An Urban Organization's Approach to Aboriginal Child Welfare Practice

by

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Dissertation Submitted in Partial Fulfillment of the Requirements for the Degree of Doctor of Education

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Abstract

Twenty staff members working for an urban Aboriginal child welfare organization were interviewed and asked to describe their approach to protecting children and supporting families while following the parameters of the *Child and Family Community Services Act*, the Aboriginal Operational and Practice Standards and Indicators, and three of the Community Organization's policy and procedures manuals. This research sought a model of *best practice* for urban Aboriginal child welfare practice.

A qualitative case study method was used that incorporated the values of the four R's (respect, relevance, reciprocity, responsibility) of Aboriginal research. The challenges of operationalizing cultural practice/programming are multifold as individuals express and form their own meaning and interpretations of culture based on their unique life experiences, language(s), teachings, knowledge, protocols, relationship to specific community, relationship to land and all of creation, family history, ceremonies, worldview, and values. Nevertheless, a working definition of Aboriginal culture was defined in this research as ways of doing (the observable parts of culture that individuals express, share and/or *do*), and ways of thinking and feeling (the unobservable parts of culture that includes values, beliefs, philosophies, worldviews, and spirituality).

The findings highlight a framework of which traditional Aboriginal values formed the core foundation. Traditional Aboriginal values considered essential in engaging children and families involved with urban Aboriginal child welfare services are: respect, non-judgment, integrity, caring, belonging, humility, working from a strength-based perspective, empowerment, sharing, and trust. The participants also acknowledged the significance of and respect for Aboriginal culture, the relevance of Aboriginal peoples' history in working with urban Aboriginal children and families involved with the child welfare system, and the responsibility of the individual worker to engage in self-care and self-reflection. When workers examined, shared, and articulated their knowledge of traditional Aboriginal values, Aboriginal culture, and Aboriginal history in a responsible way to the children and families they assisted, the workers frequently witnessed positive change.

Keywords: Urban Aboriginal child welfare practice; Aboriginal culture; traditional Aboriginal values; operationalize cultural programming; social work.

This thesis is dedicated to my children, Daniel and Sydney.

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List of Acronyms

AHF	Aboriginal Healing Foundation
AOPSI	Aboriginal Operational and Practice Standards and Indicators
BCAAFC	British Columbia Association of Aboriginal Friendship Centres
CBPR	community-based participatory research
CFCS Act	Child, Family and Community Services Act
EFT	emotional freedom techniques
MCFD	Ministry for Children and Family Development
NAHO	National Aboriginal Health Organization
RAT	responsible activity therapy
RCAP	Royal Commission on Aboriginal Peoples
TRC	Truth and Reconciliation Commission

1. Introduction

We all have something to offer one another. And it's only until we all recognize what each of us, each of the colors have to offer one another, then we will find, you know our strengths in the world, so we can do more than just survive. Live in peace and harmony like it was meant to be. (Anonymous Aboriginal therapist as cited in Verburg, 2001, p. 42)

1.1. My Late Mother

My late mother was Cree from Alberta and a residential school¹ survivor.² People have told me that my mother was fluent in her Cree language. During her lifetime she gave birth to seven children. Two of her children were born before she met my father and two children were born after divorcing my father. My mother lived with us until I was 4 years old. After that, she drifted in and out of our lives until I was 11. During this period of time, we met and visited with her family on her reservation. My father moved us to another part of the city when I was 11 years old. I did not have contact with my mother or her family until I was 29 years old. I have no memories of my mother caring for us as young children. What I do remember about my mother were her sporadic visits and that she was almost always intoxicated. I strongly suspect that she was a survivor of physical, emotional and sexual abuse.

¹ From the 1840s to 1996, the Canadian government sent Aboriginal children to residential schools to be educated and assimilated to Canadian ways. Many of the children suffered emotional, physical, verbal, and sexual abuse while at residential school. The children also lost connections to family, culture, language and land (Royal Commission on Aboriginal Peoples, RCAP, 1996).

² Those children (now adults, Elders or deceased) who attended residential schools are referred to throughout this paper as residential school survivors and/or survivors.

When I reconnected with my mother as an adult, she was sober, friendly, and had a genuine sadness about her. She told me that she tried to fit in, but just couldn't. As I lived in a different province from her, we corresponded with each other through letters, until she passed away from a brain aneurism. During her lifetime she would have likely been judged by people for neglecting/abandoning her children, excessive drinking, birthing seven children with five different men, having a criminal record and being dependent on the social services system. Today, I understand my late mother's behaviors and actions (i.e., anger, violence, how she became entrapped in her addiction) in the context of colonization. The history of Aboriginal people in Canada informs us of colonial practices and policies that have been about oppression, denial and imposition; consequently my late mother's life is an example of someone who struggled personally throughout her lifetime as a result of racist and ignorant laws. Nevertheless, over the last 4 decades, positive change has transpired for Aboriginal people as they have reclaimed their culture, their identity and their pride.

Parts of my mother's life remain a mystery to me as I did not ask her certain questions while she was alive. I have wondered what would have happened to my sisters and me if my father had decided that he could not or would not raise us. Would we have been put in foster care, adopted or sent to live with relatives? What would have happened if my mother had received support to help her overcome her alcohol addiction? Would that support have included traditional Cree knowledge/culture from family members and Elders from her community? Would she have been more involved in my life and the lives of my siblings? What happened to her at residential school? What was her life like growing up on her reservation and eventually moving to the city as a teenager? And finally, why did she feel that she did not fit in? I now recognize my mother's personal history as one that was negatively influenced by the Canadian political and colonial systems; systems that have also affected my life, the lives of my siblings and the lives of our children.

I tell my mother's story as her life deeply influenced this research and the work I do today. I currently provide counselling services to residential school survivors and their families. The counselling work I do today is very gratifying, for I get to sit with our people, listen to their stories, and do my best to guide them through their pain and sorrow to healing. It is different work from other social work roles, as the people who

come forward to see me are doing so of their own free will. I have a great admiration for social workers who work in systems where the reverse is true, and it is mandatory for 'clients' to report to and/or see a social worker. This admiration of mine became reality when I began as a student in the EdD program and then sought out a research partnership with an urban Aboriginal child welfare organization where the majority of clients have a mandatory obligation to speak with, work with, and/or report to social workers.

This research study discusses the approach used by 20 staff members of an urban Aboriginal child welfare agency in engaging Aboriginal children and families in the areas of guardianship, family preservation and reunification, and residential resources. This organization has requested anonymity, as the Chief Executive Officer (CEO) provided the following reasons:

(a) the organization is an urban agency on Coast Salish territory serving children, youth and families from over 50 distinct cultural groups across North America. At the time of this research, the community organization was just beginning to formally define their cultural practices, (b) the organization did not want to situate itself in a position of expert knowledge but from a place of *unearthing knowledge* from diverse knowledge keepers/Elders in defining cultural practical during this phase of cultural practices/definition, (c) the organization would like to remain committed to a deeper understanding of urban child welfare practice by continually seeking guidance from knowledge keepers/Elders and their Board for future directions.

(Community Organization CEO, personal communication, February 9, 2012)

I made the decision to simplify a name for the organization, by referring to it as the Community Organization throughout this paper.

1.2. Need/Purpose for the Study

Through a mutual contact, I was informed that the CEO of this Community Organization might be interested in a research partnership. I called the CEO and set up a meeting time to formally discuss our shared interests. The CEO agreed that their organization and others may benefit from a community-based research design that answered the following question:

• How does an urban Aboriginal child welfare agency operationally define cultural programming in their approach to protecting children and supporting families within their role as a delegated agency under the *Child, Family and Community Services Act* (*CFCS Act*, 1996)?³

The need for this study came about as a result of my discussion with the CEO. We both agreed that documenting the approach used by staff in their work with Aboriginal families may help articulate and operationalize cultural approaches for urban Aboriginal child welfare practice. Our supposition was that this may contribute to a best practice model from the perspective of staff that had experience working with families in an urban Aboriginal child welfare context. While the Community Organization was not delegated to apprehend children (i.e., child protection) at the time of the interviews, they maintained child welfare responsibilities in three areas:

- *Guardianship.* Responsible for the care, custody and guardianship of children under the *CFCS Act* (1996);
- *Residential Resources.* Actively recruits and supports Foster Families who take care of children in care under the *CFCS Act* (1996); and
- *Family Preservation.* Provides support for families who may be at risk for having their children removed or provides support for families whose children are already in care.

In consultation with the CEO, it was decided that there was a need to document the practical delivery of urban Aboriginal child welfare services in this Community Organization to understand how workers were supporting/strengthening Aboriginal families and children in a culturally-appropriate way. This need corresponded with the mission of the Community Organization (2009), "to provide holistic service delivery that culturally and spiritually strengthens Aboriginal families" (p. 1). As well, the British Columbia Ministry of Children and Family Development (MCFD) require that the Community Organization meet specific operational standards. From the *Aboriginal*

³ Terms are defined in Section 1.4 "Terminology."

Operational and Practice Standards and Indicators (AOPSI) manual (MCFD 2005), Standard Number 11 is "preserving the identity of the child in care and providing culturally appropriate services" (p. A-21). This necessitates the child welfare worker to "preserve and promote the cultural identity of the child in care and provide services sensitive to the child's views, cultural heritage and spiritual beliefs" (p. A-21). AOPSI also provides four standards for social workers in delivering culturally-appropriate service for Aboriginal children and families. Thus this research study sought to document and discuss how child welfare workers strengthen Aboriginal children and families through culturally-appropriate programming/practice. The practice model that emerged from the perspective of the 20 child welfare workers interviewed in this Community Organization centered on specific traditional Aboriginal values (e.g., respect, caring, humility, integrity, sharing) and highlighted the importance of:

- 1. culture (includes ceremony, traditional teachings and knowledge, traditional values, spirituality, worldview),
- history (understanding the history of Aboriginal people in Canada is crucial for people working in Aboriginal child welfare organizations and communities),
- 3. individual workers (practicing self-care by balancing positive emotional, intelligent, physical, and spiritual needs), and
- Aboriginal families and children (individual staff worked from a values framework that positively assisted and supported the urban Aboriginal families and children they served while working within the parameters and policies of the *CFCS Act*, the *AOPSI* manual (MCFD, 2005), and the policy manuals of the Community Organization, 2003, 2004, 2009).

1.3. Rationale

The British Columbia Provincial Health Officer (2009) reports that in 2007, 1 of the 10 worsening trends (of 64 health indicators) in the overall health and wellness of Aboriginal people in the province of British Columbia is the high proportion of Aboriginal children in care as a percentage of all children in care. The report states that 4,647 Aboriginal children were in Ministry care in 2009. This means that approximately 1 in 20 Aboriginal children are in Ministry care, or 50% of all children in BC Ministry care are Aboriginal (MCFD, 2002). The Aboriginal Advisory Committee (2002)⁴ to the MCFD recognizes that the large number of Aboriginal children in care must be reduced, and children returned to their home communities as appropriate. Therefore, one aim of this research was to explore culturally-appropriate services that may help reduce the likelihood of Aboriginal children coming into long term care.

1.4. Terminology

Terms and acronyms are defined that are used throughout this study:

- Aboriginal people in this research generally refers to First Nations people who are defined as *Indians* under the *Indian Act* (1876). There are over 600 distinct cultural First Nations across Canada with approximately 53%⁵ of Aboriginal people now living in urban areas.
- Aboriginal Operational and Practice Standards and Indicators (AOPSI) is a complete manual with operational and practice standards that guide Aboriginal child welfare practice. AOPSI was completed in 1999 (revised 2005) and is currently used by Aboriginal child welfare communities and organizations across British Columbia.
- **Best practice.** Practice standards guided from an Indigenous worldview⁶ with respect to Aboriginal child welfare practice, best practices are those sought through cooperative sharing between First Nation delegated agencies, urban Aboriginal delegated agencies and Métis delegated agencies, the Province of British Columbia and the Department of Indian and Northern Affairs Canada (AOPSI; MCFD, 2005). Kishk Anaquot Health Research (2003) describes best practice as "a promising practice or an activity that appears to work well and can easily be adapted to a variety of contexts. In no way is the term *best*

⁴ The Aboriginal Advisory Committee consists of representatives from the following organizations: United Native Nations, Métis Provincial Council of British Columbia, First Nations Summit; with support from the Assembly of First Nations [BC Region], BC Association of Aboriginal Friendship Centres, Federation of Aboriginal Foster Parents, First Nations Agency Directors Forum, and Native Courtworker and Counselling Association of BC.

⁵ From the 2006 census compiled by Statistics Canada, there are 1,172,790 Aboriginal people living in Canada. Of the 1,172,790 Aboriginal people: 308,490 live on reserve; 240,825 live in rural areas; and 623,470 live in urban areas (Statistics Canada, 2011).

⁶ A full description of an Indigenous worldview is explained in Chapter 3.

to be understood as the only way nor should its use engender competition between project teams or communities" (p. 66).

- Child welfare workers is a broad term that defines people who work to ensure the safety and well-being of children, and the strengthening of families. In this research study, the participants worked in three areas of child welfare practice: Guardianship, Residential Resources, and Family Preservation. While child protection is closely related to all three areas of child welfare practice, the Community Organization was not delegated to remove children at the time of interviews. In this study, adoption is not part of the broader term of child welfare.
- Child, Family and Community Services Act (CFCS Act; 1996) is the legislation in British Columbia that helps protect children from abuse and neglect, and regards their safety and well-being. It is administered by the MCFD and Aboriginal delegated agencies who have assumed their responsibility under this legislation.
- Community Organization is the urban Aboriginal child welfare organization in the Lower Mainland of British Columbia referred to throughout this document. The Board and CEO of the Community Organization (2009) capture their vision statement as "a balanced and harmonious Aboriginal community" (p. 1) Their corresponding mission statement commits "to provide holistic service delivery that culturally and spiritually strengthens Aboriginal families" (p. 1). The five guiding values of the Community Organization are: respect, integrity, belonging, humility, and strength-based practice (Community Organization, 2009).
- **Indigenous** refers to Indigenous peoples worldwide and the shared experiences of colonization.
- Ministry of Children and Family Development (MCFD) is the formal government department in British Columbia that provides various service and programs for children, youth, parents, adults, and families.
- **Traditional/traditions.** "When we say 'tradition' in our communities, we are referring to values, philosophies and lifestyles that pre-date the arrival of the Europeans, as well as ways that are being created within a larger framework of Euro-Canadian culture, or in resistance to it. The values and symbols that we use as we move through these processes can be as true today as they were five centuries ago" (Anderson, 2000, pp. 35-36).

1.5. Overview

Chapter 1 introduces the dissertation subject, purpose, and emerging model based on participant findings. Chapter 2 discusses the role that colonization played in the undermining of Aboriginal culture and family structure, while linking it to the current status of Aboriginal children in care. Chapter 3 reviews the literature on the relationship between culture, personal health, and healing as methods of responding to the challenges identified in Chapter 2. Chapter 4 presents the research methodology used to document the Community Organization's approach to urban Aboriginal child welfare practice to assist in defining and operationalizing cultural programming and practices. Chapter 4 also includes a review of the policies and procedures that child welfare workers must adhere to while working in a British Columbia Aboriginal community/organization. Chapter 5 presents the findings and the succeeding model for culturally-appropriate practice specific to this Community Organization. Chapter 6 discusses the conclusions stemming from this research and includes recommendations to inform best practice for urban Aboriginal child welfare organizations. Chapter 7 provides my final thoughts.

Throughout this research, I have been aware of Lawrence's (2004) statement: "how mixed-blood urban Native people understand and negotiate their own identities in relation to community and how external definitions and controls on Indianness have impacted their identities" (p. 1). In writing this thesis, I speak from my voice, experiences, and knowledge, when appropriate, and take full responsibility for my words. I am aware of how I have negotiated and continue to negotiate my identity as an Aboriginal person—specifically one of mixed-blood Cree from Alberta. I do not speak the Cree language, nor did I grow up with traditional Cree teachings. However I have been blessed with many Aboriginal teachers and in this study offer that which has been shared with me both throughout this research and my life. I also recognize that as a human being I have biases and, in having *inside* knowledge of Aboriginal culture, worldview, values, etc., I have done my best to remain curious, yet objective, in maintaining research credibility. An example of such bias would be my strong belief in Indigenous wisdom and I have thus sought to bring forth other credible and scholarly Indigenous voices, knowledge, and concerns to substantiate this work and constrain my own bias.

2. Colonization

Until you understand that your own culture dictates how you translate everything you see and hear you will never be able to see or hear things in any other way. (Ross, 2006, p. 4)

The 1986 Australian film, Babakiueria (2010) is a satire on colonization reversing the roles and power structure of Indigenous Australians and European Australians. The film portrays negative stereotypes of white people (i.e., European Australians) as being lazy, drunkards, unreasonable, and incapable of making informed decisions. The commentator is an Indigenous anthropologist who is fascinated with white people and their culture. The anthropologist lives with a white family for 6 months, so that she can study and firmly understand who the white people are and how they live. She features the family in their daily life (work, eat, play), in their family relationships, and comments on their strange cultural customs. The anthropologist also interviews Indigenous government officials and other Indigenous people about the somewhat bizarre behavior and actions of white people. The anthropologist is sympathetic to change within the family when government officials lawfully remove a child from this white family to be properly educated in the Indigenous system. She is concerned again when officials relocate the family to a geographical location that they have deemed to be in their best interest. The Indigenous anthropologist witnesses resistance to these incumbent changes from the son of the white family who verbalizes his frustration. By depicting European Australians in a subordinate role, this film forces the spectator to examine their views about the detrimental impacts on a displaced group, resulting from power structures imposed by the colonizing forces.

In my role as an instructor, I have presented this film to students (both Aboriginal and non-Aboriginal students) studying Aboriginal health issues as a way of helping them understand colonization. In my efforts to generate discussion and awareness amongst my students about colonization and the impacts, there was a multitude of responses and concerns about this film. The students expressed their anger, frustration, sadness,

indifference, discomfort, and some also expressed disbelief. In particular, I wanted the students to be aware of the following themes presented in this short film: the harmful impacts of government policy at the family level, the absurdness and justification of government policy decisions, the resistance of the people to whom those policy decisions were imposed, and the disrespectful treatment and judgment of people who are culturally different. I realize now that some of the students had difficulty relating the process of colonization to their own experience, as (paraphrased from the opening quote in this chapter) their own culture and worldview dictated how they heard, saw, and processed the film. Colonization is a complex process and one that generally excludes the resistance of those being colonized. Kennedy and Blauner refer to the complexity of colonization in seven parts:

- 1. The incursion of the colonizing group into a geographical area,
- 2. The destructive effects on the social and cultural structures of the indigenous group,
- 3. and 4. Interrelated processes of external political control and economic dependence,
- 5. The provision of low-quality social services in areas such as health and education,
- 6. and 7. Social interactions between the two groups generally refer to racism and the establishment of a color-line. (Kennedy & Blauner as quoted in Frideres & Gadacz, 2008, pp. 3-5)

These seven parts of colonization have negatively permeated the lives of Aboriginal people in Canada at the individual, family and community levels. Nevertheless, Aboriginal people have resisted colonial pressures by: demonstrating through protests and lobbying; withdrawing or removing children from residential/manual-labour schools; discussing their objections to those in power; and ignoring the law (Frideres & Gadacz, 2008; Kelm, 1998; Miller, 2000). Alfred (2009) asserts, "without a good understanding of history, it is difficult to grasp how intense the European effort to destroy indigenous nations has been, how strongly Native people have resisted, and how much we have recently recovered" (p. 25). The focus of this chapter will highlight the destructive effects of colonization on Aboriginal people, as well as its present-day effects on health, spirituality and culture. The next section of this chapter begins by examining traditional Aboriginal life prior to European contact, focusing on First Nations in British Columbia.

2.1. Pre-Contact

Today there are over 200 First Nations in the province of British Columbia, with 7 of the 11 language families across Canada spoken in British Columbia. There were (and still are) clear differences in language, cultural procedure and protocol, and social organization amongst Aboriginal communities in British Columbia. Many similarities were (and still are) found in values, belief system, and spiritual worldview. The following description of traditional life could be attributed to First Nations across British Columbia (and Canada):

For thousands of years, each generation learned the lessons of Turtle Island from preceding generations. The ancient wisdom, the traditions, rituals, languages and cultural values were passed on and carried forward. In this process, a primary role was played by the Elders, the Old Ones, the Grandmothers and Grandfathers. As individuals especially knowledgeable and experienced in the culture, they were seen as those most closely in touch with the philosophical teachings of life lived in harmony with the Creator and creation....Guided by the teachings of the Old Ones, the people survived and flourished. Great nations coexisted. Extensive trade networks thrived. Alliances and confederacies formed for mutual interest, and complex international relationships emerged. Compatible attitudes toward the Creator and Mother Earth formed the basis of agreements among nations. Rules of conduct, whether in peace or in war, governed behavior.

(Royal Commission on Aboriginal Peoples, RCAP,⁷ 1996, Volume 4, Chapter 3)

Elders contributed in a very significant manner to life through their practical, cultural and spiritual knowledge. They shared and willingly gave of their time and their teachings. Healthy Elders in the traditional way were known to appreciate the goodness in all people, even if the actions of those individuals were inconsistent with respect for others.

⁷ The RCAP's purpose was to review and make recommendations regarding the unjust relationship developed over decades between Aboriginal people and the Canadian government. The Commission was also to propose solutions to ongoing challenges in Aboriginal communities. RCAP proposed 440 recommendations in rebalancing the political and economic powers between Aboriginal people and various levels of Canadian governments.

While there were natural and humanistic challenges, most of our people understood the importance and advantages of working as a collective. Helin (2006) from the Tsimshian Nation on the Northwest coast of British Columbia describes *elements* that contributed to the livelihood and culture of Aboriginal people in British Columbia before European contact. These elements included "self-reliance, self-discipline, moral leadership, complete interdependence and teamwork" (p. 86). The elements of selfreliance and self-discipline were realized in daily roles and responsibilities. Helin (2006) noted that our "tribes were fiercely self-reliant because they simply had to be—there was no alternative that did not involve starvation and demise" (p. 82).

Moral leadership was crucial to our survival and leaders likely utilized these four themes: (a) Living the teachings of our ancestors, (b) dedication to the Aboriginal community, (c) knowledge of the past, and (d) support to others (Hately, Pinnow, & Small, 2002). For the survival of our communities, leaders had to be dedicated to their people as a collective, honor the values and teachings passed on from their ancestors, and provide guidance in social and political spheres. The current Lieutenant Governor of British Columbia, Judge Steven Point (Sto:lo Nation) discussed Aboriginal Leadership in an Education 960 class on March 11, 2005. He spoke of the Aboriginal worldview and what was [is] required of a contemporary and traditional moral Aboriginal leader: (a) awareness (of self, systems, worldviews), (b) learn lessons (e.g., leader should be humble, honest, "walk their talk"), (c) apply lessons, and (d) teach or demonstrate (pass on information, share as an Elder would). Alfred (2009) uses the following Indigenous analogy to signify moral leadership in the spirit of teamwork and interdependence:

I like to think of indigenous leadership in terms of the relationship between the drummers, singers, and dancers at a pow-wow. The drummers and the singers give voice to the heartbeat of the earth, and the dancers move to the sound, giving life to their personal visions and to those of their people. The drum prompts and paces. Drummers, singers, and dancers act together to manifest tradition through the songs. All three groups are essential and related; the role of each group being to respect and represent the spirit of the creation in its own way, according to its own special abilities. (p. 115)

The collective elements of interdependence and teamwork relied on individual members to work in a cooperative effort for the benefit of the entire community. Green (2009)

describes a community effort using oolichan fishing: "Everyone's role at the oolichan camp was and is deemed of equal importance and value. The preparation was done collectively, each according to their age and abilities" (p. 229). Atleo (2004) provides his example of interdependence in his home community of Nuu-chah-nulth on Vancouver Island:

A specific Nuu-chah-nulth teaching associated with the idea of community is that if one doesn't ask for help when help is needed, then one is not friendly, one is not kind. One is not aphey....Consequently, a person in need is taught and encouraged to depend upon neighbours, and this interdependence is considered one of the strengths of a traditional Nuuchah-nulth community. (p. 12)

Teamwork was demonstrated through dedicated activities that were undertaken for the survival of the group. People generally worked in an organized fashion to gather, hunt and preserve food. While the threat of starvation was a factor, Aboriginal people in British Columbia traded food for other goods and held cultural feasts (Haig-Brown, 1988; Kelm, 1998).

The comparative values, beliefs and worldview of Aboriginal people stem from traditional beliefs in the interconnectedness of all living things and the respectful relationships developed with self, others, nature, land and the Creator. Traditionally, individuals sought to be self-reliant and practice self-discipline for the collective good of the community. Collectively, we relied on our interdependence and teamwork to survive and flourish. Elders provided moral guidance to those who would lead. This was our way of life and in part, represented our culture.

2.1.1. Children

First Nations across North America agreed that children were sacred beings. Our children were highly valued, loved, nurtured and cherished in our traditional communities (Fournier & Crey, 1997; RCAP, 1996; Reid, 2009; Swinomish Tribal Mental Health Project, 1991; The Northwest Indian Child Welfare Institute, 1986). Children were raised with important teachings about respectful conduct and behavior with others and nature. Elders played a large role in the upbringing of children (Archibald, 2008b; Fournier & Crey, 1997). A strong belief within Aboriginal communities regarding the

central importance of children and family has remained despite extensive vicissitudes to Aboriginal culture brought about following European contact. A further examination of these changes that accompanied European settlement is vital to a more comprehensive understanding of the current health and social challenges facing our communities.

2.2. Post-Contact

Contact refers to the encounter between Canada's Aboriginal and European peoples nearly 500 years ago. The first European explorers arrived in Eastern Canada looking for land and possible trading routes to the Far East. Both contact and colonization occurred at different times in different provincial and territorial regions of Canada. Miller (2000) and Frideres & Gadacz (2008) note that the respective patterns of colonization began their emergence in British Columbia in the late 1700s. These three historians (i.e., Miller, 2000; Frideres & Gadacz, 2008) provide a thorough chronological history of Canada post-Contact. However, in the context of this discussion, a brief summary will be provided outlining the complexity of the evolving relationship between Aboriginal and European people. This historical context provides a framework for understanding how commissioners from the 1996 RCAP concluded that "the main policy direction, pursued for more than 150 years, first by colonial then by Canadian governments, has been wrong" (Aboriginal Affairs and Northern Development Canada, "A Word from Commissioners," para. 5). As will be argued, government policies were erroneous for the following reasons: (a) the imposition of European values and customs; (b) the deliberate dismantling of our culture and spirituality; (c) the attempted disintegration of Aboriginal families and communities; and (d) the total indifference in helping our children who were separated from family/community, especially those children that were abused sexually, physically, emotionally and mentally in the residential school system or while under government care.

At first contact, Aboriginal people assisted and supported the Europeans' transition to this land in order to help them survive the harsh climate and conditions. Aboriginal people helped by providing food, shelter and guidance about the land to the Europeans. Extensive mutual exchange soon followed and the building of political alliances, largely through inter-marriage. Aboriginal people in Eastern Canada (then

called Upper Canada and Lower Canada) were military allies for both the British and the French (Frideres & Gadacz, 2008; Miller, 2000). After the War of 1812, the military importance of Aboriginal people decreased, as there were no other major wars to fight. The once cooperative relationship between government officials and Aboriginal people began to change. It took a severe turn for Aboriginal people as we were now viewed as barriers to Western economic progress. The government of the day wanted to control the vast lands which were rich in resources, and populate the lands with European immigrants. Until land ownership and resource issues were settled, the government of the day could not move forward in their plans. In 1830, the now reigning British government began to formalize governing policies towards Aboriginal people (Frideres & Gadacz, 2008; Miller, 2000). Legal measures were undertaken to begin the process of solving the barriers to economic progress (i.e., the "Indian problem") by assimilating Aboriginal people into mainstream society. Three key acts established the assimilative intentions of government of Indians; and the 1876 Indian Act.

2.2.1. 1857 Gradual Civilization Act

Commonly referred to as the 1857 *Gradual Civilization Act*, the *Act to Encourage the Gradual Civilization of Indian Tribes in this Province, and to Amend the Laws Relating to Indians* stipulated that adult Indian men of good and moral character consider becoming British citizens through a process called enfranchisement. This was an example of the British imposing their *superior* values by defining and judging the character of individual Indian men. Enfranchisement meant giving up legal status/entitlements as Indian people. As an incentive to this process, the government promised 20 hectares of reserve land to those male Indians who enfranchised. This act did three things: (a) it paradoxically created legal distinctions between *Indians* and Europeans (the government wanted Indian people to be enfranchised, not have special status); (b) it did not live up to the intent of the 1763 Royal Proclamation,⁸ whereby reserve lands were meant to be dealt with only by the crown; and (c) it was the catalyst for the creation of Indian identity based on a legal definition. From the standpoint of the government, the act failed miserably, as only one Indian man applied for enfranchisement (RCAP, 1996; Miller, 2000). The *1857 Gradual Civilization Act* indicated the first formal attempt by the reigning government to assimilate Aboriginal people into their society.

2.2.2. The 1869 Gradual Enfranchisement Act

Commonly referred to as the 1869 *Gradual Enfranchisement Act*, the *Act for the Gradual Enfranchisement of Indians* was another policy put forth by the Canadian government to ensure the integration of Aboriginal people into a European value system. Individual bands were now required to elect their leaders based on a municipal-style government, rather than the traditional hereditary system of chiefs. Government officials were legally given the power to remove an elected chief for dishonesty, intemperance or immorality. As well, the government wanted to remove community owned reserve lands by encouraging Indian men to obtain a "location ticket" for their individual share in a plot of reserve land. Furthermore, Indian women who married non-Indian men were displaced of their legal Indian status and rights through the official removal of their Indian status. The same stipulation was not accorded to Indian men (RCAP, 1996; Miller, 2000). The changes brought about by this act undermined the traditional way of life by imposing a foreign system in the selection of Chiefs. This act also enforced patriarchal norms from Europe by stripping Aboriginal women to purchase individual reserve lands.

⁸ The legal framework for making treaties with First Nations in the last 250 years is the *Royal Proclamation* of King George III. It was issued in 1763, four years after the defeat of France, and established strict procedures for British territorial expansion in North America. Regarded by Canada's First Nations as their *magna carta*, the proclamation recognized them as nations and stipulated that only the British government could acquire their lands, thus preventing acquisition by private individuals or companies. And the only means by which First Nations' lands could be acquired was through treaty with the Crown (Arnot, n.d., p. 3).

2.2.3. The 1876 Indian Act

Commonly referred to as the 1876 *Indian Act, An Act respecting Indians* and subsequent amendments gave legal control to the federal government to govern "Indians and Lands Reserved for Indians." Formal policies and procedures were put into place to both assimilate and colonize Aboriginal people through the *Indian Act*. Boldt (1993) summarizes the destructive nature of the *Indian Act*:

For more than 100 years, the Indian Act segregated and isolated Indians geographically (by the reserve system), socially (by prejudice and discrimination), politically (by a colonial system of administration) and legally (by the constitution and the Indian Act) from the world external to their reserves. (p. 171)

There are many examples of blatant discriminatory practices in the *Indian Act*, including: removing ancestral lands from Aboriginal people (through the reservation system), disintegrating strong family and community ties (by placing children in residential schools), criminalizing spiritual and ceremonial practices (until 1951), setting the criteria for legally defining who was/is an Indian, and prohibiting Aboriginal people from voting in federal elections until 1960. Additionally, Aboriginal women were once again discriminated against when government officials pronounced that Indian women would not have voting powers in band elections (changed in 1951) (Frideres & Gadacz, 2008; Lawrence, 2004; RCAP, 1996). These policies/practices were executed with seemingly no respect for involving Aboriginal people in any of the decisions.

2.2.4. Alcohol, Disease, Christianity

Solid non-governmental influences on our people in the post-contact era also included: the introduction of alcohol; the fatality of European infectious diseases; and the influence of Christian missionaries. Prior to 1951, alcohol consumption was not yet a "serious threat," although it did entice violence and at times, death (Kelm, 1998; Miller, 2000). Alcohol would become a much more serious issue in our families and communities after 1951.⁹ European diseases¹⁰ killed many Aboriginal people throughout Canada. Ubelaker (1988) estimates "that by about 1900, the North American Indian population had declined by over 1,364,000 persons" or 72% (p. 293). Boyd as cited by Kelm (1998) estimates that the northwest coast population in British Columbia at contact was 188,344; this population decreased 90% by 1890. Finally, missionaries and their Christian religion presented a profound influence over Aboriginal people in their core spiritual beliefs. The quest of the missionaries was to save the *savage* souls of Aboriginal people by introducing them to their deity, Jesus Christ. Tinker (1993) portrays the stories of four missionaries in the United States (John Eliot, Junipero Serra, Pierre-Jean De Smet, and Henry Benjamin Whipple) who:

arrived with a genuine interest in the well-being of Indian people and an announced commitment to bring them the gospel message of salvation. At the same time, all came with implicit, largely unspoken commitments to their own cultural values and social structures. (p. 112)

The teachings of Christ include compassion, humbleness, non-judgment and love. These teachings and their corresponding values matched well with the spiritual teachings of Aboriginal people. However, the religious dogma often taught by missionaries focused on the concept of Hell, a Creator (God) that was punitive and fearful, and that all people were born into sin. These latter teachings ran contrary to our spiritual worldview, as summarized by Elder Matthew King of the Lakota Nation (Chief Noble Red Man):

Goodness is the natural state of this world. The world is good! Even when it seems evil, it's good. There's only goodness in God. And that same goodness is in us all. You can feel it in yourself. You know when you feel good inside....Yes, you're God's child, too. You are good. You are sacred. Respect yourself. Love the goodness in yourself. *Then put*

Diseases introduced to North America include smallpox, measles, influenza, dysentery, diphtheria, typhus, yellow fever, whooping cough, tuberculosis, syphilis, various unidentifiable fevers (Waldrum, Herring, Young, & Kue, 2006, p. 49).

⁹ The 1951 amendments to the Indian Act allowed public consumption of alcohol.

that goodness out into the world! That's everybody's instructions. (Arden & Wall, 1998, p. 103)

The differences in religious teachings had significant impacts on the spiritual development of Aboriginal people. While some Aboriginal people found great comfort in the Christian religion, many chose to continue with traditional spiritual/religious beliefs and ceremonies that went *underground* for 75 years. As well, our people have described the atrocious abusive behaviors of Christians while attending residential schools. This likely caused a great deal of tension between family and community members in their core spiritual beliefs and practices, while also leaving family members wondering how their own people could find consolation in the Christian faith.

The influences of alcohol, disease, and Christianity had numerous negative effects on Aboriginal people. Alcohol began the destruction of family and communal life. At times individuals who drank alcohol to excess could not be relied upon, and the work they contributed to the community was decreased. The European diseases killed thousands of Aboriginal people—here again; our family support was diminished while people grieved their familial losses. Missionaries partnered with the federal government to formally educate our children in the residential school system. Although the agenda of the missionaries (save souls) and the federal government (assimilate and civilize) was different, the outcome changed Aboriginal people forever. The damaging effects of forced assimilation on our culture and family relationships are now explored in greater depth through the residential school system and the succeeding provincial/territorial child welfare services.

