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12-18-2014

### Statement by Bo Yerxa collected by Marcie Lister on December 18, 2014

Bo Yerxa

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### General Information

**Private or Public Statement?** - Private

**Statement Provider:** Bo Yerxa

**Date:** December 18, 2014

**Location:** Portland, Maine

**Previous Statement?** N/A

**Statement Gatherer:** Marcie Lister

**Support Person:** N/A

**Additional Individuals Present:** Carol Wishcamper

**Recording Format:** Video

**Length of Recording:** 45:54

### Recording

**ML:** Okay, we are recording now. My name is Marcie Lister, and I am here today gathering the statement of:

**BY:** William E. Yerxa II, best known as Bo Yerxa.

**ML:** And also with us is:

**CW:** Carol Wishcamper, Commissioner of the TRC.

**ML:** The file number is ME-201412-00156. Today is the 18th day of December, 2014, and we are at the Unitarian Universalist Church on Stevens Avenue in Portland, Maine.

**WC:** On Allen Avenue.

**ML:** On Allen Avenue. I'm sorry, Allen Avenue. I kept saying Stevens Avenue, I kept thinking it was Stevens Avenue. We may need to change that, yeah, so —

**CW:** This morning you said Allen. You said this morning Allen.

**ML:** Oh, did I say Allen this morning? Okay, Allen Avenue. Bo, have you been informed, have you heard the consent forms and understand them?

**BY:** Yes.

**ML:** And you've signed the consents?

**BY:** Yep.

**ML:** Okay. And I just need to inform you that if at any point during this recording you indicate that there is a child or elder in need of protection or there is imminent risk of serious bodily harm or death to an identifiable person or group, including yourself, that that information may not be protected as confidential. Do you understand that?

**BY:** Yep.

**ML:** Okay, thank you. Now we will go on with the meat of this. So now, in general, what we're interested in hearing from you is about — We understand that you set up the health clinic program at Indian Township. But I will also, I will be asking you a number of more specific questions as well, but I don't want to limit you to what I ask, either. So what, well, why don't you tell us a bit about that, and then I can ask some —

**BY:** Well, I was living in Washington County. I was actually living in a log cabin originally built by Passamaquoddys that I jacked up and moved. And there was a — I had been working for the Community Action Agency and I had done some grant writing and there was a job posted. And because of some things in my background that may fall outside the purview of this, I was pretty attracted immediately, even though folks, when I said I was going to apply, said, 'Oh, that's the end of your career,' because it was such a racially polarized time with politicians in both parties just red-baiting, if you don't mind me using the term in this context. And I didn't care, because there was work that needed to be done that was good. And I went out and met with Wayne Newell, and, um, Wayne offered me the position and I took it in a second. And that was, I believe, in 1980, and with a year out for a graduate degree in planning, I was there, I think, for six years in total.

It was very interesting. When I arrived, everybody was carrying guns, houses were being burned down. There was a lot of that turmoil that kind of spread over the whole process of the land claims, and good people all around, some of whom said, 'Take the best deal you can,' and others who didn't, and I respect, you know, all of that. But, it was a pretty turbulent time, and at that point, our health center was based in two trailers that were parked beside a, I think it was the forestry building, and we had a few rooms in there. And I think I was maybe the fourth or fifth non-Tribal member. It was very small. And a lot of what we were doing at that point was really just designing plans. Uh, I was involved actually in hiring the individual who took the lead staff role in establishing the child welfare program. He actually came from California two months ago to visit me, and that was Jerry Jacobs who was an ABD in both —



He had his clinical degree, but he was an ABD in mental health planning and administration, and actually Choctaw on his side of the family. And he came up out of curiosity and became really kind of the focus for a lot of good practice with what the community needed at the time.

And everybody weighed in on what we wanted because everybody had the stories about kids being taken because, you know, State social workers didn't understand the culture. And you've probably heard that again and again and again and again. And it was — So, I started in 1980. A lot of the planning went on in the next year and a half, two years, including planning the building for, uh, the health center which was an *exhaustive* process. And, I actually designed the building based on how people saw themselves relating and — cultural areas, areas for traditional healers. Even in those early days, we planned, uh, and actually carried out, sessions with non-Native physicians and other senior providers with traditional healers. And the idea there, was that the physicians and PAs needed to know what was being done and be respectful. But at the same time, we tried to do it in such a way, sharing each perspective, that the traditional healers were also a little more aware of some things which perhaps they ought to be complementary rather than the lead in identifying certain things. And it was — I thought it went really well.

