
Cultural Safety

Exploring the Applicability of the Concept of Cultural Safety to Aboriginal Health and Community Wellness

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ABSTRACT

The goal of the research paper is to explore both the concept of cultural safety and its practical implications for policies and programs designed to improve the health of Aboriginal people and the wellness of Aboriginal communities. The paper demonstrates the concept of cultural safety can shift from a being a tool to deliver health care services to individuals to a new and wider role. The concept of cultural safety can have a significant impact the way policy and services are developed at an institutional level in fields such as health, education, the courts, universities, and governance (both First Nations and other types of government). Four case studies at the end of the research paper show how cultural safety has helped communities at risk and in crisis engage in healing that led to lasting change. The research paper, defines cultural safety and how it differs from cultural competence or trans-cultural training and practices; shows why it's important to move from the concept of cultural safety to the outcome of cultural safety, namely the success of an interaction; explores the idea of a shift from cultural safety for individuals to cultural safety at institutional and policy levels; and provides recommendations in five areas.

KEYWORDS

Colonization, cultural safety, healing and wellness, historical trauma, social determinants of health

INTRODUCTION

1. Introduction and definition

This paper describes and analyzes the concept of cultural safety as it pertains to Aboriginal policy and assesses its usefulness as a means of designing and developing government policy and service delivery. It seeks to draw together a range of literature sources to assess the applicability of cultural safety in a Canadian context.

The aim is to understand First Nations communities at risk and in crisis and the effectiveness of programs designed to address their issues. While focused on cultural safety, the paper broadens to consider other connected issues, as well as the wider determinants of health within

a holistic and community-based context. The focus will be on conclusions in the form of lessons learned, best practices and recommendations for government departments, policy-makers, researchers, scholars, and community members.

The concept of cultural safety evolved as Aboriginal people and organizations adopted the term to define new approaches to healthcare and community healing. Much of the literature confirms that a definition of cultural safety should include a strategic and intensely practical plan to change the way healthcare is delivered to Aboriginal people. In particular, the concept is used to express an approach to healthcare that recognizes the contemporary conditions of Aboriginal people which result from their post-contact



safety is a journey of self-awareness on this continuum. According to Irihapeti Ramsden, the Maori nurse and educator who developed the concept in her doctoral thesis in 2002, cultural safety is the ultimate goal in a learning process, starting with cultural awareness of a patient's ethnicity and, in culturally safe practice, growing concerns with "social justice ... and nurses' power, prejudice and attitude" (Ramsden, 2002, p. 5). In other words, Ramsden turns the focus of cultural safety away from the cultural understanding and knowledge of the health care worker and onto the power inherent in their professional position. She seeks to redefine cultural safety from a transformative point of view of the Aboriginal person receiving care; the determination of success is by the recipient, who defines the care received as culturally safe, or not.

Ramsden effectively combines the practical and the theoretical conceptions of cultural safety by depicting it both as an extension of cultural competence – where the knowledge and learning of the non-Aboriginal practitioner continues to play a crucial part in the relationship with the Aboriginal patient – and as a radical and explicit departure from it. This dual approach, stressing both knowledge (through cultural competence) and power (through cultural safety), is very attractive, as it depicts the transformation of the relationship through a combination of both conceptual and a practical change.

In the University of Victoria course on cultural safety, the issue of power as central to the concept of cultural safety is reinforced:

... the recognition that we are all bearers of culture and we need to be aware of and challenge unequal power relations at the individual, family, community, and societal level. There are important differences between cultural safety and the following concepts which are closely aligned with cross-cultural models (University of Victoria, retrieved Nov. 2008, p. 1).

Cultural safety as depicted on the culture continuum is evidently the most advanced concept in terms of practical relevance to the design and delivery of government and institutional policy. The term implies the reversal of cultural danger or peril, where individuals and communities may be at risk or in crisis. The concept entails not just the agreement and understanding that cultural differences matter in social and health policy delivery, but also the need to make a real difference in methods of delivery and the ultimate effectiveness of the policies. In other words, through cultural safety, the power of cultural symbols, practices and beliefs extends political power to the Aboriginal people. Cultural safety is not just a process of improving program delivery; it

is also part of the outcome.

Scholar Jessica Ball (2007a) supports this view of cultural safety as an outcome, but views cultural safety as a departure from cultural competence, rather than an extension of it. In essence, she sees a link between cultural sensitivity and cultural competence, but not between these concepts and cultural safety. She stresses that, while the responsibility for cultural competence lies with the service provider, cultural safety turns this on its head, transferring the responsibility (and the power) of determining how successful the experience was to the service recipient. Thus, Ball effectively appears to reject the view of cultural safety on a continuum, regarding it more as a paradigm shift in the relationship.

Unlike the linked concepts of *cultural sensitivity* or *cultural competence*, which may contribute to a service recipient's experiences, *cultural safety is an outcome*. [Emphasis the author's] Regardless of how culturally sensitive, attuned or informed we think we have been as a service provider, the concept of cultural safety asks: How safe did the service recipient experience a service encounter in terms of being respected and assisted in having their cultural location, values, and preferences taken into account in the service encounter? (Ball, 2007a, p. 1).

Ball goes on to describe five principles necessary for cultural safety:

- **Protocols** – respect for cultural forms of engagement.
- **Personal knowledge** – understanding one's own cultural identity and sharing information about oneself to create a sense of equity and trust.
- **Process** – engaging in mutual learning, checking on cultural safety of the service recipient.
- **Positive purpose** – ensuring the process yields the right outcome for the service recipient according to that recipient's values, preferences and lifestyle.
- **Partnerships** – promoting collaborative practice. (Adapted from Ball, 2007b, p. 1)

Fundamentally, the conceptualization of cultural safety as a step on a continuum or as a paradigm shift rests on the role of power in the relationship. The steps on the linear continuum or the concentric circles effectively depict the responsibilities of the service provider in the relationship. The conceptualization of cultural safety as a paradigm shift



not just as a measure of the effectiveness of policy and delivery, but as a very real part of a political power struggle for control over one's own life. Cultural safety becomes a means of changing broad attitudes and deep-seated conceptions, on an individual and community-wide basis.

However, the danger of broadening the definition of cultural safety too widely is that it loses its significance and practical relevance in specific policy areas. Politicizing the relationship between service providers and service recipients is of considerable theoretical interest, particularly in the 'big picture', but may be of limited practical value to either. The problem is two-fold: first, the power relationship is inherently unbalanced, where the qualified healthcare professional retains the power of their professional knowledge and practical capabilities of their position in relation to the relatively less powerful position of the patient; and second, a paradigm shift with a transfer of power may be of less practical value to a patient than a culturally knowledgeable, respectful and sensitive service provider. Literature sources based on practice (including handbooks, field experiments in healthcare delivery and first-hand reports on service delivery) return to the view of cultural safety as a further step on a continuum of cultural understanding, not because of any perception of the political threat of a paradigm shift, but because of tangible practical outcomes. Locating cultural safety on the cultural continuum makes it more achievable, effectively defining it as a better form of cultural competence, building a stronger and more trusting mutual relationship between receiver and provider.

To understand this, we will examine some key policy areas, namely, health, education, and self-determination. First, however, we will briefly touch on the issue of the pre-eminent *visibility* of Aboriginal cultural in any consideration of cultural safety.

2. Multiculturalism and cultural blindness

This section of the paper briefly examines the issue of the *visibility* of Aboriginal cultures. The Assembly of First Nations argues that, to preserve a culture (and in particular a language), it is necessary to make the culture highly visible to Aboriginal and non-Aboriginal people alike (AFN, 2007, p. 10; AFN, 2008, p. 2).

Canada's "diversity model" (Smith, 2003, p. 109) is built on a historical legacy of immigration, largely one based on European cultures, which we recognize today as a defining characteristic of Canadians' self-image and political culture. One of the enduring nation-building myths of Canada's inception as a nation is its founding

value of tolerance and accommodation of different cultures, religions and languages. However, the experience of many immigrants to Canada belied this myth of Canadian nationhood and exposed the highly British-oriented bias of government policy and attitudes of the times. In addition, the paternalistic legislative and policy stance of government towards Aboriginal people deprived them of basic human rights as well as what later became known as inherent rights of the First peoples in the land. The assimilationist policies, notably the residential schools policy, not only irreparably damaged the cultural identity of First Nations children in the schools, but also left a legacy of individuals, families and communities in crisis.

In the 1960s, Canada redefined itself explicitly as a multicultural nation, reflecting the civil rights movements in the USA and the image of Canada promoted by the leadership of then Prime Minister Pierre Trudeau. This diversity model, which continues to this day, hinges on two seemingly contradictory principles that form the foundations of public policy regarding ethnicity:

- **Universalism** – implying a blindness to difference, this focuses on individual rights and freedoms.
- **Multiculturalism** – implying a positive recognition of difference, this focuses on a celebration of the many cultures and ethnic origins of many Canadians. (Stasiulis & Abu-Laban, 2004, p. 371)

Canada's relationship with the Aboriginal population demonstrated some of this ambivalence with separate cultural and ethnic identities. In 1969, following consultation between the government of Canada and Aboriginal leaders in which issues of Aboriginals and treaty rights and the right to self-government were prominently discussed, the Trudeau government introduced a 'white paper' which advocated the elimination of separate legal status for First Nations in Canada. The white paper amounted to an all-inclusive assimilation program which, if implemented, would have repealed the Indian Act, transferred responsibility for Indian Affairs to the provinces, and terminated the rights of First Nations people under the treaties made with the Crown.

For Prime Minister Trudeau, the white paper promoted the view of First Nations as Canadians like all others, served by the same departments, programs and services available to other Canadians. In other words, government would be *blind* to cultural differences and Aboriginal traditions, knowledge and languages. In this context, cultural blindness was seen as a virtue, eliminating racism and discriminatory



treatment and attitudes, and effectively treating First Nations as if they were just another ethnic group that made up the multicultural profile of the Canadian population.

This view of Aboriginal society within Canada was vehemently rejected by Aboriginal people. Led by, amongst others, Harold Cardinal (1969), a leading First Nations activist in his powerful book *The Unjust Society*, the response to the White Paper acted as a call-to-arms for First Nations people in Canada. The result was a complete policy reversal by the federal government and the establishment of joint meetings between Aboriginal people and the government to determine policies based on explicit recognition of the distinctive interests of Canada's Aboriginal peoples.

Ultimately, both the concepts of multiculturalism and cultural blindness were entirely inadequate in responding to the demands for recognition by Aboriginal people in Canada. In her book on cultural safety in New Zealand, Wepa draws attention to the distinctions between biculturalism and multiculturalism. Equating indigenous colonized histories with those of other immigrant groups is dangerous and invalid, she states, and risks further marginalizing Indigenous people (Kirkham, 2006, p. 334). Ramsden expresses the same argument that Indigenous people must be seen not as one cultural or ethnic group amongst many, but an equal founding nation and therefore with a rightful claim to a pre-eminent status (Ramsden, 2004, p. 175).

Furthermore, multiculturalism pays scant attention to the historical path that has led to communities facing social, psychological and economic crisis as a result of colonization and discrimination, and to the government's own responsibility. By generalizing Aboriginal culture into the wider cultural mix of the modern Canadian state, it diminishes it and marginalizes the specific self-deterministic claims of Aboriginal people.

The concept of cultural safety can be seen as the direct antithesis of the concepts of both multiculturalism and universalism. Multiculturalism considers all cultures in Canada as having an equal claim on government and societal attention, and universalism downplays differences between individuals and communities into a single citizenry and seeks common interests based on general human rights. In contrast, cultural safety requires the explicit and detailed recognition of the cultural identity of the Indigenous people and the historical legacy of power relations and repression.

The issues of race relations and racism in Canada challenge the dominant myths of national identity of a tolerant, welcoming place where everyone enjoys the same opportunities and treatment at the hands of the state. Scholars in both Canada and the United States have

explored such national myths and how they create deeply held assumptions in both White and non-White people which perpetuate patterns of advantage and disadvantage. American scholar Peggy McIntosh turns the race debate on its head by exploring what she calls 'privilege systems,' the "unearned overadvantage [of White people] as a function of unearned disadvantage [of non-White people]" (McIntosh, 1988, p.1). Instead of focusing on non-White people in a White-dominated society, McIntosh focuses on the privileges enjoyed, even unconsciously, by White people, describing White privilege as "an invisible weightless backpack of unearned assets" (ibid, p.1).

