versus Contemporary Navajo Views of Special Education

Introduction

Respect of cultural values plays an intricate role in obtaining services for Navajo children with disabilities. In order to effectively meet the needs of students with disabilities and successfully work with their families it is essential to understand the broad context of Navajo culture as well as individual family beliefs (Cunningham, Cunningham, & O’Connell, 1987). In depth consideration must be given to the intricate clan system, language dominance, and cultural views of the parents of Navajo children who are disabled.

The traditional philosophy of the Dine (Navajo people) evolves around four main areas: thinking, planning, life and strength. When these areas are in harmony and balanced a person is said to have “Hózhó Naasháa” which means, “In Beauty We Walk” (Prater, Jones, Miller, Gilmore, Harwood, Morris, Badonie, Gilmore, Hall, Gilmore, Scott, Joseph, Tallis, & Wooll, 1997). Today among the Navajo people a wide range of beliefs can be encountered. Some Navajos practice orthodox Navajo religion, utilizing many ceremonies and strongly adhering to traditional ways and beliefs. Other Navajos have embraced contemporary medicine, but still honor and respect traditional ceremonies and beliefs. Finally, there are Navajos that utilize contemporary medicine and have no foundation in traditional views or beliefs.

Purpose

The purpose of this paper is to provide an understanding of how traditional Navajos and contemporary Navajos view individuals with disabilities. Examples will be provided of how parents, guardians, educators and community members address the needs of students with disabilities.

Setting

This study was conducted in and around Kayenta and Piñon, Arizona on the Navajo Reservation. The Navajo Reservation covers approximately 24,000 square miles in three states—Arizona, New Mexico and Utah (O'Connell, J.C., Minkleer, S. Dereshiwsky, M., Guy, E., & Roanhorse, T, 1992). Navajo Land is located between the four Navajo sacred mountains: Sisnnajini or Blanca Peak in the East, Dook’ o’sliid or the San Francisco Peaks in the West, Tsoodzi or Mount Taylor in the South and Dibe Ni’tsaa or Mount Hesperus in the North. Approximately 156,000 Navajos reside on the reservation (Tsosie, 1990).
Method

This study was conducted by undergraduate and graduate special education students enrolled in the Rural Special Education Project (RSEP) and the Piñon Partnership Program (PPP). Under the supervision of their instructors, the RSEP and Piñon students designed the survey and interview questions, obtained the data, and assisted in the data analyses of this study.

The participants targeted in this study consisted of 30 staff members from the Kayenta and Piñon Unified School Districts: 21 Navajos, eight Anglos and one Hispanic. The staff members included general educators, special educators, administrators, school psychologists, home liaisons and special education related service staff. Eleven of the Kayenta and Piñon staff members were interviewed and another 19 of the staff members were given surveys that were later collected by the researchers. In addition, a total of nine community professionals were surveyed, eight were Navajo and one was Anglo.

The parental participants consisted of 15 Native Americans, three of whom were medicine persons. A total of seven parents were directly interviewed by the researchers. Of the seven parents interviewed, four needed to have the interview interpreted in Navajo. The eight remaining parents were given surveys which were later collected by the researchers. Finally, of the three medicine persons who were interviewed two were medicine women and one was a medicine man. All three interviews were given in Navajo.

Results
Interview and Survey Questions

Question 1: What is the traditional Navajo view of children/adults with disabilities?

Educators/community service personnel:

The majority of responses from the school personnel implied that traditional Navajos viewed disabilities as a result of “imbalance, disharmony...and/or the breaking of taboos.” Many of these taboos dealt specifically with behaviors that parents shouldn’t do. For example several educators and community personnel stated that, “...looking at dead animals, avoiding certain ceremonies, handling frogs, and fishing...” were taboo. One of the most mentioned taboos among these participants had to do with marriage and the Navajo Clan System. Traditional Navajos prevent members of the same or closely related clan(s) from marrying each other, which in effect prevents intermarriage and the disorders related to intermarriage. Not only were disabilities the result of broken taboos, but individuals with disabilities were in themselves taboo. These individuals were “kept at home” and their families would “hide them.” Rarely were disabled individuals seen in public. These were only a few of the many traditional taboos articulated by educational professionals.