So, I went off and spent a year at UMass and came back and the clinic was built. It looked nothing like my design, because there were people that knew what they were doing that — the interior and the way everybody related was the way people wanted. It was really very satisfying. And so I spent the next couple of years, and finally, I served under three governors. And when I felt I didn't want to serve under somebody who was probably going to get elected, I went, 'Whup, time to leave.' I'm a white mercenary, love this place, love these folks, but if I care about who wins about governor, I got to step out. So I did. And that would have been, I think, around '86, perhaps '85, something like that. So I spent about four years, almost five, I think, in that setting. It was a lot of fun, it was a lot of challenges, it was a lot of work, but I loved it.

**ML:** Well, I think that gives us a nice sort of platform on which to ask a few more specific questions about your work there. What was the initial plan for Tribal Child Welfare?

**BY:** Well, I think the initial plan could best be stated by: 'We're not letting those white people take our kids anymore.' I don't think that there was a strong sense of what that would look like, because recognition had just come. It came in a truncated format that I felt then and feel now was inappropriate, a compromise that, you know, uh, many assert has deleted certain aspects of sovereignty that I think were inappropriate and just politically driven. Again, the people made the decision and there were people within the Tribe and —

**CW:** You're talking about the land claim settlement?

**BY:** Yeah. And so, I think that there had not been a lot of folks looking at models that existed already in Indian territory in other recognized Tribes, when I got there. And, um, we weren't exactly sure we wanted to follow the Federal pattern, anyway. Because, you know, that the Maine Tribes were pioneers in the 638 legislation, Tribal self-determination, and they were committed to doing it their way.

I think that, um, there were a lot of meetings and discussions held that were very — I mean, they were in the community. They were based — People told their stories. Some of them you probably heard here many years later, or very similar stories. And I think that the notion really was, at first, we want to get out from under the jurisdiction of the State, because they don't understand our culture. They take actions that we can't do anything about, and it's tearing families and the Tribe apart.

So, I don't know that it was a very — fixed, but I think that as it evolved, they did draw some from the Federal programs. It was really the basis for establishing it within the State. But I think that there were some things that came through, and I don't remember the details, because this would have been probably 30 years ago. But, I know it was an exhaustive discussion that took place over a year before we even, I think, put out an ad that brought Jerry out.

**CW:** So the exhaustive discussion was within the Tribe —

**BY:** Absolutely, yeah.

**CW:** So this was — 1978 was the passage of ICWA. This was 1980.

**BY:** I started in 1980, and I think that those discussions had been underway, and probably a few months in, we developed the position description and I put it out broadly, both in Indian territory and in New England, and Jerry came up. But it was interesting because —

**CW:** Was he a Tribal person?

**BY:** No. He was not, although his — He actually has aunts and uncles who were Choctaw, Mississippi Choctaw I think, down in that area. But it —

**ML:** What was his title?

**BY:** Golly, I think he would have been, um — I don't know if he was mental health director or coordinator. I have his contact information, and he'd be quite willing to participate at a distance, I'm sure. You could, you know, scope him out. But what — To me, his arrival sparked another mini-round of some of those things, because we were starting to identify language and close in. But, the main thing was just, 'Let's just keep these folks with the State of Maine behind them coming in and taking our kids for no cost because they don't understand the culture.' They don't understand that it's an honor to live with your grandparents or that your mother's sister is pretty much your mother, too. (*laughs*) The basics. And so, I think there was just an awful lot of community discussion around it. The framework, I'd say, was about 80 percent Federal, but there was an awful lot of tinkering, really, with the way we did it locally.

**CW:** Do you know if any of those documents could be found?

**BY:** Oh boy, oh boy. I don't. I don't.

**ML:** Bo, what was the relationship like with the State at that point?

**BY:** Well —

**ML:** And, I guess, how did it evolve?

**BY:** Yeah, at that time there were still white caseworkers coming on the reservation and a lot of grief and aggravation around it. I mean, basically, uh, as I said, the times were racist, and both political parties had a hand in it. And both of them terrified the people of the State of Maine that these Indians were going to come and take their farms. And it was just ridiculous. I can — Maybe this will share a little information. And after I was there about a year, it became pretty apparent to me that the things that we needed to do, were more than was going to be covered by the, uh, Federal budget, our Indian Health Service budget.