Interestingly, this approach turns the notion of racial visibility and invisibility on its head. McIntosh explains that she was "taught to see racism only as individual acts of meanness, not in invisible systems conferring dominance on my group" (ibid, p. 1). Multiculturalism can be seen, not as a 'celebration of diversity', but a means of making culture and race invisible, by blurring and ultimately ignoring important differences between people into a meaningless notion of diversity. Verma St. Denis, a Canadian scholar examining race and education, particularly as it pertains to Aboriginal students, argues that the danger of the 'multi-culturalism myth' is that it creates an ideology of 'racelessness', making race invisible when it should be acknowledged and understood, and reinforcing Whiteness as the standard of what is normal. With colleague, Carol Schick, St. Denis examines racial attitudes in education in the Canadian prairie provinces, observing that the invisibility of White privilege which is accepted sub-consciously as the norm has the effect of marginalizing Aboriginal people and other racial minorities, and causing the 'inferiorization' of Aboriginal people for their apparent failure to meet White measures of success and achievement (Schick & St. Denis, 2005; St. Denis, 2007).

York University scholar Susan Dion takes the same view of race relations in education as St. Denis, underlining the need for carefully designed curricula to trace the history of the 'colonial encounter' between Aboriginal and non-Aboriginal people and understand 20th century issues in the light of this history. Dion, like both St. Denis and McIntosh, stresses that the 'transformation' of inter-racial relationships places an obligation on White people to confront and understand their own racial identity and the way their dominant White culture shapes all of society and the norms by which people live (Dion, 2007).

Dion, St. Denis and McIntosh all relate their studies of interracial relations primarily to the field of education and curriculum-design. The relationship between teacher and student carries similar professional power imbalance



and Aboriginal people, but very little that explicitly links it with the concept of cultural safety.

Issues surrounding the residential schools program put primary and secondary education squarely in the discussion on cultural safety, as the source of cultural destructiveness and anomie. Like other Aboriginal policies, education has been governed by federal and provincial government policies that were paternalistic, imposed and assimilationist. Within the context of education policy, the term 'anomie' has particular resonance, particularly in light of the history of residential schools. The term, developed by French sociologist, Emile Durkheim in 1893, describes a state in which there is a breakdown of the norms that guide individual and group social behaviour. A norm is a socially enforced rule or custom of behaviour which shapes individuals' expectations of how they should behave and how others will behave towards them. Norms are created and passed on through family and community life, cultural ceremony, rituals, stories, and religions.

Furthermore, Durkheim extended the use of the term anomie as part of functionalist theory. Functionalism focuses on the structure and workings of society, and views society as a series of interdependent parts – family, education, religion, law and order, media – which act as an organic whole. Later he expanded the concept to include psychological anomie, where individuals lose their personal moral regulation, leading potentially to depression and suicide. There is both personal anxiety and a disruption in the rhythm of social life, as economic status and family anomie increase in the face of normlessness and powerlessness (Greene, 2003, p. A-22).

Educational institutions, curricula and styles of learning are part of the structural functionalist model that produces economic prosperity, social stability and individual and community well-being. If individuals are removed from their family and cultural home, the cultural anomie they experience cuts them off from the norms of their society, leaving a legacy of personal and community damage.

As part of the healing process, education at secondary and post-secondary levels in particular plays a crucial part of building strong Aboriginal communities. Stable, resilient communities need capable, confident human resources to become community leaders, skilled workers and good parents. However, despite the great emphasis in Canadian culture on the value of education, modern western education fails many Aboriginal youth. Under the Indian Act, the federal government provides educational services to First Nations students from ages 6 to 18 that are living on reserve. In fact, while most on-reserve elementary schools are federally funded, provincial governments maintain jurisdiction over secondary education.

Despite progress reported in education achievement of Aboriginal students over the past forty years, disparities in educational achievement between Aboriginal and non-Aboriginal youth persist. Scholars Paul Maxim and Jerry White studied students across Canada and found that, compared with non-Aboriginal youths, young Aboriginal people aged 18-20 are much more likely to be without a high school diploma (42.5 per cent versus 23.5 per cent) and much less likely to be in post-secondary education (35.5 per cent versus 53.9 per cent). The lower rate of high school completion also widens the gap between Aboriginal and non-Aboriginal economic and social prospects (Maxim & White, 2006, p. 34) International comparisons show these disparities even more starkly: Canada currently ranks among the top five on the United Nations' Human Development Index, which measures economic growth with the capabilities of the country's population. Canada's Aboriginal population ranks 78th (Kloster, 2008).

Cultural safety addresses these issues of cultural anomie and powerlessness. The central tenets of cultural safety as applied to education would require: (1) Aboriginal people exercising control over the education of their children and youth, possibly through partnerships with educationalists and institutions; and (2) recognition of and respect for traditional education and indigenous knowledge.

Aboriginal people have asserted their own aspirations for community-based education. In the report of the Royal Commission on Aboriginal peoples (RCAP) (1996), the Commission recommended that Aboriginal people should have a greater voice in determining the shape and content of the education of Aboriginal children and youth. The report based its recommendations on a vision of the relationship between non-Aboriginal Canadians and Aboriginal peoples, founded on the recognition of Aboriginal peoples as self-governing nations (Government of Canada, 1996). However, in reality, partnerships or shared power arrangements over education are, like the issue of health care, complicated by federal and provincial jurisdiction over the education of Aboriginal children and youth, and by the role of the institutions themselves. Cooperative ventures, such as Aboriginal-specific programs and services, special funding and Aboriginal involvement in curriculum design, have been successful at the post-secondary level in colleges and universities. These bicultural efforts at cultural safety in education have succeeded in helping Aboriginal students gain entry to and stay in mainstream post-secondary institutions. Examples include: the First Nations University, started in 1976 in partnership with the University of Regina is overseen by the Federation of Saskatchewan Indian Nations; the Gabriel Dumont Institute of Native



Safe Trusting Relations

When working with First Nations communities building trust can be critical to program or project success, particularly with communities at risk and communities in crisis. These communities' dysfunctions stem from colonization caused by historical trauma and residential school. The first step in the healing process is to establish safety and trust. Safety can restore power and control to survivors and foster responsibility for self and a feeling of belonging. So it is critical that the government team and individuals working with communities at risk and in crisis develop safe and trusting relations with First Nations communities. Developing safe and trusting relationships can be accomplished through cultural competency training and an institutional cultural competency policy. (AHF, 2008)

APPENDIX B - Hollow Water First Nation Case Study

Community Holistic Circle Healing (CHCH), Manitoba

Hollow Water First Nation is one hundred fifty miles northeast of Winnipeg. In 1984 a healing and development team was formed to work in Hollow Water and the Métis settlements of Manigotogan, Aghaming and Seymourville. The team was comprised of political leaders, service providers from all health and service agencies. The team's objective was to create a safe and healthy community for their children and grandchildren by achieving two objectives: 1. to facilitate individual and community healing journeys; and 2. to coordinate integrated program services, such as education, politics, health, religion, and economy.

Safe and Healthy Community

Hollow Water was a community in crisis; it had a history of violence, suicide, addiction problems and sexual abuse. Community Holistic Circle Healing made a remarkable transformation through community healing and restorative justice. Hollow Water clearly demonstrates that a community-based approach founded on traditional knowledge can successfully deal with historical trauma and residential schools painful past. In 1988 they established a program called S.A.F.E.:

What followed was a very active period of learning and healing. The Resource Group consulted with many groups across North America who was dealing with similar issues and by 1988 had set up their own training program called S.A.F.E. (Self-Awareness For Everyone), modeled after the New Directions Training

being offered at that time by the community of Alkali Lake. This step allowed them to bring this type of training to as many of their community members who were willing to begin a journey of personal healing and development (Bushie, n.d.).

The team found that building of trust and communication contributed to a dramatic increase in disclosures. The team would gently record the victim's story; they ensured the victim's safety; and with the presence of trusted people offered support to the victim through the crisis. Healing at Hollow Water occurred at the community, family and individual level.

The Healing Journey is shown in the medicine wheel, as a four step process that in the experience of Hollow Water took three to five years. In the end, it resulted in restitution and reconciliation between the abuser and the victim, the victim's family and the whole community. Every journey begins with the talking circle where all sides are heard – individuals speak from the heart. It is here at the talking stage that personal and cultural safety is critical to getting the process started. Many believe that colonization has resulted in mistrust of authority by First Nations communities which is a barrier to be overcome in every process and relationship. Whether it's hearing their anger, stories and pain or silence – building trust through safe practice is a huge challenge. The second step is learning, the circle shares what it has learned from each other in the talking circle. The third step is the healing journey where there is consensus on the path to follow. Finally, the results are transformation, restoration and reconciliation.

Medicine Wheel: The Healing Journey (Brascoupé, 2008)

Hollow Water has achieved remarkable results through its CHCH approach. The team identified further work needed to link their work to other issues and priorities.

1. Healing Lodge: build a healing lodge that can serve as a centre for both residential and outreach programs with the capacity to take in whole families.
2. Cultural Foundations of Treatment: to blend it with Hollow Waters traditional healing approach the healing practiced by dominant culture professional psychologists.
3. Linking Treatment to Training: link treatment to training, which transforms healing to social and economic well-being of the community.



Policy Implications

Programs and strategies that support community healing and wellness based on concrete steps and plans laid out in *Mapping the Healing Journey* can be beneficial to communities at risk and in crisis and is an important starting point when there is no apparent way forward.

Rationale

Mapping the Healing Journey offers some evidence that this approach is effective in reducing rates of offenders reoffending and significant cost savings of restorative justice over incarceration of offenders. It also provides a clear step-by-step process enabling communities at risk and communities in crisis to start the healing journey at the micro-level; how community members begin the process that works for First Nations communities.

Project implementation

The process of the healing journey focuses on individual and community healing combined with program coordination to achieve collaborative interventions and initiatives. The case studies make it clear that community members and program managers can be trained to design, plan and implement community healing. (Lane et al., 2002)

APPENDIX D - From Truth to Reconciliation Case Study

Aboriginal Healing Foundation

A recent article by Marlene Brant Castellano confirms and further elucidates the importance of safety to the individual and community healing. She further explains the process of reconciliation between Aboriginal and non-Aboriginal People.

Individuals who have suffered trauma in childhood vary in their ability to integrate their experiences into the narrative of their lives. Reports from project participants confirmed that healing from painful or suppressed memories begins with awareness of barriers to a satisfying life and beginning recognition of the sources. Awareness can develop gradually or be precipitated by a crisis such as a health problem, breakdown of a marriage, or being charged with an offence. Projects typically found that Legacy education about the history and impacts of residential schools and group events that centred on cultural activities supported readiness to

engage in therapeutic activities and relationships. In the beginning stage of healing, survivors need to feel safe. Establishing cultural safety, affirming identities that had been forcibly suppressed, was an important feature of most projects. (Marlene Castellano Brant, 2008)

Castellano like others looks for a common thread, and she points to developing cultural safety in healing, that people often referred to as “spiritual.” She believes that individuals talk about “different ways of making a connection to something greater than themselves and their individual griefs” (Brant Castellano, 2008, p. 398). They desire to connect with the “natural world, the stream of history, family and community, or in some cases, with a spiritual being who is friendly” (ibid). Trust lost by colonization and residential schools is regained through a long process that begins with personal and cultural safety.

The model for Stages of Community Healing is similar to the model in *Mapping the Healing Journey*, it includes the following steps:

1. Core group forms.
2. Gathering momentum.
3. “Hitting the wall.”
4. Healthy individuals / vibrant community.

Healing begins in an environment of safety and trust. The transformation to a healthy state is made possible by a climate of safety and an attitude of mutual trust.

Lesson learned

The healing process while understood and mapped-out is found to be a long-term process: “Healing the legacy of residential schooling, whether at the individual or community level, is not a linear process” (Brant Castellano, 2008, p.394). The stages are approximate models of complex real-life events and survivor’s progress and then circle back on earlier stages when confronted with recurrent challenges. For communities, change was described as “like ripples unfolding in a pool, where each new circle contains the previous ones” (ibid). The healing process begins with individuals, often instigated by youth, then rallies at the family level and finally finds a home at the community level.