Three of the nine community service personnel interviewed/surveyed stated that disabilities were traditionally caused by the breaking of taboos, such as marrying into one’s own clan. One community personnel stated that disabilities among adults can be caused by witchcraft. The others interviewed did not mention taboos, but did state that traditionally one would feel
sorry for children with disabilities. One person indicated that, “Navajos will go out of their way to help their children.” Another respondent stated:

Sometimes I know the traditional view of [disabled] children and adults is that they are special people. The extra sixth sensory...that they have a special talent to sometimes foretell a fate or fortune of an individual or group. And then I think the traditional has always viewed them as someone not to be made fun of...and they are special people...and they have roles as teachers—role models within the tribal group. They’re the ones that are teachers. And those...men [who] have been...feminine...they have roles as teachers. And then the tribal members go out as leaders and warriors, and I guess nowadays...find employment. The disabled people are usually teachers.

Parents/guardians:

Of the 15 respondents, four parents/guardians viewed disabilities as a gift. Five parents/guardians thought that disabled children were taboo and “had a dark side to them.” Three parents/guardians responded that individuals with a disability were different and were looked down upon.

The three medicine persons, who are part of the parental group, felt it was very difficult to care for a person with a disability. One medicine person stated, “There is an increase of Navajo people who don’t believe or weren’t taught traditional values. Therefore, they are breaking taboos without realizing how it might affect them later in life.”

Question 2: What is the contemporary Navajo view of children/adults with disabilities?

Educators/community service personnel:

A majority of the educator responses viewed disabilities as being acceptable now that more support services for individuals with disabilities have become more available on the reservation. One educator stated that, “People and parents are more educated and aware of the opportunities in schools and other places.” Two of the Navajo respondents thought disabilities were a “blessing” and viewed children with disabilities as a gift. Other Navajos viewed disabilities as being the result of breaking or violating some Navajo traditional culture or taboo.

Navajo professionals in Kayenta and Piñon stated that contemporary Navajos are more accepting of disabilities because they are more educated. The majority of contemporary Navajos indicated that disabilities were due to society or environmental issues, such as lead and uranium poisoning. One professional stated:

The more you know about it [disabilities] the more you are able to deal with these disabilities. If you read about them [disabled persons]...you have more knowledge about how to deal with them...and more respect for them as people.
Parents/guardians:

The majority of the respondents to this question were more accepting of disabilities because of all of the opportunities available in schools, local and statewide services. Some of the respondents stated that disabilities are viewed as “handicapped,” and “some [Navajos] will think of it as a burden.”

All three of the medicine persons agreed that there are contemporary services available which are utilized by individuals each day. Contemporary individuals rely on Western medicine.

Question 3: Do traditional Navajo practices ever put families in conflict over how to best meet the needs of their child with disabilities?

Educators/community service personnel:

Eleven educators responded (seven Navajo, three Anglo and one Hispanic) that they had experienced conflict when obtaining or delivering services. Educators indicated that most of the students they serve with disabilities are living with extended families and are often being raised by their grandparents. Not able to understand or speak English, extended family members are often misdirected and misinformed about the resources for their child. Always keeping the best interest of the child as a priority, many extended family members are content when their child obtains a blue-collar job. This increases his/her independent daily living skills.

Two Navajo professionals in the Kayenta community responded that it’s against Navajo traditional values and religion to utilize Western medicine. The traditional Navajos will pay the medicine man for health care. A Navajo nurse explained that modern technology can help, but traditional Navajos rely on traditional medicine. One Navajo also responded that Western medicine and traditional medicine are in conflict. Another Navajo respondent stated that Navajo medicine deals with the inner part of your soul. The respondent continued, saying:

A lot of the medicine practices, like when you’re not feeling at harmony with yourself, you can go to a Navajo ceremony and people can pray for you there. It’s a whole family, holistic kind of being—being strong—people helping you be strong.

Parents/guardians:

Nine of the parent/guardian respondents said that they’ve utilized both traditional and contemporary medical practices for either themselves or other family members. They initially see medical doctors for a diagnosis and then present this to a medicine man for additional help. There are specific ceremonies for specific problems.

Of the three medicine persons interviewed, one medicine man stated, “I always seek a medicine man first before white medicine...” They all felt strongly about seeking traditional services first and then seeking contemporary services. Traditionally, “....we cure the mind and body, not cut and scar the body... We cure a person...through herbal medicine, ceremonies and blessing and prayers.”
Question 4: If you do feel as though traditional practices put families in conflict over how to meet the needs of their children with disabilities, what has your role been in resolving these traditional/contemporary conflicts?