2.3. Assimilation

The forced and intrusive goals of assimilation were manifested in two very real ways in (Canada and) the province of British Columbia. The first was done through the removal of Aboriginal children from their families and communities to the residential school system from the 1880s up until 1984. The second was done through the removal of Aboriginal children from families and communities through the provincial/territorial child welfare services, from the 1950s to the present.

2.3.1. Residential Schools

Beginning in the late 1880s and ending in British Columbia in 1984, many Aboriginal children attended residential schools. Under the Indian Act (1876), attendance for status Indian children was legally required from 1920 to 1951 in British Columbia. School age Aboriginal children were removed from their family homes with or without their parents' consent and taken out of their community to a boarding school run by Christian officials (i.e., missionaries, priests, ministers, nuns) where they resided and received instruction. The various denominations of the Christian Church were given the authority by the federal government to implement their religion, and academic curriculum instruction to Aboriginal children (Fournier & Crey, 1997; Haig-Brown, 1988; Kelm, 1998; RCAP, 1996). Although the stated objective of the residential schools was teaching in reading, writing, arithmetic and the Christian religion, the underlying purpose was to ensure that "the Indian [adapted] to an agrarian lifestyle and ultimately to assimilation into a 'superior', European society" (Haig-Brown, 1988, p. 29). The prototype for residential schools in Canada was founded by U.S. Lt. Richard Henry Pratt. Pratt's method (madness!) was premised on this statement, "kill the Indian in him and save the man." This declaration was further predicated on the U.S. Government Indian policy guiding principle of Indian residential schools, "the only good Indian is a dead Indian" (Fournier & Crey, 2006, p. 147).

For many children who attended residential school they were: severely punished for speaking their traditional language and for acts of self-preservation (e.g., running away); deprived of nutritious food; harshly disciplined for any small discretion (e.g., bed wetting, not being *obedient*, not listening); and geographically isolated while at school. Many Aboriginal children were also denied access (for some it was years) to family and community members (Haig-Brown, 1988; Fournier & Crey, 1997; Ing, 2000; Kelm, 1998). Many of our residential school survivors have described their horrific experiences in the residential school system as children. The levels of abuse varied from physical beatings, verbal abuse, and/or sexual exploitation. Brave Heart and DeBruyn (1998) and Chrisjohn, Young, and Maraun (1997) state unequivocally that the residential school system was purposely set up to "kill the Indian" through a process of cultural genocide. Tinker (1993) provides a concise definition of cultural genocide: Cultural genocide can be defined as the effective destruction of a people by systematically or systemically (intentionally or unintentionally in order to achieve other goals) destroying, eroding, or undermining the integrity of the culture and system of values that defines a people and gives them life....It needs to be repeated that cultural genocide is never the ultimate goal and quite often not the overt intention but results from the pursuit of some other goal of economic gain and political dominance. (p. 6)

Testimonials from Aboriginal people concerning their residential school experiences verify the system's dismal failure in many respects. Randy Fred states the following about his experience in residential school:

I was first sexually abused by a student when I was 6 years old, and by a supervisor, an ex-Navy homosexual, when I was eight. Homosexuality was prevalent in the school. I learned how to use sexuality to my advantage, as did many other students. Sexual favours brought me protection, sweets (a rarity in the school), and even money to buy booze. But this had its long-term effects...including alcoholism, the inability to touch people, and an "I don't care" attitude. (Haig-Brown, 1988, p. 85)

Another participant using the pseudo name, Nancy, describes one of her experiences in residential school:

I got in trouble for chewing gum....It was such a minor, minor thing in my view. But I was taken into the playroom....She was a lay person. She took down my pants right in front of everybody...Can't remember whether she used her hand to spank me or whether she used a ruler or a strap...but I remember being punished. (Haig-Brown, 1988, p. 83)

Willie Blackwater has publicly discussed his residential school experience for

years:

I can talk about the sexual abuse and physical abuse and describe every detail about what happened, but that's old news to me. I've been on a healing journey with that for a long time. It's still a little bit painful, but not as much as it used to be. The most pain is with my family and the loss of our culture and our tradition.

(Smith, 2008, para. 4)

These are only a few examples of testimonials from Aboriginal people who were abused in the residential school system as children. Many more statements of residential school survivors are currently being collected by the Truth and Reconciliation Commission (TRC), discussed in further detail in section 3.1. The residential school system and the abuse endured by survivors has affected generations of Aboriginal people.

The consequences of restrictions to culture, family, food, and the harsh punishment endured are still felt today by both the survivors of residential schools and their families. Some of our survivors and the intergenerational survivors of residential school continue to experience cultural shame and/or loss of cultural identity; some have buried their pain and sorrow in substance abuse; many have difficultly forming healthy intimate relationships; and many continue to deal with the disturbing remnants of posttraumatic stress disorder (Stout & Kipling, 2003). Furthermore, direct survivors of residential school felt the loss of traditional cultural practices/knowledge from family and community. In residential school, there was no reference to Aboriginal culture, language, art, stories, history, spiritual traditions, etc. Many direct survivors (and consequently the succeeding generations) were also unprepared to parent their own children in a healthy way (Stout & Kipling, 2003). The parent models (i.e., priests, nuns, ministers) in residential school were often abusive and authoritarian. Bennett and Blackstock (2002) noted that when these children become parents themselves, they did not have the skills or knowledge to parent their children in a nurturing and kind way. Walmsley (2005) notes that in his interviews with 19 child welfare practitioners in British Columbia (both Aboriginal and non-Aboriginal); they believe that the residential school system was largely responsible for the inability of today's parents to care for and raise their own children. The RCAP (1996) summarizes the residential school experience:

The tragic legacy of residential education began in the late-19th Century with a 3-part vision of education in the service of assimilation. It included, first a justification for removing children from their communities and disrupting Aboriginal families, second, a precise pedagogy for resocializing children in the schools, and third, schemes for integrating graduates into the non-Aboriginal world.

(Volume 1, Part 2, Chapter 10)

The residential school system: disrupted our familial ties; it confused our identity as Aboriginal people; it brought up feelings of shame and denial about being an Indian;

the abuse interrupted normal processes of healthy childhood development; and it affected generations of people's self-worth, self-esteem, and self-respect.

In 1948 the federal government at the urging of Aboriginal communities and on the recommendation of the joint parliamentary committee on Indian affairs, changed their policy regarding residential schools. A new system of attendance for Indian children began in 1951 with day schools,¹¹ provincial schools and federal schools (RCAP, 1996). The old government initiative of assimilation and cultural genocide in the residential school system would soon be replaced with a new assimilative initiative that would once again, separate Aboriginal children from their culture, families and communities.

2.3.2. Aboriginal Child Welfare Practice in British Columbia

Historically, the Canadian federal government did not assume responsibility for child welfare services, as these were within the jurisdictions of the perspective Canadian provinces and territories. Any child that was being abused and/or neglected at home and brought to the attention of child welfare services, was placed in government care—either in a foster home, a group/institutional setting, or placed for adoption. In 1955 there were 29 Aboriginal children in British Columbia government care. By 1960, the number had increased to 849 and in 1964 the number of Aboriginal children in British Columbia's provincial government care had further risen to 1,446 (Johnston, 1983). Three factors stemming from amendments to the Indian Act (1876) explain how Aboriginal children entered the BC child welfare system in exponential numbers. First, the 1951 federal policy of placing Aboriginal children in schools (day, provincial, federal) allowed children much closer proximity to their communities and families than was permitted by the more remote residential schools. Aboriginal children were more visible within their community and more easily observed by community members. The inter-generational impacts of residential school were also now more noticeable. Many parents or survivors of residential school had difficulty providing caring, nourishing environments for their own

¹¹ The day school is modelled on the current public school system, where children attended daily instruction Monday to Friday and returned to their families in the late afternoon and on the weekends.

children, due to their own unmet needs in residential school. Second, Section 88 of the 1951 *Indian Act* amendment gave legal authority to provincial child welfare services to include Aboriginal children living on-reserve. Third, further adjustments to liquor laws in the *Indian Act* made in 1951 and again in 1956, meant Aboriginal people could legally consume alcohol on or off reserve (as cited in Walmsley, 2005). Hawthorn, Belshaw, and Jamieson noted that, after decades of "wild and secretive" drinking, many Aboriginal people drank alcohol to excess more openly (as cited in Walmsley, 2005, p. 21).

Excessive drinking of alcohol in our communities was one factor facing social workers who were provincially mandated to protect children from abuse and neglect. However, the policy direction which resulted in the decision to apprehend Aboriginal children into government care was likely based on previous assimilation attitudes. The *apprehension* of our children within the federal residential school system was now being replaced through apprehension of children by social workers in provincial child welfare services (Johnston, 1983). The justification for removing Aboriginal children was fundamentally based on the perception that Aboriginal children would be better off in non-Aboriginal homes/facilities that could provide "proper" housing, food and resources (Libesman, 2004; Walmsley, 2005). There was an assumption from child welfare authorities that Aboriginal families could not provide the basic necessities of shelter, food, and adequate care to their own children.

The "sixties scoop" (a term coined by Patrick Johnston) defined the decade that child welfare workers began apprehension of Aboriginal children in astounding numbers who were then placed into non-Aboriginal foster care homes/facilities or adopted into non-Aboriginal homes (as cited in Walmsley, 2005). To understand how social workers had become such a colonizing force in removing Aboriginal children from families, we need to consider the 'white privilege' mindset. Johnston (1983) argues that after the 1951 amendments to the Indian Act, social workers (at this time dominated by white workers) likely gave no thought to differences in culture, nor did they consider meeting the needs of Aboriginal families. Johnson (1983) also states that during this time, "the profession of social work was gaining in credibility, its horizons were expanding, as many held the firm belief that in such endeavours lay the answers to world problems" (p. 2). Blackstock (2009) maintains that the role of social workers during and after the 60s scoop was misguided by their intentions to "improve others" without thinking through the

very serious negative consequences of how this would impact the identity and health of Aboriginal People. Social workers had and continue to have a very influential role in the lives of Aboriginal people. While this relationship is slowly changing for the better, it is unfortunate that the negative influence of 'social workers' still permeates Aboriginal communities today.

As a result of the many Aboriginal child welfare apprehensions, the Spalumcheen First Nations of British Columbia's southern interior took action. They became the first nation in Canada to sign an agreement with the British Columbia government in 1980 to run their own child welfare services on designated Spalumcheen land. Since this agreement, over 150 Aboriginal communities and urban Aboriginal organizations across British Columbia have been working with the provincial government to run their own Aboriginal child welfare services (Walmsley, 2005).

From 1960 to 1990, the RCAP (1996) reported that over 11,132 status Indian children were adopted into non-Aboriginal homes. This did not include the number of Aboriginal children placed in foster care, nor did it include non-status Indians, Metis or Inuit people. The placement of Aboriginal children in government care was yet another act in displacing children further away from their identity as Aboriginal people, their families and communities, and their culture. This resulted in further disintegration of family ties and the erosion of the family structure within Aboriginal communities.

2.4. Contemporary Impacts to Families and Children

Decades of governmental interventions in the lives of Aboriginal people have continued to negatively impact many aspects of daily life. The *Indian Act* (1876) policies, the residential school system, and the adoption/fostering of our children into non-Aboriginal homes/facilities clearly affected our relationship with self (and identity), family, community and culture. The consequences of these affected relationships have manifested in the current rampant social and health challenges affecting so many Aboriginal people today. Poverty, addiction, mental health issues and/or family violence continue to be intrinsically linked with the high number of on-going current Aboriginal child welfare apprehensions (Bennett & Sadrehashemi, 2008). The foundation for a healthy emotional person begins with knowing and feeling they are valued, respected and loved. These characteristics are generally formed through familial relationships in the early years of life. Many of our children were denied the opportunity to feel nurtured and loved, having been removed from the care of their natural parents and placed in the residential school system and/or as wards of provincial government child welfare services. Aboriginal people who were abused in those systems have great difficulty trusting themselves and others. They continue to *act out* their emotional issues in adulthood. Freeman (1992) discusses the concept of "unfinished business" as "unresolved emotional issues from one generation to the next" (p. 36). Brave Heart and DeBruyn (1998) and Wesley-Esquimaux and Smokewski (2004) discuss the intergenerational transmission of historical trauma, unresolved grief, and the healing that is required today. Many Aboriginal people continue to act out their unfinished business, historical trauma and unresolved grief. The acting out behaviors are manifested in our communities (both rural and urban) in the high rates of suicide, alcoholism, domestic violence and unemployment.

Kelm (1998) contends that the physical health of Aboriginal people was greatly compromised and weakened in the early part of the twentieth century in British Columbia. Kelm states, "The full impact of colonization played out upon Aboriginal bodies through increasing restrictions on access to land and resources, and through intensifying interventions into their lives" (p. 18). Through our weakened physical bodies and immune system, the diseases of modernization (e.g., cancer, diabetes, substance abuse, heart and circulatory disease) slowly consumed Aboriginal people within a few generations. Weaver and Yellow Horse Brave Heart, and Mitchel and Kaufman (as cited in Lowe, 2008) argue that the HIV/AIDS epidemic is now the "new small pox" in many Aboriginal communities (p. 230). The British Columbia Provincial Health Officer's Report (2009) states:

Compared to other British Columbians, the Status Indian population is twice as likely as other residents to be hospitalized for diseases of the digestive system and external causes, such as injuries, and five times more likely to be hospitalized for mental and behavioural disorders due to psychoactive substance use.

(p. xxxii)

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Many of our physical health disparities today stem from historical government directives and are revealed at the physical level of the individual (Adelson, 2005; Waldrum, Herring, Young, & Kue, 2006). The National Aboriginal Health Organization (NAHO) lists 12 health determinants¹² that establish an individual's health. NAHO (2006) argues that Aboriginal people have additional determinants that are directly related to colonization. A useful definition of health clarifies the added health stresses due to colonization:

...the physical, spiritual, mental, economic, emotional, environmental, social and cultural wellness of the individual, family and community....A circle or wheel is sometimes used to represent the inseparability of the individual, family, community, and world. The circle embodies the notion of health as harmony or balance with the physical and social environments.

(British Columbia Provincial Health Officer, 2002, p. 10)

Aboriginal individuals, families and communities are still in the process of striving for cultural wellness, harmony, and balance. Mikkonen and Raphael (2010) noted that on the United Nations Human Development Index, Canada as a country was ranked in eighth place. Aboriginal people in Canada ranked 33 amongst other nations. This index is a comparative measure of life expectancy, education, standards of living, economic well-being and child welfare. It is important to highlight this disparity, as the on-going ramifications of colonization are still being played out with Aboriginal people's health, well-being, current social ills, and the excessively high number of Aboriginal children in British Columbia government care.

¹² The National Aboriginal Health Organization's (2006) 12 health determinants are: income and social status, social support network, education, employment and working conditions, social environment, physical environment, personal health practices and coping skills, healthy child development, genetic endowment, access to health services, gender and culture (p. 11).

2.5. Making Historical Wrongs Right

Today Aboriginal people are in the process of decolonization, both politically and culturally. Decolonization is defined as the "replacement of conventional systems with systems that reintegrate traditional aspects destroyed during colonization" (McKenzie & Morrissette, 1992, p. 127). The Community Organization recognizes the role of history and colonization in working with urban Aboriginal families and children. The Community Organization has been proactive in the deconstruction of colonization by working to be a decolonizing force in integrating Aboriginal cultural knowledge and practice in their service delivery. Furthermore, the board of directors and CEO recognize, respect and value the diversity in both the cultural identities of their staff and the children and families they serve. The Community Organization invites Elders and Knowledge Keepers who are versed in their own specific cultural teachings and knowledge to share with staff and the families they serve. Furthermore, when children are involved with the Community Organization, there is a concerted effort to engage them with Elders and Knowledge Keepers from their own unique First Nation community (Community Organization, Guardianship policy and procedures manual, 2004; Community Organization, Human Resources Policy and Procedures Manual, 2009; Community Organization, Cultural Practices Financial Policy, 2011).

In making historical wrongs right, a careful review of what works or what constitutes best practice to move Aboriginal people forward to heal from the effects of colonization is crucial. The Community Organization is aware of our history as colonized people and understands the disruption that occurred in our culture, our ceremonies, our language, etc. In balancing the need to decolonize, encourage pride in identity and culture as Aboriginal People, and in making historical wrongs right, the Community Organization understands their obligation to offer appropriate culture and knowledge. The next chapter discusses healing, culture and culturally-appropriate programming and practice.

3. Healing, Culture, and Culturally-Appropriate Programming/Practice

I believe we should share, get up and speak, do the moccasin work, talk to the people—communicate. Our culture is something I have always respected. As the Elders before me, I loved to demonstrate what our songs and dances mean. We have to keep doing this, to be proud of who we are, to show our different Nations with our regalia.

(Squamish Nation's Chief Simon Baker, Baker & Kirkness, 1994, p. 201)

The discussion in the previous chapter centered on colonization and its harmful effects on the well-being of Aboriginal people. The legacy of the residential school experience and the displacement of Aboriginal children through provincial child welfare services continue to negatively impact generations of people. One aim of this study was to investigate ways that culturally strengthens the pride, self-respect, health and dignity of Aboriginal people. This chapter begins with a definition of healing and then introduces features of traditional culture that facilitate healing. The chapter ends with a discussion on culturally-appropriate programming and practice for modern day urban Aboriginal families involved with child welfare services.

3.1. Healing

The need to heal stems from our collective colonial past that includes: emotional, physical, sexual, spiritual and psychological traumas; and the loss of many aspects of culture and separation from family/community. The inter-generational effects of trauma, loss and hurt are pervasive in Aboriginal communities across Canada. The effects are visible in the behavior of Aboriginal people that is self-destructive, abusive and harmful. Brasfield (2001) terms the negative experiences of residential school, the residential school syndrome, defined as:

Re-experiencing [trauma], avoidance, and increased arousal. The residential school syndrome diagnosis is different from that of post-traumatic stress disorder in that there is a significant cultural impact and a persistent tendency to abuse alcohol or other drugs that is particularly associated with violent outbursts of anger. The residential school syndrome diagnosis also highlights possible deficient parenting skills. (p. 80)

Healing and/or recovering from trauma are established in stages according to Herman (1992): establishing safety, reconstructing the trauma story, and restoring the connection between survivors and their communities. Engaging with others so that they feel safe and building that ever important trust relationship with Aboriginal people is the first step. Second, helping people reframe their perspectives and personal beliefs about self (e.g., moving from feeling like a victim to feeling personal power and self-respect) and their experiences/stories can be powerful in supporting a very different understanding about living and life. Third, restoring relationships between people and their communities (however the person defines their community) can lead to recovery of trauma.

Healing is imperative for all generations of Aboriginal people if we wish to move ahead and rebuild healthy individuals, families and communities. Healing requires individual effort in re-balancing all parts of self: the mental, the emotional, the physical, and the spiritual. Bopp, Bopp, Brown, and Lane (1984) state: "each of these aspects must be equally developed in a healthy, well-balanced individual through the development and use of volition" (p. 12). Healing at the individual level is also:

(1) the willingness of the individual to take ownership of the problem; (2) the individual (with the help of others) creating a different understanding about their behavior and feelings; (3) changing destructive behavior and distorted beliefs about self [through cultural practices/programming, therapy, etc.]; (4) practice those changes in the world.
 (Alex Elgard, personal communication, April 12, 2011)

Healing requires work and effort from individuals even if the "problem" stems from historical government directives; it also requires a commitment from communities and organizations to offer the most current best practice.

Other projects and/or research studies have focused on what has worked to facilitate healing and aid in good health and well-being for Aboriginal people.

McCormick (1997) interviewed 50 First Nations people in British Columbia to ask what would assist them in their healing process. Of 10 categories established by McCormick, the following five had the highest percentage of incidents or healing for Aboriginal people:

- establishing a social network and obtaining support from others (25%),
- connection with nature (16%),
- establishing a spiritual connection and participation in ceremony (15%),
- expressing oneself (13%), and
- anchoring oneself in tradition (7%).

Hunter, Logan, Goulet, and Barton (2006) interviewed eight urban Aboriginal people to explore their answer to the question, "How do urban-based First Nations people use healing traditions to address their health issues?" Three cultural healing themes emerged:

- following a path rich with culture,
- gaining balance in the areas of physical, emotional, mental and spiritual wellness, and
- sharing respectful relationships with others.

Finally, Carriere (2005) interviewed 18 First Nation people adopted into non-Aboriginal homes. Her findings suggested that "the lack of connectedness to birth family, community and the ancestors creates a persistent spiritual void that is manifested in health problems affecting the whole person" (p. 197). Carriere further explains that Elders recommended prayers and ceremonies to help these adoptees fully heal and feel whole. The healing addressed by Aboriginal people in these research studies demonstrates the benefits of traditional culture and practices in addressing overall health.

Through the advocacy of First Nation political groups, healing is possible for Aboriginal people through programs funded by the Aboriginal Healing Foundation (AHF). Through the Gathering Strength: Canada's Aboriginal Action Plan that followed from the 1996 RCAP, the AHF funded programs for healing of survivors of residential schools and their families for 11 years (1998 to 2009). The federal government funded mandate of the AHF was to "support community-based healing initiatives of Aboriginal people affected by physical and sexual abuse in residential schools including intergenerational impacts [the Legacy]" (Kishk Anaquot Health Research, 2001, p. II). The third interim evaluation report prepared by Kishk Anaquot Health Research (2003) revealed that 826 participants completed a questionnaire regarding participant satisfaction of healing programs. From this survey, the five highest rating of types of services utilized in healing were:

- elder,
- ceremony,
- one-to-one counselling,
- · healing and talking circles, and
- traditional medicine.

In addition to the programs offered through the Aboriginal Healing Foundation, another important development in healing for Aboriginal People began in 2009 with the Truth and Reconciliation Commission (TRC). The TRC has a mandate to "learn the truth about what happened in the residential schools and to inform all Canadians about what happened in the schools" (TRC, n.d., para. 5). The TRC is working from a holistic cultural perspective that assists in restoring respectful relationships between Aboriginal people and their families, as well as Aboriginal people and Canadians. The witnessing and recording of the experiences of residential school survivors is completed through Commissioners sharing panels, sharing circles, and private statements gathered by survivors. Furthermore during the TRC process, survivors of Indian Residential School and their families are able to access support through the Indian Residential Schools Resolution Health Support Program. These supports include: cultural support; professional counselling; and emotional support.

It is important to look to our past and remember the healthy lifestyle and cultural practices that sustained us for thousands of years. Alma Brooks of the Wabanaki Medicine Lodge states:

The only way for Aboriginal people to heal is to go back to those original instructions that were given to us, go back to the sacred fires, go back to the wisdom and knowledge that was given to us, and apply that to our lives today.

(RCAP, 1996, Volume 3, Gathering Strength, Health and Healing)

Abadian (2006) argues that for healing to fully manifest for Aboriginal people (especially those who have endured trauma), it is vital that positive aspects of culture are incorporated. Abadian speaks of a healthy society that:

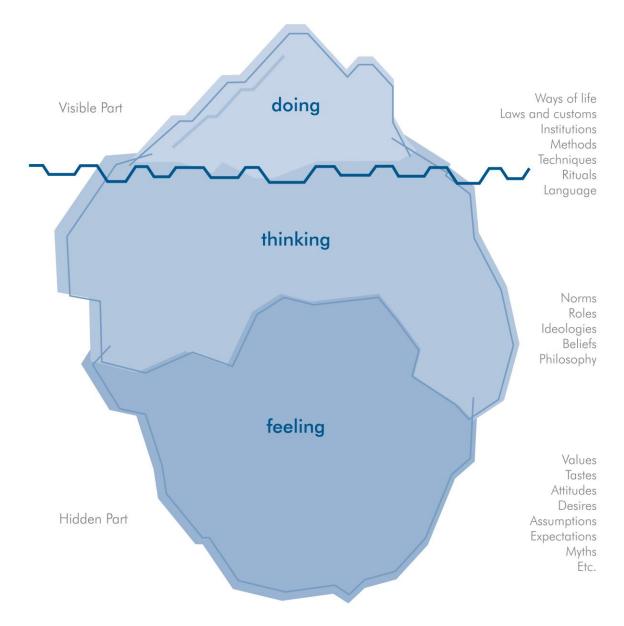
has a medicine cabinet full of balanced, optimistic, gratitude-inspiring, and abundance-oriented collective narratives that tell of getting through dark times, the goodness of life on earth and the goodness of people, and how people are deserving of love, abundance and joy. These healing narratives honour the self that was hurt and all others, and offer understanding of trauma as a stage in growth. Healthy traditional societies were aware of what happens to people when they experience terrible things, and they had well-developed methods of dealing with individual trauma....As in the case of the boarding [residential] schools, many colonial policies traumatized not only individuals but also collectives and therefore, collective resources to deal with trauma. The trauma was so severe that it damaged the entire community's medicine chest of health-giving, life-enhancing narratives. (pp. 20-21)

Looking to our *medicine chest*, and building on traditional cultural foundations will contribute to our healing, health and overall wellness.

3.2. Culture

The Centre for Intercultural Learning adapted Rocher's definition and model of culture using the Iceberg Model of Culture (see Figure 1). Ten percent of a culture is represented by the visible part of the iceberg and is known as "ways of doing": ways of life, laws and customs, institutions, methods, techniques, rituals, and language. Traditional Aboriginal culture was rich in ways of doing. Sacred spiritual ceremonies are/were ways of doing to honour and respect all of creation. Another example of cultural ways of doing in a community context is provided by Fiske (2008) in her research with the QuI-Aun Trauma Program on Vancouver Island. The cultural practices used in healing are: the sweat lodge, teachings from the ancient Medicine Wheel, ceremonies and rituals (e.g., ceremonies of welcome, completion of program), and sharing stories in healing circles.





Note. Centre for Intercultural Learning, 1969; used with permission.

The importance of the presence of healthy Elders to provide guidance was a strong component in delivering culturally-appropriate programming. Fiske (2008) noted that two of the practices, the sweat lodge and teachings from the Medicine Wheel, were not part of traditional cultural practices of the West Coast First Nations, but were

integrated into the program because of their healing benefits. The Qul-Aun Trauma Program also recognized the benefits of alternative approaches to healing and incorporated the following in their programs: inner child work, psychodrama, emotional freedom techniques (EFT), cognitive foundations (e.g., understanding of multigenerational trauma), group work, and responsible activity therapy (RAT). Baikie (2009) states the following about alternative approaches to healing: "the use of non-traditional and even Euro-Western knowledge or practices is not problematic as long as the community is exercising free will and operating in the best interests of their people" (p. 50). Absolon (2009) acknowledges the complexity in finding the *right* approach:

Because Indigenous communities are not homogeneous, generalizing traditional or cultural approaches to an Indigenous community can be erroneous and may alienate you from the people. Also, espousing Eurocentric theories and practices and applying them to Indigenous contexts is colonizing and resembles missionary work. Finding a balanced approach is challenging and requires a consciousness of the community context. (p. 189)

Fiske (2008) noted that part of her research was to identify "best practices in Aboriginal healing." A best practice was defined earlier as ways that successfully work for a variety of people, are flexible and easily adapted. The success of the Qul-Aun Trauma Program lies in the integration of best practice as:

the acknowledgment of diversity of knowledge, of the need for skilled technicians to work in harmony with gifted healers, and to modify and expand existing models to make sense within Aboriginal world views underlie what the therapists and healers view as a truly holistic approach. (p. 90)

The remaining invisible or hidden 90% of culture from the Iceberg Model of Culture (see Figure 1) is divided in two parts: thinking and feeling. The thinking parts of culture are: norms, roles, ideologies, beliefs, and philosophy. The feeling parts of culture are: values, tastes, attitudes, desires, assumptions, expectations, and myths (Centre for Intercultural Learning, 1996). Little Bear (2000) discusses how Western anthropologists clearly misunderstood the thinking and feeling part of Aboriginal culture, when he states:

They [anthropologists] have done a fairly decent job of describing the customs themselves, but they have failed miserably in finding and

interpreting the meanings behind the customs. The function of Aboriginal values and customs is to maintain the relationships that hold creation together. (p. 81)

Chief Justice Beverly McLachlin (2003) states, "One problem, more than any other, dominates human history—the problem of how we deal with those who are different than us" (para. 1). An Indigenous Hawaiian scholar, Meyer (2001) provided an example of how she thought and felt and how she was meant to do according to her culture while attending a philosophy course at a Western university where the cultural norm was different from her own:

She [the instructor] talked to me about the Platonic method of instruction where the teacher challenges you and you're supposed to challenge back. Well, that's not what I do with teachers. I have been taught not to engage like that, but to take it in and think about it, be changed by it, and do what has been asked. But that's evidently not the Platonic method. It's a discourse of receiving and giving feedback. So that was pretty interesting. Wow, so she did that on purpose?! She wanted me to respond? I didn't know that. (p. 190)

Meyer's dilemma was working within a cultural system that went against her ingrained cultural beliefs. Once Meyer understood the cultural standard of University discourse, she was able to understand the behavior of her instructor; and accordingly, adjust her belief that the instructor was disrespecting her. Another example of cultural differences was provided by Ross (2006) who was told this story by the late Mohawk Psychiatrist, Dr. Clare Brant. What's interesting about this story is that it provides cultural differences from the perception of two First Nations in Canada. The Mohawk from Tyendinaga had invited the James Bay Cree to a sporting tournament:

The Mohawk, who were an agricultural people long before contact with Europeans, had developed a custom of always setting out considerably more food than their guests could consume. In this way they demonstrated both their wealth and their generosity. The Cree, however, had a different custom. A hunter-gatherer people for whom scarcity was a daily fact, their custom involved always eating everything that was set before them. In this way they demonstrated their respect for the successful hunter and for his generosity. Needless to say, a problem arose when these two sets of rules come into collision. (p. 2) Ross (2006) continued with his discussion of this story by providing an excellent interpretation for the misunderstanding:

The significant point is that each group believed that the other was intentionally being insulting and disrespectful when, in fact, each group had been going to great pains to show exactly the opposite. The problem lay in the fact that each group could only see the other through its own rules, could only interpret the behavior of others from within their own perspective. (pp. 2-3)

It is clear that both groups were doing their best to demonstrate respect through their own cultural lens. While cultural perspectives and guiding customs/rules vary in First Nations, there were/are aspects of Aboriginal culture (i.e., spiritual beliefs, values, teachings) that are commonly shared. Morrissette, McKenzie, and Morrissette (1993) state:

Too often cultural characteristics are identified to highlight differences among population sub-groups, and these are encouraged and preserved only as long as they do not challenge conventional values and practice. This rather passive approach to culture fails to see it as a potential source of liberation and empowerment. (p. 95)

Sharing, highlighting, and focusing on cultural similarities, while maintaining best practices can enhance practices and programming offered to Aboriginal people who need it the most. Hence, the following features of traditional Aboriginal culture (doing, thinking, and feeling) that were and are meaningful are further explored and defined: indigenous worldview, indigenous knowledge, traditional values, traditional teachings, and sacred ceremonies.

3.2.1. Indigenous Worldview

How we view and understand the world comes from: our culture; our personal experiences, perceptions, and beliefs; the teachings we acquire; the relationships we develop; and the lessons learned from life as we grow and develop. Bopp et al. (1984) described 12 principles and teachings in their book, *The Sacred Tree: Reflections on Native American Spirituality.* The collective knowledge and teachings in this book were derived from Aboriginal Elders, community members, leaders and professionals at a

conference held in Alberta in 1982. The first principle partially describes the philosophical foundation of an Indigenous worldview:

Wholeness. All things are interrelated. Everything in the universe is a part of a single whole. Everything is connected in some way to everything else. It is therefore possible to understand something only if we can understand how it is connected to everything else. (Bopp et al., 1984, p. 26)

Three other principles from *The Sacred Tree* further explain an Indigenous worldview as: "two kinds of change—the coming together of things and the coming apart of things; change occurs in cycles or patterns and is not random or accidental; and both the seen physical world and the unseen spiritual world are real" (Bopp et al., 1984, p. 27). Little Bear (2000) describes an Indigenous worldview "as being holistic and cyclical or repetitive, generalist, process-oriented, and firmly grounded in a particular place" (p. 78). McCormick (1996) describes three components of a First Nations worldview that includes balance, interconnectedness, and transcendence/spirituality. The ancient Indigenous worldview is one that anchored itself in tradition, wholeness, connection, interrelatedness, spirituality, balance and healthy relationships. An Indigenous worldview is a cultural way of thinking and feeling that can be difficult for people outside of the culture to understand. To fully appreciate a traditional Aboriginal worldview, it may help to understand what it is not. Table 1 offers a simplified comparison of Western and Aboriginal worldviews.

Western Worldview	Aboriginal Worldview
Linear	Circular
Individual competitiveness	Interdependence and collective approach
Static	Changing
Objective/Science	Subjective/Spiritual
Grounded in when events happened	Grounded in where events happened
Separation	Wholeness
Resources are for human exploitation	Take only what is needed

 Table 1.
 Comparison of Western and Aboriginal Worldviews

Note. Sources Little Bear, 2000, p. 83; Duran & Duran, 1995, pp. 14-21; Morrissette et al., 1993, p. 93.

An Indigenous worldview revolves around the thinking and feeling parts of culture.

3.2.2. Indigenous Knowledge

Archibald (2008a) describes three types of Indigenous knowledge provided to her by Aboriginal Elders:

Traditional knowledge is a timeless type of knowledge that includes values and philosophies that have been transmitted from generation to generation. Ecological knowledge relates to place-based knowing and environmental knowledge. Cultural knowledge focuses on ways of living and combines contemporary with traditional ways of knowing. These three forms of knowledge are inter-related and shaped by Indigenous language. They are not the only Indigenous ways of knowing. (p. 372)

Other Indigenous ways of knowing came from a wealth of sources including: the Creator and all of creation; ceremonies and rituals; Elders and ancestors; inner knowledge; and nature and land. Mails (1991) was asked by the late Sioux holy man, Fools Crow, to write a book about his life so that he could share some of his *gifts* that had been given to him by the Creator. Mails understood Fools Crow's gifts as miracles. As an example, Fools Crow was able to heat stones for a sweat lodge ceremony using only his medicines and prayers (stones are normally heated with fire). Through his belief and faith in the Creator, Fools Crow was guided to find the right plant to heal a person's ailment. Fools Crow lived a traditional life, strong in his spirituality and ceremonies, thinking good thoughts for all people. He was quoted as saying "anyone who is willing to live the life I have lead can do the things I do" (p. 1).