- Browne, A.J., Fiske, J. & Thomas, G. (2001). First Nations Women's Encounters with Mainstream Health Care Services & Systems, British Columbia Centre of Excellence for Women's Health. Available On-line: <http://www.bccewh.bc.ca/publications-resources/documents/firstnationsreport.pdf>
- Buckley, H. (1992). From Wooden Ploughs to Welfare: Why Indian Policy Failed in the Prairie Provinces. Montreal and Kingston: McGill-Queen's University Press.
- Bushie, B. (n.d). *Community Holistic Circle Healing: A Community Approach, Community Holistic Circle Healing*. Hollow Water, Manitoba, International Institute for Restorative Practice. Retrieved November 2009. http://www.iirp.org/library/vt/vt_bushie.html.
- Cardinal, H. (1969). *The Unjust Society*. Douglas and McIntyre, Vancouver.
- Congress of Aboriginal and Torres Strait Islander Nurses (CATSIN) (2001). Strategic Framework for the Inclusion of Indigenous Health in Nursing Curricula and the Development of Recruitment and Retention Strategies for Indigenous Australians in Nursing Education.
- Cooney, C. (1994). A Comparative Analysis of Transcultural Nursing and Cultural Safety. *Nursing Praxis in New Zealand*. 9(1), 6-11.
- Cornell, S., Curtis, C. & Jorgensten, M. (2003). *The Concept of Governance and Its Implications for First Nations*. Native Nations Institute for Leadership, Management, and Policy, Udall Center for Studies in Public Policy, The University of Arizona.
- Coup, A. (1996). Cultural Safety and Culturally Congruent Care. *Nursing Praxis in New Zealand*. 11(1), 4-11.
- Couzos, S. & Murray, R. (1973). *Aboriginal Primary Health Care: An Evidenced-based Approach*. South Melbourne: Oxford University Press.
- Crisp, J., Potter, P.A., Griffin Perry, A., & Taylor, C. (2009). *Potter and Perry's Fundamentals of Nursing*, (3rd [Australian] ed.), Chatswood, N.S.W.: Mosby Elsevier Australia.
- Crowe, K.J. (1991), *A History of the Original Peoples of Northern Canada* (Revised edition), Montreal and Kingston: McGill-Queen's University Press.
- Davidhizar, R. (2001). Teaching Culture within the Nursing Curriculum Using the Giger-Davidhizar Model of Transcultural Nursing Assessment. *Journal of Nursing Education*, 40(6), 282-284.
- Dickason, O.P. (1997). *Canada's First Nations* (2nd ed.), Toronto: Oxford University Press.
- Dickie, B. (2000). *Hollow Water*, National Film Board of Canada, 48 minutes. <http://www3.nfb.ca/collection/films/fiche/?id=50027>.
- Dion, S. (2007). Disrupting Molded Images: Identities, Responsibilities and Relationships – Teachers and Indigenous Subject Material, *Teaching Education*, 18(4), 329-342.
- Dowd, T. & Eckermann, A. (1992). Cultural Danger or Cultural Safety: Remote Area Health Services. *The Australian Nurses Journal*, 21(6), 11-12.
- Dowling, J. *Transversing the Cultural Gap- Cultural Awareness on Deployments*. Retrieved Nov. 2008, <http://www.defence.gov.au/dpe/dhs/infocentre/adfnursingofficers/forum/2002/Cultural%20Diversity%20in%20the%20ADF.doc>.
- Durie, M. (2001). *Cultural Competence and Medical Practice in New Zealand*. Australian and New Zealand Boards and Council Conference. <http://aictp.com/Resources/Cultural%20CCompetence.html>.
- Ellison-Lochsmann, L. (2003). Cultural Safety Kawa Mhakaruruha, Auckland, NZ: Massey University, Retrieved December 2008 <http://culturalsafety.massey.ac.nz>
- Flores, G., Gee, D. & Kastner, B. (2000). The Teaching of Cultural Issues in U.S. and Canadian Medical Schools. *Academic Medicine*, 75, 451-455.
- Frideres, J. S. (1983). *Native Peoples of Canada: Contemporary Conflicts* (4th ed.), Scarborough: Prentice Hall Canada.
- Goodman, A (2006). The Story of David Olds and the Nurse Home Visiting Program. *Grants Results Special Report*, Robert Wood Johnson Foundation. <http://www.rwjf.org/files/publications/other/DavidOldsSpecialReport0606.pdf>
- Goode, T.D., Dunne, M.C. & Bronheim S. M. (2006). The Evidence Base for Cultural and Linguistic Competency in Health Care. *The Commonwealth Fund*, 37. http://www.commonwealthfund.org/publications/publications_show.htm?doc_id=413821
- Government of Canada Correctional Service Canada (2008). retrieved January 2009 <http://www.csc-scc.gc.ca/text/pblct/so/aboriginal>.



- Government of Canada Health Canada (2000). *A Statistical Profile on the Health of First Nations in Canada for the Year 2000* report. www.hc-sc.gc.ca/
- Government of Canada Health Canada (2004). *Building on Values: The Future of Health Care in Canada (The Romanow Commission)*. www.hc-sc.gc.ca/hcs-sss/hhr-rhs/strateg/romanow-eng.php.
- Government of Canada Health Canada (2008). Health of Aboriginal People, retrieved Nov. 2008, <http://www.hc-sc.gc.ca/fniah-spnia/index-eng.php>.
- Government of Canada Indian and Northern Affairs Canada (1996). *Royal Commission on Aboriginal Peoples*, www.ainc-inac.gc.ca/ap/pubs/sg/sg-eng.asp.
- Government of Ontario Ministry of Community and Social Services (1994). Aboriginal Healing and Wellness Strategy. http://www.mcscs.gov.on.ca/mcss/english/pillars/community/programs/aboriginal_healing.htm.
- Greene, R. W. (2003). *Sociology and You*. Ohio: Glencoe McGraw-Hill. <http://www.glencoe.com/catalog/index.php/program?c=1675&cs=21309&p=4213&parent=4526>.
- Haslip, S. (2000). Aboriginal Sentencing Reform in Canada – Prospects for Success: Standing Tall with Both Feet Planted Firmly in the Air. *Murdoch University Electronic Journal of Law*, 7(1).
- Hurley, M.C. & Wherrett, J. (2000). Commentary on the Report of Royal Commission on Aboriginal Peoples, Parliamentary Library.
- Kalt, J. (2007). The State of the Native Nations: Conditions under U.S. Policies of Self-Determination, *The Harvard Project on American Indian Economic Development*, Oxford University Press.
- Kirkham, S. R. (2006). Review of the book *Cultural safety in Aotearoa New Zealand*. *Contemporary Nurse* 22(2), 333-4.
- Kloster, D. (2008). Aboriginal Resource Council, quoted in Victoria Times Colonist, June 11, 2008.
- Kruske, S., Kildea, S. & Barclay, L. (2006). Cultural safety and maternity care for Aboriginal and Torres Strait Islander Australians, *Women and Birth*, 19(3), 73-77.
- Kulchyski, P. (2004). E-nakaskakowaahk=A Step Back: Nisichawayasihk Cree Nation and the Wuskwatin Project. Winnipeg: Canadian Centre for Policy Alternatives, Manitoba Branch.
- Kulchyski, P. (2005). *Green Green Water* Documentary Film, Panniquuuq Summer School, Baffin Island, http://www.umanitoba.ca/faculties/arts/departments/native_studies/people/kulchyski.html.
- Kulchyski, P., McCaskill, D. & Newhouse, D. (Eds.) (1999). *In the Words of Elders: Aboriginal Cultures in Transition*, Toronto: University of Toronto Press.
- Lane Jr., P., Bopp, M., Bopp, J., & Norris, J. (2002). Mapping the Healing Journey: The Final Report of a First Nation Research Project on Healing in Canadian Aboriginal Communities. Solicitor General Canada and the Aboriginal Healing Foundation. APC 21 CA, 2002. http://www2.ps-sp.gc.ca/publications/abor_corrections/pdf/apc2002_e.pdf.
- Leininger, M. (1991). Transcultural Nursing: The Study and Practice Field. *Imprint*.
- Leininger, M. (1998). Leininger's Theory of Nursing: Cultural Care Diversity and Universality. *Nursing and Health Care*, 1, 152-160.
- Lenburg, C. (1995). *Introduction and Content to Promoting Cultural Competence*. Washington, DC: American Academy of Nursing.
- Maxim, P. & White, J. (2006). School Completion and Workforce Transitions among Urban Aboriginal Youth. In J. P. White, S. Wingert, D. Beavon, & P. Maxim (Eds.), *Aboriginal Policy Research Moving Forward, Making a Difference*, Vol. III. (pp. 33-52). Toronto: Thompson Educational Publishing.
- McClennon-Leong, J. & Kerr, J. R. (1999). Alternative Health Care Options in Canada, *Canadian Nurse*, 95(10), 26-30.
- McIntosh, P. (1988). *White Privilege: Unpacking the Invisible Knapsack*, Wellesley College Center for Research on Women.
- McIntosh P. (1998). White Privilege, Color and Crime: A Personal Account. In C. R. Mann & M. S. Zatz, (Eds.). *Images of Color, Images of Crime: Readings*, Los Angeles: Roxbury Publishing Company.
- Narayan, M. (2002). Six Steps Towards Cultural Competence: A Clinician's Guide. *Home Health Care Management & Practice*, 14(5), 378-386(9).



approach to change, consisting in the effort to reintegrate the essential features and benefits of a reconnection to homeland and of “traditional” indigenous land-based cultural practices that have proven in many cases to be key to the reclamation of spiritual, physical and psychological health and to the restoration of communities characterized by peace and harmony and strength.

Political and social institutions, such as band councils and government-funded service agencies that govern and influence life in First Nations today, have been for the most part shaped and organized to serve the interests of the Canadian state. Their structures, responsibilities, and authorities conform to the interests of Canadian governments, just as their sources of legitimacy are found in Canadian laws, not in First Nations interests or laws. These institutions are inappropriate foci for either planning or leading the cause of indigenous survival and regeneration. Reconfiguring First Nations politics and replacing current strategies, institutions and leadership structures with those rooted in and drawing legitimacy from indigenous cultures is necessary for creating renewed environments capable of supporting indigenous ways of being. Transformations begin inside each person, but decolonization starts becoming a reality when people collectively and consciously reject colonial identities and institutions that are the context of violence, dependency and discord in indigenous communities.

It is evident to anyone who has experience living or working within First Nations communities that conventional approaches to health promotion and community development are not showing strong signs of success. Reconciliation and empowerment through economic development and as the expected outcomes of self-government processes, land claims agreements, and aboriginal rights and title legal strategies, have not materialized. This is in large part because they have proven to be weak challenges to the thrust of the colonial-capitalist enterprise: the destruction or dispersal of Indigenous populations from their homelands to ensure access for industrial exploitation enterprises and concomitant non-indigenous settlements. Conventional approaches are based on an accession to the colonial-capitalist agenda with respect to Indigenous people and their lands. The agenda is heavily promoted by largely pro-assimilationist media and mainstream non-indigenous scholars (Widdowson, 2008; Helin, 2006; Flanagan, 2006), with integration into the market economy and cultural assimilation advanced as the only viable pathways to a better life for First Nations people and communities. This perspective is also at the centre of government policy and, it is fair to say, forms the view of the vast majority of the Canadian population.

Even among First Nations leadership, there is reliance upon the promise of integration and assimilation as a panacea for the complex of colonization and its resulting social suffering. The implicit assumption being that indigenous spiritual and cultural attachments to their homelands are relics of the past, and that the land and land-based cultures are capable of providing nothing more than a touchstone for the formation of new ethnic adaptations of a dispossessed and decultured “Aboriginal Canadian” identity. But the acceptance of being such an “Aboriginal” within the larger social-cultural mainstream of Canada is as powerful an assault on meaningful indigenous existences as any force of arms ever brought upon First Nations by the colonial regime. This integrationist and unchallenging aboriginal vision is designed to lead First Nations into oblivion, as individual successes in assimilating to the mainstream are celebrated, and our survival is redefined strictly in the terms of capitalist dogma and practical-minded individualist consumerism and complacency.

Despite some celebrated successes in court cases and economic development ventures, neither of these strategies generates real transformation in the quality of the lived experience of Indigenous peoples’ lives or expands the opportunities they have for living in ways that are not harmful to themselves or their communities. There is in fact not a shred of empirical evidence that increasing the material wealth of Indigenous people, or increasing the economic development of First Nations communities, in any way improves the mental or physical health or overall well-being of people in First Nations communities (Irlbacher-Fox, 2009). On the collective level, in terms of the need to empower First Nations communities, the self-government and economic development approach further entrenches both dependency and assimilation. As financial agreements, they are framed within and consistent with government policies without any real consideration of First Nations’ needs and objectives. Structured as year to year funding agreements, they promote instability and work against long-term planning and capacity building. They also do not provide means for First Nations to develop autonomous means to generate revenue, and most self-government agreements contain significant disincentives for First Nations to even attempt to move towards developing a capacity for such, “own source revenue generation.” In fact, business development and job training and other schemes to increase First Nations participation in the market economy are irrelevant to the basic problems that are the actual causes of the social and health crises in First Nations communities and at the root of First Nations psychological and financial dependency on the state. This “suffering as a causal web in



imperial prerogative to pre-empt indigenous ownership of land. Britain (and France before it) secured control against other would-be colonial powers by recognizing indigenous nationhood and sovereignty both in rhetoric and practice, as Europeans were not militarily capable of defeating indigenous nations outright, and needed indigenous alliances to confront their colonial rivals. Once Britain gained a preponderance of effective control over North America, it ignored earlier recognitions of indigenous nationhood and political sovereignty, as well as the legal guarantees to land ownership and access provided by treaties. By then, Indigenous populations had been reduced substantially by epidemic diseases and no longer posed a serious military threat to Britain's colonial aspirations and the colonial regime, as it should be understood after this phase of history. Britain then began the process of consolidating its territorial control and expansion with an agenda centred on the elimination of First Nations as legal and political entities, destruction of remnant indigenous resistance on the land, the management of Indigenous populations through the reserve system, and eventually a move to gradually "civilize" the Indigenous population through religious instruction and trades education (Rotman, 1996).