Educators/community service personnel:

One concerned Anglo educator felt that her role has been to understand the educational options available to the Navajo people and to assist in finding what best suits and meets the needs of the families. Some Navajo educators responded that they seek traditional ceremonies to put balance back into a person’s life. One Anglo and one Hispanic responded that although they are not involved with this decision, they respect the opinion of the Navajo families. Finding beneficial medical services was an answer that was given by an Anglo when asked about resolving traditional/contemporary conflicts. Another Anglo working on the reservation doesn’t see this as part of her job description and doesn’t get involved. All professionals in the community who responded agreed that it was up to the individual to utilize both traditional and contemporary services for the benefit of the student.

Parents/guardians:

A majority of parents/guardians stated that they seek immediate attention through Indian Health Services (IHS), but they also seek the help of traditional ceremonies, because they don’t feel comfortable with the diagnosis of the medical professionals. One parent stated:

I have a child with a disability and I don’t think there are any conflicts in meeting the needs of the child. You have to take both the Navajo practices and the Western practices and put them together with your child.

One medicine man and one medicine women responded that they felt that they heal the mind, and body. One stated, “We don’t do surgeries and make scars on human bodies as do the medical professionals.” Another medicine women stated that contemporary medicines work well physically, but the practices lack cultural values and language.

Question 5: Do you feel traditional Navajo practices and medicine can coexist with contemporary Western medicine?

Educators/community service personnel:

The answer to question five was unanimously “yes” to varied degrees. One school employee said:

Contemporary Western medicine and traditional Navajo practices can coexist. Traditional Navajo practices treat the whole person (physically, emotionally, intellectually and spiritually). Western medicine is beginning to change its focus slowly, but until they begin to incorporate such standards, it will be a long time before they accept the more unorthodox ideas of Native American traditional healing.
All the professional community responses agreed that traditional and contemporary medicine can coexist. Medical professionals can work with traditional Navajo practices. One professional stated that, "They will eventually have both medical services practiced. If one doesn’t meet their needs they will try the other.”

Parents/guardians:

All of the people interviewed and surveyed stated, whether directly or indirectly, that traditional services could coexist with contemporary services.

All three medicine persons responded that traditional and contemporary medicine can coexist, and as long as we work together we can make the person with a disability become better. They also stated that some traditional ceremonies and herbal medicine were allowed in hospitals.

Question 6: If you are Navajo do you consider yourself to be a traditional or a contemporary Navajo?

Educators/community service personnel:

Seven parent/guardians regarded themselves as traditional Navajos. However, the majority of parents/guardians and community members stated that they were either contemporary Navajos or both contemporary and traditional. One respondent stated:

In my mind, I guess I am both. I go in either way and don’t really make a division line saying I’m going to be this one day and that another. I am both of them I guess.

Parents/guardians:

Four people answered that they considered themselves to be traditional Navajos and four considered themselves to be contemporary Navajo’s. Four answered that they consider themselves to be both traditional and contemporary. One person was not sure, “I was brought up with traditional beliefs, but we still attended church every Sunday.”

I consider myself traditional because I can speak the language...and I know a lot of the traditional beliefs that the older Navajo’s practices and some of the newer religion that can be practiced. I consider myself contemporary Navajo in my generation, in my age group, where people are educated, especially as teachers.

All three medicine persons responded that they were very traditional.

Conclusions

It is obvious from the interview responses that varying beliefs about individuals with disabilities exist. Traditional views regarding the cause of disabilities often centered around the breaking of taboos or not obeying traditional cultural ways. Others traditional views supported
the belief that individuals with disabilities had a special “gift” or were “blessed.” Contemporary views of individuals with disabilities highlighted that social and environmental influences were primary causes of disabilities. The overwhelming majority of respondents felt that traditional and contemporary interventions were appropriate for individuals with disabilities. Nearly all the respondents felt that as services became more available on the reservations that attitudes toward individuals with disabilities became more positive.


The Rural Special Education Project was supported by a grant to the Center for Excellence in Education at Northern Arizona University from the U.S. Department of Education, Office of Special Education and Rehabilitation Services, Division of Personnel Preparation (#H029B50069). Additional support was provided by the Kayenta Unified School District. The opinions expressed in this article are those of the authors and do not necessarily reflect positions of the USDOE or KUSD.

References


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</tr>
</thead>
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<tr>
<td>Author(s):</td>
<td>Diane Montgomery, Editor</td>
</tr>
<tr>
<td>Corporate Source:</td>
<td>American Council on Rural Special Education (ACRES)</td>
</tr>
<tr>
<td>Publication Date:</td>
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