Ermine (1995) and Kovach (2009) describe Indigenous ways of knowing through dreams, visions, ceremonies and prayers. Kovach (2009) states "we need to open ourselves to those teachings and then give ourselves time to integrate them so that we can be of use to our community" (p. 50). Archibald (2008b) wrote of her dream where she felt the love, compassion and comfort from Sto:lo Elders who had passed on. She told them in her dream:

that it was so hard living in the city and working at the university—living and working in a place where it was a constant struggle to be First Nations, to think and feel in a cultural way, and to be understood by others, the outsiders. (p. 2) With the guidance of her ancestors in a dream, Archibald (2008b) was given a message about her purpose in academia, "to use their cultural knowledge and to share it with others, thereby ensuring its continuation" (p. 3).

Meyer (2001) informs us that empiricism is not the only way to understand land and nature. Meyer states:

our senses are culturally mediated, and that's an uncomfortable thought for many people. It's an uncomfortable idea because relativism then comes into play. People often want to explain the world in either universal or relativistic terms. (p. 194)

In her early academic career, Meyer (2001) was "stunned to know that people believe that all of the world's knowledge comes only from our five bodily senses" (p. 191). Meyer's ways of knowing and knowledge in this context are based in Indigenous ecological knowledge. Similarly, Wuyee Wi Medeek (2004) describes a research project in his home territory of Gitkxaala, British Columbia. The interviews conducted with Elders of his community asked for knowledge concerning resource sharing and sustainability. His goals were to record traditional ecological knowledge and to demonstrate that knowledge came from many sources; not just science-based knowledge. Ancient knowledge from the land and nature was a relationship understood by our ancestors and Elders that developed over thousands of years. Indigenous knowledge were/are rich ways of knowing that contributed to aspects of culture in First Nations across Canada. Castellano (2000) contends that "the ultimate test of the validity of knowledge is whether it enhances the capacity of people to live well" (p. 33).

3.2.3. Traditional Values

Bopp et al. (1984) state, "the Elders have prophesied that by returning to traditional values, native societies can be transformed" (p. back cover). Examples of traditional Aboriginal values important to our culture are: sharing; caring; humility; generosity; respect; and integrity. McKenzie and Morrissette (1992) state:

It is not the presence of these [traditional] values that distinguishes aboriginal culture from the dominant society, but rather the pattern of expressing them. While the dominant society has developed conventions that allow its traditional ethical and moral values to be separated from everyday life, integration of these values to form a general lifestyle is much more apparent in traditional Aboriginal society. (p. 119)

Ross (1996) reiterates this statement as:

Respect and sharing, for instance, are not attributes that can be turned on and off like a tap, or called upon only in special circumstances. They require effort and will, and must be part of continuing relationships with all aspects of Creation. (p. 139)

The integration of the value, *sharing*, in everyday life is discussed by three Indigenous scholars. Archibald (2008b) describes sharing in the context of Indigenous storytelling. She maintains and I agree that "sharing what one has learned is an important Indigenous tradition" (p. 2). Hart (2009) describes sharing in the *mino-pimatisiwin* (the good life) approach as "sharing includes the sharing of all we can, including knowledge and life experiences, and emphasizes that everyone is important. Sharing helps develop relationships" (p. 36). Kovach (2009) states that "the act of sharing through personal narrative, teaching story, and general conversation is a method by which each generation is accountable to the next in transmitting knowledge" (p. 14). Sharing is an important traditional value, and one that will be discussed further in relation to urban child welfare practice.

The late Dr. Walter Soboleff, a Tlingit Elder, discussed 15 traditional Native Values that could be integrated into everyday life. For the purposes of this research, 10 values are highlighted:

- 2. Respect elder, parents, property and the world of nature. Also, respect yourself so that others may respect you.
- 3. Be considerate and patient.
- 4. Be careful of how you speak, for words can be either pleasing or like a club. Traditionally, when you speak, those listening can imagine seeing your clan family line.
- 6. Pride in family, clan and tradition is found in love, loyalty and generosity.
- 7. Share burdens and support each other. This is caring.
- 10. Care and good health is important for success of the person or clan.
- 12. In peace, living is better.

- 13. Through famine, ice age, sickness, war and other obstacles, unity and self-determination is essential to survival.
- 14. Good conduct is encouraged to please the spirit we believe is near.
- 15. Humor.

(Soboleff, 1998)

George (1991), a Tsleil-Waututh Nation member in British Columbia, asserts that to do the spiritual work of the Creator and be a leader for the people, a person has to embrace, live and practice these values: kindness; generosity; caring; sharing; humbleness; and honesty. Elder Skywoman gives clear direction through her traditional Cree values:

We are called iyiniwak. That is the foundation of who we are, our identity. We are supposed to heal ourselves and others and iyiniwaskamkaw, that is our relationship to our land, our connection here. Nehiyaw is the four directions....The four directions are, we have to be caring, sharing, we have to be honest, and we have to pray daily for our strength. (quoted in Makokis, 2001, p. 90)

The values of caring, sharing, honesty and prayer are explained by Skywoman as "our connectedness...our value system" (Makokis, 2001, p. 93). Another example of traditional Aboriginal values used in a contemporary context is provided by Rupert Ross. Ross was an Assistant Crown Attorney in eastern Ontario for over 20 years. He recalls an incident where he and others listened to a young Aboriginal professor provide his thoughts on the atrocities of colonization. While Ross (2006) agreed with the accuracy of the professor's statements, he responded:

I was used to Elders who were able to make these kinds of points while at the same time keeping everyone present at ease and receptive. At lunch time another Elder, this one in his seventies and obviously busheducated, appeared at my side. During the course of the meal he quietly asked if I had listened to the younger one speak. I answered with a simple "Yes," knowing that his question was not an invitation for me to launch into my own critique. He nodded his head and was silent for a long time. I knew enough to wait. Finally he said, "He is a young man yet." In those six words he had, I am certain, offered an apology for the discomfort his brother had caused me. He had also asked me to be patient with him. It was his way of saying that the younger man had not yet learned how to speak with care and respect, but that I shouldn't write him off. (p. 31) The bush-educated Elder offered his understanding of the young man to Ross, while being respectful, patient and non-judgmental.

The Swinomish Tribal Mental Health Project (1991) in the state of Washington, USA describes culturally-appropriate services in community mental health services as being "congruent with tribal values....Approaches must be re-examined for their applicability to the tribal situation. Culturally oriented mental health services require unusual flexibility, commitment and creativity" (p. 223). The challenge for many urban Aboriginal helpers is to be cognizant of their own particular traditional values, while appreciating the values articulated in the community where the helper works/lives. It becomes problematic when people misinterpret good intentions and values; therefore the helper must be mindful that culture and cultural values are always a potential source of "empowerment" and "liberation".

3.2.4. Traditional Teachings

Archibald (2008a) documents traditional teachings from her discussions with Indigenous Elders, Chief Khot-La-Cha, Dr. Simon Baker (Squamish Nation), Tsimilano, Dr.Vince Stogan (Musqueam Nation), and Kwulasulwut, Ellen White (Nanaimo First Nation). The teachings and knowledge from these Elders are briefly summarized. The late Dr. Simon Baker teaches that if a person gets permission from an Elder, they can use the information; sit down and take the time to listen; and live honorably and show respect to everyone, even if you dislike a person. The late Dr. Vince Stogan teaches the importance of beginning with prayer, asking for spiritual guidance from the Creator, learning pieces one at a time, taking the time to learn and to never hurry the process, and that we all have responsibilities as learners. The ancestors of Elder Ellen White (Nanaimo First Nation) told her "it is important to take time to sit and think about and feel what we have learned" (p. 381). White and Archibald (1992) also teach us to question everything; experience our failures and learn from them; messages are passed through the power of words, via air; and your conduct in all areas of life are important. They also discuss the importance of the little sayings:

To become educated, then one must gain an understanding of the beauty and power of the knowledge contained in these little sayings. However, if one does not get beneath the surface—journey to the 'core'—then these little sayings remain just that—little sayings without much meaning. (p. 163)

Other Elders, like Atleo (2004), discuss the success and failures of teachings through a Nuu-chah-nulth story of trickster Raven. Atleo reminds the reader that teachings take place in context and it is up to the reader to take meaning from each story. There are many teachings in our culture that are expressed through stories and in conversations with Elders.

3.2.5. Sacred Cultural Ceremonies and Practices

Cultural ceremonies served and continue to serve many functions in our communities. Examples of ceremonies and cultural practices that take place in our communities and organizations include: cedar bough cleansing; smudging; sweat lodge ceremony; storytelling; talking circle; etc. The importance of spirituality in ceremonies and cultural practices is explained by Hart (2009). Spirituality:

is the recognition that there is another existence that is not of the physical world. Spirituality is so encompassing of traditional Indigenous life that it is respected in all interactions and is demonstrated through such activities as meditations, prayers and ceremonies....This understanding of spirituality is well demonstrated within Indigenous peoples' worldviews and philosophies. A significant and common component is respectful individualism, where individuals are provided with much room and freedom for growth, self-expression and inner exploration. (p. 35)

Researchers are showing the benefits of cultural ceremonies and spiritual practices in healing, and through changed behavior and attitude. Lowe (2008) sampled 41 Cherokee Native American high school students before and after a cultural practice (i.e. talking circle) to test their attitudes, behavioral intentions, Cherokee self-reliance, and HIV/AIDS and hepatitis C virus knowledge. Cherokee self-reliance is "the mainstay and way of life that influences the health of Cherokees" (p. 231). Lowe wanted to discover if there were positive changes in behavior and attitude of Cherokee youth if they were educated about HIV/AIDS and hepatitis C virus through the use of a Cherokee cultural practice, the talking circle. The purpose of talking (or sharing) circles is to allow a safe place for participants to share their experiences with one another and/or discuss a particular theme. Generally, an Elder and/or skilled facilitator leads the group in a

process of education, understanding, healing and connection with others (Hart, 2002). Lowe's findings demonstrated that there was a significant increase in knowledge and attitudes of Cherokee youth concerning HIV/AIDS and hepatitis C virus through the use the talking circle.

Mehl-Madrona (1997), a Native American physician and healer, spoke of the changes in people's attitudes, belief systems, and health as a result of healing (treating) ailments through traditional ceremonies. He states "people need ceremony. It's not enough just to think about life or healing. Ceremony creates the magic that allows healing to happen" (p. 193). Ceremony is the connection and the doorway to healing, health and the reclaiming of Indigenous identity. Spiritual ceremonies and cultural practices are the doing or visible part of culture.

3.3. Culturally-Appropriate Practice/Programming

For urban Aboriginal people, who are from various cultural backgrounds, support that is culturally-appropriate and sensitive is:

...tangible, action oriented, and respectful of diverse cultural practices. It includes the physical structure and environment, how a program or service is delivered and by whom, and it provides choices relative to how each person experiences culture.

(Vancouver/Richmond Health Board, 1999, p. 14)

In addition, Waldrum (2008) discusses his conclusions from five programs funded by the Aboriginal Healing Foundation that speak to practice/programming for Aboriginal people: "what clearly emerges from our research is the importance of flexibility and eclecticism in the development of treatment models" (p. 4). A culturally-appropriate approach takes into account an individual's own personal and cultural experiences. While programs (in treatment centers, parenting programs, etc.) are often structured and have a detailed daily plan, providers (i.e., social workers, Elders, counsellors, etc.) generally have one-on-one time with individuals. It is imperative that during this one-on-one time, that the provider be flexible and offer diversity in her approach to helping people discover their own cultural path. Each provider uses her own set of skills, techniques and cultural tools to intervene with the individual/family to facilitate positive change. In terms of flexibility,

the provider must understand that she/he may need to change what they are currently offering and suggest something different. For example, if the provider is offering to say a prayer with the individual but the individual is reluctant or not ready for prayer, then the provider can move the session forward by asking the individual what would work best for them right now (i.e. what would they would like to address).

Components of a cultural approach would include knowledge and teachings from the worker's perspective of: Indigenous worldview, Indigenous Knowledge, Traditional Values, Traditional Teachings, Spirituality and Sacred Ceremonies. Likewise, 10 best practices in child welfare practice were discussed by Jardine and Leblanc at a 2006 conference, "Learning from Our Past, Present and Future." Jardine and Leblanc are two Aboriginal social workers who presented their views on strengthening Aboriginal child welfare practice. Their recommendations emphasize the importance of culture, traditional values, history, and an Indigenous worldview, as well as other practical suggestions:

- 1. Always remember that providing service to Aboriginal families is value driven.
- 2. Best practice means understanding our history.
- 3. Practice needs to be open and transparent.
- 4. Culture is key to understanding and strengthening families.
- 5. Listening and the power of story are key components to a strengthbased practice.
- 6. Remember that we are all connected.
- 7. Strength based practice means we are not the experts.
- 8. Consider and remember the importance of extended family.
- 9. Support for the child comes from many areas and peoples.
- 10. Aboriginal child and family practice is more complex and quite distinct from non-aboriginal practice.

These recommendations are based on their front-line experience, what they have read, and what they know to be true about working with and for Aboriginal people. (Many of their points are highlighted in Chapter 5 by the child welfare practitioners in the Community Organization.) Although their recommendations were not supported through research, I agree with Baikie (2009) when she suggests: that Indigenous social workers bring other legitimate collective ways-ofknowing and social helping to their practice environments based on their worldview, which includes their cultural knowledge base and their individual and collective practice knowledge as social helpers. (p. 46)

Culturally-appropriate practice/programming for urban Aboriginal people involved with child welfare services is multifaceted. Waldrum (2008) expands on this complexity when he notes:

There is no singular Aboriginal client, as there is no singular Aboriginal individual. Some clients are very firmly entrenched in Aboriginal cultural experiences; others, however, have had extensive experience with the broader, non-Aboriginal influences of mainstream Canada. One legacy of the residential school and substitute care systems for Aboriginal people has been the lack of Aboriginal cultural experiences for many. These individuals are not culture-less, as many popular accounts of Aboriginal experience might suggest; rather, they simply have had little or no experience in an Aboriginal cultural milieu, especially during initial developmental stages. (p. 4)

This quote speaks of the experiences of many of the Aboriginal children and families who utilize the services of the Community Organization. The challenges in honoring the diversity of cultures (and not subscribing to a pan-Indian approach) is respected by the Community Organization in the following ways: (a) they do not subscribe to any one distinct culture, as the staff and the families are from a variety of cultures; (b) they acknowledge that they are on Coast Salish territory and respect the cultural values, protocols and ceremonies of the Coast Salish Peoples; (c) they invite respected Elders and/or Knowledge Keepers to share and transport cultural knowledge from their own territory; (d) they respect the worker's right to share his culture to the families, provided that the family is interested in knowing this information; (e) the workers seek cultural information specific to the child/family she is working with (Community Organization, 2004, 2009, 2011). The next chapter discusses the methodology used within the Community Organization in operationalizing cultural programming for urban Aboriginal families involved with child welfare services.

4. Research Methodology

Rarely am I able to step back and see one or two other sides but it takes many of us to see more than that. As in all conversations, it is the difference in our knowledge and language that makes the conversation difficult and worthwhile. It is this common earth that we stand on that makes communication possible. Standing on the earth with the smell of spring in the air, may we accept each other's right to live, to define, to think, and to speak.

(Oklahoma Chickasaw Nation's Dr. Eber Hampton, 1995, p. 42)

This chapter discusses my rationale for using various research methodologies, beginning with an Indigenous methodologies framework, the four R's—respect, relevance, reciprocity, responsibility—of Aboriginal research, and community-based participatory research (CBPR). The research methodology used is a qualitative case study utilizing a CBPR framework that encompassed the values of the four R's. Details of the research sampling, recruitment, data gathering and data analysis are also provided in this chapter.

4.1. Indigenous Methodologies

What are Indigenous Methodologies and how have I come to understand and use this type of methodology in my research process? Indigenous Methodologies are ways of doing research that respect, honor, and recognize the knowledge, worldview, and protocols used in research settings that have been contributed by Indigenous people. Put another way, Indigenous Methodologies is "research by and for Indigenous peoples, using techniques and methods drawn from the traditions and knowledges of those peoples" (as cited in Denzin & Lincoln, 2008, p. x). Adding support and acknowledgment to Indigenous methodologies, while building on Indigenous strengths, Smith (1999) states:

Decolonization, however, does not mean and has not meant a total rejection of all theory or research or Western knowledge. Rather, it is about centering our concerns and world views and then coming to know and understand theory and research from our own perspectives and for our own purposes. (p. 39)

I was cognizant of my role and responsibilities throughout the research process. Smith (2000) provides an excellent summary of my thoughts and how I wanted to conduct myself while at the Community Organization:

How researchers enter the research community, how they negotiate their project aims and methods, how they conduct themselves as members of a research project and as individuals, and how they engage with the people require a wide range of cultural skills and sensitivities. (p. 238)

My conduct and the research decisions made were partially based on the research of Kirkness and Barnhardt (1991) who established four needs from the educational system in order for Indigenous peoples in the post-secondary system to succeed: "...respects them for who they are, that is relevant to their view of the world, that offers reciprocity in their relationships with others, and that helps them exercise responsibility over their own lives" (p. 1).

Pidgeon and Cox (2002) further refine these four Rs for research purposes in an Aboriginal setting. Their four Rs are modified below to illustrate the research needs and protocol developed between myself and the CEO, the board of directors, and the staff of the Community Organization:

Respect begins with the involvement of the community in the research process, discussing each other's ideas, helping to ensure the project will be of benefit to all parties. The research partnership began when I initially met with the CEO in January 2006. At this meeting, the CEO who spoke on behalf of the board of directors and staff of the Community Organization decided that it would be beneficial to document their organization's approach to urban Aboriginal child welfare practice. In June of 2006, I was invited by the CEO to attend a working meeting with staff and was formally introduced. I discussed my role as a researcher coming to their Community Organization in September of 2006 and told them that I would be available on a part-time basis (i.e., 2 days per week) to answer any research related questions. I officially joined the Community Organization as a researcher that September. An office was provided to use on a part-time basis that included a telephone and a computer. On the first day, I sent out an e-mail to the staff letting them

again know about my research role and that I was open to any comments/suggestions/concerns. I also explained in the e-mail who I was (a doctoral research student at Simon Fraser University); where I was from [Whitefish (formerly known as Goodfish) Lake Cree First Nation, Alberta, on my late mother's side; and German from my father's side]; and why I was at this given place and time (i.e., I was at their Community Organization with the purpose and intent of requesting research interviews to answer the research question on behalf of their organization). Indigenous Scholars elucidate the cultural importance of describing who you are, where you come from, and why you are at the given place/location (Absolon, 2009; Green, 2009; Kovach, 2009; Mehl-Madrona, 1997).

• **Relevance** is between the researcher, the topic and the community. In this instance, the community is defined as the CEO, staff and board of directors working for the Community Organization. As well, the people indirectly affected by this research are the urban Aboriginal families that the Community Organization serves. The first important piece regarding relevance came from the CEO on behalf of the Community Organization. I was asked to answer the following research question:

How does an urban Aboriginal child welfare organization operationally define cultural programming in their approach to protecting children and supporting families within their role as a delegated agency under the *Child, Family and Community Services Act (CFCS Act,* 1996)?

This research question is relevant to the Community Organization, as it came directly from them, thereby meeting their research needs. As noted by Kovach (2009), "regardless of the origin of the research question, it ought to respond to a need" (p. 114). I then designed interview questions to answer the research question, which was then reviewed by the Community Organization CEO, and two of my committee members. Based on their feedback and comments, changes were made to the interview questions. I then pre-tested the questionnaire with two Aboriginal colleagues and two non-Aboriginal colleagues, and again made changes based on their feedback, to ensure the relevancy and appropriateness of the interview questions in answering the research question. The questionnaire was e-mailed to all seven people again for final review. While such pilot testing and design activities are standard to most questionnaire development processes, my efforts were focused on item validity and reliability.

Reciprocity is about meeting the needs of both the community and the researcher and ensuring there was a balance of sharing and gathering of information. In this reciprocal relationship, I did my best to share information about the research process to staff via e-mail, meeting one-on-one, and at gatherings. (More detailed information is provided in Chapter 4, Section 4.4, "Sampling and Recruitment") Although the reciprocal relationship began between myself and the Community Organization (staff, CEO, Board of Directors), it was always intended to benefit the urban Aboriginal families who used their services.

• **Responsibility** means to design a process in consultation with the community members, keep the process flexible, and maintain the integrity of the research to satisfy everyone involved. I kept in regular contact with the CEO, and kept her and the staff updated at their Quarterly meetings. I sent e-mails to update everyone on the progress of the interviews. I also made the commitment to ensure that I would remain fully engaged in the research. As Weber-Pillwax (2004) states, it is the personal responsibility of the researcher to: "(1) [be] accountable for the effects of the research project on the lives of the participants and (2) the purpose of the research is to benefit the community and the peoples of the community" (p. 80).

I was responsible and accountable to staff by ensuring they had access to me while at the Community Organization, whether through e-mail, telephone or meeting in person. I did my best to allow time to discuss any aspect of the research and/or interviews during my part-time 14-month stay at the organization. Accountability and responsibility on my part also meant keeping the names of people interviewed confidential.

Using the 4Rs of Aboriginal research was extremely helpful to me as an Indigenous researcher. The 4Rs provided a framework that served as a model in my research work with the Community Organization. It was also important for me to be clear about the research process to everyone involved, as well as build healthy relationships. It was my wish that people would understand that they could trust my process and this research, so that it would be of benefit to this Community Organization.

4.2. Community-Based Participatory Research (CBPR)

What is community-based participatory research and why does it work well in an Aboriginal setting? Fletcher (2003) notes:

Community-based participatory research (CBPR) is an important tool for researchers working with Aboriginal and Indigenous communities. It acknowledges the different ways of knowing, giving equal weight to scientific expressions of knowledge and traditional or cultural expression of knowledge. (p. 28)

Community-based participatory research has received a positive and enthusiastic response by both Aboriginal community members and academic researchers (Baskin, 1997; Castellano, 2004; Zolner, 2003). I selected this "western" CBPR methodological approach in the Community Organization, based on the positive feedback from

Indigenous scholars who had written about and worked with this framework in Aboriginal communities. I did not feel any tension merging the Indigenous 4Rs of Aboriginal research with CBPR, as both frameworks provided space to incorporate and validate Indigenous ways of being and knowing. What was important to me while working with this Community Organization was to ensure that this research was done in a responsible and respectful way. I continued to remind myself of the importance of decolonization in research and although this statement was not written during the time of my research, it holds true to the overall research intent:

Policy and programming grow out of research, and while the influence of research and its methodologies is not always visible in the policy cycle, research is where it starts. Research creates policy and policy creates programs. There has been a crisis in Indigenous educational and child welfare policy (among other sites) in this country. Why? Because the research that influences policy and shapes practices that impact Indigenous communities emerges from Western, not Indigenous, knowledges or forms of inquiry. (Kovach, 2009, p. 13)

By imbuing the CBPR method with the 4Rs of Aboriginal research, I was able to address the concerns identified by Kovach while also maintaining the integrity of the "western" data gathering and analysis techniques. For the purposes of this document, the Community Organization is defined as a *community* in the context of this research. Generally speaking, most people would define an Aboriginal community as a group of people who live in the same geographical area, speak the same language, practice the same culture, and gather at meetings, social and cultural events. Conversely, this Community Organization is comprised of two office buildings in an urban setting where people work Monday to Friday, 8:30 a.m. to 4:30 p.m. The staff members come from a variety of cultural and social backgrounds, and while they gather during the day to work and meet for important meetings and cultural events, their practices after work are private. During work hours, the overall goal of helpers in this Community Organization is to work to strengthen urban Aboriginal families in three main areas: guardianship of children in care under the CFCS Act (1996), support to caregivers, and family preservation. As Fettes (1998) notes, "In the end, we need to have a concept of community that goes beyond 'people of related ancestry or traditions living together in the same place', to encompass a dynamic process of meaning creation and cooperative

action" (p. 251). In this regard, a sense of community and cultural identity that authenticates urban Aboriginal people is:

also tied to a land base or ancestral territory. For many, the two concepts are inseparable....Identification with an ancestral place is important to urban people because of the associated ritual, ceremony and traditions, as well as the people who remain there, the sense of belonging, the bond to an ancestral community, and the accessibility of family, community and elders. (*R. v. Gladue*, 1999)

Therefore, for the purposes of this research and in the context of CBPR, the Community Organization is defined as a community, as the staff are working together to create positive change and a sense of belonging in the lives of urban Aboriginal children and families.

Providing community-based participatory research also means working with an organization/community in the context of the following six principles:

- 1. the process is planned and systematic,
- 2. the research is relevant to the community,
- 3. the process requires community involvement,
- 4. there is an overall problem-solving focus,
- 5. there is a focus on societal change, and
- 6. the end result focuses on sustainability (Hills & Mullett, 2000)

The first three principles of CBPR were discussed in Chapter 4, "Indigenous Methodologies" (Section 4.1). I will now add more details to the first three principles of CBPR in relation to my work with the Community Organization. This section will conclude with a discussion and further particulars of the final three principles of CBPR, again in relation to the research completed with the Community Organization.

In terms of having a planned and systematic research process, the CEO and I agreed that I would be present on a part-time basis at the Community Organization 2 days per week from September 2006 to June 2007. This (we thought) would allow enough time for me to complete my research proposal, apply for ethics approval, build healthy and trusting relationships, discuss the research, interview staff members and attend various meeting/functions at the Community Organization. The dates were

extended beyond June 2007, to December 2007 in the Community Organization, as I did not receive ethics approval from Simon Fraser University until late April 2007. Thus, this delayed the start of the interviews by a few months.

The second principle of CBPR requires that the research be relevant to the community. As mentioned above, the research is relevant to the Community Organization for the following reasons: (a) the research question was designed by the CEO, making it applicable to the Community Organization's research needs (I agreed as the researcher to answer the research question); (b) the research aimed to operationalize cultural practice/programming by interviewing staff around their approach to urban Aboriginal child welfare practice—again this was agreed upon by myself as the researcher and the CEO who represents the Community Organization; and (c) the CEO with the support of the board and the staff, believe this research initiative is relevant to the larger urban Aboriginal community.

The third principle of CBPR requires community involvement. The research completed for this Community Organization would not have been accomplished without community involvement, that is, the support and volunteer time of the staff from the Community Organization. Without their assistance, no interviews would have been completed and this research partnership would have dissolved. I am grateful to everyone at the Community Organization for their commitment to this research endeavour.

The fourth principle for using community-based research is the problem-solving focus. The answer to solving the problem lies in the research question:

• How does an urban Aboriginal child welfare organization operationally define cultural programming in their approach to protecting children and supporting families within their role as a delegated agency under the *Child, Family and Community Services Act* (*CFCS Act*, 1996)?

Throughout the *CFCS Act*, and the Community Organization's policy and procedures manuals (2003, 2004, 2009), there are references to culture, cultural identity, cultural heritage, cultural history, Aboriginal culture, etc. However, there is no clearly defined definition of culture found in any of these references. The challenge for the Community Organization is to clearly define culture, so that in turn cultural practice/programming can

be measured. Additionally, the AOPSI (MCFD, 2005) manual has served as a starting point for an audit and review process, as well as "ensuring that the operational and practice standards that guide practice and form the basis of the audit process are culturally appropriate, achievable, and sound" (p. 1). The four practice standards (see MCFD, 2005, Section 5.8.4) account for minimum social work standards delivered in Aboriginal child welfare organizations across the province.

CBPR's fifth principle looks at societal change. In terms of the Community Organization and change being made at the organization level, perhaps this research will contribute in providing: a practice model that can be referred to and used in the organization; setting measurable standards for cultural practice/programming; and making recommendations for change in policy.

Finally, the sixth and final principle is sustainability. This research is being documented so that future generations of child welfare workers can learn about culturally-appropriate practice and cultural knowledge that works well in urban Aboriginal child welfare organizations. Once the thesis is completed, my plan is to present the findings to the Community Organization and offer them with a copy (copies) of the final thesis. I also wish to discuss with the Community Organization CEO and the Community Organization Elder, how I can best proceed to offer this work to their organization in a culturally appropriate manner.

4.3. Qualitative Research

Qualitative research analyzes data through the collection of materials such as: case study; personal experience; introspection; life story; interviews; artifacts; cultural texts and productions, etcetera (Denzin & Lincoln, 2000). The research collected here was completed via interviews, participant observation, and my personal research journal/journey. The method of constant comparative analysis was chosen to analyze the interviews, directed through a process of open coding, axial coding and selective coding. The three types of coding are used to develop categories, link with subcategories and finally, to form one general theory (Strauss & Corbin, 1998). One visual practice model was formulated from the direct quotes of the participants specific to this Community Organization, therefore I ruled out using grounded theory as a methodology and chose to call this a CBPR framed case study. What was helpful in my reading of grounded theory research was an appreciation of the "gathering of rich data" (Charmaz, 2006) through step-by-step data analysis of interviews.

4.4. Sampling and Recruitment

From September 2006 to April 2007, I worked on building respectful relationships with members of the Community Organization. At this time, the Community Organization employed approximately 65 staff members including: guardianship workers, care giver support workers, family preservation workers, clinical supervisors, a cultural coordinator, various managers, a chief executive officer, and other support workers (i.e., human resources, finance, clerical). Although I had been introduced to the staff in June of 2006 and sent out a brief e-mail in September 2006 to introduce myself, and sent the formal introductory e-mail in November 2006 that clarified my research role and provided opportunities to dialogue (Appendix A). From September 2006 to April 2007, I formally met with 28 staff members on an individual basis to discuss their role and responsibilities at the Community Organization.

I was invited to sit in on meetings/gatherings, such as Community Services Provider Day, an open house hosted by the Community Organization, Child Protection Policy Advisory Committee meeting, Christmas Craft Fair held at the Community Organization, protocol signing between a BC Aboriginal Nation and the Community Organization, Christmas luncheon at the Community Organization, quarterly update meetings, Lunch and Learn Workshops, and a meeting to discuss *cultural identity*. As well, during my 14-month part-time stay at the Community Organization, I had many opportunities to speak with staff individually (e.g., during lunch and/or coffee breaks, after large meetings, etc.) about the research process, but did not discuss volunteering for interviews face-to-face with anyone, unless the individual asked about it. I spoke about the research process and interviews in group gatherings and used e-mail to distribute information about the research. While completing interviews in 2007, the Community Organization was partially delegated for providing residential resources for children in care, family preservation services for MCFD child protection services and guardianship services for children in continuing care¹³. The Community Organization had not assumed responsibility for the delivery of child protection services in 2007 while I engaged in this process.

4.5. Data Gathering

In late April 2007, the Ethics Review was approved by Simon Fraser University. I sent out an e-mail (Appendix B) to all staff in the Community Organization in May, 2007 requesting volunteers to be interviewed and attached three documents to the e-mail: the "Poster," "Interview Questions," and "Research Data Information Form" (Appendix B). I sent this information to all staff, so that everyone had the opportunity to review the information. In particular, I wanted the staff to have the opportunity to think about whether or not they wanted to be interviewed. As well, I wanted this research to be transparent with as little mystery surrounding it as much as possible because of the historical mistrust developed between researchers and Aboriginal communities (Castellano, 2004; Kovach, 2009).

Six people interviewed between May and June 2007. I was not at the Community Organization for the months of July and August, 2007, and therefore sent out another e-mail in June 2007 informing people that I would be away for 2 months and would send another e-mail reminder in September 2007. On September 5, 2007, I sent an e-mail requesting volunteers to come forward to be interviewed, with the three attachments. Six more people interviewed between September and October 2007. Another e-mail reminder was sent to all staff on Thursday, November 2, 2007 and the final eight people were interviewed between November and December 2007. Of the 65

¹³ Refer to Chapter 1 for further information about these services.

employees, 20 people volunteered to be interviewed, almost one-third of the employees from this Community Organization.

When a staff member contacted me for an interview, I asked them to let me know the best time, date, and location to meet. I met all 20 participants either in my office at the Community Organization or in their office during regular work hours. When I met with each person, the first question (not on the interview question sheet) I asked of each participant before each interview was, "Have you discussed these questions with anyone prior to our interview?" I asked this to find out if any of the interview questions they would answer were influenced by discussions with other people. All 20 participants responded "no"-that they had not discussed the interview questions with anyone else. All participants were required to read and complete the "informed consent by participants in a research study" (an official document from Simon Fraser University) and the "Research Data Information" form (see Appendix C). After receiving written consent and asking if there were further questions about any of the forms, I explained that their interview was to be recorded using a digital voice recorder. Again, I asked each participant if there were any questions about this before turning on the digital recorder and starting the interview. I asked each interview question one-by-one, and did not take any notes during the interviews, but listened actively to each person as they answered the questions. During each interview, I used my common sense to take breaks as needed. After each interview, I provided a gift of herbal tea and a sage medicine bundle to each interview participant to honor their time and commitment to the research process. Interviews took anywhere from 30 minutes to 90 minutes to complete.

From the sample of 20 people interviewed, 14 of 20 people identified as Aboriginal: eleven identified as First Nations, and three identified as Metis. Of the 14 Aboriginal staff members, seven were from First Nation communities in British Columbia; while the remaining staff members came from First Nation communities in the Canadian provinces of Alberta, Saskatchewan, Manitoba and Ontario. I noted that nine of the 20 participants had former experience with child protection. There were 18 women and 2 men interviewed. The age-range for the 20 participants was as follows.

- 2 in the 35 to 39 age group,
- 8 in the 40 to 44 age group,

- 4 in the 45 to 49 age group,
- 2 in the 50 to 54 age group,
- 1 in the 55 to 59 age group, and
- 3 in the 60+ age group.

Educational experience was documented as follows.

- 10 participants have a bachelor's degree,
- 6 participants have a master's degree, and
- 4 participants have a mixture of high school/certificate/college diploma/university courses.

I transcribed 10 of the interviews and hired a consultant to transcribe the other 10 interviews. The consultant signed a confidentially clause that she would not release the names of the person interviewed. Each staff member was e-mailed and provided with an electronic copy of their personal transcribed interview. I gave each person the option to meet with me immediately after their interview was transcribed to review the data, make any changes they deemed necessary, and discuss any issues that may have arisen for them during the interview/research process. Five participants made minor changes to their transcripts (either minor grammatical changes and/or spelling mistakes that were corrected). Another step I took to ensure validity using *member checks* was to have the participants review my interpretation of their statements once I had completed writing the findings chapter. I e-mailed 17 of the participants in early 2012 (I could not locate 3 participants, as they no longer worked for the community organization) to confirm that my interpretation of their statements were correct, and added that I would make any required changes to their words if they did not agree with my interpretation (Creswell & Miller, 2000). I received confirmation from 17 of the participants that they received my e-mail and would review their statements accordingly. Twelve participants readily agreed with my interpretation of their words, while 5 participants made revisions to their statements. The participants who made revisions, made it clear that it was not my inferences that they were changing, but rather they wanted to clarify their statements.

The interviews recorded on the digital recorder were destroyed once I was able to transfer the data to my computer. All information stored on my laptop was password

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protected. All printed transcriptions were kept in a locked file in my home. I let the participants know that the following would be deleted/shredded after a two year period, once the final thesis was completed: all printed transcriptions would be shredded; all written transcriptions removed from my laptop computer, the external hard-drive, and memory sticks.