And so, I had been interacting with a lot of folks, and the planner at Penobscot and I felt that these Tribal health centers could qualify under the State of Maine as rural health centers, which meant we could do billing and we could then fund things, like our own pharmacist and a sanitarian, and things that, normally, you would not have found. And both Tribal councils were just: 'We're not going to do that! We're not going to sign anything that hooks us into the State.' And it took almost six months of just kind of putting it out there and, I think, you know, people like Wayne Newell, the most skilled inter-cultural communicator I've ever worked with, and a friend, and I think, at a certain point, they realized that they couldn't do the kind of thing they wanted to with just Indian Health Service money.

But they were *not* interested in engaging in signing one more document with the State of Maine at that point in time, and I think they all know that it was a good thing to do. It was not intrusive, and it did allow them to provide an awful lot more services to a community that had been lacking, in any systemic way or in any prevention-oriented way, because we really tried to think of it as like a little HMO that was controlled by the Tribe. You know, we had some Federal regulations, and of course, rural health was minimal, but it was in there. And they didn't want to do it for quite a while. And finally they looked at the need and the budget and said, 'Well, let's give it a try. We can always say (*raises hand*) it didn't work if it didn't work.'

**CW:** So with the passage of ICWA in 1978, did anything fundamentally change in terms of how the DHHS workers came onto the reservation? Were there Tribal child welfare workers at that point in time?

**BY:** No, no. I think that the interaction that there was between Passamaquoddys in a formal way is, I think, Sonya Dana, who was a nurse at the clinic at the time. I think she was an LPN, and I think that was the highest level of health professional of any Tribal member, at that time.

She later on went on got her RN, did a baccalaureate in psychology, I think. But I remember Sonya and Martha Barstis, who was an elder who was also a substance abuse counselor, and I can remember them talking about interacting with Child Welfare people and trying to be a buffer and intercedent. But essentially, they could do what they wanted to do.

**CW:** So, when was the first Tribal Child Welfare workers hired? Was that under you, or was it later?

**BY:** I think it was around — we had community health — CHR, community health representatives, were already working in '79 or '80, but I think no Child Welfare, per se, I'm thinking maybe '82, '81, '82, something like that. And, I don't even know that we had the court set up by then. Can't remember those details. But it was a very high priority. I mean, obviously.

**CW:** And who were some of the key people involved in Child Welfare?

**BY:** Well, I mean, Sonya. Martha had a keen interest. Wayne Newell hired from all the clients. No politics. He hired very inclusively. Sonja, Allen Sockabasin. Allen had a lot of ideas. I think at one point, he may have even worked in that setting, and Allen had an awful lot of ideas. He was quite a character. He's mellowed a lot, and I have a lot of respect for him. *(laughs)*

**CW:** Was he chief during your tenure —

**BY:** No.

**CW:** — or was he chief after you left?

**BY:** I think it was after, because I think he might have been chief twice. I think he was in young and fiery, and then, I think a little bit later he was in as well. A lot of people had a lot of opinions, but I do remember that he and Sonya were kind of key people from the Tribe.

**ML:** What were some of the experiences that you heard about involving Child Welfare?

**BY:** Well, again, it just — the generic: 'They come, they take the kids, they don't understand that she's fine with my parents.' You know, the tradition of carrying firewood for your grandparents, you probably know, is kind of an honorific because you skip a generation in culture. You directly get the language, you directly get the medicine and such, and so those people — And I think Wayne Newell may have been one who lived with their grandparents by and large. The culture's stronger in them. And so, I do remember, you know, just that they did not understand these practices of how families worked within the Tribe. So you know, I don't know all the details, and probably some of what I know, I've forgotten over time

**CW:** So, in terms of when a white worker from DHS would get called in, do you know where the triggers would come? Was it from school? Was it from church? Was it from neighbors? Was it — How did DHS get — ?

**BY:** Every once in a while, probably a nun said something or other, but I think, largely, DHS

was operating on its own network.