Within this broad sweep of history, focusing on the political economy of the process sheds light on the "dependency" aspect of the colonial enterprise by accounting for the common end-result of diverse economic relations between Indigenous populations and the colonial regime. There are many differences between and among Indigenous peoples in their experience with colonization. Differences in class, race and gender account for many variations among the experienced realities of Indigenous peoples throughout history (Wotherspoon & Satzewich, 1993, p. xiv). In the final analysis, European powers and Canada as the legacy state of European imperialism in North America have had a consistent goal centred on the seizure, control and use of indigenous lands in support of resource-based extractive industry to generate profits for, first, European regimes, later, for the resident Euroamerican metropolitan population, and more recently for globalized corporations. The policy of European and Euroamerican governments since first contact has not only been guided by mistaken notions of racial superiority and divine rights to domination, but also largely by the needs of a capitalist mode of production. Early in the fur trade era, Europeans required indigenous allies in trade and in war. The early peace and friendship treaties recognizing indigenous nationhood and sovereignty and guaranteeing protection of indigenous homelands flow from this politico-economic imperative. The shift from a mainly mercantile to an industrial form of capitalism created a

need for the lands to settle large incoming populations of Europeans, thus the colonial regime pursued the objective of settling treaties (the so-called "numbered" treaties signed after Canadian confederation) with First Nations that extinguished indigenous land rights. State policy shifted around the turn of the 19th century, reflected in the establishment of the *Indian Act* and its governmental system, to become an important tool in assimilating or subjugating Indigenous peoples in service to the needs of Canadian capitalist expansion (Wotherspoon & Satzewich, 1993, p. 14).

It is the forced, rapid reshaping of indigenous existence during this process of colonial-capitalist expansion and consolidation which is the most important aspect of the colonial experience for Indigenous peoples themselves – every aspect of their lives was reshaped in the interests of capitalism and to ensure the opportunity and profit potential of the white population recently settled in their homelands. Wotherspoon and Satzewich, considering the implications of Indigenous peoples' situation between capitalism and the land, explain that "people's lives were destroyed both inwardly and outwardly, in concert with idleness from lack of economic opportunity and the absence from any meaningful place in mainstream society" (Wotherspoon & Satzewich, 1993, p. 157).

The anthropologist Hugh Brody's work with Dene peoples in north-western British Columbia, in his book, *Maps and Dreams*, details the specific causal linkages between aspects of colonization and the cultural and social harms to First Nations. In Brody's evaluation, the cumulative effect of resource extraction activities and of white settlement in indigenous homelands has been the disruption of traditional patterns of economic life, as well as serious damage caused to the natural environment caused by pollution and settlement activities. He sees these as the direct cause of First Nations social suffering. In Brody's words, these "environmental effects feed directly and frighteningly into all adverse social disruptions in Indian life" (Brody, 1981, p. 253).

The case of the First Nations fishery on coastal British Columbia is another illustration of the colonial state's efforts over time to undermine First Nations' economic autonomy and to generate the dependency. The indigenous economy in the area was based mainly on the harvesting and preserving fish from the sea and rivers. First Nations had adapted their traditional practices and expanded their activities to include participation in the commercial fisheries established by non-indigenous capitalists. They did this to accommodate the changing realities of modern life, maintaining control over the pace and nature of their adaption and preserving the basis of their cultures. Newell gives a detailed historical



and culturally no matter what the strategic outcome of the struggle.

Meaningful change, the true transcendence of colonialism, and the restoration of indigenous strength and freedom can only be achieved through the resurgence of an indigenous consciousness channelled into contention with colonialism. Indigenous people need to challenge the continuing conquest of the land and our people, but doing so through the futile delusions of money or institutional power can only bring cultural stasis enshrined in law or further conversions to capitalist-consumerism. These outcomes do not reflect the ideals of peace, respect, harmony, and coexistence that are at the heart of indigenous spiritualities and philosophies. The struggle to live in the face of colonialism must be done in an indigenous way according to indigenous needs, values and principles.

Such a renewed consciousness has the possibility to become the sacred knowledge that guides First Nations out of fog of confusion that has enveloped our people. The resurgence of an indigenous consciousness is an explosive potential capable of transforming individuals and communities by altering basic conceptions of the self and in relation to other peoples and the world. Its elements are the regeneration of identities consistent with the sacred teachings that come from the land, commitments to stand up for ourselves, and just restitution for the harms that our people have endured. There is no apparent alternative capable of helping First Nations build better relationships within communities, restore regimes of peace, respect and responsibility, and to lead Indigenous people to courageously counter the legacies of historical trauma and still-present threats to our existences.

THE EFFECT OF COLONIZATION

The situation facing Indigenous people in North America is not unique – neither in the present or in terms of the dynamics of a relationship between invader/oppressor and the subjects of colonization. Frantz Fanon, a medical doctor, used the tools of psychoanalysis to explain why black people lacked the individual and collective confidence in the French Caribbean colony Martinique. Fanon attributed these problems to racist assumptions held by both black and white people. These assumptions placed white people at the apex of civilization, and measured everyone else against white cultural standards. Accordingly, only those black people who assimilated into French culture were deemed to be civilized. Those who did not assimilate experienced a form of perpetual ridicule, which resulted in feelings of personal

inadequacy. In Fanon's analysis, colonized people who mimic the ways of the colonizer – who assimilate to the mainstream – and suppress their natural selves on a conscious and unconscious level begin to suffer from various psychological disorders (Fanon, 1982). There is certainly no evidence that the issues around assimilation and psychopathology are any different for Indigenous people. And, regarding the specific effects of colonization in Canada, Kirmayer and Valaskakis report that “it is likely that the collective trauma, disorientation, loss, and grief caused by these short-sighted and often self-serving policies are major determinants of mental health problems faced by many Aboriginal communities” (Kirmayer & Valaskakis, 2009, p. xv), clearly verifying that a Fanonian perspective on the psychological stresses of colonialism are present in Canada today.

Drawing on his research among the Kluane First Nation in the Yukon, Paul Nadasdy has described the harmful effects of colonialism, manifest as modern land claim processes and wildlife co-management initiatives, on First Nations communities as collectivities. His conclusion is that the most significant changes forced on First Nations relate to the emergence of various bureaucratic structures, such as wildlife co-management boards and the various negotiating tables involved with land claims, which have supplanted indigenous governing structures in the community. This increases the social stratification between those educated and technically qualified to navigate government bureaucracies and those who maintain an existence on the land and who engage in traditional land-based practices. It also changes the community's relationship with the land, eroding relationships based on indigenous spiritual teachings to a framework of individual private property. It alters the people's relationship with animals, where over time Indigenous people begin to view and treat animals no longer as sacred beings worthy of respect but as natural resources and marketable commodities (Nadasdy, 2003).

The geographer Cole Harris' work on the economic, social and health consequences of colonial and reserve policy for Indigenous peoples elaborates on these themes. Harris links the imposition of a private property rights regime with ideas on the superiority of the white race and European culture, as well as with the imperatives of the state itself, most notably the requirements of the state for surveillance and discipline of dysfunctional or minority populations. He notes that in the early period of contact and settlement, Indian agents responsible for monitoring and managing the colonial regime's law and policy in relation to First Nations were often times unable accomplish their objective of total surveillance of Indigenous peoples, especially in



imposition of the *Indian Act* and the forced settlement of Indigenous populations on reserves:

1. **Disorientation** – caused by the lack of self-government and management capacity appropriate to the imposed bureaucratic and capitalist environment.
2. **Disempowerment** – due to coercive enforcement of colonial laws and policies by government authorities.
3. **Discord** – resulting from people's inability to fulfil traditional, social, cultural, and spiritual obligations.
4. **Disease** – caused by inferior nutrition and the sedentary nature of reserve life.

The experience of Indigenous people in the urban context has not been extensively studied, but even the limited research by Jim Silver on urban indigenous political participation does shed some light on the particularities of their situation. Silver links the urban Aboriginal experience, characterized by experiences of overt racism and social exclusion, with an ongoing colonial relationship that equates, in experiential terms, to the removal of a normative framework for life leading to anomie suffered by reserve-based First Nations. There is, then, evidence of significant commonalities of effect between the urban and reserve in spite of the obvious difference of circumstance in geographic and socio-economic terms. Confinement to rural reserves and confinement to economically disadvantaged neighbourhoods in urban centres lead to the same results in the negative life experiences of Indigenous people.

The main differences between the two situations are that in the urban context Indigenous people's lives are affected by their experience of economic and racial discrimination – most cannot afford to live anywhere but in disadvantaged neighbourhoods, and once there, the dynamics of enclave ghettoization and racism keeps them from locating elsewhere. Furthermore, just like in the reserve setting historically and in the contemporary period, the needs of Indigenous people living in indigenous enclaves or in economically disadvantaged neighbourhoods in Canada's cities are neglected by the federal and provincial governments (Silver, 2006). Thus, for the purposes of understanding colonialism and its fundamental effects on Indigenous peoples in Canada, there is no basis for distinguishing between urban and reserve populations.

Compounding the psychophysical and cultural effects of separation from the land and dissolution of

community, there is the actual experience of harm and the multigenerational reverberations of the violence used in and associated with the oppression of First Nations. The historical traumas experienced by Indigenous people in the process of being removed from the land and in the construction of a colonial regime predicated on their marginalization are another factor at the root of the crisis of dependency (Whitebeck, Adams, Hoyt, & Chen, 2004, pp. 199-130). The spectrum of psychophysical effects being manifested in First Nations in Canada are the same ones that have been directly and causally linked to experiences of oppression in the research on Holocaust survivors and their families – recent research indicates that the direct effects and multigenerational legacies of the experience of colonialism has created similar effects on First Nations people as experiencing the Holocaust had on Jewish survivors (Yellow Horse Brave Heart & DeBruyn, 1998). Conceptualized as the source of “historical unresolved trauma,” the pattern of colonization in Canada as experienced by Indigenous peoples has three identifiable features:

1. Ongoing multigenerational processes of dispossession and oppression;
2. Violent and systematic marginalization and assimilation; and,
3. Forced acculturation to Christianity and forced integration to market capitalism.

Whatever the particular situation, Indigenous people's basic relationship to the state is as members of nations in a colonial relationship with a dominating external power. All Indigenous people's personal interfaces with the state are channelled through and shaped by the collective relationship that their nation has, historically and currently, with the colonial regime. The laws and other types of institutions that give shape to First Nations life in Canada, and through which state agencies relate to Indigenous people, operate in a context that is historical and political and which reflects the objectives of the state in regard to the collective entities that make up the indigenous reality of Canada as economic, political and social facts. As such, the relationship between First Nations and the Canadian state remains colonial and is for the most part one of conflict rooted in the state's imperative to maintain its control over indigenous lands and to limit the power of First Nations.

In such a colonial relationship, impositions of power and authority by the regime may be absorbed, tolerated, or accommodated by Indigenous people in various ways over time, but the conquest of the Indigenous population



are conflated with these historical processes, and therefore set in time and unchangeable. Since Aboriginal identities, legal constructs and policies are premised on these *historical* notions, politics cannot address the social suffering that results from *ongoing* injustice, and they become simply band aids for the symptoms of ongoing colonization. If aboriginalism were to become the main framework for indigenous identity and for constructing relationships between Indigenous peoples and state, it would lead to the complete erosion of First Nations as political and culturally distinctive entities. Such a result would no doubt deepen the crises facing First Nations.

As a political program and set of cultural assumptions, aboriginalism manages to gently step through the minefield laid by formal definitions of genocide in international law. But this psychological and legal security exists only because the Canadian government's agenda and policies are not critically scrutinized in the public discourse or by most mainstream scholars. The severe destructive and disintegrating effects of colonization in indigenous communities and the momentum towards assimilation, combined with the active construction of aboriginalist structures to support the elimination of authentic indigenous existences, make such self-examination unlikely. Instead, accommodations with colonialism are sought.

Indigenous people who embrace aboriginalism become cultural mirrors of the mainstream society, and because they aspire to elevate their status inside settler society, they are afforded opportunities to usurp the voice and privileges of legitimate representatives of First Nations. Governments promote, and the general society accepts, the aboriginalist voice in politics and the arts, scholarship, media, and other public forums because it is the voice of accommodation and acceptance of the situation and allows settler society the hubris of its mistaken notion that indigenous dysfunction is responsible for First Nations dependency and suffering. This misappropriation of voice and subtle manipulation of the constitution of First Nations leadership in Canada is another powerful attack on the ability of First Nations to regenerate culturally and politically as collectives. From an indigenous perspective, it is not the Indigenous bureaucrats, businessmen, politicians, and lawyers holding positions of influence in state agencies or government-sponsored negotiation processes that have the right and responsibility to represent First Nations on the basic questions of indigenous identity and rights, cultural knowledge, traditional law and governance, or spirituality. It is the Elders and those who have been recognized as traditional knowledge holders or spiritual leaders that have that right and responsibility; and, it is theirs whose voice is being

ignored, appropriated and manipulated in the advancement of the aboriginalist agenda.

Indigenous Elders, knowledge holders, and spiritual leaders are consistent in their conclusions on how indigenous cultures have changed in the wake of colonization. In the culturally and spiritually rooted indigenous perspective, the most significant issues are not legal, political or financial in nature, they relate to the destruction of languages, spiritual practices, and social institutions (family, community, and governing structures), and the importance of restoring these things in order to re-establish a sense of personal identity and belonging for contemporary Indigenous peoples (Kulchyski, McCaskill & Newhouse, 1999). The respected Okanagan Elder and teacher Jeannette Armstrong describes how colonialism has led to the "slow internal disintegration of the survival principles developed over thousands of years;" and she tells how community focused relearning of traditional ways and governance systems (*enow'kin*) and a renewed focus on spiritual practices is the "backbone of the movement" to recreate solidarity within First Nations communities (Lobo, 1998, pp. 235-239).

Based on these understandings, from a solutions-oriented perspective, colonialism is best conceptualized as an irresistible outcome of a multigenerational and multifaceted process of forced dispossession and attempted acculturation – a disconnection from land, culture and community – that has resulted in political chaos and social discord within First Nations communities and the collective dependency of First Nations upon the state. This harm has resulted in the erosion of trust and of the social bonds that are essential to a people's capacity to sustain themselves as individuals and as collectivities.

Disconnection is the precursor to disintegration, and the deculturing of our people is most evident in the violence and self-destruction that are the central realities of a colonized existence and the most visible face of the discord colonialism has wrought in indigenous lives over the years. Cycles of oppression are being repeated through generations in indigenous communities. Colonial economic relations are reflected in the political and legal structures of contemporary indigenous societies, and they result in Indigenous peoples having to adapt culturally to this reality and to individuals reacting in destructive and unhealthy (but completely comprehensible) ways. These social and health problems seem to be so vexing to governments; large amounts of money have been allocated to implement government-run organizations and policies geared towards alleviating these problems but they have had only limited positive effect on the health status of our communities.



This paper examines the stressors for First Nation communities at risk or in crisis with a focus on canvassing determinants of health including: poverty, child welfare, youth gangs, policing, and domestic violence. It provides some principles that could guide strategies in developing decolonizing processes and methods that create opportunities for long term sustainable initiatives within a culturally relevant framework for First Nation communities. With this commitment to positive change there are opportunities for creating healthy, just and safe communities in Canada. This requires leadership but also sustainable planning based on inclusion, integration and shared responsibilities. Putting things right in at risk or in crisis First Nations communities is a complex and challenging task. Incidences of violence have become commonplace in many communities. Statistics show that First Nations young people in Canada are more likely to become involved in gangs, to have higher rates of suicide than non-Aboriginal youth, to be unemployed or underemployed, and to come into contact with the western justice system. They are less likely to complete high school or form long-term, healthy, intimate relationships. High rates of physical and sexual abuse against Aboriginal women and children, high rates of unemployment, low rates of education, and disproportionate rates of conflict with the law are some of the common community dysfunctions which are inter-generational. Faced with these challenges, communities struggle to move forward in positive and rewarding ways.

Through the struggles some communities have experienced healing ways, relationship building and social, political and economic developments – these are all critical steps toward successful intervention of community dysfunction. Examples such as Hollow Water, a First Nation community that initiated an indigenous circle process as a way to respond to the harms within their community, provide a roadmap toward a new way of doing justice. Circles bring together whole families, both members who have harmed and who have been harmed, to find a way to respond and make communities stronger out the other side. Relative to the Euro-based colonial model, healing the spiritual, emotional, and mental anguish is a “new” but “old” way of living, but forging a new/old life for communities by undertaking healing work can be tough. Restoring and reclaiming culture and restoring unhealthy relationships to good ways are extremely challenging, both for the individuals who take these steps and for the communities who undertake collective transformations. Healing means setting out on un-walked paths to decolonization. Small changes to the status quo do not bring the healing transformations that First Nations need. These transformations require new patterns of thinking, acting and

behaving that honour and respect First Nations cultures and traditions.

If new strategies and transformative efforts have hope of making things better, there must be a concerted and concentrated approach to develop strategies for change. In the last 20 years, there has been some movement toward developing positive relationships with the Aboriginal people of Canada. For example, in 2008, Prime Minister Stephen Harper apologized to Aboriginal peoples for forcing their children to attend Residential Schools. As well, the system has made some headway by using more healing and restorative practices, which strengthen relationships and creates a deeper understanding of what is going on. We need to build upon these positive developments in seeking new transformations. Without question, any changes that make a system more inclusive, less harsh and more accommodating are welcome. For those in crisis, even the slightest easing of colonial force becomes a lifeline. Such measures are, however, only a small step on the path to addressing the harms done to Aboriginal peoples. Much more must be done.

Understandings of colonialism suggest that it is a process of domination that has proven destructive to the many colonized people of the world. For First Nations peoples in Canada, the effect was a colonial regime applying pressure against their cultures, practices and traditions. In naming colonialism as a major and central source of harm, we do not intend to blame any individuals or otherwise. What we are seeking to understand is the systemic structures of colonialism that operates in ways that are antithetical to Aboriginal knowledge, teachings and ways of life. This creates opportunities to move toward decolonization methodologies and strategies. The current realities that First Nations face cannot be appropriately understood, much less constructively addressed, unless these root causes in colonialism are named. Our purpose in stating the full extent of harm that colonialism has caused, therefore, is not to widen the gap between peoples working toward healing the harms, but to assess the situation with sufficient accuracy so that we can, together, find viable solutions.

Remediating communities at risk or in crisis requires collective, personal, economic, social, and political strategies that address the root causes of harm and is grounded upon transformative initiatives that accord appropriate respect toward First Nations traditions, practices and cultures. Anything less will keep the same power structures in place and maintain the status quo dysfunctions. This paper relies upon two premises: 1) that addressing the crisis in communities must begin with recognizing the root cause of harms, colonization. Peeling away the layers about this



When new ways of making things right are undertaken, there can be resistance and pull to confine change. For example, restorative justice offers many ways to reconcile people, but resistance to using these methods can be quick to surface. The moment difficulties arise, as they inevitably do whenever something is tried for the first time, rather than working to create a better approach, colonial approaches can use them as examples to prove the new method did not work. Instead of working through the resistance, it is easy to suggest how to make the new approach fit within the existing system, until we are back to square one. Layer by layer, innovative ideas are chipped away until the implemented end product is no longer able to achieve its transformative goals. The best and most sincere efforts to breathe life, dignity and equality into a system that is anchored in injustice and bias seem to fail. Worse, those very energies for change get co-opted.

Report after report document the inequity, harshness, bias, and unfairness of the colonial system toward those who are different. The Royal Commission on Aboriginal Peoples (1996) report is one of the most quoted and relied upon documents for telling the harsh truth about the impacts of colonization on Aboriginal peoples living in Canada. More recently, the *From Truth to Reconciliation: Transforming the Legacy of Residential Schools* research report by the Aboriginal Healing Foundation (2008) opened with the news that “Truth and reconciliation are new words in the vocabulary of Canadians speaking about our history and our future in this land” (p. 1). The collection of papers from leading Indigenous scholars asks readers “to follow a path that leads from truth-telling through the territory where the ongoing legacy of residential schools and colonialism is laid bare ... in pursuit of justice and reconciliation” (p. 4).

For the first time, other Canadians have begun to listen. Unfortunately, principles of healing, reconciliation, restoration, land return, respect for diversity, and the celebration of languages and cultures were unfamiliar to many Canadians. Familiar sociological labels peppered conversations about First Nations people and culture: marginalized, vulnerable, in crisis, at risk, or incapacitated. While these terms may apply to far too many First Nations people and communities, they do not capture why First Nations conditions are so dire. Moreover, the dire conditions for many of the communities will continue to increase with its demographic population exploding.

1.2 Aboriginal and First Nations Growth Demographics in Canada

i) Aboriginal Peoples

More than one million people identify themselves as Aboriginal people in Canada. Many (about half) are under the age of 24. The Aboriginal population is getting younger and has grown by 45 per cent over the past decade. This is about six times faster than the eight per cent growth rate of non-Aboriginal Canadians (Statistics Canada, 2008c). Aboriginal people comprise 3.8 per cent of the total Canadian population, ranking second in the world. In comparison, the largest Aboriginal population is located in New Zealand with approximately 15 per cent of the total population. After Canada’s percentage of 3.8, both Australia and the United States lag behind with Indigenous populations of approximately 2 per cent of their total population (DeSouza, 2008). In October 2008, Statistics Canada released the Aboriginal Children’s Survey information for 2006. It collected information on children’s health, sleep, nutrition, development, nurturing, child care, schooling, language, behaviour, and other activities. Aboriginal children are a growing segment in relation to all children in Canada (Statistics Canada, 2008a).

ii) First Nations Peoples

On December 9, 2008, Statistics Canada released its newest findings about on-reserve First Nations people. The study covered issues of status, area of residence, age group, gender, and other selected demographics (cultural, labour force, education, and income characteristics) based on the 2006 Census (Statistics Canada, 2008c). The data is incomplete, since 22 Indian reserves and settlements were not covered properly by the 2006 census. Even so, the overall trends clearly show that approximately 50 per cent of First Nations people are less than 25 years of age. Similar to other provinces, it is important to note that approximately 15 per cent of Saskatchewan’s population is Aboriginal and of that, roughly two-thirds were First Nations and one-third were Métis (Statistics Canada, 2008b).

If we rely on the Indian and Northern Affairs Canada (INAC) (2007) statistics of Historical Trends of the Indian Population from 1982–2007 (Figure 1 next page), 615 Indian Bands live in Canada. Their total registered Indian population numbers 778,050. This includes Aboriginal people living on reserve (410,889), on crown land (23,697) and off reserve (343,464) (Indian and Northern Affairs Canada, 2007).

Between 1982 and 2007, the registered Indian



- Combined, **circulatory diseases** (23 per cent of all deaths) and **injury** (22 per cent) account for nearly half of all the deaths among First Nation people. In Canada as a whole, circulatory diseases account for 37 per cent of all deaths, followed by cancer (27 per cent). Unintentional injury and suicide were approximately 6 per cent of all deaths among First Nation people living in Canada.
- The **most common causes of death** for First Nation people aged one to 44 years was injury and poisoning. Among children under 10 years, deaths were primarily classified as unintentional (accidental). For First Nation members aged 45 years and older, circulatory disease was the most common cause of death.
- **Suicide and self-injury** were the leading causes of death for youth and adults up to age 44 years. In 2000, suicide accounted for 22 per cent of all deaths in youth (aged 10 to 19 years) and 16 per cent of all deaths in early adulthood (aged 20 to 44 years). This compares with 20.4 per cent in Canadian youth.
- **Motor vehicle collisions** were a leading cause of death over all First Nation age groups.
- In First Nations, the **potential years of life lost from injury** were more than all other causes of death combined and were almost 3.5 times that of the Canadian rate.
- Compared with the overall Canadian population, First Nations had elevated rates of **pertussis** (2.2 times higher), **rubella** (seven times higher), **tuberculosis** (six times higher), and **shigellosis** (2.1 times higher) for the year 2000.
- The notification rate of **genital chlamydia** was almost seven times higher than the national rate, while the reported hepatitis C rate was one-third lower than the national rate.
- The coverage rates for routine **immunizations** of two-year-olds were lower among First Nations children for all antigens.
- First Nations **hospitalization rates** were higher than the Canadian rates for all causes except

circulatory diseases and cancers. Where the principal diagnoses were respiratory diseases, digestive diseases and injuries or poisonings, the rates were approximately two to three times higher than their corresponding Canadian rates.

- **Diseases of the respiratory system** accounted for 18.8 per cent and 11.6 per cent of all hospital separations for First Nation males and females, respectively, in 1997.
- **Injuries and poisonings** accounted for 17.7 per cent and 9.3 per cent of all hospital separations for First Nation males and females, respectively, in 1997.
- The 1997 First Nation **smoking rate** was reported to be 62 per cent. In Canada, 24 per cent of the national population aged 15 years and older were smokers in 2000.

The First Nations Longitudinal Regional Health Survey (RHS) reports that 28.4 per cent of First Nations adults report that they have a disability. Nearly one in three First Nations women have one or more disabilities compared with one in four Aboriginal men. Disability becomes more common as people age. Half of all First Nations people over 60 years of age have a disability, compared with 13.1 per cent in the 18–29 age groups. This increase of disability with age can be explained, in part, to increased exposure to factors that place people at risk of disability across the lifespan, such as accidents, the natural aging process, illnesses, and other conditions (e.g., arthritis, heart conditions and progressive hearing loss) (First Nations and Inuit Regional Health Survey National Steering Committee, 2002).

Health does not exist in a vacuum. Many factors contribute to determining our health. For instance, past and current socio-economic status, the presence of available, adequate, and affordable housing, employment, food security, safe communities, levels of education, and one's mental and emotional state; all of which have an impact on First Nations communities' health and well-being.

The *Indian Act* (1985), for example, has had, and continues to have, a major effect on the everyday lives of First Nations people. Formal definitions of the term "Indian" acquired a legal mandate in 1850, when the first legislation governing Indians was created (S.C., 1850). Section 3 of the *Indian Act* of 1876 states: "[t]he term 'Indian' means 'any male person of Indian blood reputed to belong to a



of success for the future but the educational crisis remains. Dr. Marie Battiste, an internationally renowned Aboriginal education scholar, has provided convincing studies and material on the importance of decolonization methodologies and protecting Aboriginal knowledge, heritage and culture in education initiatives (Battiste 2004a, b; Battiste & Henderson, 2005).

There remain further gaps in the research on the specific needs and wants of First Nations, Métis and Inuit. Wilson and Sarson (2009) indicate that “[w]e need data that distinguishes between First Nations, Inuit and Métis students because this aspect of their identity can have significant impacts on that which can make-or-break them as students ... and their communities’ need from post-secondary institutions” (p. 38).

Poverty Reduction and Social Assistance

The newly released 2008 National Council of Welfare report found that most people living on social assistance are so impoverished that adequate housing, jobs and recreational activities are beyond their reach (National Council of Welfare, 2008c). The vast majority of welfare recipients subsist on extremely low levels of income and the most vulnerable are subject to even harsher circumstances. The income for a couple with two children ranged from a low of \$18,849 in New Brunswick to a high of \$22,906 in Prince Edward Island. The welfare system is supposed to be a safety net for those in need and move toward addressing poverty, but has huge holes in it. John Rook (as cited in National Council of Welfare, 2008a), Chair of the Council stated a strategy to solve poverty is urgently needed:

[I]t should have targets and timelines, a plan of action, accountability and measurable indicators. ... For any nation to solve poverty or foster prosperity there must be government action, political will and a real recognition of the human face of poverty.

In an earlier report in 2007, the National Council of Welfare found that Aboriginal social assistance welfare programs and its delivery was discriminatory. Moreover, the researchers were astounded at the patience of Aboriginal people and they themselves felt a sense of frustration and impatience for bolder action (National Council of Welfare, 2008b). Dr. John Rook (National Council of Welfare, 2007d) stresses that:

Aboriginal women and men are at the centre of creating a better life for their children and young people and

they are finding solutions that work. Governments need to act now and in new ways, to genuinely work with Aboriginal people and support them more fully in their own decisions about what is needed (p.1).

It was found that Aboriginal children in the welfare assistance program are caught in a legacy of colonialism, racism and exclusion. Their developmental years are fraught with high rates of poverty and its related causes and consequences from health problems, poor housing and educational difficulties to astounding numbers of children taken into state care and of youth in trouble with the law or victims of violent crime. The other side of the portrait shows progress, even in the face of these obstacles. Aboriginal individuals, families, organizations, and communities are working hard toward finding solutions, acting as role models, developing successful programs, and providing the keys that restore hope for future generations (National Council of Welfare, 2008b).

The report urges government action to include: a comprehensive national anti-poverty strategy, with a specific vision and accountability to Aboriginal peoples; immediate investment in basic needs for today’s children and youth, and in other programs and policies that are making a difference, and; greater effort to build fair, sustainable governance frameworks in the interests of a better quality of life for all Aboriginal women, men and children (National Council of Welfare, 2008b).

These suggestions are supported in an earlier report to the Atlantic Policy Congress of First Nations Chiefs on Models of Social Assistance (Wien, 2001). Social assistance for First Nations people are tied to provincial systems so the mainstream approach is the way in which the programs are organized and delivered on reserve. However, the report found these “mainstream” approaches were not designed with Aboriginal people in mind and there is a serious gap between First Nations conditions and the social welfare policies that they are required to implement.

[P]rovincial (welfare) systems do not reflect First Nation cultures, they are part of a fragmented (rather than integrated) approach to the achievement of health and well-being, and they are geared to the provision of support to individuals but in such a manner that the frequent result is isolation and dependency. In practice, linking First Nation welfare to provincial systems has produced what might be called a separate and unequal system (Wien, 2001, p. 26).



3.2 Community Strategies of Success

i) Community Support and Leadership

A healthy community requires healthy leaders. The literature reviewed for this paper show the importance of good leadership skills, by examining the qualities of great leaders. Leaders are not born as leaders but are developed through individuals and their community by positive mentoring and nurturing (Sask. Justice Reform, 2004). The Saskatchewan Justice Reform Commission describes this concept:

This Commission believes that leadership requires a complex interplay of skills (such as discipline, flexibility, self-awareness, self-management, ability to learn, drive, purpose and honesty). It also requires the knowledge and skills to work with others and within organizations. Such work calls for the ability to manage effective work groups, the ability to build and maintain relationships, the ability to communicate, the ability to develop others, the ability to inspire, the ability to manage change, the ability to solve problems and make decisions, the ability to influence, the ability to take risks, and the ability to set and obtain goals and make plans. Some may come by these skills naturally, but for most they are learned. In the right settings, they can be taught, practised and cultivated (Saskatchewan, 2004, Ch. 1, pp. 1-2).

It is important to support today's capable leaders and to cultivate the next generation of leaders – without this – our recommendations may fail. While it is necessary to create governance structures to deal with the concerns noted in this report. The structure that governs a community and a First Nation must be one of empowerment to support the leaders while any new approaches are developed.

ii) Preventing and Targeting Crime

Chantal Bernier (2007), Assistant Deputy Minister (ADM) of the Community Safety and Partnership Branch of Public Safety Canada, noted in her report that:

With any government policy or program, there will always be the typical challenges—lack of funding, insufficient mandates or jurisdictional issues, to name a few. However, the real challenge is to find ways to overcome these obstacles and provide effective services to the people the policy serves (Bernier, 2007, p. 4).

The policing issues that we see today will be exacerbated with any significant population growth, not to mention

growth rates exceeding 75 per cent in less than two decades. Policies must then be crafted to reflect a new framework. For example, we need policies that improve the resources to police on reserve but also actively encourage them to work closer with the community. Policies are needed to set a framework of sharing information, developing holistic approaches and making meaningful commitments to work with the communities.

Engaging Aboriginal people in securing the safety of their communities is a critical step away from the colonizing model. Fundamentally, First Nations cultures held people on a good path in any number of ways. But in a no man's or no woman's land of neither one nor the other, we must find ways to address the trauma of colonization that support the reconnections of Aboriginal people with each other and others. Utilizing some of the recommendations in this paper is a very good start (Bernier, 2007).

As Ms. Bernier's report states, the serious issues raised will not solve themselves. Demographic data demonstrates that high crime rates, poor health conditions, and overcrowded, rundown housing will only get worse unless these problems are vigorously confronted and resolved. Building partnerships by consulting meaningfully with those most affected and rallying the essential human and financial resources necessary will help address some of the serious problems underlying safety issues in Aboriginal communities today. Until the restraints and positive supports provided by Aboriginal cultures are restored, communities need help in restraining those individuals so overcome with trauma or addictions that they "act out" on those closest to them. Restraining and, if necessary, excluding—banishing—those who act harmfully toward the community are practices that are consistent with many First Nations traditions. For all these reasons, we need to provide what is necessary to adequately police Aboriginal communities. This includes, for example, increasing the number of culturally astute police officers to provide around-the-clock service, providing acceptable office and lock-up facilities, and making sure the officers have appropriate housing. The health and well-being of residents of First Nations and other Aboriginal communities depends on safe environments through preventing and targeting crime.

Part 4 Moving Forward in New Directions

4.1 Increasing Knowledge

As the adage goes, knowledge is power and so it is within



- Bennette, M. & Blackstock, C. (2002). *A Literature Review and Annotated Bibliography Focusing on aspects of Aboriginal Child Welfare in Canada*. Ottawa: First Nations Child and Family Caring Society of Canada.
- Bernier, C. (2007). *Speech for Delivery, and Presented at the National Aboriginal Policing Forum*. Ottawa: Pacific Business and Law Institute (unpublished on file with the authors).
- Brzozowski, J., Taylor-Butts, A. & Johnson, S. (2006). *Victimization and offending among the Aboriginal population in Canada*. Ottawa: Statistics Canada – Catalogue no. 85-002-XIE, 26(3).
- Canadian Association of Elizabeth Fry Societies. (2006). *Health and Mental Health*. Ottawa. Retrieved December 21, 2008, from <http://www.elizabethfry.ca/eweek06/pdf/menthlth.pdf>
- Canadian Race Relations Foundation. (2009). *UNEQUAL ACCESS: A Canadian Profile of Racial Differences in Education, Employment and Income*. Retrieved February 13, 2009, from <http://www.crr.ca/content/view/260/538/lang.english/>
- Chandler, M. & Lalonde, C. (2004a). Cultural Continuity as a Hedge against Suicide in Canada's First Nations. *Transcultural Psychiatry*, 35, 191-219.
- Chandler, M. & Lalonde, C. (2004b). Culture, Selves, and Time: Theories of Personal Persistence in Native and Non-Native Youth. In C. Lightfoot, C. Lalonde & M. Chandler (Eds.), *Changing Conceptions of the Psychological Life*. Nahwah, NJ: Laurence Erlbaum and Associates
- Chandler, M. & Lalonde, C. (Forthcoming) Cultural Continuity as a Moderator of Suicide Risk Among Canada's First Nations. In L. Kirmayer & G. Valaskakis (Eds.), *The Mental Health of Canadian Aboriginal Peoples: Transformations, Identity, and Community*. Vancouver: University of British Columbia Press.
- Chansonneuve, D. (2005). *Reclaiming Connections: Understanding Residential School Trauma Among Aboriginal People*. Ottawa: Aboriginal Healing Foundation. Retrieved January 26, 2009, from <http://www.ahf.ca/publications/research-series>
- Chartrand, L., Logan, T.E. & Daniels, J.D. (2006). *Métis History and Experience and Residential Schools in Canada*. Ottawa: Aboriginal Healing Foundation.
- DeSouza, M. (2008, January 16). Canada's aboriginal population passes one million. *The Star Phoenix*, p. D4.
- Eng, S. (2005). *Policing for the Public Good: A Commentary*. In D. Cooley (Ed.), *Re-imagining Policing in Canada* (p. 320). Toronto: University of Toronto Press.
- First Nations and Inuit Regional Health Survey National Steering Committee. (2002). *First Nations and Inuit Regional Health Survey, National Report*. Ottawa: National Aboriginal Health Organization.
- First Nations Child and Family Caring Society of Canada. (2007). *Wen:de Series of Reports Summary Sheet*. Retrieved January 26, 2009, from <http://www.fnfcfs.com/docs/WendeReportsSummary.pdf>
- Government of Newfoundland and Labrador. (2005). *Facts on Violence*. Newfoundland & Labrador: Canada.
- Hamilton, A.C. & Sinclair, C.M. (1991). *Report of the Aboriginal Justice Inquiry of Manitoba: The Justice System and Aboriginal People. Vol. 1*. Winnipeg: The Inquiry.
- Health Canada. (2001). *A Statistical Profile on the Health of First Nations in Canada for the Year 2000*. Ottawa: Canada.
- Health Canada. (2005). *First Nations Comparable Health Indicators*. Retrieved December 15, 2008, from http://www.hc-sc.gc.ca/fnihah-spnia/diseases-maladies/2005-01_health-sante_indicatif-eng.php
- Henderson, B. (1996). *Notes on the Indian Act*. Retrieved December 19, 2008, from <http://www.bloorstreet.com/200block/sindact.htm>
- Henderson, J.Y. (2006). *First nations Jurisprudence and Aboriginal Rights*. Saskatoon: Native Law Centre.
- Indian Act, R.S.C. 1985, c. I-5.
- Indian Act, 1876. S.C. 1875, c. 18.
- Indian Act, 1906, S.C. c. 81, s. 2(c).
- Indian and Northern Affairs Canada. (2007). *Historical Trends – Registered Indian Population Canada 1982-2007*. Retrieved December 8, 2008, from <http://www.ainc-inac.gc.ca/ai/rs/pubs/sts/ht/ht-can-eng.pdf>
- Inuit Tapiriit Kanatami & Inuit Circumpolar Council (Canada). (2007). *Building Inuit Nunaat, The Inuit Action Plan*. Ottawa: Inuit Tapiriit Kanatami & Inuit Circumpolar Council.



- Irvine, K. (2004). *First Nations Child & Family Caring Society Crisis Response in First Nations Child and Family Services*. Blackstock, C. (Ed.) Retrieved December 19, 2008, from http://www.fncfcs.com/docs/Communities_in_Crisis.pdf
- Lane, P., Bopp, M., Bopp, J., & Norris, J. (2005). Mapping the Healing Journey: First Nations Research Project on Healing in Canadian Aboriginal Communities. In W.D. McCaslin (Ed.), *Justice as Healing: Indigenous Ways* (pp. 396-405). MN: Living Justice Press
- Linden, S.B. (2007). *Ipperwash Inquiry*. Ontario: Ministry of the Attorney General
- Lux, M. (2001). *Medicine That Walks: Disease, Medicine, and Canadian Plains Native Peoples; 1880-1940*. Toronto: University of Toronto Press
- Luxely, J., DeRiviere, L., Prakash, T., Blackstock, C., Wien, F., & Thomas Prokop, S. (2005). *WEN:DE The Journey Continues: The National Policy Review on First Nations Child and Family Services Research Project: Phase Three*. Retrieved January 26, 2009, from <http://www.fncfcs.com/docs/WendeJourneyContinues.pdf>
- MacKinnon, K.A. (2008). Labouring to nurse: the work of rural nurses who provide maternity care. *The International Electronic Journal of Rural and Remote Health Research, Education, Practice and Policy* 8, 1047. (online) http://www.rrh.org.au/publishedarticles/article_print_1047.pdf
- National Aboriginal Health Organization. (2007). *About NAHO*. Ottawa:NAHO. (online) <http://www.naho.ca/english/about.php>
- National Aboriginal Health Organization. (2002). *Improving population health, health promotion, disease prevention and health protection services and programs for aboriginal people: recommendations for NAHO activities*. Ottawa:NAHO.
- National Council of Welfare. (2008a, December 10). Press Release. Retrieved December 19, 2008, from <http://www.ncwcnbes.net/documents/newsroom/2008DecPressreleaseE.pdf>
- National Council of Welfare. (2008b). *First Nations, Métis and Inuit Children and Youth: Time to Act*. Retrieved December 19, 2008, from <http://www.ncwcnbes.net/documents/researchpublications/ResearchProjects/FirstNationsMetisInuitChildrenAndYouth/2007Report-TimeToAct/ReportENG.pdf>
- National Council of Welfare. (2008c). *Welfare Incomes, 2006 and 2007. Vol. 128*. Retrieved December 19, 2008, from <http://www.ncwcnbes.net/documents/researchpublications/OtherPublications/2008Report-WelfareIncomes2006-2007/Report-WelfareIncomes2006-2007E.pdf>
- National Council of Welfare. (2007d, September 18). Press Release. Retrieved December 19, 2008, from <http://www.ncwcnbes.net/documents/researchpublications/ResearchProjects/FirstNationsMetisInuitChildrenAndYouth/2007Report-TimeToAct/PressReleaseENG.htm>
- Native Women's Association of Canada. (2007). *Reclaiming Our Way of Being: Matrimonial Real Property Solutions Position Paper*. Retrieved December 19, 2008, from <http://www.nwac-hq.org/en/documents/NWACMRP.pdf>
- Paradis, S. (2007, July 2). Residents Live in fear due to lack of Police. *Timmins Daily Press*, p. 1
- Point, R.v. (1957). 22 W.W.R. p. 527.
- Public Safety Canada. (2006). *An investigation into the formation and recruitment processes of Aboriginal gangs in western Canada*. Retrieved from http://www.publicsafety.gc.ca/res/cor/apc/abor_gangs-eng.aspx
- Public Safety Canada. (2007). *First Nations Policing Policy*. Retrieved December 21, 2008, from <http://publicsafety.gc.ca/pol/le/FNPP-en.asp>
- Quann, N. & Trevethan, S. (2000). *Police-Reported Aboriginal Crime in Saskatchewan*. Ottawa: Statistics Canada – Catalogue no. 85F0031-XIE.
- Royal Commission on Aboriginal Peoples. (1996). *Report of the Royal Commission on Aboriginal Peoples. Vol. 1-5*. Retrieved June 16, 2009, from <http://www.ainc-inac.gc.ca/ap/index-eng.asp>
- S.C. (1850). *An Act for the Better Protection of the Lands and Property of the Indians in Lower Canada*. C. 42, s. 5.
- Saskatchewan. (2004). *Commission on First Nations and Métis Peoples and Justice Reform: Final Report Legacy of Hope An Agenda for Change*, Vol. 1, pp. 1-2, 8-24, Retrieved March 21, 2009, from <http://www.justicereformcomm.sk.ca/>
- Statistics Canada. (2004a). *CANSIM, Table 051-0001*, Centre for Criminal Justice Statistics



History Matters

Understanding the relationship between governance and communities in crisis is not simply a matter of defining and measuring indicators and/or causal factors. Understanding the relationship between governance and community wellness in its contemporary manifestation requires one to see beyond the gaps in the literature and to look at the historical relationship between governance and community well-being. Doing so provides a foundation for understanding both this relationship and the continued existence of communities in crisis, for it allows us to see how the destruction of indigenous systems of governance continues to impact community wellness and a community's ability to cope with crisis.

It is important to begin this conversation with a discussion of (traditional) indigenous governance or that which existed as the political system before it was officially replaced by the Canadian government (often with brutal force). Likewise, it is important to begin with an understanding that indigenous political systems are exceedingly different from those which were developed in Europe (such as the Canadian adaptation of the Westminster model). European systems of government were designed by, and designed to maintain the privilege and power of those 'superior beings' who claimed dominion over the earth and the right to rule other humans. They are systems of hierarchy, power and authority. Meanwhile, within the parameters of indigenous thought, governance is an expression of "the way in which a people lives best together' ... as a part of the circle of life, not as superior beings who claim dominion over other species and other humans" (Ladner, 2003a, p. 125). Indigenous political systems were and are complex structures of governance that were defined and created by each nation within a specific territory. The Blackfoot Confederacy, for instance, created a complex web of clan, society and bundle structures of governance at the sub-national, national and confederal levels, each of which operated within its set area of responsibilities or jurisdictions and in a manner defined and confined by their own constitutional order.¹

Each of these constitutional orders provided for a system of responsible government that had the tools, jurisdictional authority and capacity to address the needs and aspirations of the nation and its subunits or constituent communities. Meaning indigenous systems of governance had the capacity, tools and authority to deal with situations of crisis within their communities. For instance, the complex web of Blackfoot systems of governance provided for a constitutionally defined system of situational leadership whereby specific societies and their leaders were given

the responsibility for dealing with specific crises and/or situations such as war, the moving of camp and the buffalo hunt. As institutions of governance, these societies had very specialized skills/tools, authority and capacity that enabled good governance and good leadership that saw communities through challenges and moments of crisis without allowing the crisis to define or overtake the community. Just as in other indigenous political systems, these specialized institutions (societies in the case of the Blackfoot) were constitutionally defined and confined as was their authority and capacity. So too was their relationship to the community – institutions were responsible and accountable, and operated in accordance with consensual governance as it was operationalized and institutionalized in each nation's political system.

There are many examples of community histories which tell of the time at which indigenous political systems were established. Most of these histories shed light on the impetus for political change or the events/situations which created the movement (led by individuals and/or through a community process) which led to the adoption of a new political system. What is most interesting for the purpose of this paper and understanding the relationship between self-determination and community wellness/communities in crisis is that the impetus for political change was a situation that is best defined as communities in crisis.

For example, the Haudenosaunee constitutional order (Kayanerenko:wa) was brought to the constituent nations by the Peacemaker at least a thousand years ago during what is described as "dark and troubled times" (Alfred, 1999). The political system, forged in crisis and blood-feuds, responded directly to the situation at hand. It was an attempt to respond to and overcome the state of community crisis based on a message of peace, power and righteousness. Further, this system provided the tools necessary to ensure against the return of those "dark and troubled times" such that a consensus based confederal governance was created as a means of maintaining peace within and among nations and a political order was established based on an understanding of "the way in which a people lives best together" (Monture, 1999).

Because indigenous governance "traditionally" was, by and large, viewed in terms of creating peace and living the best way possible (as people and as nations) together and within a territory, it is not surprising that indigenous systems of governance had the flexibility, adaptability and the capacity to respond to community needs – including those that developed in response to colonialism. Even with all of the chaos, crisis and community breakdown that resulted from colonialism, many indigenous systems of governance (if not the vast majority) proved able to provide



sharing, and mutual responsibility) which, when taken as a whole, would ameliorate crises in communities and facilitate community wellness. Though RCAP spends much time developing models and explaining why self-governance is essential for developing capacity and meeting community needs and aspirations, it never fully explains the relationship between governance and community well-being, or how increased self-determination impacts communities in crisis. It is simply assumed and asserted but never measured and no indicators for measurement are advanced.

Beyond the RCAP, there has been little written on the nuts and bolts of implementation. Instead, a growing body of literature had developed in law and politics that engages theoretical debates pertaining to matters of constitutionality (jurisprudence and legal, historical and political justification) and scope. Much of this literature, including the work of Henderson (1994, 1996, 2000, 2006, and 2007), Ladner (2001, 2003a, 2003b, 2003c, and 2009) and Borrows (1994, 1997 and 2002) – not to mention the work of Barsh and Henderson (1996), Little Bear, Boldt, and Long (1984), Brock (2004), and White (2002) – does not directly address the impact of self-determination on communities in crisis. For instance, Henderson's work on indigenous governance and self-determination has largely focused on ideas such as treaty federalism, Aboriginal tenure and dialogical governance while encouraging the rebuilding of nations, indigenous legal orders, treaties, and the treaty relationship through constitutional law. While not the focus, Henderson's work does address the disconnect between indigenous histories, laws and cultures and the imposed system of colonial rule (the *Indian Act*). Although he does not discuss in any measurable way the impact of increased self-determination on community wellness a dramatic impact seems to have been taken as a given.

Though most of the scholarship does not, there are several key authors who have more substantively joined the discussion of self-determination and its scope and justification of self-government with a discussion of community wellness and consideration of the impact of self-government on communities in crisis. For instance, in their attempt to explain Aboriginal history and demands of self-government to Canadians, Mercredi and Turpel (1993) framed self-government as a necessity for poor and powerless communities who lack responsible government and are unable to govern within, and respond to the needs of their communities. For them, self-governance (or increases thereof) will serve to heal communities and will create capacity (institutional and human) for communities to manage internal disputes and problems, address matters of individual and community wellness, and address issues of

dependency. In the mean time, several other scholars (Cairns, 2000; Flanagan, 2000; Widdowson & Howard, 2008) have argued that self-determination will negatively impact community wellness and thus argue that self-government may negatively affect and/or even result in situations of communities in crisis. For instance, Flanagan (2000) has argued that, self-government increases the prevalence and severity of communities in crisis by causing further marginalization, reducing the leadership and governing capacity and exacerbating poverty of Aboriginal peoples.

Stepping Beyond the Theoretical: Does it Really?

Though the vast majority of articles and reports (governmental and NGO) assume self-determination to be a worthy goal, there is little discussion of the relationship between governance and communities in crisis and/or community well-being. That said, there is a small – but expanding – body of governance literature being produced (mainly by the Harvard Project and policy institutes) that speaks directly to this issue and to the positive affect that increased self-determination has on conditions that enable/disable communities in crisis and to the relationship between self-determination and community wellness.

Equating community well-being with economic development, the Harvard Project on American Indian Economic Development contends that there is a direct correlation between good governance and economic success (community well-being) and more importantly, that nation building (defined as practical sovereignty, effective governing institutions, cultural match, strategic orientation, and nation-building leadership) is a requisite of successful economic development (Cornell, 2006; Cornell & Kalt, 1995). Beyond conceptualizing the relationship, the Harvard Project's case studies (stories from communities) demonstrate how communities in crisis can be transformed through increased self-determination (nation building) thus effectively demonstrating the power of self-determination and the importance of this relationship.

Likewise, policy institutes such as the Institute for the Research on Public Policy (IRPP) and the Canadian Policy Research Networks (CPRN) are engaging in studies which examine community wellness and its relationship with governance. In her paper for the CPRN, Abele (2004) argues that policy innovation in the form of changes to the Indian Act system of government is needed if community health is to change. Meanwhile, in publications by the IRPP, Papillon (2008) has assessed the impact that the James Bay Northern Quebec Agreement (JBNQA) and the subsequent self-government agreements have had on the quality of life



community in search of the means for economic well-being, and began to talk about and rebuild their rights as a nation (and thus, their nationhood). While tensions turned the community's attention away from rebuilding their own community to the confrontations and violence between theirs and the settler society, the initial events forged the net that links community together through rights and responsibilities and gave them the sense of shared vision and a new future for the collective.

This episode of political mobilization demonstrates that increased self-determination (no matter its location) can positively affect community well-being even when it is the traditional leadership (in this case clan mothers and "traditional"/district chiefs) that show the vision and leadership and begin to operationalize responsible government. Even though this transformation at Burnt Church was relatively short lived and the community slowly slipped back into perpetual crisis (or a perpetual state of non-resiliency and crisis), this episode of mobilization shows the tremendous impact that traditional leadership and increased self-determination among traditional peoples can have on a community's well-being.

Thus, as this example and the literature on understanding suicide in indigenous communities reminds us, it is not about effective governance (formal or state-based Indian Act band government) as an enabler of economic success that facilitates community wellness, creates resiliency and increases capacity to deal with/overcome challenges and crises. It is not simply a matter of finding a cultural match between the systems of governance and the community or integrating tradition into the political system (as the Harvard Project suggests), for this disregards the integration and/or the role of tradition in community life (Chandler & Lalonde, 2008) and the affect that this has on community wellness.

Beyond this is the fact that this ignores the role of both tradition and self-determination outside of the parameters of the "recognized" formal institutions of governance – which are in this case the state-based Indian Act system of governance. This is most important for the purposes of this paper because increases in self-determination that positively affect the conditions that enable/disable communities in crisis may involve the traditional leadership as was the case at Eskinuopitjick First Nation. Traditional leadership became the champions of change during the so-called Lobster Wars empowering the grassroots to mobilize and to take back their self-determination as individuals and as a community. Individuals were empowered, the community transformed as a sense of hope and the community was renewed as Mi'kmaw traditions of governance were reclaimed. Clan mothers, community members and the Keptins (members of

the Sante Mawiomi or Mi'kmaq Gran Council) envisioned a renewed community and actively pursued a political life separate from the Indian Act band council. In short, what they achieved in a very short time (yet unable to sustain) was to remind the community and its members of their potential rather than their shortcomings because as a community they had the strength to stand up for their rights and in so doing they held the potential to reduce dependency (in its multiple manifestations which includes political dependency) and to increase resiliency.

The potential for traditional governmental structures, philosophy and leadership to be pivotal factors in enabling/disabling communities in crisis is very much supported by the literature of scholars such as Alfred (1999) and Monture (1999). They argue that the transformation of leadership and/or institutions of governance will positively affect and even transform communities, suggesting that the impact that the resurgence of traditions, traditional leadership and traditional governance will have in terms of community wellness, in creating capacity for dealing with/overcoming crises, and in dismantling a perpetual state of crisis will be tremendous. As Kirmayer, Simpson, and Cargo (2003) suggest, self-government is a critical component of community healing or in "repairing the ruptures and discontinuity in the transmission of traditional knowledge and values, and asserting their collective identities and power" (p. 15).

As Monture (1999) argues, it is through the rebuilding of communities from the ground up using traditional infrastructure (mothers, families, clans, and governments) and indigenous philosophy (traditions) that communities can address issues of dependency on the state, transform community wellness and truly come to operate self-determination. Thus, as Chandler and Lalonde (2008) and Monture's (1999) work reminds, it is not just about the role of tradition and self-determination outside the parameters of "recognized" and/or "traditional" institutions of governance, it is the presence of tradition itself. As McBride's (2003) work on the healing journey of the Sault Saint Marie Tribe of the Chippewa points out, revitalization can have a tremendous impact on both individuals and the community as a whole. Because the healing journey of the Chippewa focused on traditional teachings pertaining to clans, clan responsibilities and the responsibilities of individuals within and to the clans, the process really had a tremendous impact on the individuals and the community as it focussed on creating awareness of one's role within the collective. This is just as John McKnight (2002) suggests, by focussing on the abilities of individuals rather than the negatives, their needs, individuals and communities can be



transformed as people learn to care for themselves and each other – reducing both dependency and crisis and increasing community capacity and resiliency.

Returning now to institutions of governance, the literature reminds us that self-determination may not have a measurable affect on community wellness and the government's ability to ameliorate (or simply lessen) the conditions that enable/disable communities in crisis. As Papillon (2008) points out, because Ottawa holds the purse-strings and the ability to set agendas and hold governments financially accountable, those communities that have negotiated self-government often face the same constraints and problems that confront Indian Act band councils – the lack of money and the lack of control over fiscal resources. This holds true even in situations where control over finances have been handed over to the indigenous government (not simply as a manager or policy administrator but as a government which is able to set and implement its own agenda), for the simple reason that most indigenous governments lack adequate resources. Thus, without dealing with issues of dependency and resources adequate for governance (not simply administration), increases in self-determination may have a negligible or even a negative effect on community wellness as governments need the resources to fund services that will address community needs. Simply put, without increased resources, self-government (or arguably, self-administration) has the potential to negatively effect community well-being as increased administrative responsibilities have not necessarily been accompanied by increased financial resources and are therefore unable to engage in “business as usual” let alone in a way that more effectively responds to community needs and aspirations. Such was the case for the James Bay Cree, who as a result, have spent much of the last 25 years trying to renegotiate self-government and its implementation (Papillon, 2008).

As Papillon, Abele and others point out, there are also institutional realities that work against self-determination and the ability of communities to enhance their resiliency and more effectively deal with conditions which enable/disable communities in crisis. Such that even if a leader or group of leaders were to emerge within the band council system who simply unilaterally exercised increased powers of self-determination (creating responsible and accountable governments), their capacity to govern with a long-term vision and/or engage and sustain long-term commitments (community development) is completely diminished by the two-year election cycle mandated by the Indian Act. While the problems resulting from the perpetual election

cycle (with a two year cycle, governments are either newly elected or preparing for and seeking an election) could be remedied with changes to the electoral system as is being proposed in Manitoba, this still leaves the Indian Act system of government virtually unchanged. Tinkering with the Indian Act will not resolve the problem. Incremental change does not address the institutional reality of the Indian Act or the fact that it was designed to facilitate the authority and control of the Canadian government (through Indian Affairs) over Indians and reserves.

Beyond this, even when self-government is supposedly achieved, leaders are confined and defined by institutional realities that also work to diminish their capacity such as the use of negotiated and delegated jurisdictions (as compared to inherent rights, indigenous constitutional orders and/or treaty federalism/constitutionalism). Leaving aside issues of fiscal dependency, the reason for this has been explained as negotiated inferiority meaning that self-government does not create a jurisdictional foundation for government that is separate from federal and provincial oversight and parliamentary supremacy (the supremacy of federal and provincial governments). Such that indigenous governments are still unable to respond to the needs and aspirations of communities and provide really creative transformative governance for they are required to meet and/or beat all federal/provincial laws in the area of influence (jurisdiction), with federal and/or provincial governments retaining the ability to rule inoperative those actions which it sees fit. Further, the Charter and the Canadian Constitution poses even more restrictions on and institutional parameters around the so called self-governing governments (Ladner & Orsini, 2005; Henderson, 2000; Ladner, 2001). With these limitations in mind, it becomes very clear that self-government as we know it is little more than self-administration, and while self-administration enhances a community's ability to address the needs, aspirations and demands of the community, its ability to do so is quite limited (though less so than those communities governed by the Indian Act).

Creating Resilient Communities

The literature postulates (typically as an assumption) that self-determination positively affects community wellness. It also shows both that institutional change is necessary to have a measurable effect but that such an effect may be negligible if processes facilitating self-determination are not adequately supported. Given this, one must ask what must be done to increase and facilitate self-determination in such a way that it positively affects community well-being and



- Ladner, K. (2003c). Treaty Federalism: An Indigenous Vision of Canadian Federalisms. In M. Smith & F. Rocher (Eds.), *New Trends in Canadian Federalism*. Peterborough: Broadview Press.
- Ladner, K. (2009 – in press). Take 35: Reconciling Constitutional Orders. In A. May Timpson (Ed.), *First Nations, First Thoughts*. Vancouver: UBC Press.
- Ladner, K. & Orsini, M. (2005). The Persistence of Paradigm Paralysis: The First Nations Governance Act as the Continuation of Colonial Policy. In *Canada: State of the Federation, 2003*. Kingston: Institute of Intergovernmental Relations, Queen's University.
- Little Bear, L., Boldt, M. & Long, J. A. (1984). *Pathways to Self-Determination: Canadian Indians and the Canadian State*. Toronto: University of Toronto Press.
- Macklem, P. (2001). *Indigenous Difference and the Constitution of Canada*. Toronto: University of Toronto Press.
- McBride, B. (2003). Aspects of Community Healing: Experiences of the Sault Sainte Marie Tribe of Chippewa Indians. *The Journal of the National Center of American Indian and Alaska Native Mental Health Research*, 11(1), 67-83.
- McKnight, J. (2002). Two Tools for Well-Being: Health Systems and Communities. In M. Minkler (Ed.), *Community Organizing and Community Building for Health*. New Brunswick: Rutgers University Press.
- Monture, P. (1999). *Journeying Forward: Dreaming First Nations Independence*. Halifax: Fernwood Publishing.
- Papillon, M. (2008). Aboriginal Quality of Life Under a Modern Treaty: Lessons From the Experience of the Cree Nation of Eeyou Istchee and the Inuit of Nunavik. *Choices*. Institute for Research on Public Policy, 14(9).
- Pocklington, T. (1991). *Government and Politics of the Alberta Metis Settlement*. Regina: Canadian Plains Research Centre.
- Ponting, J. R. (1997). *First Nations in Canada: Perspectives on Opportunity, Empowerment, and Self-Determination*. Whitby, Ontario: McGraw-Hill Ryerson.
- Royal Commission on Aboriginal Peoples (1992). *The Right of Aboriginal Self-Government and the Constitution: A Commentary*. Ottawa: RCAP.
- Royal Commission on Aboriginal Peoples (1993). *Partners in Confederation: Aboriginal Peoples, Self-Government, and the Constitution*. Ottawa: RCAP.
- Royal Commission on Aboriginal Peoples (1996). *Final Report of the Royal Commission on Aboriginal Peoples*. Ottawa: RCAP.
- Tobias, J. (1991). Protection, Civilization, Assimilation: An Outline History of Canada's Indian Policy. In J.R. Miller (Ed.), *Sweet Promises: A Reader on Indian-White Relations in Canada*, Toronto: University of Toronto Press.
- Turpel, M. E. & Mercredi, O. (1993). *In The Rapids*. Toronto: Penguin.
- White, G. (2002). Treaty Federalism in Northern Canada: Aboriginal-Government Land Claims Boards. *Publius: The Journal of Federalism*, 32(3), 89-114.
- Widdowson, F. & Howard, A. (2008). *Disrobing the Aboriginal Industry: The Deception Behind Indigenous Cultural Preservation*. Montreal & Kingston: McGill-Queen's University Press.
- Willims, P. (1982). *The Chain*. Unpublished LLM thesis. Toronto: Osgoode Hall.

END NOTES

1. Bundles are spiritual beings that contain knowledge, teachings and ceremonies. Apart from the spiritual, within the Blackfoot political system there are several major bundles that contain responsibilities for governance and in turn exist as institutions or structures of governance. These bundles are the foundation of the political system as they give it order, a political philosophy and they contain many of the laws and instructions for both government and the nation. Together with the holders of the bundles and their councils that are charged with responsibilities set forth in the bundles, the teachings, ceremonies, laws and philosophies contained in the bundles exist as a structure or institution of governance (alongside clans and societies).
2. Band councils have the ability under section 81 of the Indian Act to make by-laws in a variety of areas of interest to local governments (including traffic regulations [excluding speed], the establishment of dog pounds, the construction and maintenance of local infrastructure such as roads and ditches, and the regulation of bee-keeping) (Canada, 1989).
3. For examples see Membertou and Osoyoos First Nations.