4.6. Data Analysis

After the 20 interviews were transcribed (a total of 233 pages), the next step I took was to purchase and familiarize myself with the Nvivo 7 (2006) software program. Nvivo 7 is a program used for qualitative data analysis and also functions in:

- planning and managing the project;
- writing analytic memos;
- · reading, marking and commenting on data;
- searching;
- developing a coding scheme;
- coding;
- retrieving coded segments;
- · recoding; and
- organizing the data. (Lewins & Silver, 2007)

Nvivo 7 (2006) was useful in helping me to organize the coding and recoding of the data into themes, and to write memos about what I coded each day. However, I did not use the software for planning the project, or commenting of data. I chose to write detailed memos about my research process and keep a research journal on a word document. I will now expand on my data analysis process.

I began the process of initial coding of the interview data by reviewing the answers given to each of the questions asked during the interview. I read the participant answer to each question and studied the "fragments of data—words, lines, segments, and incidents—closely for their analytic import" (Charmaz, 2006, p. 42). These segments or "tree nodes" (a term used in Nvivo 7, 2006) of data were selected in order of the interview question answered and will now be referred to as the "initial code

categories." All 20 participants answered each of the research questions one-by-one, except for one participant.¹⁴ I selected a theme name for each of the initial code categories (e.g., spirituality) without being specific about what that category was used for and/or what it was not used for. I did this so that I would have a general overview of what the participants spoke about. (In hindsight, it would have been better if I had been more specific about categories. For example, instead of initially writing "culture" as a placeholder, I should have written "culture definition".) By February 6, 2009, I had created fifty-four initial code categories with a total of 395 sources (i.e., each initial code categories) and 637 references (fragments of data). See Table 2 for the 54 initial code categories.

To understand how I came up with the initial code categories, I will provide an example. The category "Children as sacred beings" listed four sources (four people discussed children as sacred beings) as well as seven references (3 of the 4 people spoke about children as sacred beings two different times during their interview). Jemma (alias name) made these two comments about the sacredness of children: (a) "make sure that the standard of service to our children is just right up there"; and (b) "I don't care if you're black, white or green, you know, umm, the safety and well-being of our children and youth is paramount. They deserve the best service ever."

I wrote the following in my research journal on February 6, 2009, "Overall impression is that there's a lot of data, and I need to condense into smaller categories." I also wrote on this day, "I am going through each tree node and figuring out if it's important for the research. Also, I am referring to the research question and the interview guide." At this point, I was working to further condense the initial code categories into more focused code categories or themes. Charmaz (2006) discusses selecting "what seem to be the most useful initial codes and test them against extensive data. Throughout the process, we compare data with data and then data with codes" (p.

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¹⁴ For this participant, I read through her interview and coded segments of her answers into themes.

42). Next, I reread the 54 initial code categories, while keeping the answer to the research question in mind.

Table 2.Initial Code Catego	ries
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Categories	Sources	References
1. Being asked to work with the Community Organization	6	7
2. Belonging	3	3
3. Belonging and how to show define belonging for families	2	2
4. Changes	3	3
5. Children as sacred beings	4	7
6. Connection to Family	1	1
7. Culture	20	48
8. Differences in practice	9	14
9. Differences in values between Community Organization and mainstream	2	2
10. Discrimination	2	2
11. Elders	3	7
12. Extended Families	1	1
13. Family and Family History	17	25
14. Family and Family History influencing practice	6	7
15. Give and Receive or Karma	2	2
16. History Description	19	35
17. Hope	3	3
18. How identity influences practice	7	10
19. Humility	3	4
20. Identity	19	31
21. Identity and Sharing of common history and or suffering	4	5
22. Identity being changed by work in an Aboriginal organization	3	4
23. Importance of Celebrating	1	1
24. Influence of history on practice	19	31
25. Integrity and or Honesty	3	3
26. Judgment	1	1
27. Lateral Violence	2	2
28. Listening	3	4
29. Mentors and or Heroes	1	1
30. Not Reacting	1	1
31. Patience	1	1
32. Positive Thoughts	3	4
33. Post-Secondary	20	38
34. Practice effecting Aboriginal families	19	33
35. Protocol around traditional territory	2	2
36. Racism	9	10

Categories	Sources	References
37. Recommendations	19	59
38. Respect	5	5
39. Respect and how to show and/or define respect	3	4
40. Self-care	3	4
41. Self-awareness	5	5
42. Sharing teachings	10	20
43. Spirituality	18	35
44. Strength Based Practice	1	1
45. Strengths	5	5
46. Thankful	1	1
47. Values	10	13
48. Values and how we demonstrate them in our work	3	3
49. Values learned from family	6	7
50. What do we all need	5	8
51. What do you reveal to clients	19	31
52. Who to involve in significant decision making	19	27
53. Work other than with the Community Organization	19	29
54. Work with the Community Organization	20	25

I noted that the following initial code categories, although important, were not relevant to answering the research question:

- being asked to work with the Community Organization,
- discrimination,
- give and receive (or karma),
- identity being changed by work in an aboriginal organization,
- importance of celebrating,
- post-secondary,
- racism,
- thankful,
- what do we all need,
- work other than with the Community Organization, and
- work with the Community Organization.

These categories were important for people to discuss in their interviews; however, the majority of them were not applicable to answering the research question. I therefore

deleted these categories, but was able to move some of the quotes to other newly defined categories.

I became aware of *bugs* in the Nvivo 7 (2006) software. I noticed that one of the participant's interviews was missing when I exported the data, and reviewed my Nvivo 7 notes and the participant's interview to make sure her contribution was accounted for. As well, another interview showed up in its entirety in one of the initial code categories. I deleted her interview in the category and became much more mindful that I might come across more mistakes. I made a mental note to (again) review all 20 interviews after the entire process of data analysis was completed to ensure that I did not miss any important statements. I then printed out the 54 initial code categories and began the process of refining them, making them more descriptive, recoding some of the categories. Table 3 shows 15 focused code categories with 35 subcategories.

Of the 15 focused code categories (with their subcategories), a total of 255 sources and 411 references were created between February 9, 2009 and June 22, 2009. Charmaz (2006) noted that "as we proceed (with coding) our categories not only coalesce as we interpret the collected data but also the categories become more theoretical because we engage in successive levels of analysis" (p. 3).

I exported the initial code categories and the focused code categories from Nvivo 7 (2006) to a word document in my computer. I chose to export the information, as I wrote the following in my research journal, "Just had an epiphany. Will now export all the files to my computer and do the work here. I'm spending way too much time trying to figure out how this (i.e., the Nvivo 7 software program) all works." Furthermore, the software license was about to expire, so rather than renew the license, I decided to refine the work in a word document. The next step was to develop concepts with the focused code categories and subcategories.

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Focused Code Categories	Sources	Reference
. Action/ behavior of values towards clients		
Beginning work with families	3	3
Letting families know they are sacred	1	1
Sharing with clients in practice	4	4
2. Culture		
Acknowledge differences in cultural practices	1	1
Children as sacred beings	5	10
Culture and Identity	1	1
Culture and value of Judgment	1	1
Culture brings purpose to work	5	6
Culture Definition	3	3
Culture delivered by Aboriginal people	1	1
Culture is central to delivering child welfare services	1	1
Demonstrating cultural practice outdoors	1	1
Effective change for families begins with culture	2	4
Importance of cultural self-awareness of staff	3	5
Importance of Cultural Values	1	1
Importance of Culture in Healing Families	2	2
B. Family and family history influencing practice	6	7
I. History		
History description	19	35
Identity and sharing of common history and or suffering	4	5
Influence of history on practice	19	28
 How staff identity influences practice 	7	10
6. How to create a safe place for families		
Creating a safe place	1	1
'. Identity	19	30
B. Lessons learned in the child welfare field		
Influence of mentors on workers today	2	2
Letting go of pain	1	1
No judging	1	2
Practice differences		
Differences in practice	10	16
0. Practice effecting aboriginal families	19	32
1. Recommendations	21	62
2. Sharing teachings	10	19
3. Spirituality	18	35

Table 3.Focused Code Categories

Focused Code Categories	Sources	References
14. Values		
Belonging to a community	6	6
Humility	3	4
Integrity and/or honesty	3	3
Respect	5	5
Strength-based	1	1
Listening	3	4
Sharing with clients	18	30
Values in general discussed by workers	10	13
Values learned from family	6	7
15. Worker's responsibility		
Self-care	2	2
Self-awareness	6	6

I inserted the 15 focused core concepts with their subcategories into an outline word document on October 8, 2009. I then went back to the original interviews to see if I missed important statements. As mentioned previously, when I exported the documentation from Nvivo 7 (2006) to my computer (in word format), I noticed a few of the interviews had copied (100% coverage) under certain categories. I deleted these, and then noticed that the number of sources (should have been at least 19) in each of the interview questions I asked, was in some instances, incorrect. For example, in one question asked, I noted that I only had 11 sources. In my research notices on October 8, 2009 I stated:

I noticed that all interviews in their original format in Nvivo 7 were here (from August 20, 2008) and that somewhere between August, 2008 and the time I exported the files in October, 2009, some of the interviews were placed incorrectly in a category, and/or were missing completely.

I did a search with some of the original interview quotes to see if they had copied over in the correct place.

I then discussed in my research journal that, after naming and reviewing the focused codes in the 15 focused code categories and subcategories, I began to notice that participants focused on discussing:

- 1. practice that incorporates *culture* and how this looks,
- 2. practice that incorporates *values* (e.g., respect, humility, integrity, sharing, caring, etc.) and how this looks,
- 3. practice that acknowledges the *history* of Aboriginal people in Canada and workers who understand this and are able to be empathic,
- 4. practice that incorporates holistic health (in particular Spiritual and Emotional wellness) for the families, as well as *self-care* of the worker, and
- 5. *lessons* learned by workers over the years working in the child welfare field (e.g., bringing in hope, encouragement, accountability, sense of belonging; ensure clients have a safe place to talk and be heard; acknowledgment they we are all sacred beings and should be treated accordingly).

As I read some of the quotes, I also noted in my research journal, "How do child welfare workers begin/continue their practice in a good way with Aboriginal families." I also added that "I believe Culture, Spirituality and Values are key here." After reviewing these themes, and looking through the data, I began to see four important concepts emerging from the 15 focused code categories:

- 1. core *values* and the workers demonstrating those values to their peers/clients, etc.;
- 2. importance of those *values* matching behavior/action as closely as possible—looking to our Elders/Old people for those teachings;
- understanding of *history* of Aboriginal people in Canada—stress why this is so important and why our *worldview* is important for workers to know;
- holistic—balanced in terms of health, having emotional, physical, intellectual, and spiritual wellness for individual workers and the organization facilitating holistic health for all involved (includes involvement of Elders).

At this point, I began to see that these concepts were leading to a framework with guidelines for culturally-appropriate practice in this particular urban Community Organization. Before bringing the discussion to the findings (Chapter 5), the next section will detail five important documents in supporting the delivery of urban Aboriginal child welfare practice. A major challenge for the Community Organization is to successfully integrate aspects of the (partially) delegated requirements of the MCFD through the CFCS Act, with three of their policy and procedures manuals and the AOPSI

Manual that honors and respects Aboriginal culture, Aboriginal cultural expression, Aboriginal knowledge and Aboriginal cultural practices.

4.7. Policy and Procedures

A brief overview of the Community Organization's policy and procedures manuals (2003, 2004, 2009) are included in this section; these manuals include several references to the *CFCS Act* (1996) and the AOPSI (MCFD, 2005). I reviewed three policy and procedures manuals in this Community Organization: (a) residential resources, (b) guardianship, (c) human resources. There is no formal policy and procedures manual for the family preservation and reunification programs. Therefore, I will provide a brief summary of the family preservation and reunification programs. The family preservation and reunification programs emphasize keeping families together (thus concentrating on prevention of child apprehension into government care), while also reuniting families whose children have been in care. There are cultural home coming ceremonies held at the Community Organization for those children who are reunited with their families. This program offers the following services/programs for urban Aboriginal children and families: clinical services; advocacy; in-home services; and cultural programs designed to improve parenting skills, family relationships and life skills for children.

4.7.1. Residential Resources Policy and Procedures Manual

Resource workers in the Community Organization actively recruit and support foster families, as well as provide needed resources for Aboriginal children in care. The *Residential Resources Policy and Procedures Manual* (Community Organization, 2003) describes family care homes providing a wide variety of resources and care in the dayto-day lives of Aboriginal children in care. This manual highlights the importance of culture in the following areas:

• **Recruitment: Specific Recruitment.** Aboriginal children in care are given special consideration when placed with foster families. Priority in foster care for Aboriginal children in care is given to the child's family and their Aboriginal community, in a location where they can maintain contact with family or with another Aboriginal family. Special effort is made to recruit Aboriginal

caregivers and non-Aboriginal caregivers who have a connection to the Aboriginal community.

- **Recruitment: Information Sessions.** Information sessions are held for prospective foster parents. Child welfare workers provide relevant information about becoming a foster parent, including Aboriginal culture and the differences between the Community Organization and the MCFD.
- Assessment, Approval and Contracting: Home Study and Agreements and Contracting. In the written home study required for prospective foster parents, the following two points must be gathered, evaluated and documented: (1) understanding of and willingness to accept and support the role that birth family and extended families play in the lives of children in care; (2) knowledge and practice of Aboriginal culture and willingness to learn about a variety of Aboriginal cultures.
- Partnerships in Caring for Children: Assessment; Written Plan of Care. The assessment and written plan of care discuss provisions for the child to access family, friends, community and culture (language, history, traditional practices). Components of the plan of care include: cultural identity, cultural heritage and cultural history.
- Partnerships in Caring for Children: Cultural Plan. The cultural plan involves specific roles and responsibilities of the specific First Nation community, child welfare workers in the Community Organization, and the caregiver. The manual states the following: "If children are so disconnected from family and culture that they do not identify as Aboriginal, the caregiver will be offered consultation with the social workers and others about how best to gently and persistently help the children to develop this part of identity" (p. 42). The caregiver can contribute to the identity and cultural plan of the child in a number of ways that includes cultural activities (ceremonies, spiritual practices, celebrations, language, songs, dances, and other community events) specific to the child's specific nation. Many people may be involved in the planning of culture for a child, including: the child, immediate and extended family, Elders from the child's community, child welfare workers, etcetera.

4.7.2. Guardianship Policy and Procedures Manual

Guardianship workers are responsible for the care, custody and guardianship of children in provincial government care. In the Community Organization's (2004) *Guardianship Policy and Procedures Manual*, four references to Aboriginal culture are made in the day-to-day practice of guardianship workers; they are highlighted below:

• *Planning: Maintaining Family Connections.* The importance of an extended kinship system in Aboriginal families is noted. Meetings between guardianship workers and Aboriginal family members may be structured using cultural strategies such as the talking circle. Furthermore, it is the responsibility of the guardianship social worker to ensure that the child's family, extended family, and family history is gathered and documented.

- *Planning: Maintaining Cultural Identity.* Stresses the importance of the individual worker to gather and help the child maintain his/her cultural identity, including their unique history, values, and practices from their specific Aboriginal community.
- Planning: Cultural Plan. The cultural plan involves specific roles and responsibilities of the specific Aboriginal community, child welfare workers in the Community Organization, and the caregiver. The manual states: "If children are so disconnected from family and culture that they do not identify as Aboriginal, the caregiver will be offered consultation with the workers and others about how best to gently and persistently help the children to develop this part of identity" (p. 35). The caregiver is the person(s) deemed with the most responsibility in ensuring that the Aboriginal child's identity and cultural plan are developed. Caregivers are strongly encouraged to involve the child in cultural activities (ceremonies, spiritual practices, celebrations, language, songs, dances, and other community events) specific to the child's Aboriginal community. Many people may be involved in the planning of culture for a child, including: the child, immediate and extended family, Elders from the child's community, workers, etcetera.
- Caring for Children: Physical, Intellectual, Emotional, and Spiritual. Consistent with traditional Aboriginal beliefs, is the concept of holistic health that includes taking care of physical, emotional, intellectual and spiritual needs. Caring for Aboriginal children's physical needs includes the following cultural components: traditional and ceremonial food, consultation with traditional Aboriginal healers, and providing the child connection to their specific Aboriginal community traditional health and healing practices. Cultural intellectual needs for Aboriginal children include: creating opportunities for further education and connecting with Elders who may assist with this; and encouraging and assisting youth in finding funds for further education and training. Facilitating Aboriginal children in the cultural emotional realm includes: seeking to establish and maintain strong family connections; and access to Elders and Traditional Healers to assist in emotional wellness. Spiritual wellness for an Aboriginal child may involve: assisting the child in exploring his/her spirituality, providing opportunities to experience traditional spiritual practices, and access to Elders.

4.7.3. Human Resources Policy and Procedures Manual

The Human Resources Policy and Procedures Manual (Community

Organization, 2009) provides information to staff about: their terms and conditions of employment; compensation, benefits and administration; employee selection and assignment; performance management; employee relations and separation; and records management. In addition, the manual addresses cultural practice in the following areas: diversity and cultural identity; staffing; education and training, and health, safety and wellness.

- **Diversity and Cultural Identity.** The Community Organization clearly states that they value diversity and respect the cultural identify of all staff. The Community Organization commits to training staff on the history of Aboriginal peoples and highlights the importance that staff be educated on the impacts of colonization (particularly traditional parenting beliefs, practices and systems of parental support). The manual reiterates the importance of staff being educated on a child welfare perspective of an Aboriginal worldview that includes: holism; anti-oppressive social work; inclusive fostering and adoption; the use of the circle in decision making; significance of storytelling; incorporation of cultural protocol and witnessing important celebrations.
- Human Resources Practices and Culture: Staffing. The Community
 Organization practices preferential hiring under Human Rights Legislation.
 They hire and recruit staff with Aboriginal ancestry (the "50% plus 1" guideline)
 to reflect the demographics of the Aboriginal families and children they serve.
 Furthermore, it is written in this policy and procedures manual that at least one
 member of the hiring committee is an Aboriginal person who will assist in the
 final decision making process.
- Human Resources Practices and Culture: Education and Training, and Health, Safety and Wellness. The Community Organization works to promote a workplace that respects Aboriginal culture. For example, in terms of education and training, managers are provided with leadership training from Aboriginal peoples (University instructors, Elders, Knowledge Keepers) who endorse an Aboriginal worldview and perspective. Another example is the "Four Elders' Forums" hosted by the Community Organization in 2010-2011 to provide traditional knowledge to staff concerning contemporary Aboriginal child welfare concerns. The Community Organization supports staff in their health and wellness by offering: Cultural Awareness Programs (e.g., LAHAL, Living a Healthy Aboriginal Lifestyle), Elders and Knowledge Keepers (an Elder is currently staffed to provide emotional and spiritual support to all workers), Aboriginal Therapeutic/Spiritual Practices (staff are welcomed to participate in traditional ceremonies-Smudging, Sweat Lodge, and the Healing Circle—organized by the Community Organization), and ceremonies to publicly acknowledge staff for their hard work and efforts.

4.7.4. Aboriginal Operational Practice Standards and Indicators

The AOPSI (MCFD, 2005) provide four practice standards in delivering culturallyappropriate service for Aboriginal children and families across the province of British Columbia:

- 1. Identify family members, friends, community groups, and organizations that can provide cultural resources to the child;
- 2. Enlist Band/cultural group or Aboriginal community services (e.g., child care worker, counselor, children's therapeutic groups) for the child that are knowledgeable about and sensitive to a child's views, cultural and ethnic heritage, spiritual beliefs and identity;

- 3. Include the services of a language/cultural interpreter to participate in assessment, planning and service delivery, when appropriate;
- 4. Encourage and provide opportunities for the child to participate in cultural and religious instruction and events.

(p. A-21)

The Community Organization (2003, 2004, 2009) has integrated these four practice standards into their three policy and procedures manuals.

4.7.5. *Child, Family and Community Services Act* (CFCS Act)

For the purposes of this study, specific principles pertaining to Aboriginal children and *culture* in the *CFCS Act* (1996) are highlighted below. They are listed in the Community Organization manuals (2003, 2004, 2009) as *CFCS Act* [s.2 (e)(f); s.3(b)(c); s.4(1)(e)(2); s.71(3)].

Under Section 2 of the CFCS Act (1996, "Guiding Principles," s.2 (e)(f)):

- (e) kinship ties and a child's attachment to the extended family should be preserved if possible;
- (f) the cultural identity of aboriginal children should be preserved. Under Section 3 of the CFCS Act (1996, "Service Delivery Principles," s.3(b)(c)):
- (b) aboriginal people should be involved in the planning and delivery of services to aboriginal families and their children;
- (c) services should be planned and provided in ways that are sensitive to the needs and the cultural, racial and religious heritage of those receiving the services;

Under Section 4 of the CFCS Act (1996, "Best Interest of the Child," s.4(1)(e)(2)):

- (1) Where there is a reference in this Act to the best interests of a child, all relevant factors must be considered in determining the child's best interests, including for example, (e) the child's cultural, racial, linguistic and religious heritage.
- (2) If the child is an aboriginal child, the importance of preserving the child's cultural identity must be considered in determining the child's best interests.

Under Section 71 of the CFCS Act (1996, "Out of Home Living Arrangements," s.71(3)):

- (3) If the child is an aboriginal child, the director must give priority to placing the child as follows:
 - (a) with the child's extended family or within the child's aboriginal cultural community;
 - (b) with another aboriginal family, if the child cannot be safely placed under paragraph (a);
 - (c) in accordance with subsection (2), if the child cannot be safely placed under paragraph (a) or (b) of this subsection.

5. Culturally-Appropriate Practice Findings

Honoring children and being respectful in your approach towards this sometimes gut-wrenching field of work will enable you to get closer to achieving the trust that is so lacking, but so necessary, when working with children and families. Without this trust you would merely be administering policies and programs—something that could be done by pencil pushers rather than social workers. (Walmsley, 2005, p. x)

This chapter presents a model of culturally-appropriate practice that evolved from the voices of the participants (i.e., Community Organization staff). Initially I was asked by the CEO to only interview Aboriginal staff, as she felt that their lived experiences as Aboriginal people would better describe a cultural approach; as well, she felt at the time that Aboriginal staff would better situate them to reflect and respond to the complexity of the research question. However, at a meeting with the CEO in early 2007, she changed her perspective regarding this issue in light of the fact that the non-Aboriginal staff who work with Aboriginal children and families have lived experiences as helpers committed to the same vision as the Aboriginal staff of the Community Organization. The CEO understood that non-Aboriginal staff were allies of the Community Organization, and many of them had knowledge and understanding of our culture and our history. She reiterated that the Community Organization was not about exclusion, but rather inclusion. Archibald (2004) said the following statement in an archived webcast that relates to the importance of inclusion:

If when we, if we could remove that concept of marginalization and go back to the holistic, the circle, where everybody can stand in that circle together, so that means no one is out of the circle, everybody is together. Therefore, no one is marginalized. If we could replace that concept of marginalization with more inclusion and being together, then that would be an important step.

The following discussion revolves around the respective themes found—themes substantiated with participant statements. Pseudonyms were used for all 20 participants

to maintain confidentiality. I have used the following designations to describe the people who interviewed for this study: participants, staff, workers, helpers, social workers and child welfare workers. The final section of this chapter provides a summary and a diagram of the practice model that evolved from participant statements.

I take full responsibility for the interpretation of the data and any misinterpretation of the findings. While some participants spoke about each of the five themes presented, others expressed ideas around three or four of the themes. The participants also voiced their opinions about other topics (e.g., racism, discrimination; see Chapter 4, "Data Analysis") that were extremely relevant to Aboriginal child welfare practice and our history as Aboriginal people. However, these topics were not relevant to answering the research question and were therefore not discussed in the findings.

5.1. Values

Before I began community-based research with the Community Organization, I was invited to attend a staff meeting to formally introduce myself. Here, I learned the greater purpose of this staff meeting. The staff had been working diligently in small groups to present their vision of values that were common to the Community Organization. The goal of this exercise was to define and produce guiding *values* that would direct their child welfare practice. The five Community Organization's values and their respective definitions are:

- **Respect.** Respect flows freely from the Creator to and through everyone and everything without judgment, from the tiniest child to the oldest Elder. It is the basic law of life that authenticates who we are and allows us to honor all of creation and all paths to the Creator that keep the Circle flowing in a good way.
- **Integrity.** Acting with Integrity means doing the right thing and facing adversity head on. Making a decision in good faith means believing in our hearts that we are acting in the best interests of all.
- **Belonging.** Creating authentic connections that encourage healthy and caring relationships with our children, families and community.
- *Humility.* Humility is...putting others first by giving up what you think you deserve; Mother Earth for she provides our every need and loves us even when we do not listen to her; a newborn baby coming into this world with

nothing but their small presence asking only to be loved and cared for; recognizing what we give in our lives and being thankful for each new day.

• Strength-Based Practice. The Community Organization incorporates a strength-based approach to service delivery. It is based on the recognition of resilience among the many generations of Aboriginal people who have withstood the impact of sustained and systemic oppression. It is also a celebration of the survival of our Indigenous worldview and our cultural practices that continue to guide the reclamation of our Indigenous system of care. We believe in empowering people to trust that they have both the capacity and mastery to take responsibility for their own healing. Through empowerment, we facilitate a process whereby the individual discovers and reclaims the strength and wisdom that is inherent within their being. Our role in the strength-based model is that of a helper in a traditional sense. By carrying the teachings of our ancestors and incorporating Aboriginal cultural customs within our social work practice, we can facilitate healing opportunities and share in the successes of Aboriginal children, families and the community that are involved with our Community Organization.

(Community Organization, 2009)

These five guiding values of the Community Organization are important to note as they are a positive reminder to the helpers of working from a place of respect, integrity, humility, belonging and strength-based practice to the children and families they serve. As noted before, the staff are from a variety of communities across Canada, but came together to complete their vision of guiding values for urban Aboriginal child welfare practice. This is important as it comes directly from the staff who work for the Community Organization, and it clearly defines and articulates their vision in how they wish to approach urban Aboriginal children and families.

Four participants made direct reference in their interviews to the importance of these Community Organization values in the integration of their practice, and the significance of having a values framework in the Community Organization:

I think the key thing here is having an agency to believe and to keep strong, and when we're all working from the same value system, we end up being able to be consistent, like a strong mom for our people, and I think that's so important. (Ebony)

The Community Organization values actually are kind of a good thing for me to hang onto because they are things that have been a part of my practice for a long time too. So, you know—humility, integrity, strength-based,...respect, and belonging. (Mai)

In regards to the values, I really believe in the core values of our Community Organization because those are mine....One of the nice things I like about our Community Organization is that we put our values right up front. (Sapphire)

But the other thing that's important is that thinking about the Community Organization values, is the whole concept of respect.... (Pearl)

While abiding by the guidelines and frameworks of the *CFCS Act* (1996), the AOPSI (MCFD, 2005), and three of the Community Organization's policy and procedures manuals (2003, 2004, 2009) in protecting children and supporting families, there were opportunities for participants to express similar values of the Community Organization in their work:

We ask people to work from a place of who they are and what they believe in. We ask people to give of themselves, their own experience in the work that they do. So it's a spiritual form of practice that we ask our staff to engage in. (Sky)

So I don't think I've been in the Community Organization building more than 20 minutes when I knew I wanted to work here. That's what it really was. My values were alive and encouraged here. (Topaz)

Along with the Community Organization values, participants spoke of the importance of other values that influenced their work with Aboriginal families and children: caring, empowerment, (no) judgment, sharing, and trust. At times, participants spoke about these values individually, as well as how they would demonstrate these values in their everyday practice and interactions with families. A few participants grouped their values together, making strong statements about the importance of consistent values in their everyday practice:

The values that I was raised with are really about sharing, caring, respect, honesty, humility, doing things in an honorable way. All of those, I think translate into my work because it's how I interact with people—whether it is children, whether it's the families we work with, the other colleagues or other partners that we have in the community, even in the Ministry. (Jasper)

And it's really interesting because I usually just sit and listen, after I've laid down the ground work in terms of where I am coming from and all that, what my role is and everything. Then I just sit there and I listen and it's amazing how much people tell me. I don't even really have to ask a lot. It's the fact that you are respectful and willing to listen to their story and not be judgmental. (Sapphire) A few participants described working from a value system that centered on treating families and children with respect:

I think that when values started really making sense to me is when I started really seeing, in my first work place...they really provided a lot of cultural activities for us....And the agency fostered and supported that utilizing the culture. And the messages that I kept hearing...is that the caring, the sharing, and the respect. And you would hear the Elders constantly say respect, respect....I really think that it's about, the basic one is respect. That's the springboard off of everything else. You know, the caring, the sharing, umm, how we treat each other. And I think that when I do my work and it is based on that.

(Jemma)

I value trust, integrity, being truthful, non-judgmental, and trying to treat others as best, the best I can, the way I would want to be treated. (Jasmine)

The values from my traditional culture—those are important to include in the work, in my approach to the work. And I think it's not that unique or not that profound, in that you treat people with respect. (Jade)

The participants believed in the importance of working from their value system in everyday practice. Treating people with respect, decency and non-judgment, while caring and sharing of our own unique experiences was described as a spiritual practice. This practice in turn would likely influence a more positive outcome with Aboriginal children and families.

5.1.1. Respect and Non-Judgment

Respect was an extremely important value discussed that was integral to both personal and professional relationships:

The value that I value most is respect because in my opinion respect is the umbrella over most other values. Respect is huge within the Aboriginal population. In doing my work and even in my personal life, I try to reflect respect in all my thinking and actions. (Pearl)

Respect was also discussed as understanding that while our life experiences are different, all people deserve to be acknowledged and included in the circle of life, rather than being marginalized to the sides:

...the whole concept of respect is different in Aboriginal culture than it is in my culture. [In] my culture respect...there's an implication that you are below the other person. You look up to someone you respect and what I'm learning in Aboriginal culture is that respect, is that each person is, there's kind of an equalizer if I can put it that way. (Daisy)

Respect was not about placing families above or below the worker, but rather walking with and/or beside the family:

Many [of the families I worked with] of them would say that I'm the counsellor and I would say you're the family and I'm walking with you. I'm not going to be ahead of you or behind you. We're walking together for a little while in your journey. (Summer)

...we don't have to, I don't ever put myself above the clients. I try to put myself on their level. (Ebony)

Hart (2009) explained respect as "the showing of honour, esteem, deference and courtesy to all, including refraining from imposing our views onto others" (p. 36). Respect could also be interpreted as the worker acknowledging the family by being in the present moment with them, and, at the same time, having an understanding with no judgment of their current circumstances:

It's acknowledging people where they are at in life. We all have our own journeys in this life and I can't walk your journey and you can't walk mine. I try not to judge those people I work with and even those people who are out on the streets because I don't know what reason they are on earth and what lessons they are here to learn. (Pearl)

And one of the red road teachings was everybody is on their own journey, they're at different places along the path. (Oak)

One participant explained that by taking the time to build respectful relationships with families, the families would likely acknowledge the worker as a helper:

...if you can show your clients the respect, they in turn will respect you and therefore you will have a much better working relationship, because they'll know that you're here to actually help. (Sapphire)

Another important concept related to respect, is non-judgment. Aboriginal adults served by this Community Organization may have previously and/or currently felt judged by workers as a result of their addictions, family violence, poor parenting skills, and/or

unhealthy lifestyles. Participants discussed supporting families by being aware of their own judgments:

Because many of our moms and fathers and children are wounded beings who are very vulnerable and are very sensitive to any judgments, people might have...attunement is very important in the work that we do with our families. (Winter)

...we need to accept them [the families] where they're at and not judge them for, not be angered, not take offence where they're at or if they don't want to grow. (Oak)

I think that if you can come to people as they are, as closely as you can to that, it's easier to develop a trusting relationship. (Opal)

Furthermore, one participant noted that judgment was not part of our value system in our traditional communities:

Because judgment is something that is not part of our culture.

(Violet)

These quotes stress the importance of the values of respect and non-judgment in practicing urban Aboriginal child welfare work. Workers, who can remain open, curious and respectful, as opposed to judgmental, support our urban Aboriginal families. Giving families opportunities to engage in healthy relationships by demonstrating the values of respect and non-judgment may help strengthen families by building confidence in their abilities.

5.1.2. Integrity

Working with children and families in an honest manner was meaningful to the participants. It can be difficult at times for workers to confront and inform Aboriginal families about their practice concerns (e.g., a worker has to inform a parent that her child in foster care has to have his placement extended). However, telling the truth to families was needed in order for the workers to help the families deal with their present challenges:

I've had many, many clients come to me after the fact and say, you know, you're the only social worker that's ever been straight up with me, that's told me what's what, and was very firm, and I never had a question about what was going on when you were my social worker.

And they really appreciated that. So honesty is the big thing.

(Lily)

So that kind of stuff (dishonesty) really, really upsets me, especially as a social worker today. I don't tolerate that in my work and I don't tolerate it from...and it sounds harsh from the workers that I supervise or the workers from the Ministry. You know, if they do work, it's got to be the truth. (Jemma)

Integrity was also considered as an important value for social work practitioners:

I think I've always been a person, I'm proud of my integrity as a person, very proud of that, and that again influences my work. I just try to stay whole and then accept others that way and go with that.

(Daisy)

For me integrity is so important. Without integrity, you have nothing and I really believe that. (Sapphire)

I also know I must first be honest to self and others. We talk about integrity, we talk about values, we talk about ethics. These are important parts of our cultural teachings. (Willow)

Being honest with families by clearly stating expectations and documenting

paperwork in an ethically honest manner was important to these child welfare

practitioners. Working from a place of integrity is vital in this line of work.

5.1.3. Caring and Belonging

The participants considered the importance of caring for families in their work. Acceptance, guidance and supporting families (again with a non-judgmental approach),

were part of caring:

Right now I'm working with a family who is street entrenched. So they're just coming out of that and they're trying to make it, their way out there. I'm trying to guide them and give them the acceptance that they need. So, it's letting them know that there are people that care. (Ebony)

I took about 20 minutes talking to her and letting her know what our worker could do. And, you know, doing that whole piece. The Ministry was there, so I think that giving our families opportunities. Take some of that...being that buffer too when the system is so harsh. It's like, you sit down and I will just take care of this for a minute. And, you know, sometimes families need that for a bit. Just to get some of that pressure off—they need a buffer. (Jemma)

Participants also spoke of helping families connect and/or feel like they belonged to a community. This is part of caring:

So in the city, make community, create belonging. (Daisy)

I try to encourage people to connect to whoever it is that they feel they need to connect to. Whether it is family, friends, community (theirs and others) and those support people in the community, they are there to help them in their varying circumstances. I know many people who visit the Friendship Centers and I know many that don't. (Pearl)

Caring was demonstrated by the workers to the families by: providing extra supports to the families when needed, taking time to listen; acknowledging their concerns, and accepting (not just tolerating) the families without judgment. Enhancing the belonging/connection for families to their culture, families, and/or community was also an important component of caring.