**CW:** And what would that network — ?

**BY:** In some manner, way, shape, or form, a kid came to their attention, maybe through the Sheriff's Department or, you know, something, before the Tribal police were established, which I think was right after recognition, within a few months. And, once somebody gets in the system, then there are all these little permutations and off-shoots. And, I think that there was a lot of talk between white Child Welfare workers. Well, you know that — now, it just didn't seem like — I was not in that referral path, but my ex-wife was supervisor of child protective in Washington County a decade after I worked there, and her sense —

**ML:** For DHHS?

**BY:** Yeah. And her sense from talking to some of the older folks was they saw themselves as, as the protectors working in a primitive setting, and it was their responsibility to make sure these poor Native American kids —

**CW:** Got rescued.

**BY:** — got rescued. I mean, they thought they were doing the right thing, but it was a thought born of ignorance and cultural misunderstanding. *(laughs)*

**ML:** Can you describe the training that you helped develop or that was developed during your tenure there for — Now it says for caseworkers, for Tribal welfare, Child Welfare people?

**BY:** That, you would want to talk to Jerry Jacobs because my hands were so full, that I left it to Jerry, Sonya, Allen. They were all involved with that.

**CW:** You were a good administrator. You knew how to delegate.

**BY:** Yeah. Know when my limit is reached. And — Because Wayne Newell was the director of the center. I was the health planner. And, uh, Wayne was just a wonderful person to work with and because he had visual limitations, I got to go everywhere with him. It was just a wonderful experience. And —

**CW:** Was he chief at that time?

**BY:** No. No, Wayne avoided — I'm not sure if Wayne Newell was ever the Tribal governor.

**CW:** I thought he was, or maybe I'm wrong.



**BY:** He's been on the Tribal council, but his whole life has been to try to have all the plans see him outside of his own plan structure. You know, we're all in this and not follow the political schisms. And so, I'm not sure if he ever actually was governor. He was rep to the legislature, but I don't know if he ever actually was governor. He would have been, I think, if he wanted to be, but he kind of held back. Majority rule really did a number on Native culture, as you know. It's one of the least attractive things. You know, I guess it's necessary at this point, but at that time, it was disruptive to the decisioning processes that had been going on for an awful long time, which were —

**CW:** And how did —

**BY:** — consensual.

**CW:** Consensual.

**BY:** I mean, the clans had roles, the genders had roles, but at the end, it was consensual.

**CW:** It would take its own time.

**BY:** Yeah. So Jerry would be able to describe those. I know that we did draw on trainers, a few trainers that were in-State. I think that Indian Health Service provided a couple of training opportunities elsewhere and brought some folks up at a certain point to do some training, as well. Some for staff, some for, I think, the — Somebody that came up from Nashville, I think, actually had a community meeting, too.

So, I don't think it was all that in-depth initially, but obviously, as time went on, and more young people took advantage of tuition waivers and — I mean, when I look at who's running the Tribes now, you know, it's what we hoped for. All these young people have picked up degrees and many of them have chosen to come back, and that's the whole essence of self-determination.

**CW:** Do you spend much time up in that community anymore, or are you — ?

**BY:** Not as much. Wayne Newell and I probably email each other a couple of times a month, talk on the telephone a couple, three times a year. I've, um, had a very consuming job for the last ten years, and I just might get up there once a year. I think I was up there, a year ago last month was the last time I was up for a few days.

**ML:** Can you describe any other work that you did with the Tribes and Child Welfare that might be useful for us to know about, or ... ?

**BY:** Well, I guess there were a lot of things that you might not think of as Child Welfare that I saw. And, when I arrived, basically, I was shown to a closet that was about six feet by eight or ten feet, and it was stacked full of cardboard boxes. And that was my start in epidemiology, before computers, going through, I think, five years of receipts for dentists, ophthalmologists, pharmacy. All of these bills that were approved by the Indian agent who was, for many years, an evil force on the reservation until Ed Hinckley arrived. And Ed was totally enlightening and just wonderful.



But, for example, (*laughs*) I started digging into these things, and I'm going, 'What the heck! Here's somebody that got a new set of dentures every year for five years. What's that all about?' You know, here's somebody, now I'm not a dentist, I took it to my dentist, and I said, 'How many times can you work on the same tooth?' But the one that might best relate to Child Welfare — because it really talks about the fabric of family and the fabric of community — is when I hit the receipt, boxes for receipts for the pharmacies, and what it appeared to me as I tried to chart all of these and relate them to families and which part of the reservation and everything else, it appeared to me we were trying to kill the Passamaquoddy Tribe with narcotics. *Incredible* prescriptions, *multiple* prescriptions from *multiple* providers, *filled*. I mean, *ridiculous* amounts that a substantial part of the Tribe was obtaining. Whether for personal use or economic benefit or what, I don't know. But based on that, we decided that we needed to have a pharmacist, and none of the rural health centers in the State had ever thought of having a pharmacist.

And it was kind of anomaly in that moment, but, um, we worked with Pleasant Point and Indian Health Service in Nashville and managed to get approval. And again, this rural health center money was very helpful, and we split a pharmacist. And we built pharmacies. I thought the State Board of Pharmacy was gonna blow up, they were so agitated because we had to build it steel-reinforced concrete all the way around and everything. And people were afraid, and I understand that. But, we became the only Tribe east of the Mississippi, other than the Cherokees who were all Indian Health Service staff, to have a pharmacy.

And, as this became apparent in the broader community. There were pharmacists immediately adjacent to the reservation, one in Woodland, and one in Eastport, right next to Sipayik, and they complained to their legislators. And I'm trying to remember if that was '82 or '83, but they — I got — I think they wanted to call me on the carpet, and I believe Harry Vose and Tony Tamoreau (*phonetic*) were the senator and representative for the area at that time. Liked them both, but — So, they get these businesspeople, and I'd gotten in trouble in Eastport years earlier, closing down boarding homes for the Bureau of Mental Retardation, and was reported to the legislature. Had a wife chase me down the street with a broom. It was really pretty funny. (*laughs*)

But so, they thought they would — And I come into the meeting with one of these boxes, and I dumped it out on the table. And I said, 'If anybody would like to start going through this with me, let's see what we can do for characterization.' And everybody's looking at me. I said, 'I have more boxes.' I said, 'And when I go through these, and I talk to people who are not from this area who are pharmacists or physicians, they immediately say they have to know what's going on here. And it's really a violation of the pharmacy practice norms.' And so, I just shared that, and I said, you know, 'We can go through these and start charting, because I've got them taped together by individuals and dates.' And the meeting was over in about five minutes.

And what's interesting is, not long after, I was asked to serve on the hospital board of trustees in Calais Hospital, and I think either Tony or Harry had something to do with that. And, at a certain point, one of the committees that I served on was around physician practice and privileges, and I knew things about these providers that a lot of people didn't. And I took privileges away from people that, by and large, I respected, but you just couldn't continue to practice in that way. And, I think it all got ingested out. I think it's all norm now, but at that time, that just said a lot to me because, to me, it was impossible that anybody, such as the Indian agent, would be paying for that time and time and time again. I've never met the gentleman. I hesitate to impugn, but you actually have to wonder if — You know. *(laughs)* But it said a lot to me.

And the other kinds of things that I think really stood out was — Because, when I finished my degree in planning, they asked me to be involved in other aspects of planning. Just sitting in on some meetings and things. And, you know, the abuse at the hands of the white community was such a guiding force. And, when it was time to put sidewalks in along Route 1, in the new growth up on the north end of Route 1, the Tribes insisted on putting sidewalks 15 feet in or so, 12 or 15 feet. And the State was fighting them. In 40 years, there had been six or seven Indians killed on that stretch of road, and nobody accountable. I don't believe anybody was held accountable for deaths by whites in that community. I don't know if they ever have. I mean, this is 30 years ago, but there were a lot of deaths. There were killings, there were accidents, and nobody held accountable. So I think it's, uh — They were very, very cautious of the environmental issues and things that affected the kids and all of that.

But it was an exciting time. I think we did a lot. I have been told that the Center got a little politicized at times and there were —

**CW:** Who succeeded Wayne and you? Who was the next — ?

**BY:** Oh, my word. I'm embarrassed, but I can't really remember. But, I know that at one point, it was political favoritism by the governor, because people felt they should go to the white man's hospital. And they would go to the ER and see a physician's assistant, driving right by the physician on the reservation, some people, because it can't be good if Indians are running it. That was the internalization of oppression.

**CW:** Even the Native people felt that themselves.

**BY:** And we had great practitioners. We also had a little fight with the Maine PA Association, because the first physician I hired happened to be a DO, and at that time, the common understanding was that DOs could not be physicians in rural health centers. And we broke that. *(laughs)*

**CW:** What was it like when you were serving on the hospital board? Did you encounter prejudice yourself?

**BY:** Oh — mmm — I've always straddled different groups, and I think I did a good job. I was saying earlier, I volunteered in the presidential campaign to three candidates named Barry, the first being Barry Goldwater. So I have an ability to, I think, communicate pretty well across

the spectrum. And I value that, because don't think I'm always right, you know. But it was, uh — there — My next job actually was not with a local entity. So — I mean a social service entity. Actually, the University of New England hired me for a year. I was offered an office at the community college, and the president at the end of the year said, 'I think I need a dean of continuing education. Do you want to do it?' And I had never even thought of higher ed.

So — But it was a lot of racism, a lot of prejudice, and it's still there. I think a lot less, way less, um, but it's still there. I also have been the only non-Hispanic/Caucasian male in the National Rural Fellowship and have spent a lot of time in the South through that, which is primarily Hispanic and Latin America. And a year-and-a-half as an interim vice president for planning for the Urban League of Rochester, New York which is an inner-city community action. So all in all, I have spent probably eight years working, uh, as a minority white male for totally minority-controlled organizations and learned so much and enjoyed it so much that I just consider I'm a lucky guy.

**ML:** Yeah, well, it's fascinating listening to your experiences.

**BY:** Are there more focused questions — ?

**ML:** There are. You were about to ask —

**CW:** You finish the focused ones.

**ML:** There are three final questions. The first of the final questions is, do you believe that ICWA — Has ICWA done enough to protect the rights of Native children and families?

**BY:** I think I'm too far distant from that to have an opinion that would be credible. I know there's an awful lot of smart people that are involved. I know that, uh, the community fully grasped the criticality of this for the survival of the Tribe and the Tribal culture. And as these young folks have gotten education and moved in there, I'm sure they're doing a great job. But, I don't know that from personal observation. I'm an optimist. *(laughs)*

**ML:** Clearly, you are. And that's awesome. And this is sort of related but maybe you could add something to it. In your perspective, has the relationship changed over time and, if so, how so? And I'm not exactly —

**BY:** The relationship —

**ML:** Well, I'm not exactly sure what Rachel meant by the relationship, but I would — You know, one possibility is the relationship between the Tribe —

**CW:** — and State.

**ML:** — and the State.

**BY:** Well, let me put it this way. Let me start small to say that, I know through my ex and my daughter, both Child Welfare — My wife, my ex-wife retired, I think, four years ago and my daughter just took another job a year ago. But I know there are protocols now. People know what the rules are, you know, and that is a lot. And the Tribes have standing and they can trump and, you know, that's all got to be good at the functional level —

**CW:** Your daughter is with DHHS?

**BY:** She was —

**ML:** Was.

**BY:** She was, until about eight weeks ago. She was a Child Protective worker for six years, and her mother, I think, for 22.

**CW:** In what region?

**BY:** Hancock and Washington County. Okay? And her daughter, my granddaughter, Chloe Berry, is a member of an Alaskan Band of Natives. So I mean, it's like that. She actually inquired after the job that was posted to see if it was something that she might contribute to.

But, let me just share something. I went to John Baldacci's gubernatorial inauguration. I try to go to them all. I don't care what party they are. You know, let's go and do the ritual. And I was sitting there with the governors, Tribal governors, and Penobscot's Butch —

**CW:** Butch Phillips?

**BY:** Yes, Butch Phillips and another elder were doing a smudging ceremony in the Augusta Civic Center. And they — I mean, I've seen them. They really — they were — oh. And John Baldacci gets up there and he says, 'Well, that was really special, boys, but I'm still not supporting a casino.' Were you there? *(to CW)*

**CW:** I remember hearing about it.

**BY:** And I just wanted to slide under the seats. And, I don't think in terms of the government, that it has changed an awful lot. There's not the strong antipathy and urgency and craziness of: 'We're going to get thrown out of our homes!' But it's still there. And the fact that the dominant culture cannot understand that every single thing we have as white folks in America comes from land we stole from people we killed. You know, expropriation of Indian land and genocide and slavery are the twin barriers we, as a culture, philosophically and morally, still have to come to terms with. And, things are much better. We can't hide from our past. It's still — It's here, you know. So I think things are better, but they're really not where they should be.

**CW:** Yeah, and sometimes it depends better for whom and does everybody benefit.

**BY:** Sure. And didn't the House of Representatives just try to sell two million acres of Navajo land to some European mining company? It goes on.

**CW:** It's not done.

**BY:** Awful.

**ML:** One final question, and that is, is there anything else that you would like the Truth & Reconciliation Commission to know?

**BY:** Well, I guess, you know, not specifically. I will say that I grew up on a potato farm in Aroostook County, and, um, I was pretty aware of the civil rights movement at a pretty young age. My grandfather, who was an illiterate potato farmer, I can remember he got a black and white TV and we were sitting there watching the news and he said — It was Little Rock, and President Eisenhower sent in the troops. And my grandfather said, 'The president was right to do that. Those little nigger kids deserve the same opportunity as you do,' which revealed the profound state of ignorance, on the one hand. But he didn't know any different.

And, I think that was pretty much the case in rural Maine where, if you think back in the '20s, nine out of every ten non-Catholic men were Ku Klux Klan elected governor of this State. You know, so it's there. It's simmering. I think it's not as — the issue with the last couple of generations, but I think it's still there. And I grew up where we had our Indians. I had mentioned my grandfather started farming in 1923. The [41:08] Giu (*phonetic*) family came down from Big Cove; they were looking for work. My grandfather said, you know, 'You can work here.' And that family came every year, until my grandfather stopped farming. And came down to have Sunday dinner with him after my grandfather stopped farming.

And so you had these relationships and, yet, underneath was a real non-understanding and, you know, the white dominance kind of thing. And I was a senior in high school, and you know, back then you might get the car to go to Houlton or Presque Isle on a Friday or Saturday night, but not most. So, a lot of Friday nights we'd go to people's houses and spin 45s and ate pizzas. And I showed up with my date who was my girlfriend my senior year and my freshman year in college, who happened to be half Native American and was told by our next door neighbors, 'Bill, you can't bring that squaw in here.'

And I think that, to me, was a transformative moment, because I suddenly realized the water that I was swimming in. And in college, I was one of the four or five people that organized the first anti-Apartheid demonstration north of Portland, and really kind of committed a lot of my work around social justice, that involves socio-economic justice, no matter what your pigmentation or ethnicity is. (*laughs*) So all in all, I think, you know, I learned a lot from working with the Tribe, and I'm a much better person for it. And I was right to leave when I

left, because my fears were borne out.

**CW:** In terms of the way the election went?

**BY:** Yeah. Okay, anything else?

**ML:** I don't have anything.

**CW:** You were very helpful. Appreciate your candor and—

**ML:** Yes, thank you so much.

**BY:** Okay.

**CW:** It's all part of the record. You know, in order to be able to go forward, we need to look backwards sometimes and say some truths which aren't particularly pleasant, but they're the truth.

**BY:** Yeah, well, it's worth it. You know, every time somebody says, 'Oh, you know, these acts of individual conscience like Rosa Parks just refusing to give up her seat,' — Well, of course, you know, she'd been to Highlander. She'd been trained by the same people that were training coal miners to form unions, and she was selected out of a group of people. And it's organizing. And we keep trying to make people exceptional, but it really is people organizing. And the Tribe, in many ways, was fractured by the acceptance of the settlement, as well as some other kinds of things that were pretty traumatic. But I think they really came together around the Child Welfare process, and it was something that everybody valued and everybody — You know, it was the future of the Tribe and they got serious about it.

**CW:** When you say the Tribe, you're talking about the community in Township because there's also the community in Sipayik—

**BY:** Yeah, exactly. Well, yeah, and they're all inter-related and it was — and I suspect, although I was not as present at Penobscot and in the Maliseets, that they must have been going through the very same thing. I saw much of it in Sipayik because it's a joint Tribe.

**CW:** And did you maintain connections with Micmac?

**BY:** Well, through my role, because they were up from where I grew up, Houlton/Ridgewater area. But the health planners did meet regularly, and we tried to work together and we tried to share what knowledge we had and —

**CW:** Which is what happens now with the Child Welfare workers —

**BY:** Yeah, and that's the way it ought to be.

**CW:** — the health directors was, you know —

**BY:** And many years later, I was the State coordinator for the Maine AIDS Education &





Training Centers. So when I wanted to outreach Native Americans, I knew exactly the structure to work through. All I had to do was say, 'I'm available. This is what I have. Are you aware of resources? I have Native-specific, mostly oriented to western Tribes, but other things that you want to, you know, kind of bring into this. And — but I didn't go to each reservation because I wanted to use the system, and when you do that, they have norms, and that helps you move everything forward. That was it.

**ML:** Well, again, thank you so much.

**CW:** Very helpful.

**BY:** All right.

**END OF RECORDING**