5.1.4. Humility

Humility and being humble were discussed by participants as important values in their work with urban Aboriginal families. These participants described humility as being a helper or facilitator:

I would like to think that umm, I helped in some small way facilitate their own healing and their own growth. And...not that I ever want to take responsibility for that you know, but just to be able to be in a position to help facilitate that. (Jasper)

And just being very mindful of that, that I'm just a very small part in their lives [families I work with] and that they are the ones that have the power and the power to change. (Jasmine)

Another participant discussed humility as learning from the family, as they learn from him:

I reveal to them that I'm not an expert. I'm not an expert. I'm an experiential learner. I'm a person who is experiencing life and that I have the pleasure of experiencing life with them and others I have encountered. That I learn and grow like they may from the experience they have with me. (Winter) One participant described humbleness as recognizing that she did not have to know everything:

I get to walk in a place where people are very vulnerable and that I need to honor that. I need to honor and humble myself to this, because it's so amazing....Humbleness. You know, I don't have to know everything. (Summer)

Workers practiced humility by knowing that families understood their challenges and had the solutions to change:

The families ..., have the answers on how to change their situation and my job is to ensure that the kids don't get hurt in that process. (Jade)

I think that a lot of times our families have the answers, it is just that nobody has actually taken the time to sit down with them and find out what things do they want to work on. What things are important to them and how are we going to go about dealing with the challenge. (Sapphire)

Being humble in a healthy way with families meant that it was reasonable to ask the families for solutions to their challenges. It also meant that the worker would accept constructive criticism from families around what was or was not working:

...It's ok to say [to the client] I need your help. It's ok to be humbled. I think that that's what's happening, is that there is too much pressure on them [the child welfare worker] to be the expert.

(Emerald)

And to continuously check in with families, co-workers. You know, something is not sitting right, so I'll say to the family, tell me how I'm working, tell me what works and what doesn't work. I'm a big girl, I can take it. Umm, and if you don't want to talk to me, you can talk to my supervisor, or you can write it down, you know, if something is just not sitting right with you. You know, we can work this out, whatever is going to be supportive for the family. (Jasmine)

Practicing humility and being humble was discussed by the workers as: putting yourself at the same level of the family; not being an expert on their lives; being open to learning about self from clients; turning to families for guidance to their current challenges; and having the ability to learn from the families by listening to their advice around what works best for them.

5.1.5. Strength-based Practice and Empowering Families

Strength-based practice was described as looking at the strengths and resilience of families, rather than their weaknesses and/or faults. While the worker can acknowledge family challenges, the focus should be the current strengths of the family:

But it's just changing that perspective and sort of looking at things in a way that, not always from the negative, not from the deficit base, that there are strengths to every situation so it's becoming a bit broader in your thinking around it. (Jade)

I always come from a strength based place. I always try to look at the positive side of things. (Sapphire)

Each individual needs to find their own strengths, as we all have strengths. It was and is very important to me to know my strengths in doing my work and living my life. (Pearl)

Two participants noted the vulnerability of urban Aboriginal people, and restated the need to emphasize strengths:

We deal with such pain every day, such loss every day. The hopes and strengths of families are always there. We talk about our families and their strengths. They have strength and courage because they stand right now in front of us, vulnerable and raw. (Willow)

Because many people...what was described to me in my work before is that they felt stripped and they felt naked when they were coming to learn about parenting and that they had nothing. And that they were left without their family and they were fighting for their family....Leave people intact and know how to bring that out and how to bring out their strengths. I work on those things. You know, to make it so that they're visible and that they can always see that in themselves. (Summer)

Related to strength-based practice, staff highlighted the importance of

empowering families and children. Starratt (1996) discusses empowerment:

The empowerment of individuals takes place within an empowering community. We can engage in a process of growth, self-discovery, and self-expression in a community of persons who care for us, who respects us, and all the ways we are different, who appreciate and embrace our talents as sources of enriching the community. (p. 112)

If workers take the time to help families understand that they have personal power, families can begin to feel empowered in their everyday lives:

I want them [Aboriginal clients] to feel like they're part of the solution. In fact, they're going to come up with the solution. I want to empower them. I want our service to be able to make our families resilient. (Sapphire)

My approach is always to empower the families. My approach is always to look at how they can they make a difference in themselves. (Ebony)

I want them [Aboriginal people] to feel empowered. I really want them to feel that they can fight back. I am not sure if fight is the right word but I feel like...I want them to feel that they can assert themselves and be heard. (Emerald)

I'm very passionate about helping and empowering families. Umm, understand who they are and where they are and how they can sort of fit into society, as best they can...understanding that I can, I can work at empowering families and in subtle, but teaching, caring ways to help build their families to make sure they don't have another generation of kids in care. (Jasmine)

Giving them [the families] every opportunity, never writing them off, not undermining the work that they are doing. (Jasper)

When workers help individuals/families feel empowered, the families in turn can use their strengths to enrich and empower others. The participants expressed their passion in their work to empower families by: giving families the opportunities to help with decision making; stating to families that it's ok to verbalize their needs and wants; acknowledging their accomplishments; helping families become responsible and taking ownership of their current challenges; and helping families understand that changes they make today can positively impact their futures.

5.1.6. Trust

The participants discussed that building trust with families was essential due to our history of colonization:

I mean people need to able to trust, especially Aboriginal people. Being white, that's a bit of a barrier sometimes....You have to develop trust. (Opal)

The clients that you work with, you just have to make sure that there is trust. (Sky)

Developing trust is a process that requires the social worker to use their skills, knowledge and values to establish credibility to the family that they will not take advantage of their vulnerabilities. The workers need to be clear to families about expectations, particularly when working within the child welfare system:

I would like my practice, specifically with Aboriginal people, to help a little, have more trust in the system, because there is none there, and justifiably so. It's a hard thing to trust when all the historical stuff has gone on. (Lily)

One participant identified that in developing trusting relationships with families, they in turn would likely share more of themselves:

Things can be done differently when you know our people and can reach out to people and where there's trust, they open up and they're ready to share some of their losses and their history of living.

(Violet)

Taking the time to build trusting relationships with Aboriginal families who are or potentially will be involved with child welfare services is crucial. When trust is established and families are willing to share more of their predicaments, the work for both the worker and the family would likely be more relaxed and stress-free.

5.1.7. Sharing

During the interview process I asked the guestion, "Is there anything about yourself as a person that you reveal to your clients (or the people you work with)?" I was curious to find out what workers shared about themselves with families and children. In the context of urban Aboriginal child welfare practice, this worker imparts what she has learned about sharing with families:

people need to know where you're coming from. People need to know what you believe about them, what you believe about the work with our people. They need to know your general guidelines, your general approach, so that they have some anchors for themselves in the work that they do. (Sky)

In the early stages of meeting and developing relationships with families, this worker explained his work philosophy:

I think it's very important that I share with them, right off the bat, that I'm just experiencing life and that I am learning and growing just like they are. Not any better, not any worse. I'm just experiencing life and I thank them for being part of my life. (Winter)

Knowing what to reveal about self was tricky. Personal life experiences were shared with families if the worker deemed it appropriate and felt that it would help the family in some way:

When I felt that it would assist a family member that I did share experiences that I had gone through. I also shared things that I had tried to make change. So, when it was appropriate, that I was able to do that. And part of that was really trying to make the connection, you know. (Jasper)

I can empathize. I may understand the Aboriginal experience but I wouldn't dream of condescending to know exactly what that suffering has been, but I can share in that suffering because I've had my own suffering as well. And I can share that suffering of my own and help Aboriginal people, my colleagues, or clients know that as a woman or as somebody who's lived in a culture where they felt ostracized, I can relate to that and you know, suffering I think is the common human experience. (Emerald)

The purpose of sharing or self-disclosure to families was about helping them; it was clear that it not about sharing the worker's own unmet emotional needs with the family. Freeman (1992) offers his "Involved/Detached I" position (although this stance is from a family therapist standpoint, it is appropriate in this context) that "requires that the therapist (i.e. child welfare worker) be emotionally involved in the family, and yet, keep part of his mind out of the emotional involvement and in an observational stance" (p. 61). The helpers stated the following about self-disclosing to families:

As I become more of a more mature professional, I've sort of increased how much of what I reveal. Umm, which has been an interesting practice development and what that means. Types of self-disclosure, yes, it's about how much, when, where, you know, whose interests are at play. (Mai)

If I do reveal anything, it needs to be appropriate for the situation, as well as ethical. I have to be careful what information I reveal to the families. It's rare that I share any information about self. I remind them of the confidentiality clause and inform them that it's their life we're talking about, not mine. (Willow)

I mean I am aware that when you tell people things about yourself there's a chance that you are now changing what is supposedly kind of

a worker therapeutic relationship into a social relationship. And I understand that reasoning but I just think there's lots of times it's totally appropriate to reveal something that is relevant to what's going on. Even if it's just a way of letting people know that you do know what it's like to struggle or to go from "a" to "b" the hard way. That there's times when it's absolutely relevant, but I mean, I also do believe that you can do the work without really ever doing that. So yeah, but personally I tend to sometimes self-reveal. (Topaz)

Relating to common experiences in the child welfare system was seen as an appropriate topic to share with families:

Oh yeah, I am a pretty open person (ha ha). So I certainly keep appropriate information to myself, but I think that it helps me with some of my teens and young girls, helps them realize that I'm more than just this person who comes and sees them and has this education and a good job. I try to help them see that I struggle with some of the same things that they did. I certainly talk about my own losses—I wouldn't say a lot, but enough that I am hoping that through what they hear that I've gone through, that they will have some sense of that I understand and that I know that it's hurting and that they are in pain. So I definitely do use a lot of my personal experiences in life to reach out to kids. I'm honest with them about my own experiences as a teenager and as a young person and how my, you know, what decisions and choices brought me to where I am today. And I think that that can only really help kids if they see that you are a real person and not just this social worker that comes and visits them every month—that you really do identify in lots of ways with them. And if it's not my own experiences, I often share about people I know or family members. I just really want to relate to kids sometimes and sometimes I think you can only do that through personal experiences. (Garnet)

Oh I tell them about having been a foster kid myself. (Oak)

I tell them I'm adopted because they ask me about that. I tell them that I was in foster care. I guess I don't want the conversation to be focused on me, but I can speak to them just around you know very general [things] I suppose. I choose not to be in a vulnerable position with a client I guess but just to let them know that I've had experience with some of the stuff that they may be experiencing as well. (Jade)

...that I was a cic, a child in care. Umm, that I'm a young mom with no family, no nothing. You know, just taking little training courses and seeing where life was going to take me. Making decisions, how I came to those decisions....Umm, and just really sharing that, you know. (Jemma)

These workers shared personal examples of parenting challenges:

I look at, ok, what can you do to make a difference for your own family and I give them examples of, myself too at the same time. Being a parent and what it's like to raise a child and how you have to change your ways of being in order to make sure that the child is going to be happy and safe and have a stable home, right.

(Ebony)

It depends on the client and if I'm trying to build rapport with the client and if there's something that I feel could be beneficial; I'll discuss it with them. I'll discuss you know, you know they will say something about how it sucks to be a single mom and I'll go, yeah, it does. I was a single mom and I know it's difficult and that anything worth doing is hard work, but that their path is going to be very different from my path and that, you know, the next family may have the same thing.

(Jasmine)

Archibald (2008b) discusses the responsibility of sharing in a cultural context:

If one comes to understand and appreciate the power of a particular knowledge, then one must be ready to share and teach it respectfully and responsibly to others in order for this knowledge, and its power, to continue. (p. 3)

Knowing what and when to self-disclose personal life experiences to children and families was dependent on whether or not the worker felt it would help the family. The workers understood this responsibility and were cognizant of its power.

5.1.8. Walk Your Talk

Two participants acknowledged that working from a practice based on traditional Aboriginal values was not always easy:

On the other hand, those values [sharing, caring, respect, honesty, humility] are really hard to live by. You know they are very easy to say, umm, but they're very hard to live by. (Jasper)

On the Red Road we talk about integrity, we talk about honesty, we talk about awareness, and we talk about empathy. All these things are an important part of this work. And I need to talk the talk and walk the walk otherwise, I would be a hypocrite and also lack integrity. (Willow)

One person was firm on the importance of walking the talk:

Make sure you're walking the path of what you're trying to teach out there, and what you're trying to model. And do it by action, not just words. (Violet)

The participants in this study discussed working from a framework where their value system closely matched their everyday actions and behaviors. Canda and Furman (1999) discuss the awareness that social workers "walk this talk" while supporting families:

social work in its best sense...means that there is an awareness of suffering and the possibility of transformation. It means that there is a motive of compassion to work together with other people to help us overcome obstacles and achieve our aspirations....Of course, it is difficult to 'walk this talk'. (p. 9)

5.1.9. Family of Origin Influence on Values

The participants discussed how their approach to social work practice was influenced by their families. Four of the staff members were raised partially/fully in foster care; one participant was adopted; three people were raised mainly by grandparents/extended family; and 12 of the 20 participants were raised by their birth parents. Those raised partially/fully in foster care and/or adopted stated the following about their commitment to this work and their personal history of upbringing in the child welfare system:

I come from trauma. We deal with families trying to find out where they belong and which I've been trying to find where I belong most of my life. Certainly we have families who have to deal with removals. I was a removal and in the system itself. (Willow)

I feel as I said earlier, being Aboriginal myself, I think it has a lot to do with it. I've been in foster care myself. I've also been adopted by a white family, so I have a lot of personal connection I think to the work as well. (Jade)

Participants who grew up in foster homes and/or were adopted were empathetic with the families. Growing up in foster care influenced one participant to become a helper:

When I was younger, I always wanted to help out, umm. I'm not sure, you know, where that came from. It was inside and I think it

was, you know, some of it was being raised in care myself and maybe I needed that sense of purpose in my life. (Summer)

Participants, who grew up with their birth families discussed their family influence in their value systems:

So, umm, influenced by [my family] the kindness, the caring and not judging and just being present for the people that I'm working with. (Jasmine)

Appreciating struggles from their own family of origin, two of the participants

discussed how they view families through a non-judgmental lens:

And I really think my family is really evident of a family being able to go through just horrendous stuff and being able to come out and heal from that and be able to remain solid. So I think that that translates to how I view the families we work with, you know. (Jasper)

Well I grew up in a family that looked really white middle class normal on the outside, but there was a lot of silence inside and again I was kind of an anomaly....So, I like being in any kind of position where I can encourage individuals to be who they are. And I always see that as positive. I think my practice is strongly influenced by an ability to see a human being through the circumstances—whether it's a violent dad, or a little child, or someone who is addicted. (Topaz)

These participants were able to see beyond the destructive behaviors of the families and see that their own life experiences helped them have compassion and a better understanding of suffering and pain. Two participants discussed positive family of origin experiences that translated into them wanting the same for the families they worked with:

I came from real privilege and feeling very secure as a child and always safe, always loved and nurtured and well taken care of and as I started to grow up, I guess it was sort of the conversations we had around the dinner table or whatever and I started to notice that there were other people in the world that didn't have what we had and that just really struck a chord with me and stuck with me. I do feel very privileged and very lucky. And I would love that every child could have what I did, right. (Opal)

I think that I bring a lot of my culture into my job because at a very young age, in our family anyways, my mom and dad really taught us the values of what's it's like to be a good citizen and to care about your family, as well as the people that you look after. (Sapphire) Alcoholism, domestic violence, and mental illness were some of the challenges staff discussed in their own family upbringing. These challenges may have inadvertently prepared participants in knowing that future positive change for families is possible:

Since childhood I've been seeking more belonging then I was able to have in my family. My family was, uhh, lots of family violence, lots of drinking, really up and down, depressed mom, angry dad, all that kind of thing. And I think that it really helped me to be able to put myself in someone's shoes. It wasn't my fault. I was just a child. (Daisy)

Coming into this work, I looked at how I wanted to make a difference for other people, because I knew what it was like to grow up in an alcoholic home. I knew what it took to overcome that. (Ebony)

Staff described positive influences from grandparents who provided good teachings about living a good life and understanding the value of family:

And one of the things that I learned from, many things I learned from them [grandparents], but the main area of influence has been their value system. Just in general what they believe to be the responsibility of people to be honest, to be kind, to be respectful of the environment and to avoid bad karma. To them it wasn't karma, it was about the belief that what you put out is what's going to come back to you in your life. (Sky)

I was fortunate enough to live with my grandmother and grandfather when I was young. I got a couple of good years of childhood and a couple of good years of parenting from my grandmother. And I was really fortunate to live in a home that had four generations in the home. (Lily)

It was important for the participants to disclose that their social work practice with urban Aboriginal families was heavily influenced by their value system. The values discussed by the participants that were an important part of their every-day work with families were: respect, non-judgment, integrity, caring, belonging, humility, empowerment, focusing on strengths (rather than weaknesses), sharing and trust. For these participants, it was finding the right balance to make the families feel comfortable and, at the same time, continue to follow policy and procedures guidelines.

5.2. Respect for Culture

The participants spoke of having a deep respect for the role of culture in Aboriginal child welfare practice. They acknowledged that culture has a role and place while working with urban Aboriginal families:

...the cultural piece, the strength of the traditions and the practices and that those systems that have been existing for thousands of years are still very relevant and very functional and practical and can really lend itself to a lot of the strengthening and healing that is going on today. (Jade)

One person spoke of the loss of aspects of traditional culture due to the colonization process. He maintained that workers have a responsibility to understand and be clear about the significance of culture in healing contemporary urban Aboriginal families:

I have a real belief that any individual working in a child welfare agency, right, whether they are Aboriginal or non-Aboriginal has to have a really, really clear understanding of culture and the importance of culture in healing the families that we're working with because it's, the disconnect of our culture, you know, that allows a lot of this stuff to continue to be perpetuated, you know. (Jasper)

Two staff spoke of the work environment and the function of Aboriginal culture in the form of visual presentation (e.g., paintings, carvings, blankets). They described the good feelings and positive energy in the office milieu:

This Community Organization is the celebration of culture that is contributing so much to morale and to just the whole tone of the place. The decorations, the color, it takes it away from that bureaucratic office-like feel. People really, they put themselves on the walls at this Community Organization. You walk into someone's office, you get a feel of a person's character. Now that's true in the Ministry too—people do decorate their offices but not with the exuberance. (Daisy)

I've actually brought people in here who are friends of mine who have come to say, meet me for lunch and they walk into this environment and they come from manufacturing industries and other industries in Vancouver like lawyers or a friend of mine who is a printer. Other people when they come into this department, they say "wow." "Our working environment is not like this." And they feel it. That is very unique. (Emerald) Likewise, one staff member highlighted the importance of sustaining Aboriginal culture in their Community Organization through visual representation (e.g., art work, brown faces), so that people who entered the building would feel comfortable. It was important to welcome Aboriginal people in a way where they felt accepted:

the predominant mode reflecting back to our clients when they come into the doors as an Aboriginal person, whether it be through the faces that the see, the art work that is on the wall, the practice of song and cultural expression in the work that we do, and knowing that the people that they are dealing with completely understand how they came to be where they're at. (Sky)

Aboriginal culture is important for healing families and for welcoming them to the Community Organization. Aboriginal culture was and continues to be an integral part of social work practice with Aboriginal people.

5.2.1. Definition and Description of Culture in the Community Organization

Culture was defined in three parts in Chapter 3: (a) ways of doing, (b) ways of thinking, and (c) ways of feeling. In the context of daily practice with urban Aboriginal children and families, culture is a way of doing: knowing that being supportive means approaching families with respect and care, while also setting firm boundaries and guidelines. Culture is a way of thinking: workers need to be mindful of the historical injustices imposed on Aboriginal people and understand that inappropriate behaviors and actions are almost always masked as pain. Culture is a way of feeling: workers can help families feel that they belong, that there is help available, and that there is a way out of the child welfare system. While I did not specifically ask participants to define culture, one Aboriginal woman offered her interpretation of culture, as coming from a set of values that helps people understand and know they are cared for:

We are very, culturally, we are very caring, a very supportive community. Again, that balance, walking through it. Knowing when we need to be tough and strong and knowing when we can, you know, hold somebody, carry somebody. And how we support people through that and again if somebody is hurting they need their own people to be rallying around them and holding them and taking them through that. That's culture. (Jemma) Practical aspects of traditional Aboriginal culture were described by staff members as ways of doing, particularly in spiritual ceremonies:

Within our agency we practice prayer in a circle, usually holding hands or if it is the sick season, then we open our hands to the Creator. Someone leads us in prayer before our weekly team meetings (more recently) and there are other situations where we pray in a circle. At one time, once a week, it was announced that an elder was available for prayer and smudging. Those that wanted to participated. One day it was announced that we were having a circle to honor the missing women of the east side. Someone led us in prayer and those that wanted to share stories or feelings did so. Again, it is only offered for those that wish to participate. Our agency has also practiced cleansing of our buildings and brushing off of our staff for those who wished it. (Pearl)

There is space made at meetings for prayer, and the celebration, for example, of youth who age out of care and all that stuff is just, it happens in a very powerful way at this Community Organization. Perhaps I am seeing it that way because it's foreign to me—it's not my culture. But I just really love it. (Daisy)

Although this response was not specifically related to culture in this Community

Organization, it is relevant to the overall description of culture in an Aboriginal context:

They [an Aboriginal agency] really provided a lot of cultural activities for us. You know, be it an Elder coming for the afternoon for the staff who wanted to talk. Be it a medicine man coming for the community and once the community finished, the staff were able to go and see the medicine man. Umm, really embracing cultural practices, sweet grass picking, whatever it was. There were always options and opportunities for us to take part in that. And of course there were sharing circles. (Jemma)

As a final point in this discussion, one participant acknowledged that culture is something that is learned throughout a lifetime:

Culture is about how you express your life through a very specific lens and that lens has to do with the culture you come from. (Sky)

Aboriginal culture was reflected in this Community Organization by being visible, heard, and likely felt through the values expressed by the workers towards the families served. Aboriginal culture was highly respected by staff as being an integral part of urban Aboriginal child welfare practice.

5.2.2. Importance of Culture in the Community Organization

Nineteen of the 20 participants agreed that culture played a major role in delivering Aboriginal child welfare services. The one staff member, who did not readily agree that culture had a role in service delivery, expressed the following:

I'm still learning about my own particular culture. Umm, it's very difficult, so I'm sort of on the fence with that. If it's positive for the family, I'm all for it, I'll stand behind it. I will get as much information as I can for the family to support them, find Elders, counsellors, do internet searches, ask around, get as much as I can. And if the family doesn't want anything to do with their culture, then I don't push it. (Jasmine)

There were many positive aspects of utilizing traditional culture with families/children. For example, introducing culture to families can help facilitate *native pride*:

Culture and ceremonial practice/teachings are important to pass onto our lost brothers and sisters who live in the urban area. They can be informed who they are and where they come from, as long as the cultural teachings/practices are present in the community. ... Culture is a tool to assist and validate the families. (Willow)

One participant described the importance of culture as an integral part of everyday living. She also acknowledged the importance of helping each family find their own cultural practices (ceremony, protocol, teachings):

Culture is a big part of who we are and you can't put it to the side when we're looking at our people, our values, they come from our culture too, right. So when we're dealing with the people, we're not able to separate that easily. Give them that respect and, trying to search, help the client search for their own practices at the same time. What is appropriate for them. (Ebony)

A few workers expressed the importance of culture in identity formation and the reality that many of the families/children may not have any knowledge/experience with traditional culture:

Well I really want to help children stay connected to their culture. I think that that's imperative to who they are as a person. (Garnet)

I think that for our Aboriginal children, it's so important to be exposed to the culture because I think that some of these urban children have not ever been exposed to the culture. (Sapphire)

Having witnessed the hope and healing that culture has provided, this participant recognized the power of cultural connection:

Most people—once they click and they make that [cultural] connection themselves, and wow they just take off, so yeah it's important.

(Jade)

Matching the needs of families with traditional cultural values, teachings,

ceremonies and protocols was identified as being essential to this work. Additionally,

culture was viewed as the bridge in building healthy relationships:

But I undoubtedly, I think culture is very important, and in my experience working with my colleagues who are Aboriginal, I see the value in that in working with the communities. (Emerald)

I think culture is a way of building a stronger connection between us as service providers and our clients and other service providers too, just as a community we can work together to meet the needs of our community. (Pearl)

Bringing in the sense of belonging and purpose for Aboriginal families through

culture was crucial in all aspects of the Community Organization's programming/service:

It [culture] has to be the absolute foundation from, of any of the programming within the child welfare agency. (Winter)

Well I think that it's [culture] is central. I don't think that you can actually deliver a useful service without taking a person's culture into account....I think that culture really helps both children and adults center, look at themselves, some of the cultural practices—like the drumming for example, helps people just find a place to stand and be who they are. It's a comfort, it's a huge comfort. And that brings, you know, they can then progress in their lives. They can really find themselves. It's a way of relating that includes empathy, respect, forgiveness. (Daisy)

The importance of culture in this Community Organization's everyday operations cannot be understated. The majority of the participants understood the power of culture in healing families.

5.2.3. Who Can Offer Culture?

In answering the question about whether or not culture plays a role in delivering Aboriginal child welfare services, some of the participants chose to discuss who should and how culture should be delivered to families. One participant was adamant that certain cultural procedures (i.e., smudge, picking herbal medicines) could be offered to the families by workers; the only prerequisite being the willingness to learn and pass on this information:

I think there's, what has happened with culture over the last few years, it's become almost too religious, in that there's been myths portrayed that only certain people can do certain things....Anybody can do a smudge. Anybody can learn how to pick the medicines out there. Anybody can learn how to do offerings. You know those kind of things that people need to be able to use that stuff in their own day to day lives. So that they can teach the families....We need the staff to feel comfortable talking about culture even if they say I don't know about culture. And we have to be ok with that. We have to be ok with them trying things out, you know. (Jasper)

While there may be disagreement amongst Aboriginal community members about who should deliver cultural services, one worker was extremely practical in her cultural approach to children and families:

I think that even a non-Aboriginal worker can be instrumental in just being a conduit, taking people or asking people if they would like to go to the Museum of Anthropology. Would they like to go to go to Aboriginal Days? Did they know their kids can have a day off? Do they have a ride to the powwow? Were they thinking of going to the powwow? What is their band? Do they remember their grandma? Were there practices that were comforting or helpful when they were small? Would that be something they would be interested in? Would they like to see if I could get some cedar for them or some sage or do they prefer sweet grass? (Topaz)

Another participant was steadfast that any social worker providing information on culture and/or cultural services in this Community Organization maintains this responsibility by taking the time to learn about Aboriginal culture:

It's important for us [as workers] to provide those [cultural] alternatives to our kids, so that they can actually make a choice. And make informed decisions about it. Like don't just say, well here let's go to a powwow and that's going to expose you to culture. It's got to be deeper than that. I learned my stuff about Aboriginal culture and stuff through internet, reading, talking to Elders, and going to ceremony myself. (Sapphire)

The fourth participant to address this concern was clear that delivery of culture be provided by Aboriginal people:

I think culture, I think...and this is as a Caucasian person, I think there needs to be Aboriginal people delivering Aboriginal services. I think it's useful that there are people from all walks of life working within this Community Organization, but I think in terms of the cultural aspects, it's crucial. (Emerald)

While there was no formal agreement about how cultural services should be delivered, it is noteworthy from the first participant in this discussion, that staff need to be more comfortable talking about, and asking about, delivering cultural services. This may be a matter that needs to be further discussed in the Community Organization. It is also worth mentioning that not all participants chose to discuss the offering of culture to clients.

5.2.4. Importance of Spirituality

Spirituality, along with culture, plays an important role in delivering Aboriginal child welfare practice. Although there were differences in how spirituality was defined and expressed, all 20 participants acknowledged and recognized the role of spirituality in their work. One participant defined spirituality as:

Spirituality is a way of life. It is not religion. (Violet)

Spirituality is viewing people through compassionate eyes:

I think spirituality is about the ability for one human to connect to another. It's about the ability to look into somebody's eyes and to be close to them and they sense that you're open and you're not in judgment of them. (Winter)

Another participant described spirituality as learning life lessons:

We're all here to learn from each other and...it's just the lessons that we all have and you know, everybody comes into everybody's life for a reason. It's all, spirituality is very important. (Lily) Spirituality is important in terms of our past, present and future connections with each other:

So one of the things that becomes important is really living the connection of all things, that holistic view of the world, that holistic and also the continuity, so that the ancestors are with us. It's such a comfort to kids when they see themselves as having a past—that is continuity. It's from the grandfathers, the grandmothers, all through, and with a strong past you have a future right, and that's so important. So that connection....All those things that are so valuable in human interactions I think, come from a spiritual place. (Daisy)

The importance of relationships in our spirituality was understood as vital:

...it's really about our relationship with the Creator, you know. It's our relationship with the world around us, you know, because we're related to everything around us, you know. It's really about that. All these other things really complement and enhance that relationship. (Jasper)

The participants summarized spirituality as: a way of life, learning lessons, feeling connected to our ancestors and all our relations, holism, non-judgment, and our relationship to the Creator. I include Canda and Furman's (1999) definition of spirituality; important in the environment of Aboriginal child welfare practice: "a universal and fundamental aspect of what it is to be human—to search for a sense of meaning, purpose, and moral frameworks for relating with self, others, and the ultimate reality" (p. 37).

Spirituality in this context is helping families reframe their everyday challenges into something that provides meaning and purpose. Three participants discussed the close connection between culture and spirituality:

There just seems to be more of a general unified work ethic or belief to focus that we're striving for the same thing and that we've sort of identified that there is a way to do it—together. And that's through culture and spirituality. (Pearl)

It's related to our culture, right? Because it's one of the facets of culture—how do you express your spirituality....When we do the smudge, when we invite an Elder to do an opening prayer, when we open a meeting with a circle, that's about spirituality. (Sky)

I think culture and spirituality are quite strongly linked. They're not, they're not completely, umm, what's the word? They're not two circles completely within each other, but they do overlap. (Mai)

The practical aspects of exploring spirituality with families were discussed. Supporting families by providing hope and support through a spiritual framework allowed workers to remain positive:

I think it is so important for us as front line workers and it's something that we can expose our clients to [spirituality]....So the spirituality allows us to see the bigger picture, put the hope back into the work, into our lives, create visions, create opportunities for people.

(Jemma)

One worker describes her determination to help families discover ways of healing and feeling good through traditional Aboriginal spiritual practices:

Often after you can establish a more stable and/or intimate relationship with the family, you can approach that topic or just maybe ask them if that's relevant to them, if they would find that useful. It's introducing things like prayers in the meetings, it's suggesting prayer as maybe an alternative to, you know their own healing. Other ideas such as smudging, sweats, all have a place in that change for a family. So I think it's yeah, including that as resources again for your assisting them. (Jade)

One participant was cognizant of how the family may perceive spirituality, and went about the work cautiously. She understood that spiritual practices were very much an important of daily traditional life:

It depends on the family and how open they are to that [spirituality], but it's important I think that I have that connection just from my own work and if I can open other people up to their own spirituality or to that part of them. Obviously if you think of traditional ways, it was a very big part of day to day life and a huge part of any kind of healing. So it's got to be there. (Opal)

Along with providing meaning and purpose to workers and families, spirituality was recognized in practical ways through ceremony:

Ceremony is in you. Ceremonies follow strict protocol, a place where people learn, practice discipline, respect, humility, sharing and humor. Ceremony can center oneself and clear the mind. This is where one can connect with the Creator, Father Sky, Mother Earth and all the

elements in a good way. This is a reminder of who we are as a people on this Earth. (Willow)

Providing and attending ceremony may help families respect and honor themselves:

Because I really think our cultural values, our cultural...the ceremonies that we do, if we can get families in touch with that, you know, then they would understand the concept of respecting, you know.

(Jasper)

One worker described her positive experience while attending a spiritual

homecoming ceremony at the Community Organization:

The way the kids were reunited with the biological mother was meaningful [through the homecoming ceremony]. In this case, it allowed the mother to get her act together and go for treatment while her child was taken into temporary care. You know, these are moving ceremonies. (Violet)

Canda and Furman (1999) provide a description of spirituality that is relevant for child welfare workers:

Spirituality is the heart of helping. It is the heart of empathy and care, the pulse of compassion, the vital flow of practice wisdom, and the driving force of action for service. Social workers know that our professional roles, theories, and skills become rote, empty, tiresome, and finally lifeless without this heart, by whatever names we call it. (p. xv)

5.2.5. Acknowledge Differences in Cultural Practices between First Nations

As a collective, participants understood the differences between nations of our

people. They acknowledged these distinctions and diversity:

There's diversity amongst Aboriginal people and that cannot be stated strongly enough. People need to know that we are not all the same. That we speak different languages, that we speak different dialects. (Violet)

Being at this urban Community Organization, we have to acknowledge the different culture groups that we work with. We have clients and staff from throughout Canada and because we are in a certain territory doesn't mean we only practice that culture. We are sensitive to all cultures. (Pearl)

I guess what I've learned, as I understand that in British Columbia. I grew in the prairies right. It's quite different. The culture is different than Aboriginal coastal culture. But I see this—in British Columbia, there are many languages, many cultural groups and they're different, they're distinct. (Daisy)

One worker was inspired and yearned to learn more of the cultural ways of the Coast Salish peoples:

I am really respectful of being in this territory, being respectful of the west coast people, but also really excited about the learning about their protocols and their ceremonies. (Jasper)

It was also acknowledged that with our cultural differences, we have similarities:

And one of the best teachings that I can say...to more people is that if you open up your mind and your heart, you will find that we are all the same in the way of our practices, our beliefs, our values. They're all the same, it's just a matter of how, the practices may be a little bit different in the way we practice, or at a different time of year.

(Ebony)

It was important for workers to acknowledge cultural differences between First Nations, while being respectful of the traditional lands and culture of the Coast Salish peoples where the Community Organization resides. Nonetheless, similarities as Aboriginal people exist in many of our value systems and beliefs.

5.3. Relevance of History

I asked participants to briefly describe the history of Aboriginal people in Canada. The workers understood and described the inter-generational impacts of our colonized history; manifesting in contemporary familial behaviors such as sexual abuse, family violence, and alcohol/drug additions. History has direct relevance to current Aboriginal child welfare practice:

It [the history of Aboriginal people in Canada] does affect my practice...because of the historical abuse there's more now— disproportionate amount of Aboriginal people who are misusing alcohol

and drugs in order to deal with the issues that have affected their lives. There's a disproportionate amount of Aboriginal people who feel disenfranchised, disenchanted and alienated. So that affects my practice because I feel that there needs to be more services—there needs to be positive action. (Emerald)

I see the results of what happened in my work every day with young kids who are in care and the families that were destroyed with loss and grief and alcoholism and trauma. I can see that it is a direct effect of years ago and what happened and how it weakened a lot of us and a lot of our families—their ability to function well. (Garnet)

The participants were able to make sense of our history and relate this to children and families in a caring way.

5.3.1. Influence of History on Contemporary Child Welfare Practice

When asked if the history of Aboriginal people in Canada influenced their current practice, 16 of the 20 participants said "yes" that the history of Aboriginal people in Canada directly influenced their practice. Four of the participants said "yes" to this question indirectly. They shared a story or a teaching to describe the relevance of our history. For example, one participant understood historical consequences in the present, and the need for continued healing in our communities:

It [the history of Aboriginal people in Canada] influences me to...I know we need to heal. I know there are things that we need to work on and I'm not hiding that. But I also want it done in a respectful manner. (Jemma)

Workers were influenced by history in empathizing with families and approaching them with acceptance:

I have empathy and strong empathy, I have a good understanding of the history of Aboriginal people and I have the experience of knowing I am an Aboriginal person and have known it since I was able to understand it. In the 20 years of working as a social worker, I have worked on reserves and in urban settings. Along with empathy, I have patience and understanding of why some of us are struggling with a healthy lifestyle and are challenged with caring for their children. (Pearl)

Yes, I just feel that it's [history of Aboriginal people] a constant that it helps me step back and think about it. It helps me to be patient when I see, because as a helper, as a worker, we all want to see progress....I think that knowing this history gives me patience and it helps me to, well I have to tell myself over and over again, but it just helps me to realize that we're getting there, we're all getting there. (Topaz)

Having familiarity with our history allowed this worker to approach families with greater sensitivity:

I think it does have a big impact on how I practice because, I think that if I wasn't aware of the history, I may not be as understanding or sensitive or sympathetic. I think that it also gives you a different perspective as to where some of our clients have come from. (Sapphire)

While this worker was mindful of his own historical injustices, he was deeply aware and thoughtful of his own words and communication style in speaking with families:

It's influenced my current practice because it encouraged me to understand the psychological impact that colonialism has had on spirituality....It teaches me about communicating and understanding how the words that come from my mouth might impact others. I am still working on that of course (laughing)....As a reactive person who has experienced racism, discrimination, stigma and stereotypes throughout my life, and consequently developed defense mechanisms, I try to employ that understanding when I speak to my Moms, Dad's, and children. I think it's led me to being a better communicator, communication is very important. I think it's very important with our people who are wounded. You have to be very sensitive to them because they may be so reactive. (Winter)

Continuing to educate others about our history can assist people in

understanding the effects of loss and trauma over several generations:

One of my roles as a resource worker, when I am talking with my caregivers (i.e., foster parents) about the importance of identity for a child, there have been so many things taken away from Aboriginal people historically....I use that history, my belief in the history of Aboriginal history in my talks and supports with the caregivers.

(Oak)

I really try to recognize and teach people that this [our history] happened. Because I'm really astonished actually that so many people are not aware of what happened. I myself was not aware of what went on, and so I try to remind people that when they make a blatant

comment about Aboriginal people that is negative, maybe they should learn more about where that person is coming from and why they've made the decisions they have. (Garnet)

Residential schools were an important part of this discussion. While I did not ask the question about attendance in residential school, 12 of the 20 participants disclosed personal family experience with residential schools: four participants attended residential school; while eight participants had parents who attended residential school. Clearly, the participants were cognizant about the impacts of residential school:

I still see the inter-generational effects of what happened in residential school and also the fact that we had lost our spirituality. We had lost our way of living and it's about reclaiming that and bringing it back to life. (Jasper)

I would say the residential school system has been the most profound influence on the families that we're involved with, and every single family that I've encountered has had an influence directly or indirectly from that system....A lot of people didn't survive it [residential school] and the ones that did, I think have moved on. It's very evident today and some people are held back by that history and pain and loss. It is all relevant. (Jade)

In one instance, one participant chose to reframe our historical past (i.e., accept it for what it was) and focus work priorities on moving families ahead:

So, umm, I understand that we have a history and I accept it. And there's nothing I can do to change it, so, I'm just moving forward. (Ebony)

The history of Aboriginal people in Canada had a profound influence on the way these workers engaged in Aboriginal child welfare practice. It would appear that their approach to families and children was softened by a deep understanding of their pain and losses. They workers were respectful, caring, and compassionate, and they were able to accept and empathize/sympathize with the families.

5.4. Responsibility of Individual Worker

The workers in this Community Organization have several responsibilities, including: individual responsibilities; protecting children and supporting families; and following the guidelines, policies and procedures of the Community Organization (2003, 2004, 2009), the *CFCS Act* (1996) and the AOPSI (MCFD, 2005). This section will highlight citations that impart the importance of individual worker responsibilities in urban Aboriginal child welfare practice; namely self-awareness of personal history, self-care and self-reflection.

5.4.1. Self-Awareness of Personal History

The workers in this Community Organization described how their own awareness of their personal histories affected the work they did in a very positive way with children and families. They were able to empathize and have compassion for the struggling children and families:

I myself had early childhood trauma that allowed me to not live in foster care, but to live with family members. My parents died in an accident when I was a child so I went to live with family members. It wasn't the most idea situation. I was separated from my siblings and it was quite hard for me, so I certainly can identify a lot with the children who are in care and who are often separated from siblings.

(Garnet)

In this example, the worker understood the correlation between her personal history and an overall purpose in working within the field:

I was in the system and understood what it was like to go through multiple social workers, and having to hide the pain and the anger. There were no resources at that time to deal with that kind of trauma. Being put in multiple foster homes, and feeling alone, not knowing who I was or where I came from. What was the meaning of family, brothers and sisters? The way I came into this world helped prepare me to work with youth and families. (Willow)

Personal life challenges can help individuals grow spiritually, thus providing perhaps a different framework from which to work:

The trauma of going through that family dysfunction affected my identity significantly and gave me a really deeply spiritual drive to work in this area. (Emerald)

One participant was cognizant of similar life experiences with families. She was aware of her own identity and life experiences, without having this undermine and/or interfere with the professional relationship:

I feel each family, each person is unique and although we might have something similar, familiar, in common, I have to be very cognizant that this is not my stuff. That this is the family's work that we're doing here. So that was a learned process I think. But it's important to do and I see it from my colleagues, sometimes that can be a difficulty where they, maybe over identify with a certain situation and it's kind of reframing it saying, hey that's not you this time, it's someone else. (Jade)

While people have different beliefs about spirituality and faith, it was this worker's self-awareness of her own faith that allowed her to bring justice and fairness to her relationships in her work with others:

My faith is also a big part of me and gives me a sense of social responsibility and social justice....What has developed over time is a real sense of wanting to encourage egalitarian relationships. (Mai)

One worker became aware of her own "white privilege" while working at this Community Organization. Frideres and Gadacz (2008) explain this concept:

Whites do not recognize their unearned privileges because whiteness operates by being invisible—so ubiquitous and entrenched as to appear natural and normative. Thus, whiteness operates as the unmarked norm against which other identities are marked and realized....Whites never have to 'speak for their race' nor are they viewed as the 'white' teacher or lawyer. (p. 6)

Here's how this worker explained how she came to this understanding:

I think what really influenced me, what really changed me in working with this Community Organization is a real recognition as myself as a privileged person. I didn't think of myself in that way. I'm a woman. I'm an older woman. I grew up in relatively impoverished circumstances, a lot of strikes against me in that sense and I never saw myself as a privileged person. I read it, I read about white privilege, but at the Community Organization I could really feel it because I never had to explain my culture. (Daisy) The workers' self-awareness of their personal histories, spiritual views, and privileges lead them to appreciate the contemporary challenges facing urban Aboriginal families and children. This self-awareness also allowed workers to learn from their own suffering and transfer this in a kind and caring manner to the children and families.

5.4.2. Importance of Self-Care

While self-care is important for all people in their personal and work lives, it was discussed as an important responsibility for workers in the child welfare field:

One of the things I find very critical and important is and I've said this over and over again and that is as people, as First Nations people, as people from all walks of life working in this kind of environment, make sure your own life is balanced. (Violet)

The Community Organization has taken a role in implementing balance and wellness for staff by offering the following initiatives on-site: an Elder to provide emotional and spiritual support, and conduct traditional ceremonies; massage therapy; yoga and other fitness classes; and nutritional consultation. Ensuring wellness in health requires that an individual maintain balance in the four areas of: emotions, spirituality, intelligence and physical needs. As well, in order to prevent burn-out, compassion fatigue, and/or vicarious trauma, workers were explicitly mindful of keeping themselves emotionally and mentally healthy. Burnout, compassion fatigue, and vicarious trauma are defined as follows:

Burnout is a term that has been used a great deal to describe the physical and emotional exhaustion that workers can experience when they have low job satisfaction and feel powerless and overwhelmed at work. Burnout does not necessarily mean that our view of the world has been damaged, or that we have lost the ability to feel compassion for others. **Compassion fatigue** (CF) refers to the profound emotional and physical erosion that takes place when helpers are unable to refuel and regenerate. The term **vicarious trauma** (VT) has been used to describe the profound shift that workers experience in their world view when they work with clients who have experienced trauma. Helpers notice that their fundamental beliefs about the world are altered and possibly damaged by being repeatedly exposed to traumatic material.

(Mathieu, 2007, para. 3)

Being aware and consciously working to maintain balance and a positive outlook on life meant thinking good thoughts, and managing emotional triggers:

It's knowing that what you think and say is really important and not to be negative. I think it's really important, even as part of an orientation package, we need to talk about the medicine wheel, we need to talk about one's balance and what are your thoughts like, what is your tongue like, do we gossip, are we judgmental, are we critical—verbally and mentally. We need to constantly look at this because if we're not doing that, what about our families who aren't educated, who've had oppression all their life, who live in poverty. (Willow)

In order to continue working with children and families in a positive manner, workers understood the importance of healthy living:

Wellness is really important because the work that we deal with is so hard. And it can taint you. (Jemma)

Sometimes in this job, it's difficult. You're dealing with the worst part of people's lives and that's hard sometimes and it's difficult.

(Lily)

And in order to be a good worker, you need to be well grounded. You need to make sure that everything is in check...it's important for us to be healthy. (Sapphire)

Absolon (2009) agrees that "our personal wellness and healing determines our capacity as o'shkaabewisuk" [an Anishinaabe word that loosely translates into the work of doing and being a helper] (pp. 174-175). While participants discussed dealing with their personal *stuff* and/or *issues* as part of self-care, they did not specify how they dealt with it:

In order to do well in this field, you need to work on your own stuff. If you're not working on your own stuff, I don't think you have any business in child welfare. Or in social work anyways, because you can only bring people as far as you've gone yourself and if you, you haven't done your own work, I firmly believe that you can do more harm than good. (Lily)

And it could be such a life changing experience when we deal with our issues. It's a life-long learning. It's a life-long process of a healing journey we take on, when we decide to make changes in our lives and let go of hurts. (Violet)

Two staff highlighted the importance of debriefing with professional counsellors and/or therapists as part of their own self-care in sorting out their feelings, thoughts, and beliefs:

I would like to say, just educate yourself, educate yourself and get a therapist, like do your own work. (Topaz)

As soon as I started working in child and youth care, I started to make connections with therapists because you have to. I mean I am just convinced of that...you've got to get a therapist that you can trust and work with because otherwise you can be destroyed emotionally. (Daisy)

Having a grateful attitude for life was an important part of this worker's self-care:

And trying to be good to yourself is a big value, trying to stay really positive in your life and be thankful every day. Every day I'm thankful.

(Summer)

Self-care is vital for workers in child welfare services, as they value wellness for themselves and the children and families they serve. Green (2009) acknowledges that "if we are not well prepared in our profession, then we will not be able to work efficiently with families and children. It is imperative that we as professionals take time to support one another, make time for our families and nurture our own wellbeing" (p. 229). Absolon (2009) reiterates that:

social workers need to find means to deal with traumatization in their own lives and develop their own supports. If a worker experiences victimization by clients they need to confide in other helpers and seek the support and guidance of their Elders, peers, and supervisors. (p. 192)

The participants recognized that working in child welfare was challenging. However, when they took the time to care for self, the people around them (i.e., families and children; other staff) benefited, as staff were in better positions to respond to the daily challenges of child welfare practice.

5.4.3. Significance of Self-Reflection

Self-reflection on practice was an important concept considered and discussed by participants. The participants understood that healthy self-reflection was part of personal growth in becoming better helpers. One worker described his daily selfreflection as being aware of his shortcomings, while consistently working from his values framework:

I find myself at the end of the day, one of my rituals is reviewing my day. And it's like, Oh I messed up there, Oh I messed up here, Oh I've got to go and tell that person I'm sorry, you know. It's really about that because sometimes I just go barreling, and even though I'm barreling there's some inkling of the values following me as I'm whirl winding around. (Jasper)

Being attentive to our actions with others by reminding ourselves of walking the talk helped this worker confront anyone she disrespected:

It's about, I want to show you respect and sometimes it doesn't always come out that way....But if I find that I disrespected somebody, I need to pull back and readdress it. (Jemma)

Self-reflection of practice issues was resolved through prayer and quiet time:

So I sometimes turn to the beautiful nature we have in Vancouver to contemplate my decisions and just really think things through about how I am going to proceed. (Garnet)

when I'm...really grappling with something and I've consulted at all levels and it's still not sitting with me, then I turn it over to the Creator. And I just sit and I wait. Because sometimes I've consulted at all levels to make a decision and it's still not sitting with me and that's usually when I do that. (Jasper)

Part of self-reflection for this worker was taking the time to sort through her

actions and ponder whether her value system was compromised:

As a matter of fact, this morning before our meeting, I said a little prayer and I asked...I hope that I can go through the day or my work this week and not compromise my own values, because of values like the code of ethics, the social work code of ethics. And sometimes those things can brush up against each other, charge into each other. I think if, I say this to myself quite regularly, that if there is ever a time when I feel like my values are going to be compromised, then I need to really look at that and decide to make my choices around my values, despite any risk. (Opal)

Constantly working to improve your role as a worker by taking responsibility and ownership of your own feelings/thoughts was part of self-reflection:

To do good work and stay healthy, one needs to take responsibility for oneself. How you internalize what someone says about you or your work or not affects your well-being. You only have control over you and not others. (Pearl)

The workers agreed that self-reflection was an important part of child welfare practice by: ensuring that values matched actions (and working to correct it if needed); using prayer, nature and quiet time to reflect and wait for the *right* answer; being mindful of professional code of ethics while balancing personal values; and taking responsibility for our own behaviors.

5.5. Reciprocal Relationships

When participants worked from an Aboriginal traditional values framework, incorporated aspects of Aboriginal culture, were aware of and reflected on their work while continuing to care for self, and thought through the ramifications of historical injustices for Aboriginal people, they could see positive change in the children and families they worked with over time. However, as one worker noted:

...it's ridiculous to think that every family that we work with is going to be able to move forward, but the ones that are willing to work with you—those people I hope I can help them gain confidence and trust in their strengths. (Opal)

Examples of this beneficial reciprocal relationship between families and workers are seen in: biological parents working to overcome their challenges (e.g., drug/alcohol addiction) and having their children returned home; parents acquiring skills to better care for their children, thereby preventing apprehension into government care; foster parents learning about Aboriginal culture and history, thus becoming better caregivers for Aboriginal children. This section will focus on how workers match their values with action to the clients. One thing that was crucial in forming relationships with children and families was the appropriateness of the worker's delivery to the family. This was especially important if the worker was not Aboriginal:

It's hard for clients to take the advice of an outsider who isn't seen as an Elder, especially if you're not the same nationality. They will go like, well how would you know kind of thing. And I think there are situations where they will take advice of non-Aboriginals but it's a matter of the style and how it's approached and how it's actually delivered. I think that that has a lot do with how successful you're going to be. (Sapphire)

Being mindful that children need to be safe, and balancing an approach that

encompasses being forthright with families, while at the same time showing compassion:

In this business I think it depends on how compassionate you are and how you present it to the families in a caring and empathetic way. But at the same time, there has to be some directness involved. The safety of the child is foremost in this work. (Willow)

I'll tell them that, you know, I don't have all the answers and I'm here to support them in making decisions and to help them get the resources that will help their families, and that I'm here to be a helper. I'm not here to judge them, I'm not here to dictate what they need to work on, but I'm here to really assist them in terms of getting them healthy so that they can provide a safe environment for their children. I'm usually really up front. (Sapphire)

Participants spoke about families experiencing respect. This worker shared her approach (slowing down and building a trusting relationship) in demonstrating respect to families:

Respect. I think for me it's not going in there like gang busters you know. It's allowing families to actually invite you. And to give them that time to get to know you. Like you know there's no rush, like really, even if you're doing an intake and that child is at risk, you can still ensure that child is safe and have the time to work with that family. (Sapphire)

Other participants discussed the power differential between them (the workers) and the families. To demonstrate respect, the workers had to acknowledge and be aware of power differences:

I would say just be really cognizant of the power and authority that you have. And that to never threaten, never yield it. You never have

to go that extreme where you are becoming like a police state in a home. That's just going to create more barriers to your work than anything. (Jade)

It's the power piece that I take very seriously, because it is a lot of power and I take it, you know. I mean, it's something that's important to me to have other good people in the field, because it is a lot of power and you have to use that wisely. (Lily)

Delivering appropriate services to urban Aboriginal families was about showing respect and acknowledging power differences. The next section will discuss how workers matched working from Aboriginal traditional values with fitting action towards children and families.

5.5.1. Matching Values with Action

The participants demonstrated their values to the families through their actions. It was important in the beginning stages of meeting with families for the worker to ask who they are and where they come from. These participants explained it as a very comfortable place to start:

I think that's the first thing that a family identifies with who they are, where they are from because that's usually the first question you ask is where you're from and who is your family and who are your grandparents. And people tend to have a, it seems to be a comfort place or a familiar place for them to begin. (Jade)

When First Nations people meet First Nations people, we normally ask, oh where are you from? Because we could be related to them (ha ha). And it's just such a common thing that we don't think twice about it....So I had one First Nations family and I said to her when I first met her, I said, oh where are you from. I knew where she was from but it was a way to dialogue with her. (Jasmine)

This worker described exploring key areas early on in the relationship:

To help, I think if change is really going to be effective or initiated, I think it's important to have that discussion with the family around their identity as Aboriginal people. I think if they have that belonging or connection and awareness of just their potential and their history, their strength of their history as well. That's going to be the fuel for make those changes. And as a person becomes more confident and stronger and believes in themselves, then there's no limiting to what they can accomplish. (Jade)

Once trust was established in the relationship, participants verbally expressed positive changes the families had made, thereby demonstrating a strength-based practice:

Being able to see the small changes that they [the families] make and letting them know, you know, like wow, look what you've done different this time. (Jasper)

Being explicit with families about positive changes they had made and how they had made them:

[Instead of just saying] you're a good mother. Well, how are you a good mother? Tell them what it is that they do [to be a good mother]. (Jemma)

This worker believed in being a conduit for families by confirming and honoring strengths:

Just to come back to the importance of what I believe in. What I see is that we need to validate our people, we need to believe in our people, we need to tell them what we believe in them, because that's something that's not done in mainstream society. (Violet)

Reinforcing positive strengths to children and families was important. Workers also acknowledged that mothers and children are our teachers:

I mean I have had a mom say, oh how do you know about being a mother, you're not a mother, you never had any kids. I said yeah you're right, but I am an auntie. But I said, if anything, a lot of the things I've learned have been from young mothers like yourself. So you are a teacher and you don't even know this. (Willow)

And I really try to value and honor children because they have a lot to teach us and I really try to listen to them and hear where they're coming from. (Garnet)

As well, being verbally directive with families and letting them know that some behaviors may need to change was about balancing regular work with an approach that was respectful. For this worker, it was about setting higher standards and challenges suitable to the particular family: Seeing that it's ok for Aboriginal people, especially practitioners to say, this is not acceptable. You know, dropping out of school, not having a home, you know, living wherever with your baby is not acceptable. We need you in school. And being able to be that auntie, being able to be that mother or that person in the community to say, you know, hey, we're here to support you, we'll connect you to it and we'll make sure you do it....it's ok to have really high standards and it's not about you know, us being mean or anything. It's just expect the best. (Jemma)

Working from a place of non-judgment and being clear about expectations, yet acknowledging the possibility for change:

And a lot of times in my practice, especially with addictions and what not, I confront people and they try and defend. And I say you don't need to defend, you know. Well, you think I'm a bad mother. No, that's not what I think. I think, I don't think you're a bad mother, I don't think you're a bad person. I think you're a person with a very serious problem and you need to address that for yourself. So that you can be the best person that you can be for your kids, because your kids are suffering right now. (Lily)

It was extremely important to listen to what the families were saying and to

"create unhurried time and talking space" (Archibald, 2008a, p. 378):

I listen, I try to listen a lot and humble myself to that hurriedness and yes, I hear that. And go on, and try not to be judgmental.

(Summer)

Actively listening to families, while not taking on an authoritarian role was implicit in this quote:

This work is not about me, it's about the families. My role as a preservation worker is to help guide them, listen to them, hear and see what they want, and what they see themselves as capable of doing. (Willow)

This worker describes the process of active listening, patience and the importance of feedback:

But you have be patient, because eventually you will get it. They know what they want and they will tell you....And I think it's important for you to also ensure that they know that you're listening, so be able to feed it back to them and say, is this what I heard? Is this right? Because if you haven't heard the right thing, that could be a problem. It's one thing to listen, but you have to be attentive when you listen, you also need to make sure that you're hearing the right stuff, because sometimes when people hear stuff, they interpret it differently than what's actually said. (Sapphire)

Examples provided in this section about matching values with actions are: working with integrity by letting families know what is and what is not acceptable; focusing on strengths and verbalizing those strengths to people; approaching people with respect by first discussing who we are in relation to community; being nonjudgmental by reframing their problems as challenges to address; listening and then provide feedback about what you heard back to the person.

5.5.1.1. Culture and Spirituality

This section discusses how workers strengthened families through culture and spirituality (thereby closely following the mission statement of the Community Organization discussed in Section 1.2). One starting point with families was initiating the conversation around culture/spirituality and being open and curious with families about their beliefs:

Just even getting the conversations going [around culture], and I noticed that being curious and interested is just a good beginning. Even though some people don't identify as Aboriginal or they say look I'm urban. I don't do those practices. The conversations still can be introduced and opened. (Topaz)

Offering cultural/spiritual resources for the family, if they deemed it appropriate:

Often after you can establish a more of a stable and or intimate relationship with the family, you can approach that topic [spirituality] or just maybe ask them about if that's relevant to them, if they would find that useful. It's introducing things like prayers in the meetings; it's suggesting prayer as maybe an alternative to, you know their own healing. Other ideas such as smudging, sweats, all have a place in change for a family. So I think it's including that as resources in assisting them. (Jade)

It was helping families articulate their current practices and beliefs around culture and spirituality, without imposing, and at the same time, encouraging pride in traditions:

I think that in my practice I have looked for ways to help people define that [culture and spirituality] for themselves, rather than putting

something on them....I used to say to people, you know what, do you believe in anything spiritual? Or were you raised that way and sometimes it would be like, well yeah, when I was a kid I did that and I've been kind of thinking about that lately, or whatever the link was for them and encourage them to develop that. (Mai)

Offering choice around including culture was important. However, this worker would further explore reasons why families had chosen not to learn about the cultural part of their Aboriginal heritage:

And grant it, yes, there should be a choice [around culture] because I know that we do have some clients that just kind of go, no I don't want this in my life, but I'd want to know why. Dig a little bit deeper, don't just scratch the surface and accept whatever they say because the reason why they don't want culture could be for something totally different. (Sapphire)

Encouraging pride in Aboriginal culture and offering culture in a way that could be appreciated by families was seen as respectful:

I think as far as working for an Aboriginal organization and working directly with Aboriginal people, that [culture] has to ultimately be a huge piece if people want it. So it's important that we offer that and are open to it and encouraging about it in whatever way people want to do that. (Opal)

While this worker encouraged children to recognize the value of their own particular culture/spirituality, she was clear that it had to be their choice about whether or not to accept culture/spirituality in their lives:

So I'm hoping and through my work with children, to help them identify the Aboriginal culture they are from, help them honor it with either attending things or, just learning about it and letting them come to a place like I said before, of where they can accept it in their lives and what's for them because it really has to be their decision....

I mean spirituality is very, I think for me it's very an individual thing and I have a hard time deciding that for other people. So I think spirituality for me as a worker if a child identifies some confusion about say religious beliefs and Aboriginal beliefs, then I hope that my work with them will be to help them decide for themselves which beliefs they want to have and embrace in their lives. (Garnet) The worker can educate children/families about culture/spirituality, or seek cultural resources for the family (i.e., Elder from their territory) to help people know and understand what their ancestors practiced:

And I think if we could do it in a way that it provides children with having an open mind when they're exposed to it and then they can choose. Because I think spirituality is really important. You have to be willing to accept it yourself and in order to do that, you need to know about spirituality and what that means and how it will have an impact on your life and to what extent do you want it in your life. And so, I definitely encourage the exposure for our kids, and our clients. (Sapphire)

Workers were clear about the benefits of culture and spirituality for Aboriginal families and children. However, the workers were also certain that education and choice around culture/spirituality were vital to families/children. This belief was affirmed by an Aboriginal therapist who spoke about introducing spirituality into the therapeutic relationship:

Because of all the impositions that First Nations have experienced over the decades and the century of imposed religion, which affected our spirituality, AFFECTED means in a negative way, we try to come to that topic in a very respectful way, without imposing more, in an explanation way and a sharing way and tying it back to traditional practices, indicating that, you know, we are of many many practices, we are of many tribes, each tribe had their own practice. So coming from an educational format first, and then, generally my experience has been that people are really quite thirsty for the knowledge and for the experience.

(Verburg, 2001, p. 37)

It was clear that helpers understood the importance of offering culture and spirituality to children and families.

5.5.2. How Workers View Families

Workers in this urban Aboriginal child welfare agency were able to view the children and families they worked with in a very positive light. Aboriginal family issues are best viewed in both a historical and current context. This worker understood that previous generations of Aboriginal people had many obstacles to overcome, and for some families, these barriers have continued through the generations:

To really place the emphasis on the family and to believe that there is not one parent who would ever hate their child. None of them are doing this intentionally; none of them are wanting to destroy their families. There's a lot more to it than that and to just have a little faith in some people. (Jade)

Some workers found it extremely beneficial to view the families in a spiritual framework:

Basically when I work with families, I tell them that you know, I believe that the Creator has pulled us all together for a reason and I have just as many things to learn from you, as you have to learn from me. So it's like a partnership where we learn and I think traditionally that's kind of how it was. (Lily)

This worker focused on the process, rather than the content in her professional

relationship with families. She understood that she was a guide/helper to the family, and that while families struggle, she believed that this was part of their learning:

Because people will change in their journey. Not the way you want them to, but it's not up to you though, you know. It's up to how the Creator sees it going. (Summer)

Moving away from judgment, nurturing the goodness in each person, and seeing people as spiritual beings having a physical experience was how one worker described her beliefs about people in general:

Again with the clients, giving them the respect that, when I look at clients, it's not looking at them as just individuals. I look at them as spirits and when, in our way we honor every spirit. It doesn't matter if they're the worst criminal in the world, their spirit is still there and their spirit needs nurturing. (Ebony)

The workers were able to see beyond the challenging behaviors of families and offer them a supportive environment.

5.5.3. How Workers View Children

Children were viewed in a very special way by workers in this Community Organization. These workers understood the role of children in families, both modernday and traditionally: That's the concept of family. The children are the most valuable asset of our communities. We all have our responsibility for ensuring the safety of children and their families. (Jade)

I remember growing up in a fishing camp. I remember the first time I went down the river and they told me to grab a fish net and I washed the slime off the fish with netting mesh and gave it to the person who was cutting the fish. In retrospect, I realize that children were an integral part of our family unit....I think that the most important point I am trying to make is that they are integral. They are part of the family unit. (Winter)

One worker stressed the importance of understanding the need for children to be loyal to their family of origin; however, it was also her responsibility to ensure the best interests of the child were considered:

I've worked with so many children who would prefer to remain in families that have been particularly abusive. Of course they do. Children are very loyal. They want to remain in the families and that cuts across all cultures and that's often not in the best interest of the children for them to remain because they normalized that...they become so desensitized to abuse and they have...and that's when their mental wellness becomes very impaired. (Emerald)

Children were to be celebrated and nurtured:

...just being able to see your children as, you know, the wealth of the world (Summer)

Children are gifts that need to be nurtured, you know. (Jasper)

I mean if you consider that your child is a gift to you and you treat that child-like gold. (Jemma)

Children were to be validated and recognized. This worker strongly advocated for more programs for children and youth:

But I just feel that the more we value children and honor them and help them at every age, early childhood—I'm hoping in my lifetime that the governments recognize that early childhood and adolescence are not...ages of children to forget—that more dollars and more monies and more programs need to exist. (Garnet)

Children were highly regarded by these workers. The workers expressed their strong beliefs in the fundamental role that children play in family life, as well as the need to keep them safe.

5.5.4. Outcomes of Reciprocity

The outcomes of workers using this culturally-appropriate values framework in assisting children and families involved with the child welfare system were fulfilled when families were able to live a good life together, as a family. Change can happen to families when they feel they have choice and control over their future lives. Workers can help facilitate this positive change:

But you keep those doors open. People, it allows them to change. That's what I've learned, you know, working you know with the families. Some of them have walked in terrible places—lost their children, beat their children and you have to show them love. And I have to show myself love to give it to them, you know.

(Summer)

I know that there's a lot of hope for people to change. I realize what they are doing to their children, but people can change—they just have to be aware and adapt to any new changes.

(Oak)

I would like to have them [the families] believe and feel safe and secure and know that at the end of the day, if I'm able to give them the tools or empower them to give them the tools, that they have choices themselves to make. That they're able to believe in themselves, so that they feel stronger, healthier, not so frightened, not so scared, not unsure, angry, feel competent as parents, as human beings and not devalued the way so much of our society does to people who are income assistance or who are even poor

(Jasmine)

Workers can provide the much needed hope, skills, tools, and cultural knowledge for urban Aboriginal children and families to change their beliefs and behaviors in living a life free from the threat of government intervention. Workers can help keep families and children on track until the family/children can shift negative beliefs and take positive action on their own.

5.6. Culturally-Appropriate Model

The model revealed from the findings, a culturally-appropriate practice model for working with urban Aboriginal people involved with child welfare is summarized as follows:

Traditional Aboriginal values form the model's core values such as: respect; caring; humility; integrity; sharing; and responsibility. The participants demonstrated child welfare practice through a combination of policy, guiding frameworks, programs, and their values. I acknowledge that people's values and beliefs continue to develop and change throughout their lifetime. Helping professionals may also be influenced in their value and belief systems in their relationships with family, friends, peers, clients, and mentors. One participant said this about values:

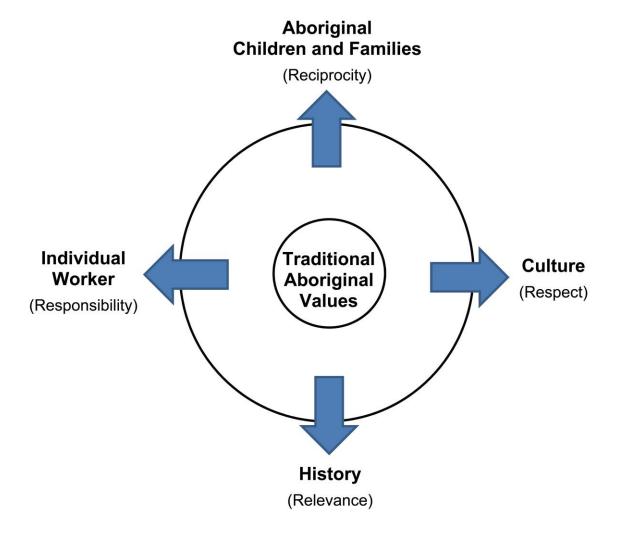
values are always evolving...but I do have certain core values and those core values, I think which most of us carry. (Emerald)

From this central place of working from core values, the participants described Aboriginal child welfare best practice as informed by and valuing:

- 1. **Culture.** Participants discussed valuing and respecting Aboriginal culture which included spirituality, protocol, ceremony, etc.;
- 2. The history of Aboriginal people in Canada has immense relevance in child welfare practice. It is crucial that helpers understand the history of Aboriginal people, so that they can recognize unhealthy actions and behaviors that are a direct result of our historical trauma, loss and pain. Aboriginal children and families working with child welfare workers need to feel understood and not judged; and without the historical understanding, there is little room for caring and compassion;
- 3. **Ourselves as individual workers.** The participants discussed their responsibilities in continually working at self-care and balancing emotional, spiritual, intellectual and spiritual needs. The participants examined and reflected on their practice and their responsibilities towards the Aboriginal families and children they served;
- 4. **Aboriginal families and children** in the reciprocal relationship with the families, the participants revealed their values to the families and children they worked with in their actions and behaviors. When families felt respected, acknowledged and validated, these positive feelings in turn allowed a trusting relationship to develop.

As discussed in the methodology chapter, the four R's of the Indigenous methodological framework are applicable to this framework in the following manner: the participants value and demonstrated respect for our culture; our history is extremely relevant to social work practice; the individual workers have responsibilities to the Aboriginal families/children, as well as to themselves; a reciprocal relationship with the Aboriginal families and children served is developed when working from an approach that integrates traditional Aboriginal values, Aboriginal culture, knowledge of our history, and self-care and reflection of the individual worker. A visual representation of this culturally-appropriate model from the findings in this research is revealed in Figure 2.





6. Discussion

I fear that our wonderful expressions of concern for young people are often just so much baloney. This is all hot air because our deeds speak far more eloquently than words. Innovative programs that could provide role models to youngsters who might not have them are jeopardized by a lack of resources. We must realize that it is a very, very shortsighted policy if we fail to redeem and salvage our most needy young people. (Archibishop Desmond Tutu as cited in Brendtro, Brokenleg, & Van Bockern, 2002, p. ix)

This chapter will summarize culturally-appropriate programming/practice from the literature, the Community Organization policy and procedure manuals (2003, 2004, 2009), and the voices of the participants. I will then offer my interpretation/analysis and provide the final resolution to the research question:

• How does an urban Aboriginal child welfare agency operationally define cultural programming in their approach to protecting children and supporting families within their role as a delegated agency under the *CFCS Act*?

The next section will discuss recommendations for revisions to the Community Organization policy and procedure manuals (2003, 2004, 2009) based on both the literature review and the voices of the participants. The goal here is to provide revised policy recommendations in the Community Organization manuals that are culturally congruent with the literature and participant expressions, thereby providing richer possibilities for urban Aboriginal families and children involved in child welfare services. Recommendations for future research will be considered and discussed. The concluding paragraphs of this chapter will review the limitations of this research.

6.1. Literature Summary of Culturally-Appropriate Programming/Practice

It is challenging to find one definition of *Aboriginal culture* that meets the requirements of all Aboriginal communities. Individuals would likely describe and define culture based their own unique language, teachings, knowledge, protocols, relationship

to specific Aboriginal community, relationship to land and all of creation, upbringing, family history, ceremonies, worldview, and values. The Centre for Intercultural Learning's model (adapted by Rocher in 1969) for defining culture (ways of doing, thinking and feeling) are used in this study to help further define and describe culture from an Aboriginal perspective; however, they are dependent on many variables. Ways of doing are the observable parts of culture that individuals express, share, and/or *do*. Examples of observable cultural ways of doing are: sacred ceremonies (i.e., smudge, sweat lodge ceremony), introduction of prayer before meetings and/or gatherings, access to Elders, cultural introductions (who are you [in relation to community and family] and where do you come from [community of origin that might include traditional land base]), traditional storytelling, and sharing circles.

The thinking and feeling parts of culture in our communities are much more difficult to understand, demonstrate and/or experience for people outside the culture. The Swinomish Tribal Mental Health Project (1991) states that, "generally, people only learn about the nature and personal importance of their own culture through encounter with other cultures" (p. 104). In other words, cultural differences are usually heightened when those parts of culture that cannot be measured (e.g., values, beliefs, philosophies, worldviews, spirituality) are further examined and compared. Even then, individuals may understand more about their own culture through differences, but not fully appreciate another person's cultural ideologies through encounters.

Accordingly, as highlighted in Chapter 3, "Culture", culturally-appropriate practice incorporates practical and philosophical applications of an Indigenous worldview, Indigenous knowledge, Indigenous traditional values, Indigenous traditional teachings and sacred ceremonies. Castellano (2000) remarks:

in certain discourse about their knowledge, aboriginal people often emphasize the timeless values of their teachings. One hears about instructions given at the creation of the world on how to maintain harmony in relationships among human beings and with the natural world. However, in these accounts it is not always made clear that culture is dynamic, and adjusts to changing conditions, and that a particular practice that embodies a timeless truth may need to be adapted if it is to remain effective. (p. 24) The challenge for organizations in providing culturally-appropriate practice/programming frameworks, are those that commit to flexibility and effectiveness. Culture changes as what we think, feel and do as individuals and communities adjusts with the generations. Nevertheless, the traditional values and teachings from our cultures remain a *timeless truth* and this then allows individuals and families to learn contemporary cultural ways of doing, while also learning and/or remembering traditional cultural Aboriginal values and teachings in their thinking and feeling.

6.2. Community Organization Policy Manuals: Summary of Culturally-Appropriate Programming/Practice

The Community Organization (2009) captures their vision statement as "a balanced and harmonious Aboriginal community" (p. 1). The corresponding mission statement commits "to provide holistic service delivery that culturally and spiritually strengthens Aboriginal families" (p. 1). This section will provide highlights of service delivery from three of the Community Organization's policy and procedures manuals (2003, 2004, 2009): residential resources, guardianship, and human resources.

The *Residential Resources Policy and Procedures Manual* (Community Organization, 2003) emphasize the daily care of Aboriginal children in foster care. In line with AOPSI (MCFD, 2005) Practice Standard 1,¹⁵ resource workers prioritize placing Aboriginal children with members of the same family and/or community. Information sessions are held for prospective foster parents to learn about Aboriginal culture. As well, prospective foster parents who do not have Aboriginal heritage or are not from the Aboriginal child's specific First Nation are assessed by resource workers in the following ways: willingness to learn about the particular child's Aboriginal culture; and willingness to involve the child's extended family in his/her life. In line with AOPSI (MCFD, 2005)

¹⁵ Identify family members, friends, community groups, and organizations that can provide cultural resources to the child.

Practice Standard 2,¹⁶ the formal written plan of care includes the child's access to people who can provide appropriate resources for their own cultural identity. Finally, AOPSI Practice Standard 4¹⁷ enhances the cultural plan of the child by ensuring the caregiver provides access to cultural activities (ceremonies, spiritual practices, celebrations, language, songs, dances and other community events) that are specific to the child's Aboriginal community.

The *Guardianship Policy and Procedures Manual* (Community Organization, 2004) acknowledges the importance of maintaining familial and cultural connections for the child that may include one or all four AOPSI (MCFD, 2005) practice standards.¹⁸ The guardianship worker is responsible for gathering and documenting the child's unique cultural ties to his/her community. As well, the guardianship worker plays a role in ensuring cultural access to the child's emotional, intellectual, spiritual, and physical wellbeing. This may include traditional foods, consultation with Elders and Traditional Healers from the child's community, access to further education, etcetera. Again, these are in line with the four AOPSI practice standards.

The Human Resources Policy and Procedures Manual (Community Organization, 2009) states that the Community Organization is committed to hiring Aboriginal people. They have chosen to practice preferential hiring under Human Rights Legislation. Under this policy and procedures manual, the Community Organization commits to training staff on the history of Aboriginal peoples, the colonization process and the resulting contemporary effects on many of the urban Aboriginal families involved with the child welfare system. Educating staff on a child welfare perspective that incorporates an Aboriginal worldview (holism, anti-oppressive social work, inclusive

¹⁶ Enlist band/cultural group or Aboriginal community services (e.g., child care worker, counsellor, children's therapeutic groups) for the child, which are knowledgeable about and sensitive to a child's views, cultural and ethnic heritage, spiritual beliefs, and identity.

¹⁷ Encourage and provide opportunities for the child to participate in cultural and religious instruction and events.

¹⁸ Practice Standard 3 includes the services of a language/cultural interpreter to participate in assessment, planning and service delivery, when appropriate.

fostering and adoption, the use of the circle in decision making, significance of storytelling, incorporation of cultural protocol, and witnessing important celebrations) is emphasized. The role of health, safety and wellness for staff is highlighted in education and training. There is preference in hiring trainers and educators (e.g., Elders, Knowledge Keepers) who are conversant in culture, an Aboriginal worldview and perspective, and traditional knowledge. It is also recognized that Elders are hired to offer traditional ceremonies to staff.

6.3. Interview Findings Summary

There were 20 volunteers from this Community Organization who provided feedback around their approach to urban Aboriginal child welfare practice. Each of the 20 participants shared their experiences around practice concerns that were driven by their values. Their value systems were influenced by their family, working in an Aboriginal organization, and their religious/spiritual beliefs. The traditional values described relevant to their practice were: respect; non-judgment; integrity; caring; belonging; humility; working from a strength based perspective; empowerment; sharing; and trust. As noted earlier by McKenzie and Morrissette (1992), it is the way that values are integrated into everyday life and expressed that differentiates them from mainstream culture. While the participants spoke solely about their value system in their work, it was their family of upbringing influence (Chapter 5, Section 5.1.8, "Walk Your Talk") that created space for these workers to express their values in their relationships with the families they assisted. The workers discussed understanding the inappropriate behavior of children and families. The workers understood that family members sometimes just needed some sense of appreciation and acknowledgment. The workers also understood the vulnerability of the families, the (sometimes) denial of the seriousness of involvement with child welfare services, and at times, the often rude behavior inflicted on workers by unhealthy family members. From this core place of working from traditional values, participants also spoke of the importance of respecting culture, the relevance of history to the work and the individual responsibility of the child welfare worker. The culmination of working from this framework at times afforded the workers a reciprocal relationship with the families, in which the workers learned more about their own level of patience, acceptance and compassion; while the families learned skills, tools, and

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cultural knowledge that would help them live independently of the child welfare system. Lastly, the participants discussed recommendations to future child welfare workers who wished to enter this field.

The importance of and respect for Indigenous culture within this Community Organization were clearly enunciated by the participants. Culture was important in: playing a role in the healing of families; building pride; and strengthening individuals and families. The visual representation of culture was confirmed in the Community Organization through art work, welcoming brown faces, and the presence of an Elder. Participants and their respective families were given opportunities to participate in prayer and ceremonies such as the smudge, sweat lodge, cleansing ceremonies, homecoming ceremonies, and sharing circles. The importance and interconnection of culture and spirituality were noted. Many participants, while recognizing the value of culture to the work (and to their own lives), also acknowledged the importance of offering culture, rather than enforcing culture. Introducing culture and/or spirituality in a respectful way was discussed and practiced by the participants in this study. There was also a positive acknowledgment and celebration of cultural differences in practice based on Aboriginal heritage and cultural diversity.

Understanding the history of Aboriginal peoples in Canada was relevant to this work. Making the connections between the current distorted behaviors of Indigenous individuals/families and the historical past was reinforced by the participants. The workers did their best not to blame individuals/families for their current predicament. Instead, they deepened their understanding of Aboriginal peoples in the historical context by continuing to support families in a caring, non-judgmental and compassionate way. The history helped the workers to have empathy, patience, perspective, and understanding.

The workers discussed their responsibilities for both themselves and the families they served. The safety and protection of children was paramount to the work, as was providing support to families. Many were aware of their own personal histories of trauma and pain that allowed them to transcend their empathy and understanding to the families. It was noted by a few workers that it was important to take personal ownership and responsibility in dealing with personal issues, rather than projecting them onto the

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individuals and families served. The participants also considered and discussed the importance of self-care. While the Community Organization provided opportunities for staff to engage in healthy self-care practices, it was the responsibility of the individual worker to engage in these activities and/or ensure their own balance and self-care. By taking care of physical, spiritual, emotional, and intellectual individual needs, workers were better prepared to respond to the challenging work of urban Aboriginal child welfare practice. Finally, the significance of self-reflection on practice was discussed as part of personal and professional growth. Reflecting on what was learned in relationships with families and what individual workers could have been done better were important concepts discussed.

The participants discussed working from a traditional values framework that also recognized the worthiness of respecting culture and being mindful of the impacts of history. When workers matched their values with congruent actions, they at times witnessed positive change and healing by family members in their emotional, intellectual and spiritual growth; this of course was dependent on whether or not family members were willing and able to work on the reasons why they first became involved with the child welfare system. Matching traditional values to actions was demonstrated by workers who were: respectful in their approach to families; honest and direct with families; patient in creating unhurried time and a comfortable space; sharing with the families about their strengths; providing feedback based on active listening; and discussing positive change in behaviors. The responsibility of incorporating cultural ways and historical knowledge in urban Aboriginal child welfare practice was shared by individual workers and the Community Organization. The overall goal in practicing from this culturally-appropriate model was to strengthen families. This was accomplished by providing skills, tools and cultural resources to families, so that future involvement with child welfare services would be substantially reduced.

When the question "Are there any recommendations you would like to make to social workers working with Aboriginal peoples" was asked, there were ample comments and suggestions. One recurring theme, while not a recommendation, was that many (especially new) workers did not *get it*. What workers continued to misunderstand or not *get* was the connection between our past histories as Aboriginal people (i.e., generations of abuse, racism, discrimination, unjust government policies/practices, loss of culture,

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loss of language, etc.) with current inappropriate behavior (e.g., abuse of drugs and alcohol, remaining in an abusive relationship, neglecting children). What this quite often led to was workers making judgments about the very people they worked with. The following is a summary of recommendations/statements for people who wish to work with urban Aboriginal peoples in the child welfare system:

- There are different challenges for Aboriginal people involved in the child welfare compared to mainstream Canadians;
- Empathize, rather than judge the families;
- Listen by opening your heart;
- Slow down;
- Involve yourself with the Aboriginal community in some way;
- Learn about and appreciate Aboriginal people, culture, worldview and history;
- Share something (appropriate to the family and context) about yourself, so that families are more willing to open up and trust;
- Ensure there is effective understanding in communication by providing clear feedback and checking with the families that your message has been received and understood;
- The safety of children comes first;
- Be aware of your power and authority;
- Focus on the strengths of the family;
- If appropriate, inform families about the history of Aboriginal people in Canada;
- Make sure your own life is balanced, that you have done (or are still in the process of completing) your own healing, and that your actions closely match the values of the Community Organization;
- Empower your clients, while also making them accountable and responsible for the work that needs to be completed.

These recommendations and the model derived from the findings match well with Jardine and Lablanc's (2006) 10 best practices discussed in Chapter 3, "Culturally-Appropriate Practice/Programming" (Section 3.3).

6.4. Interpretation

The purpose of the discussion in this section is to review and discuss the interview findings with the literature, and then compare these with what is written in the Community Organization's policy manuals. More specifically, this study sought to operationalize and consider the role of culture in the Community Organization's approach to urban Aboriginal child welfare practice. When I reflect back to reviewing the data, I remember thinking that many of the participants offered some wonderful teachings, stories, and good ways of working in urban Aboriginal child welfare practice. Their focus was not macro (i.e., being critical of larger systemic influences), but rather micro practice concerns that would benefit Aboriginal families today and in the future. The participants further emphasized skills, tools, models, and teachings that would enhance the healing and well-being of Aboriginal families. In other words, the participants offered practical ways of working with our families that integrated Indigenous traditional knowledge and Indigenous cultural knowledge.

The following summarizes and highlights the important features about culturallyappropriate practice from the literature review, the policy manuals and the voices of the participants.

6.4.1. Principles Found in the Literature Review

- The visible part of culture is about doing—sacred cultural ceremonies and practices, such as cedar bough cleansing, prayer, sweat lodge, etc.
- The invisible part of culture is about feeling and thinking. The feeling part of culture includes an Indigenous worldview and Indigenous Knowledge. The thinking part of culture includes traditional values and traditional teachings. Spirituality flows through all three parts of cultural doing, thinking and feeling.
- Offering culture in an urban environment means: being respectful of diverse cultural practices; being flexible in your approach and being mindful that culture is not static. Culture grows and evolves as individuals grow and evolve.

6.4.2. Principles Found in the Policy and Procedures Manuals

• The Community Organization captures their vision statement as "a balanced and harmonious Aboriginal community." The corresponding mission statement commits "to provide holistic service delivery that culturally and spiritually strengthens Aboriginal families."

- The five values of the Community Organization in guiding their practice are: respect, integrity, belonging, humility, and strength-based practice.
- Residential Resource workers are required to prioritize placing Aboriginal children with members of the same family and/or community.
- The formal written plan of care includes the child's access to people who can provide appropriate resources to strengthen and deepen their cultural identities.
- The caregiver provides access for the Aboriginal child to cultural activities (ceremonies, spiritual practices, celebrations, language, songs, dances and other community events) that are specific to the child's Aboriginal community.
- Guardianship workers need to ensure that Aboriginal children in care have both familial and cultural connections.
- Guardianship workers are responsible for gathering and documenting the child's unique cultural ties to his/her community.
- Guardianship workers work to ensure cultural access to the child's emotional, intellectual, spiritual and physical well-being.
- The Human Resources Policy and Procedures Manual (Community Organization, 2009) discusses their commitment to training staff on the history of Aboriginal peoples, the colonization process and the resulting contemporary effects on many of the urban Aboriginal families involved with the child welfare system.

6.4.3. Principles Found in the Findings (Voices of the Participants)

- The practice model that evolved from the findings discussed five main themes:

 working from traditional Aboriginal values;
 respecting our culture;
 acknowledging that the history of Aboriginal peoples is relevant to urban child welfare practice;
 individual workers are responsible for their own self-care and self-reflection; and
 healthy reciprocal relationships can develop with urban Aboriginal children and families when practice utilizes the former four themes.
- Traditional Aboriginal values were discussed by the participants as follows:
 - Respect is acknowledging the current family circumstances without judgment, treating families with dignity and honor, being aware of power differentials.
 - Integrity is being honest with families by stating expectations and keeping detailed and ethical paper work.
 - Caring is providing extra supports to the families when needed, taking the time to actively listen, acknowledging the concerns of the family, and enhancing connections to culture, family and/or community.
 - Humility is knowing you are not above or below, but at the same level of the family; families are the experts on their lives, the worker is not the expert; and families can teach us about ourselves.

- Strength-Based Practice is focusing on family strengths.
- Empowerment is giving families the opportunities to help with decision making, stating to families that it's ok to verbalize their needs and wants, acknowledging accomplishments, helping families become responsible and taking ownership of their current challenges, and helping families understand that changes they make today can positively impact their futures.
- Trust is establishing your credibility to the family, so that they know you will not take advantage of their vulnerabilities.
- Sharing is knowing when and what to self-disclose personal life experiences to families and is dependent on whether or not the worker feels it will help the family.
- Spirituality, as part of culture was discussed as: learning lessons, feeling connected to our ancestors and all our relations, holism, and our relationship to the Creator.

What has become clear through reviewing the literature review, the policy manuals and the voices of the participants is the complexity in offering culturallyappropriate practice/programming, as well as the varying levels of cultural ways of doing, thinking and feeling. There was no direct reference in the policy manuals to supporting families, although the Community Organization provides support for families through the Family Preservation and Reunification Programs. For the most part, the Residential Resources Policy and Procedures Manual (Community Organization, 2003) and the Guardianship Policy and Procedures Manual (Community Organization, 2004) focus on cultural ways of doing (sometimes referred to as cultural activities) in protecting children. These two manuals also emphasize the four required practice standards (cultural ways of doing) for child welfare workers (Chapter 4, Section 4.7.4 "AOPSI") working in Aboriginal communities/organizations. I did not directly ask participants about the four AOPSI practice standards: identifying people that can provide resources for the child, enlist groups/services that are knowledgeable about the child's cultural and ethnic heritage, include services of a language/cultural interpreter, and encourage and provide opportunities for the child to participate in cultural events. What I did ask was, "What role (if any) does culture play in delivering Aboriginal child welfare services?" and "Who do you involve in significant decision making?" In terms of providing cultural opportunities for children/families, 19 of the 20 participants agreed that culture does play a major role in delivering Aboriginal child welfare services (Chapter 5, Section 5.2.2,

"How Workers View Families"). Examples of who to involve in significant decision making were provided by participants:

I found that the only effective way of making decisions was to make the decision in conjunction with everyone involved. (Daisy) I invite the people that it will most affect. (Summer) Whether it's the client that we're working with or a team of people to develop policy, we always acknowledge that we work together. You know we work with many people and we create opportunities for many people to have input in decision making. (Sky) [I] consult with our Elders, community members, family members, extended family, professionals in the field. (Sapphire) When I'm working with families, significant decision making...first of all the family, they're the most important people in the significant decision making process. I would like to involve the child because the

way I was educated, the child's wishes and feelings are to be considered. (Emerald) Within my area of decision making, I don't make those decisions in isolation, you know. I always consult with the workers, the supervisors, and I ask, "How does your family feel about this?" (Jasper)

(Ebony)

We're always working as a team.

Depending on the situation, workers consulted with their team leaders, supervisors, managers, co-workers, and when possible they involved the family, extended family, Elders, etc. and when appropriate, involved the child. The *Human Resources Policy and Procedures Manual* (Community Organization, 2009) focused their responsibilities on hiring practices, while discussing the importance of all staff being educated on our history, worldview and philosophy, spirituality and cultural protocols (cultural ways of doing, thinking, and feeling).

The literature review provides a working definition of culture and culturallyappropriate examples of doing, thinking and feeling in the form of traditional teachings, traditional values, sacred ceremonies, Indigenous worldview, spirituality and Indigenous knowledge. The literature review does not provide nor acknowledge the critical importance of history, the responsibilities of individual workers (i.e., self-care, selfreflection), and the responsibilities of communities/organizations (i.e., how they support their workers) in delivering culturally-appropriate practice/programming. The participants provided concrete ways of expressing traditional values in their everyday practice that allowed them to remain true to their value system, while also following policy and procedures. There was tension or differences in opinions voiced by participants in the following areas:

- what participants share about themselves to families (Chapter 5, Section 5.1.7, "Sharing");
- who offers culture in the Community Organization (Chapter 5, Section 5.2.3, "Who Can Offer Culture?");
- how culture is offered by workers in the Community Organization (Chapter 5, Section 5.2.2, "Importance of Culture in the Community Organization").

The participants did not appear to feel overwhelmed by the differences in their opinions as overall, they shared common beliefs, principles and concerns about working with urban Aboriginal children and families. When the question, "How do you want your practice to effect Aboriginal families?" was asked, the participants responded very positively to continue to strengthen children and families, and to see beyond the initial challenging behaviors and attitudes (Chapter 5, "Reciprocal Relationships," Sections 5.5.2, 5.5.3, and 5.5.4).

In terms of operationally defining cultural programming from this research study, I will state the following.

- 1. Cultural programming can be measured by cultural ways of doing.
- 2. Cultural programming is not easily measured in cultural ways of thinking and feeling.
- 3. Cultural programming can be measured by the worker's knowledge of the history of Aboriginal people in Canada.
- Cultural programming is not easily measured in the individual's workers level of self-care, self-reflection and self-awareness of personal history.
- 5. Cultural programming is not easily measured by a behavior/attitude change in the child/family.

The provisions of cultural ways of doing within an organization can be measured in terms of the amount of ceremonies, prayers, and rituals (i.e., home coming ceremonies, smudge, sharing circles) offered to children and families, and I would add, to staff

working for the Community Organization. However, this does little to measure the growth of people in terms of spiritual, cultural and emotional wellness. As one of my mentors once said to me, "Excellence comes from the heart" and there is no way to measure our good intentions or good feelings for others.

The Community Organization has made a commitment to facilitate the relationship between history/colonization and the reasons for urban Aboriginal people's involvement with child welfare services. With these on-going educational resources, current and new staff can continue to develop their compassion for the families they work with, while working within the provisions of policy and approaching families in a culturally relevant way. Therefore, I believe that the worker's knowledge of the historical process of colonization can be measured, and if needed, on-going educational resources can be provided by the Community Organization.

The difficulty in measuring cultural programming lies with the individual worker's responsibilities and cultural ways of thinking and feeling. The Community Organization can take the lead in cultural ways of thinking and feeling by ensuring workers have access to knowledge keepers, Elders, ceremonies, workshops and cultural education. Many of these resources are already in place, as the Community Organization offers: cultural leadership training; cultural awareness programs; access to an on-site Elder for staff; access for staff to an on-site massage therapist; and finally, choice for staff to participate in ceremonies. The onus for a worker's self-care and self-reflection is of course, the responsibility of the individual, and therefore cannot be measured nor intruded upon by the Community Organization.

Finally, a change in the family attitude/behavior is difficult to measure. While there are statistical requirements that are reported to the MCFD, the positive shifts in behavior/attitude of the children/families that come about as a result of their interaction with workers, and/or programs offered by the Community Organization are not reported to the MCFD. In terms of cultural programming, the research findings in this study provide a starting point for outsiders of the culture to learn about cultural *best practice* in urban Aboriginal child welfare practice.

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I would like to add that an important contribution to Aboriginal child welfare practice will be published in the spring of 2012. The Aboriginal Child and Family Practice Standards Redesign Initiative Project are working to finalize new practice standards for Aboriginal communities/organizations based on social workers competencies. The purpose of this initiative is to refine practice standards based on Indigenous ways of knowing and doing, while meeting legislative guidelines. This document may help Aboriginal organizations/communities in hiring people who are or who will likely be culturally competent in their work with Aboriginal children and families.

6.5. Recommendations

Recommendations from this research and future research are summarized in the following nine points. Culture was recognized by the participants as being critical to this work, but surprisingly it was not defined anywhere in the Community Organization's program policy manuals (2003, 2004, 2009). Therefore, the first recommendation would be to define culture in the three policy and procedures manuals. Based on the literature review, the interview findings and the Community Organization's mission, vision, and their common values, one possible definition of culture from the Community Organization's perspective might be considered as follows:

• **Recommendation 1.** Aboriginal peoples in Canada come from multiple nations and we acknowledge our traditional cultural roots in caring for others, as well as ourselves. We recognize that through sharing, we learn of the unique perspectives and protocols of other cultures. We acknowledge the value of our shared experiences and cultural similarities as Aboriginal peoples. Culture is thus defined as our shared views on traditional knowledge, values, and teachings. Culture includes our similar viewpoints on spirituality and our relationship to the Creator and all of Creation. Culture incorporates a traditional worldview based on harmony, balance, wholeness and connection to all our relationships, traditional storytelling, and the traditional values we actualize in everyday life. Culture is living the principles and beliefs of our ancestors, so that we may all live well.

By providing a definition of culture in the policy manuals, combining it with the practical guidelines found in the AOPSI (MCFD, 2005), utilizing personal cultural resources, and having access to an on-site Elder, child welfare workers in this Community Organization are able to abide by the mission

statement, 'to provide holistic service delivery that culturally and spiritually strengthens Aboriginal families'.

• **Recommendation 2** would revise the following statement found in both the *Residential Resources Policy and Procedures Manual* (Community Organization, 2003) and *Guardianship Policy and Procedures Manual* (Community Organization, 2004): "If children are so disconnected from family and culture that they do not identify as Aboriginal, the caregiver will be offered consultation with the social workers and others about how best to gently and persistently help the children to develop this part of identity" (Community Organization, 2003, p. 42; Community Organization, 2004, p. 35).

My suggestion would be revise the sentence to read: "If children are so disconnected from family and culture that they do not identify as Aboriginal, the caregiver will be offered consultation with the social workers and others about how best to gently offer children help to develop this part of identity."

There is agreement on the importance and benefits of introducing Aboriginal culture in an Aboriginal person's life as reflected in the literature, the findings in this study, and in my personal view. However, the wording of the original sentence suggests that culture be imposed by being persistent. Culture should never be imposed, but rather as suggested in the findings, be offered in a respectful, caring way. Accordingly, if done so this way, people generally respond in a positive manner by wanting to learn about their own culture

- **Recommendation 3** is a request to the Community Organization to develop and write a policy and procedures manual on the "Family Preservation and Reunification Programs." From what I read and what I witnessed during my stay at the Community Organization, there were many positive cultural activities offered within this program. This new policy and procedures manual would also give credence to the work the Community Organization does with families.
- **Recommendation 4** would clearly state in the *Human Resources Policy and Procedures Manual* (Community Organization, 2009) how the Community Organization trains staff on the history of Aboriginal peoples and the colonization process. For example, a copy of a current power point could be inserted into the manual, or the stated objectives that are covered could be inserted into this manual. Additionally, it would be suitable to briefly summarize the training and procedures staff receive once they are hired by the Community Organization.
- **Recommendation 5** would clearly state in all policy and procedures manuals who can offer *culture*. While most workers can easily access and offer cultural resources for the child/family, many workers may feel more comfortable with clear guidelines about who to talk to about culture, cultural protocol, ceremony, etc. I restate the following points from a participant: "I think there's, what has happened with culture over the last few years, it's become almost too religious, in that there's been myths portrayed that only certain people can do certain things....Anybody can do a smudge. Anybody can learn how to pick

the medicines out there. Anybody can learn how to do offerings. You know those kind of things that people need to be able to use that stuff in their own day to day lives. So that they can teach the families....We need the staff to feel comfortable talking about culture even if they say I don't know about culture. And we have to be ok with that. We have to be ok with them trying things out, you know" (Jasper).

My recommendation for the Community Organization would be to facilitate sharing circles around these themes and make the following explicit, consistent and clear in policy: definition of culture; who can offer culture; and where workers go for cultural advice.

- Recommendation 6 would clearly explain how resource workers lead the "Information Sessions" for prospective foster parents in the following areas: (a) the philosophy of the Community Organization, (b) the differences between the Community Organization and MCFD, and (c) Aboriginal culture. Again, my suggestion would be to either insert a power point slide or insert the stated objectives that are covered.
- **Recommendation 7** would include the "culturally-appropriate model for urban Aboriginal peoples involved with the child welfare system" based on the 20 participant interviews in all policy and procedures manuals. This model would include summaries of: the traditional Aboriginal values as recognized by the participants (Chapter 6, Section 6.4, "Interpretation"), respect for culture, relevance of history, responsibilities of the individual worker, and the reciprocal relationship formed with the children/families served by the Community Organization. It would also include: the five Community Organization values; the vision of the Community Organization; the mission of the Community Organization; and examples of cultural ways of doing, thinking and feeling.
- **Recommendation 8** for the Community Organization is to review hiring practices of new staff and assess them for their knowledge of history or their willingness to learn about the colonization process. Furthermore, new staff hired must be either knowledgeable or willing to learn about Indigenous values, teachings, knowledge, worldview, spirituality, and culture.
- **Recommendation 9** for the Community Organization is to continue to develop self-care and cultural practices/programming. The Community Organization is to be congratulated and encouraged for their efforts and good work in urban Aboriginal child welfare practice. Adams (2007) defines cultural competence as: "A set of congruent behaviors, attitudes and policies that come together in a system, agency or amongst professionals and enables that system, agency of those professionals to work efficiently in cross-cultural situations" (p. 44). I firmly believe that the Community Organization is working towards cultural competence in their agency.

6.6. Limitations

The research findings in this study are reflective of 20 child welfare workers in an urban setting and as such cannot be extrapolated to all Aboriginal child welfare communities/organizations. The receivers (families and children) of the services from this Community Organization would add value to this study by discussing their views on how they are treated.

7. Final Thoughts

I think that that's been my big fortune in life, is the ability to hear others and hear their story. And to recognize in your own journey that there's pain, but it doesn't always have to be there, you know. You can let it go and you can honor the world as it kind of unfolds in front of you. There is some peace that comes as you grow older. (Summer)

Through the framework brought forth by the findings, participants offered their best practice views on urban Aboriginal child welfare practice. The phrase "walk your talk" or matching your values with matching behavior/actions was restated multiple times as part of the worker's professional and personal ethical obligations to the children and families they served. I presented the initial findings of this research at the 8th World Indigenous Women and Wellness Conference: "Building on Traditional Knowledge and Wisdom" in Calgary, Alberta (Hansen, 2008). Quotes from the findings were highlighted that focused on: the impact of personal values on practice, the importance of culture and spirituality in this work, the themes around how workers wanted their practice to positively affect families, the significance of history to the work, and the recommendations to helpers who wished to engage in urban Aboriginal child welfare practice. It was an eye-opener for me when after the presentation, one woman was dumbfounded by the results stating that, as an Indigenous person (not a Canadian Aboriginal), she did not "sign up to walk this talk." She felt that the findings in this study were unrealistic. She felt that asking workers to demonstrate these types of personal and professional responsibilities was "too much." My response to her was that the findings were directly from the voices of the participants, and this is how they practiced urban Aboriginal child welfare practice. It made me think of the commitment of the 20 people interviewed, who were working hard to help our people feel good, help them heal, and help them start the process of building a different life. It also made me think that these 20 participants were setting high standards and that they were continually striving to walk their talk in both their personal and professional lives.

My experience of the entire research process was extremely fulfilling on an emotional, intellectual and spiritual level. I have learned that as an Indigenous researcher, I have much more to learn. It was a conscious effort to continually monitor my process in this research as I engaged with course work, reading, community, writing, raising children, running a business and practicing self-care and self-reflection. I also learned that with the many challenges facing urban Aboriginal families involved with child welfare, that there are options and choices available. By returning to our original "medicine chests", and helping others find their way back to cultural practices that aided in healthy living and wellness, all Canadians benefit. In addition, I was extremely humbled by the words of the participants, as they shared their knowledge, teachings and life experiences. The participants have challenged me to walk my talk, and I thank them for that. I acknowledge that the participants in this study made it seem easy to work with children and families who would have likely preferred not to be involved with the Community Organization (i.e. mandatory involvement).

When I ask myself, what I would have done differently in this research, I think of two things: the practicality of asking different/more interview questions; and a teaching that was shared with me that goes something like this, "the process will unfold as it is meant to." While reflecting back on the process, I might have changed the following:

- Added the question, "How do you define culturally-appropriate service?" (This question was on the original list, but was removed.)
- Added the question, "How do you define culture?"
- Added the question, "How do you define spirituality?"
- · Added the question, "How do you practice self-care?"

Other than that, I know that this process unfolded as needed. All my relations!

References

Abadian, S. (2006, August 7). *Cultural healing: When cultural renewal is reparative and when it is toxic.* Paper presented at the Healing Our Spirits Worldwide Conference, Edmonton, Alberta, Canada.

Aboriginal Advisory Committee to the Minister (of Children and Family Development [MCFD]). (2002). BCAAFC Aboriginal Policy Information: Memorandum of understanding (MOU). Retrieved from http://www.bcaafc.com/component/content/article/7-policy/40-2002mouwithgovt

- Aboriginal Affairs and Northern Development Canada. (2010, October 15). *Highlights* from the Report of the Royal Commission on Aboriginal Peoples: People to people, nation to nation. Retrieved from http://www.aadncaandc.gc.ca/eng/1100100014597
- Absolon, K. (Minogiizhigokwe). (2009). Navigating the landscape of practice: Dbaagmowin of a helper. In G. Bruyere, M. A. Hart, & R. Sinclair (Eds.), *Wicihitowin: Aboriginal social work in Canada* (pp. 172-199). Black Point, Nova Scotia, Canada: Fernwood Publishing.
- Adams, E. (2007, December). An overview of Aboriginal health and cultural competency. Powerpoint presentation give at the Cultural Safety Symposium, Westbank, British Columbia, Canada. Retrieved from http://www.indigenousinstitute.ca/Cultural%20Competency%20Symposium.pdf
- Adelson, N. The embodiment of inequity: health disparities in Aboriginal Canada. CJPH 2005;96: pp. 45-S61.
- Alfred, T. (2009). Peace power, righteousness: An Indigenous manifesto (2nd ed.). Don Mills, Ontario, Canada: Oxford University Press.
- Anderson, K. (2000). A recognition of being: Reconstructing native womanhood. Toronto, Ontario, Canada: Second Story Press.
- Archibald, J. (2004). *Roundtable dialogue: Balancing educating the mind with educating the heart* [Webcast]. Retrieved from http://events.onlinebroadcasting.com/dalailama/042004/index.php
- Archibald, J. (2008a). Handbook of the arts in qualitative research. In J. G. Knowles & A.
 L. Cole (Eds.), An Indigenous storywork methodology (pp. 371-384). Thousand Oaks, CA: Sage Publications, Inc.

- Archibald, J. (2008b). Indigenous Storywork: Educating the Heart, Mind, Body and Spirit. Vancouver, British Columbia, Canada: University of British Columbia Press.
- Arden, H., & Wall, S. (1998). *Travels in a stone canoe: The return to the wisdomkeepers.* New York, NY: Simon & Shuster.
- Arnot, D. (n.d.). *The honour of First Nations: The honour of the Crown.* http://www.queensu.ca/iigr/conf/Arch/2010/ConferenceOnTheCrown/CrownConferencePapers/The_Crown_and_the_First_Nations.pdf
- Atleo, R. (2004). Tsawalk: A Nuu-chah-nulth worldview. Vancouver, British Columbia, Canada: University of British Columbia Press
- Babakiueria: A brilliant 1986 satire of Australian colonialism! (2010, December 15). Retrieved from http://www.youtube.com/watch?v=SHK308_MTiU
- Baikie, G. (2009). Indigenous-centred social work: Theorizing a social work way-ofbeing. In G. Bruyere, M. A. Hart, & R. Sinclair (Eds.), *Wicihitowin: Aboriginal social work in Canada* (pp. 42-61). Black Point, Nova Scotia, Canada: Fernwood Publishing.
- Baker, S., & Kirkness, V. J. (1994). *Khot-la-cha: The autobiography of Chief Simon Baker.* Vancouver, British Columbia, Canada: Douglas & McIntyre.
- Baskin, C. (1997). Mino-Yaa-Daa: An urban community-based approach. *Native Social Work Journal*, 1(1), 55-67.
- Bennett, D., & Sadrehashemi, L. (2008). *Broken promises: Parents speak about B.C.'s child welfare system*. Vancouver, British Columbia, Canada: Pivot Legal Society.
- Bennett, M., & Blackstock, C. (2002). A literature review and annotated bibliography focusing on aspects of Aboriginal child welfare in Canada. Ottawa, Ontario, Canada: First Nations Child and Family Caring Society of Canada.
- Blackstock, C. (2009). The occasional evils of angels: Learning from the experiences of Aboriginal peoples and social work. *First Peoples Child & Family Review, 4*(1), 28-37.
- Boldt, M. (1993). *Surviving as Indians.* Toronto, Ontario, Canada: University of Toronto Press.
- Bopp, J., Bopp, M., Brown, L., & Lane, P. (1984). The sacred tree: Reflections on Native American spirituality. Lethbridge, Alberta, Canada: Four Worlds Development Press.
- Brasfield, C. R. (2001). Residential school syndrome. BC Medical Journal, 43(2), 78-81.

- Brave Heart, M. Y. H., & DeBruyn, L. M. (1998). The American Indian holocaust: Healing historical unresolved grief. American Indian and Alaska Native Mental Health Research. *The Journal of the National Center*, 8(2), 60-82. Retrieved from http://www.class.uidaho.edu/engl484jj/BraveHeart.pdf
- Brendtro, L.K., Brokenleg, M., & Van Bockern, S. (2002). *Reclaiming youth at risk: Our hope for the future* (2nd ed.). Indiana, IL: National Educational Service.
- British Columbia Provincial Health Officer. (2002). Report on the health of British Columbians: Provincial Health Officer's Annual Report 2001: The health and well-being of Aboriginal people in British Columbia. Victoria, British Columbia, Canada: Ministry of Health Planning. Retrieved from http://www.health.gov.bc.ca/pho/pdf/phoannual2002.pdf
- British Columbia Provincial Health Officer. (2009). *Pathways to health and healing: 2nd Report on the health and well-being of Aboriginal people in British Columbia.* Provincial Health Officer's Annual Report 2007. Victoria, British Columbia, Canada: Ministry of Healthy Living and Sport. Retrieved from http://www.health.gov.bc.ca/pho/pdf/abohlth11-var7.pdf
- Canda, E. R., & Furman, L. D. (1999). Spiritual diversity in social work practice: The heart of helping. New York, NY: The Free Press.
- Carriere, J. (2005). Connectedness and health for First Nation adoptees (Unpublished doctoral thesis). University of Alberta, Edmonton, Alberta, Canada.
- Castellano, M. B. (2000). Updating Aboriginal traditions of knowledge. In G. Dei, B. Hall, & D. Rosenberg (Eds.), *Indigenous knowledges in global contexts: Multiple readings of our world* (pp. 21-36). Toronto, Ontario, Canada: University of Toronto Press.
- Castellano, M. B. (2004). Ethics of Aboriginal research. *Journal of Aboriginal Health*, *1*(1), 98-114.
- Centre for Intercultural Learning. (1969). *The Iceberg Model of Culture*. Foreign Affairs and International Trade Canada, Canadian Foreign Service Institute. Retrieved from http://www.dfait-maeci.gc.ca/cfsi-icse/cil-cai/magazine/v02n01/doc3-eng.pdf
- Charmaz, K. (2006). Constructing Grounded Theory: A practical guide through qualitative analysis. London, England: Sage.
- Child, Family and Community Services Act (CFCS Act). (1996). Retrieved from http://www.bclaws.ca/EPLibraries/bclaws_new/document/ID/freeside/00_96046_ 01
- Chrisjohn, R., Young S., & Maraun, M. (1997). *The Circle Game: Shadows and substance in the Indian residential school experience in Canada.* Penticton, British Columbia, Canada: Theytus Books Ltd.

- Community Organization (Anonymous). (2003). *Residential resources policy and procedures manual.* Vancouver, British Columbia, Canada: Author.
- Community Organization (Anonymous). (2004). *Guardianship policy and procedures manual.* Vancouver, British Columbia, Canada: Author.
- Community Organization (Anonymous). (2009, May 21). *Human resources policy and procedures manual* (Rev. ed.). Vancouver, British Columbia, Canada: Author.
- Community Organization (Anonymous). (2011, February). *Cultural practices financial policy*. Vancouver, British Columbia, Canada: Author.
- Creswell, J. W., & Miller, D. L. (2000). *Determining validity in qualitative inquiry. Theory into Practice, 39*(3), 124-130. Florence, KY: Taylor & Francis Ltd.
- Denzin, N. K. & Lincoln, Y. S. (2000). Introduction: The discipline and practice of qualitative research. In N. K. Denzin & Y. S. Lincoln (Eds.), *The handbook of qualitative research* (2nd ed.; pp. 1-28). Thousand Oaks, CA: Sage Publications.
- Denzin, N. K. & Lincoln, Y. S. (2008). Preface. In N. K. Denzin, Y. S. Lincoln, & L. T. Smith (Eds.), *Handbook of critical and Indigenous methodologies* (pp. ix-xv). Los Angeles, CA: Sage.
- Duran, E., & Duran, B. (1995). *Postcolonial psychology.* Albany, New York: State University of New York Press.
- Ermine, W. (1995). Aboriginal epistemology. In M. Battiste & J. Barman (Eds.), *First Nations education in Canada: The circle unfolds* (pp. 101-112). Vancouver, British Columbia, Canada: University of British Columbia Press.
- Fettes, M. (1998). Indigenous education and the ecology of community. *Language, Culture and Curriculum, 11*(3), 250-271.
- Fiske, J. (2008). Making the intangible manifest: Healing practices of the Qul-Aun Trauma Program. In J. B. Waldrum (Ed.), *Aboriginal healing in Canada: Studies in therapeutic meaning and practice* (pp. 31-91). Ottawa, Ontario, Canada: Aboriginal Healing Foundation.
- Fletcher, C. (2003). Community-based participatory research relationships. *Pimatisiwin:* A Journal of Aboriginal and Indigenous Community Health, 1(1), 27-61.
- Fournier, S., & Crey, E. (1997). *Stolen from our embrace: The abduction of First Nations Children and the restoration of Aboriginal communities.* Vancouver, British Columbia, Canada: Douglas & McIntyre.
- Fournier, S., & Crey, E. (2006). "Killing the Indian in the Child": Four Centuries of Church-Run Schools. In R. C. A. Maaka & C. Andersen (Eds), *The Indigenous experience: Global perspectives* (pp. 141-149). Toronto, Ontario, Canada: Canadian Scholars' Press Inc.

Freeman, D.S. (1992). *Multigenerational family therapy*. New York, NY: Haworth Press.

- Frideres, J. S., & Gadacz, R. R. (2008). *Aboriginal peoples in Canada* (8th ed.). Toronto, Ontario, Canada: Pearson Education Canada.
- George, L. (1991). Native spirituality, past, present, and future. In B. Jensen (Ed.), *In* celebration of our survival: The First Nations of British Columbia (pp. 160-169). Vancouver, British Columbia, Canada: University of British Columbia Press.
- Gradual Civilization Act. (1857). An Act to encourage the gradual civilization of Indian Tribes in this province, and to amend the laws relating to Indians.
- Gradual Enfranchisement Act. (1869). An Act for the gradual enfranchisement of Indians, the better management of Indian affairs, and to extend the provisions of the Act thirty-first Victoria, 31 Vic. C32, Chapter 42. S.C. 1869. Retrieved from http://gsdl.ubcic.bc.ca/collect/firstna1/remove/xyz/1869.html
- Green, J. (Gyawaglaab, Helping One Another). (2009). Gyawaglaab (Helping One Another): Approaches to best practices through teachings of oolican fishing. In G. Bruyere, M. A. Hart, & R. Sinclair (Eds.), *Wicihitowin: Aboriginal social work in Canada* (pp. 222-233). Black Point, Nova Scotia, Canada: Fernwood Publishing.
- Greene, J. C. (2000). Understanding social programs through evaluation. In N. K. Denzin & Y. S. Lincoln (Eds.), *The handbook of qualitative research* (2nd ed.; pp. 981-999). Thousand Oaks, CA: Sage Publications.
- Haig-Brown, C. (1988). *Resistance and renewal: Surviving the Indian residential school.* Vancouver, British Columbia, Canada: Tillicum Library.
- Hampton, E. (1995). Toward a redefinition of Indian education. In M. Battiste & J. Barman (Eds.), *First Nations education in Canada: The circle unfolds* (pp. 5-46). Vancouver, British Columbia, Canada: University of British Columbia Press.
- Hansen, H. (2008, September). *An urban Aboriginal approach to child welfare practice*. Paper presented at the 8th World Indigenous Women and Wellness Conference: "Building on Traditional Knowledge and Wisdom," Calgary, Alberta, Canada.
- Hart, M. A. (2002). Seeking mino-pimatisiwin: An Aboriginal approach to helping. Halifax, Nova Scotia, Canada: Fernwood Publishing.
- Hart, M. A. (Kaskitemahikan). (2009). Anti-colonial Indigenous social work: Reflections on an Aboriginal approach. In G. Bruyere, M. A. Hart, & R. Sinclair (Eds.), *Wicihitowin: Aboriginal social work in Canada* (pp. 25-41). Black Point, Nova Scotia, Canada: Fernwood Publishing.
- Hately, L., Pinnow, J., & Small, S. (2002). *Aboriginal leadership: A preliminary discussion.* Calgary, Alberta, Canada: The City of Calgary, Family and Community Support Services.

- Helin, C. (2006). *Dances with dependency: Indigenous success through self-reliance.* Vancouver, British Columbia, Canada: Orca Spirit Publishing.
- Herman, J. (1992). *Trauma and recovery: The aftermath of violence—from domestic abuse to political terror.* New York, NY: BasicBooks.
- Hills, M., & Mullett, J. (2000). Community-based research and evaluation: Collaborative action for health and social change. Victoria, British Columbia, Canad: Community Health Promotion Coalition.
- Hunter, L. M., Logan, J., Goulet, J., & Barton, S. (2006). Aboriginal healing: Regaining balance and culture. *Journal of Transcultural Nursing*, *17*(1), 13-22.

Indian Act. (1876).

- Ing, R. (2000). Dealing with shame and unresolved trauma: Residential school and its impact on the 2nd and 3rd generation adults. Doctoral Dissertation, University of British Columbia, Vancouver, British Columbia, Canada.
- Jardine, D., & LeBlanc, B. (2006, May 17-19). Balancing child welfare practice: Learning from our Aboriginal partners. Paper presented at the 2006 Learning from Our Past, Present and Future: "Aboriginal best practices in child welfare" Conference, Vancouver, British Columbia, Canada.
- Johnston, P. (1983). *Native children and the child welfare system.* Toronto, Ontario, Canada: James Lorimer and the Canadian Council on Social Development.
- Kelm, M. E. (1998). Colonizing bodies: Aboriginal health and healing in British Columbia, 1900-50. Vancouver, British Columbia, Canada: University of British Columbia Press.
- Kirkness, V., & Barnhardt, R. (1991). First Nations and higher education: The Four R's: Respect, relevance, reciprocity, responsibility. *Journal of American Indian Education, 30*(3) 1-15.
- Kishk Anaquot Health Research. (2001, June). *An interim evaluation report of Aboriginal Healing Foundation Program activity*. Ottawa, Ontario, Canada: Aboriginal Health Foundation. Retrieved from http://www.ahf.ca/downloads/interim-evaluation.pdf
- Kishk Anaquot Health Research. (2003, June). *Third interim evaluation report of Aboriginal Healing Foundation Program activity.* Ottawa, Ontario, Canada: Aboriginal Healing Foundation. Retrieved from http://www.ahf.ca/downloads/interim-evaluation-3.pdf
- Kovach, M. (2009). *Indigenous methodologies: Characteristics, conversations, and contexts.* Toronto, Ontario, Canada: University of Toronto Press.
- Lawrence, B. (2004). "Real" Indians and others: Mixed-blood urban native peoples and Indigenous nationhood. Vancouver, British Columbia, Canada: University of British Columbia Press.

- Lewins, A., & Silver, C. (2007). Using software in qualitative research [electronic resource]: A step-by-step guide. Los Angeles, CA: Sage.
- Libesman, T. (2004). Child welfare approaches for Indigenous communities: International perspectives. The Australian Institute of Family Studies. *National Child Prevention Clearinghouse: Child Abuse Prevention, 20,* 1-39. Retrieved from http://www.aifs.gov.au/nch/pubs/issues/issues20/issues20.pdf
- Little Bear, L. (2000). Jagged worldviews colliding. In M. Battiste (Ed.), *Reclaiming indigenous voice and vision* (pp. 77-85). Vancouver, British Columbia, Canada: University of British Columbia Press.
- Lowe, J. (2008). A cultural approach to conducting HIV/AIDS and Hepatitus C virus education among Native American adolescents. *The Journal of School Nursing*, *24*(4), 229-238.
- Mails, T. E. (1991). *Fools crow: Wisdom and power.* San Francisco, CA: Council Oak Books.
- Makokis, L. (2001). *Teachings from Cree Elders: A grounded theory study of Indigenous leadership* (Unpublished doctoral dissertation). University of San Diego, San Diego, CA.
- Mathieu, F. (2007). *Compassion fatigue* Q&A. (2007). *COGECO.ca*: Workshops for the helping professions. Retrieved from http://home.cogeco.ca/~cmc/compassion_fatigue_ganda_main.html
- McCormick, R. (1996). Culturally appropriate means and ends of counselling as described by the First Nations people of British Columbia. *International Journal for the Advancement of Counselling, 18,* 163-172.
- McCormick, R. (1997). Healing through interdependence: The role of connecting in First Nations healing practices. *Canadian Journal of Counselling*, *31*(3), 172-184.
- McKenzie, B., & Morrissette, L. (1992). Cultural empowerment and healing for Aboriginal youth in Winnipeg. In A. M. Mawhiney (Ed.), *Rebirth: Political, economic and social development in First Nations* (pp. 117-130). Toronto, Ontario, Canada: Dundurn Press.
- McLachlin, B. (2003, March 7). *Remarks of the Right Honourable Beverley McLachlin, P.C.: The civilization of difference.* Supreme Court of Canada. Retrieved from http://www.scc-csc.gc.ca/court-cour/ju/spe-dis/bm03-03-07-eng.asp
- Mehl-Madrona, L. (1997). Coyote medicine: Lessons from Native American healing. New York, NY: Fireside.
- Meyer, M. (2001). Acultural assumptions of empiricism: A Native Hawaiian critique. *Canadian Journal of Native Education, 25*(2), 188-198.

- Mikkonen, J., & Raphael, D. (2010). Social determinants of health: The Canadian facts. Toronto, Ontario, Canada: York University School of Health Policy and Management.
- Miller, J.R. (2000). Skyscrapers hide the heavens: A history of Indian-White relations in Canada (3rd ed.). Toronto, Ontario, Canada: University of Toronto Press.
- Ministry of Children and Family Development (MCFD). (2005, June). Aboriginal operational and practice standards and indicators (AOPSI; rev. ed.). Victoria, British Columbia, Canada: Province of British Columbia. Retrieved from http://www.cfncs.com/downloads/practice-standards.pdf
- Ministry of Children and Family Development (MCFD). (n.d.). 2007/08–2009/10 Service Plan: Ministry of Children and Family Development. Retrieved from http://www.bcbudget.gov.bc.ca/2007/sp/cfd/default.aspx?hash=4
- Morrissette, V., McKenzie, B., & Morrissette, L. (1993). Towards an Aboriginal model of social work practice: Cultural knowledge and traditional practices. *Canadian Social Work Review, 10*(1), 91-108.
- National Aboriginal Health Organization (NAHO). (2006). *Broader determinants of health in an Aboriginal context.* Retrieved from http://www.naho.ca/documents/ naho/english/pdf/2006_Broader_Determinants.pdf
- Northwest Indian Child Welfare Institute, The. (1986). *Positive Indian parenting: Honoring our children by honoring our traditions.* Portland, OR: Northwest Indian Child Welfare Institute.
- Nvivo 7 [Computer software]. (2006). Cambridge, MA: QSR International Pty Ltd.
- Pidgeon, M., & Cox, D. (2002). Researching with Aboriginal peoples: Practices and principles. *Canadian Journal of Native Education, 26*(2), 96-106.
- R. v. Gladue, CanLII 679 No. 26300 (SCC) (1999). Retrieved from http://www.canlii.org/en/ca/scc/doc/1999/1999canlii679/1999canlii679.pdf
- Reid, M. (Jube). (2009). Upholding traditional Heiltsuk laws, values and practices as Aboriginal people and allies. In G. Bruyere, M. A. Hart, & R. Sinclair (Eds.), *Wicihitowin: Aboriginal social work in Canada* (pp. 200-221). Black Point, Nova Scotia, Canada: Fernwood Publishing.
- Ross, R. (1996). *Returning to the teachings: Exploring Aboriginal justice.* Toronto, Ontario, Canada: Penguin Books.
- Ross, R. (2006). *Dancing with a ghost: Exploring Aboriginal reality.* Toronto, Ontario, Canada: Penguin Canada.

- Royal Commission on Aboriginal Peoples (RCAP) (1996). *Report of the Royal Commission on Aboriginal Peoples.* Indian and Northern Affairs Canada. Retrieved from http://www.collectionscanada.gc.ca/webarchives/20071115053257/http://www.ai nc-inac.gc.ca/ch/rcap/sg/sgmm_e.html
- Smith, J. (2008, June 11). Schools 'atrocity' affected generations, survivor says. *The star.com.* Retrieved from http://www.thestar.com/News/article/441343
- Smith, L. T. (1999). *Decolonizing methodologies: Research and Indigenous peoples*. London, England: Zed Books Ltd.
- Smith, L. T. (2000). Kaupapa Maori research. In M. Battiste (Ed.), *Reclaiming Indigenous voice and vision* (pp. 225-247). Vancouver, British Columbia, Canada: University of British Columbia Press.
- Soboleff, W. (1998). Native values. *Lodge2: A Native American Teach Website.* Retrieved from http://survivalring.org/lodge2/?page_id=32
- Starratt, R. J. (1996). *Transforming educational administration: Meaning, community and excellence*. New York, NY: McGraw-Hill.
- Statistics Canada. (2011). Aboriginal peoples: Area of residence (on reserve or off reserve) [links: Aboriginal identity (8), area of residence (6), age groups (12, sex (3) for the population; data table, Canada, total–sex, total–age groups]. Retrieved from http://www12.statcan.gc.ca/census-recensement/2006/dp-pd/tbt/index-eng.cfm
- Stout, M. D., & Kipling, G. (2003). *Aboriginal people, resilience and the residential school legacy*, Ottawa, Ontario, Canada: Aboriginal Healing Foundation.
- Strauss, A., & Corbin, J. (1998). *Basics of qualitative research: Techniques and procedures for developing grounded theory* (2nd ed.) Thousand Oaks, CA: Sage Publications, Inc.
- Swinomish Tribal Mental Health Project. (1991). A gathering of wisdoms, tribal mental health: A cultural perspective. LaConner, WA: Swinomish Tribal Community.
- Tinker, G. E. (1993). *Missionary conquest: The gospel and Native American cultural genocide*. Minneapolis, MN: Augsburg Fortress.
- Truth and Reconciliation Commission of Canada (TRC). (n.d.). *About us.* Retrieved from http://www.trc-cvr.ca/about.html
- Ubelaker, D. H. (1988). North American population size, A.D. 1500 to 1985. *American Journal of Physical Anthropology*, 77(3) 289-294.
- Vancouver/Richmond Health Board (B.C.) (1999). *Healing ways: Aboriginal Health and Service Review.* Vancouver, British Columbia, Canada: Vancouver/Richmond Health Board.

- Verburg, H. (2001). Aboriginal therapists exploring spirituality with Aboriginal people (Unpublished master's thesis). University of British Columbia, Vancouver, British Columbia, Canada.
- Waldrum, J. B. (2008). The models and metaphors of healing. In J. B. Waldrum (Ed),
 Aboriginal healing in Canada: Studies in therapeutic meaning and practice (pp. 1-8). Ottawa, Ontario, Canada: Aboriginal Healing Foundation.
- Waldrum, J. B., Herring, D., Young, A., & Kue, T. (2006). Aboriginal health in Canada: historical, cultural, and epidemiological perspectives (2nd ed.). Toronto, Ontario, Canada: University of Toronto Press.
- Walmsley, C. (2005). *Protecting Aboriginal children.* Vancouver, British Columbia, Canada: University of British Columbia Press.
- Weber-Pillwax, C. (2004). Indigenous researchers and Indigenous research methods: Cultural influences or cultural determinants of research methods. *Pimatisiwin: A Journal of Aboriginal and Indigenous Community Health*, 2(1), 77-90.
- Wesley-Esquimaux, C. C., & Smolewski, M. (2004). *Historic trauma and Aboriginal healing.* Ottawa, Ontario, Canada: Aboriginal Healing Foundation.
- White, E., & Archibald, J. (1992). Kwulasulwut S yuth [Ellen White's teachings]. A collaboration between Ellen White and Jo-ann Archibald. *Canadian Journal of Native Education*, 19(2), 150-164.
- Wuyee Wi Medeek (John Lewis). (2004). Forests for the future: The view from Gitkxaala. *Canadian Journal of Native Education, 28*(1 & 2), 8-14. Retrieved from http://www.ecoknow.ca/journal/08.html
- Zolner, T. (2003). Going back to square one and finding it's a circle: (Not) doing university research in Indian country. *Pimatziwin: A Journal of Aboriginal and Indigenous Community Health*, 1(1), 91-111.

Appendices

Appendix A.

Formal Introductory Email

From: Heidi Verburg Sent: Thursday, November 02, 2006 2:58 PM To: Cc: Subject: An update from Heidi Verburg

Hello everyone,

As some of you know, I am here at the office as a doctorate student. I am an EdD (education doctorate) student at Simon Fraser University (SFU) and am here at to do some community-based research. I have been here part-time since September and thought that the research process would be a lot further along. However, there have been some delays and I thought an update from me would be appropriate.

I have been working since September on proposal revisions. (The proposal basically outlines the type of research I will be doing here at the submit and get approval for the ethics review. The ethics review has to be submitted, as I will be asking Aboriginal staff to be interviewed (on a volunteer basis) around their cultural approach/knowledge in the general area of child welfare practice. The interview questions will be e-mailed to everyone, once I get approval from both my committee and the ethics review board. Again, more information about the 'research' will be revealed once my committee approves the proposal.

So, in the meantime, while I wait for the 'approvals', I thought it would be a good ideal if I get to know this agency and the people who work here a little bit better. Beginning next week, I would like to spend time with each staff member talking about your role at the second staff member talking about the second staff member talking about your role at the second staff member talking about the second staff member talking about your role at the second staff member talking about talking about the second staff member talking about talking about the second staff member talking about talking about talking about talking about talking about ta

I can also answer any questions you have about the research and any other related questions about post-secondary education. And, just so you know, I am Cree First Nations (Goodfish Lake Reserve, Alberta – on my mother's side) and German (father's side of family). I have a BSW and a MSW, both from UBC and have worked as a family therapist, counselor, First Nations patient advocate, community liaison coordinator, instructor, and program director for Pesk'a Shad Valley (working with Aboriginal youth). I have two wonderful children, Daniel (grade seven) and Sydney (grade four).

Have a great day everyone. All my relations, Heidi Verburg

Appendix B.

Request for Volunteers: Email and Attachments

Request for Volunteers Email

From: Heidi Verburg Sent: Friday, May 18, 2007 11:26 AM To: Subject: Great news to share about the research

Good morning everyone,

I am pleased to (finally) announce that the ethics review from Simon Fraser University has been approved. As most of you know (I know there are a few new staff members), we have been working to document s approach to child welfare practice.

The even greater news here is that all staff are now invited to participate (on a volunteer basis) to be interviewed. I have attached the poster (poster.doc), the list of interview questions (finalresearchquestions.doc) and a few questions to be asked of each staff member (finalresearchfom.doc).

I can assure everyone who does volunteer to interview for this research that what you say will be kept confidential.

You may contact me via e-mail at this address or at phone at

I can also be reached on my cell

As soon as I receive acknowledgment that you are interested in volunteering for an interview, I will send an e-mail letting you know and we can work towards setting up an interview time.

The interview process will take place from May – June, and then again from September – November, 2007. We will set up a time and location that is convenient for you. I do have office space available on Thursdays and Fridays at the location.

Do not hesitate to contact me if you have any questions.

Thanks to everyone for all your help and support.

All my relations, Heidi Verburg, MSW, RSW, Ed(D) candidate

Poster

Asking for Community Organization Staff to Volunteer for an Interview

Purpose

The goal of this research is to document the approach used by the community organization staff in the area of child welfare practice. A qualitative research format will be used that will generate a theory and understanding of Aboriginal child welfare practice in this urban organization.

Study Procedures

Participants will be involved in approximately a 1-2 hour confidential 1 on 1 interview. Interviews will be audio-tape recorded and transcribed. Participants will have the option to meet with the researcher after the interviews have been transcribed to review the data and discuss any issues that may arise from the research process. Participants will be provided a copy of their transcribed interviews, as well as a copy of the final report if they wish. Participation in this study is voluntary and subjects are free to withdraw from the study at any time.

Confidentiality

Any information resulting from this research study will be kept strictly confidential. Any identifying information will be deleted from any reports.

Contact

Heidi Verburg doctoral education student at Simon Fraser University, will conduct interviews as part of the requirements for completion of her graduate program. If you are interested in participating or require more information, please contact:

Heidi Verburg at or at

Information Sheet for Participants

Simon Fraser University—Form #5

Title of Research:

An urban organization's approach to Aboriginal child welfare practice

Heidi Verburg Faculty of Education

Description of the procedures to be followed and a statement of the risks to the subjects and benefits of the research

Requirements to participate: Participants must be employed by the Community Organization

Sampling: The investigator has been with this agency meeting with staff and attending meetings on a part-time basis since September 2006. I have discussed my role as investigator/researcher with most staff members since September 2006. I have also been given e-mail access to all staff and an office. The participants will be forwarded information about volunteering to be interviewed once the ethics review is approved by Simon Fraser University. Once any participant volunteers to be interviewed, I will set up a time and place to meet that is convenient to the participant. The interview will be recorded.

Participants who work for the Community Organization and volunteer to discuss their approach to Aboriginal child welfare practice will be asked to be interviewed. Participants will be involved in approximately a 1-2 hour confidential 1 on 1 interview. Interviews will be audio-tape recorded and transcribed. Participants will have the option to meet with the investigator after the interviews have been transcribed to review the data and discuss any issues that may arise from the research process. Participants will be provided a copy of their transcribed interviews, as well as a copy of the final report if they wish. Participation in this study is voluntary and subjects are free to withdraw from the study at any time.

Goals: This research will first look at the extant literature on the benefits of a culturallyappropriate approach for Aboriginal peoples that can lead to good health and healing. The literature will also find a working definition of culturally-appropriate practice. Step 2 will review three of the Community Organization policy and procedure manuals (human resources, guardianship, and residential resources) to determine current policy around culturally-appropriate practice. Step 3 will document and describe the agency's approach to child welfare practice by interviewing individual staff. Step 4 of the research will compare what the policy says to what the staff believe about culturally-appropriate practice. Finally, Step 5 of the research process will make recommendations to further enhance policy in the area of culturally-appropriate practice. **Protocol:** Participants will be asked to volunteer to be interviewed for approximately 1 to 1.5 hours. The following questions will be asked:

- Tell me how you began work for this Community Organization.
- Have you worked for other child welfare organizations? If yes, please tell me about your role and experience at these organizations.
- How have you come to work in the field of child welfare?
- If applicable, describe how your practice today is influenced by: (1) your identity; (2) your family and family history; (3) your values; (4) post-secondary education.
- How do you want your practice to effect Aboriginal families?
- What role (if any) does culture play in delivering Aboriginal child welfare services? What role (if any) does spirituality play in delivering Aboriginal child welfare services?
- Who do you involve in significant decision making?
- Briefly describe your version of the history of Aboriginal peoples in Canada. Does the history of Aboriginal peoples in Canada influence your current practice? If yes, how? If not, why not?
- Is there anything about yourself as a person that you reveal to your clients (or the people you work with)?
- Are there any recommendations you would like to make to social workers working with Aboriginal peoples?
- Is there anything else you would like to say?

Risks: Participants who volunteer to be interviewed may feel some discomfort discussing their approach to child welfare practice, during and/or after the interview. The investigator will ensure that a list of qualified therapists/clinical social workers is made available to participants if they experience any distress, anxiety, and/or embarrassment. Furthermore, the investigator will schedule time with each participant after the interview to debrief if they so choose.

Benefits: The benefits of this study are to define and describe a culturally relevant approach to urban Aboriginal child welfare practice.

Confidentiality: All participants who choose to participate in the study will only be known to the researcher, Heidi Verburg. The interview transcripts may be transcribed by another person, however, the researcher will ensure that no names are written. Each transcript will be coded by number and only the researcher will have access to the participant names.

Participants will be informed of their ability to withdraw at any time, and/or to review/edit their transcripts for accuracy.

The University and those conducting this research study subscribe to the ethical conduct of research and to the protection at all times of the interests, comfort, and safety of participants. This research is being conducted under permission of the Simon Fraser Research Ethics Board. The chief concern of the Board is for the health, safety and psychological well-being of research participants.

Should you wish to obtain information about your rights as a participant in research, or about the responsibilities of researchers, or if you have any questions, concerns or complaints about the manner in which you were treated in this study, please contact the Director, Office of Research Ethics by e-mail at neweinber@sfu.ca or phone 604-268-6593.

Interview Questions

Data Gathering Instrument/Interview Guide

- 1. Tell me how you began work for the community organization.
- 2. Have you worked for other child welfare organizations? If yes, please tell me about your role and experience at these organizations.
- 3. How have you come to work in the field of child welfare?
- If applicable, describe how your practice today is influenced by: (1) your identity;
 - (2) your family and family history;
 - (3) your values;
 - (4) post-secondary education.
- 5. How do you want your practice to effect Aboriginal families?
- 6. What role (if any) does culture play in delivering Aboriginal child welfare services? What role (if any) does spirituality play in delivering Aboriginal child welfare services?
- 7. Who do you involve in significant decision making?
- 8. Briefly describe your version of the history of Aboriginal peoples in Canada. Does the history of Aboriginal peoples in Canada influence your current practice? If yes, how? If not, why not?
- 9. Is there anything about yourself as a person that you reveal to your clients (or the people you work with)?
- 10. Are there any recommendations you would like to make to social workers working with Aboriginal peoples?
- 11. Is there anything else you would like to say?

Appendix C.

Participant Consent and Data Forms

Informed Consent by Participants in a Research Study

nup://medusa.ucs.stu.ca:8080/4dcgi/UpdateDisplay?table=Ap

SIMON FRASER UNIVERSITY

Application List Form 1 Form 2 Prologue Form 2A Printable Form 3 Form 4 Form 5 Form 6 Form 7 - Check List

Form 2- Informed Consent By Participants In a Research Study

The University and those conducting this research study subscribe to the ethical conduct of research and to the protection at all times of the interests, comfort, and safety of participants. This research is being conducted under permission of the Simon Fraser Research Ethics Board. The chief concern of the Board is for the health, safety and psychological well-being of research participants.

Should you wish to obtain information about your rights as a participant in research, or about the responsibilities of researchers, or if you have any questions, concerns or complaints about the manner in which you were treated in this study, please contact the Director, Office of Research Ethics by email at or phone at 778-782-6593.

Your signature on this form will signify that you have received a document which describes the procedures, whether there are possible risks, and benefits of this research study, that you have received an adequate opportunity to consider the information in the documents describing the study, and that you voluntarily agree to participate in the study.

Title: An urban organization's approach to Aboriginal child welfare practice

Investigator Name: Heidi Verburg

Investigator Department: Education

Having been asked to participate in the research study named above, I certify that I have read the procedures specified in the Study Information Document describing the study. I understand the procedures to be used in this study and the personal risks to me in taking part in the study as described below:

Purpose and goals of this study:

This research will first look at the extant literature on the benefits of a culturally appropriate approach for Aboriginal peoples that can lead to good health and healing. The literature will also find a working definition of culturally appropriate practice. Step two will review four VACFSS policy manuals (human resources, guardianship, resources and family preservation) to determine current policy around culturally appropriate practice. Step two will compare what policy says to what research will compare what policy says to what research make recommendations to further enhance policy in the area of culturally appropriate practice.

What the participants will be required to do:

Participants who work for and volunteer to discuss their approach to Aboriginal child welfare practice will be asked to be interviewed. Participants will be involved in approximately a 1-2 hour confidential 1 on 1 interview. Interviews will be audio-tape recorded and transcribed. Participants will have the option to meet with the investigator after the interviews have been transcribed to review the data and discuss any issues that may arise from the research process. Participants will be provided a copy of their transcribed interviews, as well as a copy of the final report if they wish. Participation in this study is voluntary and subjects are free to withdraw from the study at any time.

Risks to the participant, third parties or society:

Participants who volunteer to be interviewed may feel some discomfort discussing their approach to child welfare practice, during and/or after the interview. The investigator will ensure that a list of qualified therapists/clinical social workers is made available to participants if they experience any distress, anxiety, and/or embarrassment. Furthermore, the investigator will schedule time with each participant after the interview to debrief if they so choose.

Benefits of study to the development of new knowledge:

The benefits of this study are to define and describe a culturally relevant approach to urban Aboriginal child welfare practice.

Statement of confidentiality: The data of this study will maintain confidentiality of your name and the contributions you have made to the extent allowed by the law.

All participants who choose to participate in the study will only be known to the researcher, Heidi Verburg. The interview transcripts may be transcribed by another person, however, the researcher will ensure that no names are written. Each transcript will be coded by number and only the researcher will have access to the participant names.

Interview of employees about their company or agency:

Inclusion of names of participants in reports of the study:

Contact of participants at a future time or use of the data in other studies:

I understand that I may withdraw my participation at any time. I also understand that I may register any complaint with the Director of the Office of Research Ethics.

Director, Office of Research Ethics 8888 University Drive Simon Fraser University Burnaby, British Columbia Canada V5A 1S6 +1 778 782 3447 email: dore@sfu.ca

I may obtain copies of the results of this study, upon its completion by contacting:

Heidi Verburg,

I understand the risks and contributions of my participation in this study and agree to participate:

The participant and witness shall fill in this area. Please print legibly

Participant Last Name:

Participant First Name:

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Participant Contact Information:

Participant Signature (for adults):

Date (use format MM/DD/YYYY)

Witness (if required by the Office of Research Ethics):

Contact at a future time / use of data in other studies

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I

Research Data Information Form

Research Data Information

- 1. Position at the community organization:
- Do you self-define as an aboriginal person?
 Yes ____ No ____
- 3. If yes to Question 2, are you:
 - (i)
 First Nations _____,
 (ii) Metis _____,

 (iii)
 Inuit _____,
 (iv) Non-Status _____.
- 4. If yes to Question 2, and if applicable, what nation and province are you from?
- If yes to Question 3, did you grow up on-reserve?
 Yes ____ No ____

6. Age: