VIOLENCE TOWARDS ABORIGINAL PEOPLE: CONSULTING WITH ABORIGINAL

COMMUNITY MEMBERS TO DEVELOP CULTURALLY SAFE VICTIM SERVICE

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Marie Janet Haldane

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Dr. Gary Goreham

Chair

Dr. Cornelia Flora

Dr. Teresa Lamsam

Dr. Chris Whitsel

Approved:

October 28, 2014	Dr. Jeff Clark
Date	Department Chair

ABSTRACT

The purpose of this study was to explore the experiences of Aboriginal people when they accessed victim services in order to determine if the services were culturally safe for them. Several themes emerged which included: discrimination by the police stops Aboriginal people from using the services which are available to them; historical trauma continues to negatively affect Aboriginal people; there is a lack of understanding about Aboriginal history and the legacy of colonization.

Study participants suggested ways services could be changed to better meet their cultural needs: services need to have a cultural focus; there needs to be more Aboriginal service providers. Aboriginal people are more likely than other Canadians to experience violence and victimization. In order to support them it is essential that they have access to culturally safe services. Using cultural safety as a framework for program development gives us the tools to provide culturally safe service.

ACKNOWLEDGEMENTS

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CHAPTER 1: INTRODUCTION

In this chapter I provide a description of the Aboriginal population in the province of British Columbia (BC) and in the Metro Vancouver area. I describe the quality of life experienced by Aboriginal people and illustrate the challenges many of them face. I go on to summarize the victim support services that are available to them.

Demographics

BC has an Aboriginal[1] population of 232,290, about 5% of the total population. There are 203 bands throughout the province and approximately thirty Aboriginal languages are spoken (Statistics Canada, 2011). The City of Vancouver and its adjacent municipalities (see Appendix A) are home to 52,375 Aboriginal people, or 2.3% of the region's population (Statistics Canada, 2011). This population is relatively young: 32% are under the age of twenty-five compared to 17% of non-Aboriginal Vancouverites while only 19% are over the age of fifty compared to 31% of the rest of the population. Significantly, only 3.5% of Aboriginal people are over the age of sixty-five versus 13% of the non-Aboriginal population (Statistics Canada, 2008). One reason for this is that the life expectancy for Aboriginal Canadians is 5.5 years (for females) and 8.1 years (for males) less than for their non-Aboriginal counterparts (Health Canada, 2001). Statistics Canada (2010) estimates this gap will be reduced by one to two years by 2017.

Canada routinely places in the top ten of the United Nations' Human Development Index (HDI), which is a comparative measure of life expectancy, literacy, education, standards of living and quality of life for countries worldwide. It is a standard means of measuring population well-being. However, a 2010 United Nations' report criticized the significantly lower quality of life experienced by Canada's Aboriginal population. The report estimated that the

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[1] The term Aboriginal is used throughout this document. Aboriginal, as defined in Section 35(2) of the *Constitution Act (1982)*, is inclusive of Indian, Metis and Inuit Peoples.

quality of life among Aboriginal people is comparable to forty-eighth on the HDI (United

Nations, 2010). In a 2014 United Nations report, Special Rapporteur, James Anaya, concluded

that the most jarring manifestation of human rights problems in Canada is the distressing socio-

economic conditions of Aboriginal Canadians (Commission on Human Rights, 2014).

In a previous report (United Nations, 2004), Special Rapporteur Rodolfo Stavenhagen

recommended that Canada intensify its measures to close the HDI gaps between Aboriginal and

non-Aboriginal Canadians in health care, housing, education, welfare and social services.

Unfortunately, according to Anaya, there has been no change in that gap in the intervening

period, at least in relation to First Nations[2] communities. The statistics are striking: of the

bottom one hundred Canadian communities on the Community Well-being Index, ninety-six are

First Nations, and only one First Nation community is in the top one hundred (Commission on

Human Rights, 2014).

As the Special Rapporteur concluded, Aboriginal Canadians are more likely than their

non-Aboriginal counterparts to experience severe challenges (Commission on Human Rights,

2014), which include higher rates of chronic diseases such as diabetes and heart disease; high

unemployment; poverty and homelessness or under-housing (Cardinal & Adin, 2005).

Additionally, other research has shown that suicide, criminal detention, crime, violence and

victimization are all much higher among Aboriginal people than in any other sector of Canadian

society (Dion Stout, Kipling, & Stout, 2001; Perreault, 2012; Perreault, Sauvé & Burns, 2004;

Stavenhagen, 2004).

In discussing challenges facing Aboriginal people we must be alerted to the risks of

reproducing negative stereotypes of them as "sick, disorganized and dependent" (Smye &

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[2] Defined by the First Nations and Inuit Regional Longitudinal Health Survey as: "Following current general
practice and usage, the term First Nation has replaced the term Indian.

Browne, 2002, p. 42). For this reason, analysis of violence against Aboriginal people cannot be separated from their history and the broad ranging negative effects Government legislation, policies and actions have had on them. Ignoring this may result in a "historical conceptualization that overlooks the stresses imposed by discrimination, economic domination, or political oppression" (Wessells, 1999, p. 271). It is significant to note that community-based efforts to regain their culture are helping Aboriginal people to heal. Many Aboriginal individuals and communities are thriving; they have developed ways to mitigate the effects of colonization by combining traditional healing practices, such as the use of traditional medicines, the strengthening of kinship ties and reconnecting with elders, with Western approaches to health and healing (Browne & Varcoe, 2006; Mussell & Martin, 2006). The growing self-determined shift in Aboriginal communities from social and cultural disintegration to healing and well-being provides the impetus for this research.

Given that Aboriginal people experience more violence than other Canadians (Dion Stout et al, 2001; Perreault, 2012; Stavenhagen, 2004) and that healing and wellness are supported by the integration of traditional cultural practices with Western approaches (Browne & Varcoe, 2006; Mussell & Martin, 2006), it is essential that Aboriginal people have access to victim support services that include a cultural focus and are provided by professionals who have a deep understanding of Aboriginal history and the effects of colonization – these would be culturally safe services.

Victim Service Programs in Vancouver

The Ministry of Justice, through the Victim Services and Crime Prevention Division (VSCPD), has established both community-based and police-based victim service programs throughout the province. These programs have the following objectives:

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- To support victims and their families

- To address violence against women issues

- To provide a restorative justice response to crime

- To enhance public safety and local crime prevention efforts and

- To build and maintain safe communities (VSCPD, 2010).

VSCPD is required to meet the obligations outlined in the BC Victims of Crime Act (1996), which states in Section 8, "to the extent that it is practicable," the Government must promote the goal of providing "culturally sensitive services for aboriginal persons." However, research by Pascoe (2003) indicates services for Aboriginal people are inadequate, despite the programs that are currently available. VSCPD manages approximately 160 programs throughout BC. Fourteen of these programs are in Vancouver; however, only one is Aboriginal specific (which provides services to Aboriginal youth only) and currently employs one victim service worker, and two other programs, while not Aboriginal specific, do employ one Aboriginal victim service worker per program (Ministry of Justice, 2013).

Purpose of this Research

The purpose of this study was three-fold. Firstly, to make explicit the experiences of Aboriginal community members when they accessed victim support services; secondly, to determine if those services were culturally safe for them; finally, to determine what changes (if any) to victim services they require to make these services more beneficial to them.

The context of this research consists of several complicated factors. In order to clarify these complexities, Chapters 2 and 3 presents a summary of the literature review. In working to understand the context of violence towards Aboriginal Canadians and the importance of providing culturally safe victim support services to them, five main areas for investigation were

identified: (a) colonization (b) violence against Aboriginal people (c) historical trauma (d) cultural competence and cultural safety and (e) cultural and community development. Chapter 4 contains the qualitative approach used in this research, the ethical considerations, research procedures and process and the themes generated from the data. Chapter 5 includes a discussion section and recommendations.

CHAPTER 2: COLONIZATION & POST-COLONIALISM

In this chapter I briefly describe the history of colonization and the influence the *Indian Act (1876)* and related colonial policies and practices have had on Canada's Aboriginal peoples. I summarize the literature related to violence towards Aboriginal people, I then go on to describe historical trauma, post-colonial theory and social constructionism. The chapter ends with a description of several government initiatives that have begun to address these long-standing issues.

Colonization

Colonization includes the control of Aboriginal people, their land and resources through violence, war or the threat of war. European colonizers drastically altered the societies they colonized by restructuring the economies for their own benefit and ignoring the needs of the colonized peoples (Loomba, 1998, cited in Tamburro, 2013). Colonization, represented to the world as civilization, created European economic and governmental expansion throughout much of the world and as a result Europeans controlled, exploited and subjugated Indigenous peoples (Tamburro, 2013). Colonizers created economic dependence and destroyed Indigenous ways of living by creating the reserve/reservation systems in Canada and the United States (US). These colonized peoples provided natural resources, raw materials and labour and the colonizers reaped most of the benefits and the profits (Dickason & McNab, 2009).

Prior to contact with colonizers Canada's Aboriginal people lived in a complex socio-economic system that required cooperation and collaboration (Archibald, 2006). The Federal Government, under the auspices of the *Gradual Civilization Act (1857),* the *Gradual Enfranchisement Act (1869)* and eventually the *Indian Act (1876)* introduced foreign status distinctions, imposed new rules for governing, controlled the system of social rewards and

punishments and manipulated power and status symbols (Hanson, 2009). Government, through

legislation and policy decisions, denied Aboriginal people access to their lands and its resources

and to economic opportunities. The Federal Government, in conjunction with religious

organizations, forcibly removed Aboriginal children to residential schools - effectively

destroying community cohesion and cultural identity (Wesley-Esquimaux & Smolewski, 2004).

The historic experience of Canadian Aboriginal people resonates today; the harm done in the

past continues to manifest in a lower quality of life and health as compared to other Canadians

(Anaya, 2014; Cardinal & Adin, 2005; Royal Commission on Aboriginal People, 1996;

Stavenhagen, 2004; United Nations, 2010).

The Indian Act (1876)

No discussion about the struggles of Canada's Aboriginal people would be complete

without an examination of the *Indian Act (1876)* (the *Act).* This legislation consolidated earlier

colonial acts dealing with the indigenous population (Hanson, 2009). The primary goal of the

Act was to encourage assimilation; it included provisions that regulated band membership,

taxation, education and land use and prohibited the use of alcohol (Commission on Human

Rights, 2014; Coates, 2008). The *Act* abolished traditional forms of government and replaced

them with a male-only elective system largely under the control of the local Indian agent. Thus

Chiefs and Councillors were to serve at the pleasure of the Crown. The legislation limited the

power of councils to make laws for their communities to such a degree that they were no longer

in any meaningful way self-governing (Malloy, 2008). As well, the government determined

where and when Aboriginal people went to school and prohibited them from entering key

professions, such as law (Carter, 1999).

The *Act* defined who was and was not an "Indian;" specifically, those who belonged to a band that held lands or reserves in common, or for whom the Federal Government held funds in trust, were classified as "Indian" under the *Act* (Hanson, 2009). It also marks the beginning of gender-based restrictions to status (Oppal, 2012). The legislation stated that a status woman who married a non-status man would lose her status, and with it her treaty benefits, health benefits, the right to live on her reserve and the right to inherit her family property (Hanson, 2009), which led to the increasing marginalization of Aboriginal women (Harry, 2009). However, if an "Indian" man married a non-status woman, he would keep all his rights. Alternatively, if a non-Aboriginal woman married a status man, she would gain status. Other people who were not deemed not "Indian" included those residing outside of Canada for five years continuously and those who obtained a university degree (Hanson, 2009).

In 1885, the *Act* was amended to make it illegal to encourage or to participate in the Potlatch ceremony (Masco, 1995). Colonists, government officials and missionaries saw the sharing of wealth and food at potlatches as excessive and wasteful, but ultimately they knew how integral it was to sustaining Aboriginal cultures. Indian agents and missionaries felt it interrupted assimilation tactics. They wanted Aboriginal people to shift from an economic system of redistribution to one of private property ownership - seemingly impossible as long as the potlatch existed (Hanson, 2009). Judge Alfred Scow (1992) describes some of the impacts of the Potlatch Law:

"This provision of the Indian Act was in place for close to 75 years and what

that did was it prevented the passing down of our oral history. It prevented

the passing down of our values. It meant an interruption of the respected forms

of government that we used to have, and we did have forms of government be

they oral and not in writing before any of the Europeans came to this country.

We had a system that worked for us. We respected each other. We had ways of dealing

with disputes." (p. 344-345).

CANADA
DEPARTMENT OF INDIAN AFFAIRS

CIRCULAR   OTTAWA, 15th December, 1921

Sir,-
     It is observed with alarm that the holding of dances by the Indians on their reserves is on the increase, and that these practices tend to disorganize the efforts which the Department is putting forth to make them self-supporting.

     I have, therefore, to direct you to use your utmost endeavours to dissuade the Indians from excessive indulgence in the practice of dancing. You should suppress any dances which cause waste of time, interfere with the occupations of the Indians, unsettle them for serious work, injure their health or encourage them in sloth and idleness. You should also dissuade, and, if possible, prevent them from leaving their reserves for the purpose of attending fairs, exhibitions, etc., when their absence would result in their own farming and other interest being neglected. It is realize that reasonable amusement and recreation should be enjoyed by Indians, but they should not be allowed to dissipate their energies and abandon themselves to demoralizing amusements. By the use of tact and firmness you can obtain control and keep it, and this obstacle to continued progress will then disappear.

     The rooms, halls and other places in which Indians congregate should be under constant inspection. They should be scrubbed, fumigated, cleansed or disinfected to prevent the dissemination of disease. The Indians should be instructed in regards to the matter of proper ventilation and the avoidance of over-crowding rooms where public assemblies are being held, and proper arrangement should be made for the shelter of their horses and ponies. The Agent will avail himself of the services of the medical attendant of this agency in this connection.

     Except where further information is desired, there will be no necessity to acknowledge receipt of this circular.

Hon. Graham Esq.   Your very truly
Indian Agent   Deputy Superintendent General

Figure 1. 1921 Transcribed Circular to Indian Agents (see Appendix B)

In 1895, in a further attempt to supress culture, the government of Canada passed another amendment which banned any festival, dance or other ceremony of which the giving away, paying or giving back money or any other goods or gifts formed a part of the ceremony, whether such gifting takes place before, during or after the celebration. In 1933 the *Act* was further amendment giving the superintendent-general the power to enfranchise (strip individuals of their identity and status) without their consent (Hanson, 2009).

When Aboriginal political organizing became more widespread in the 1920's and groups began to pursue land claims, the Federal Government further amended the *Act* outlawing the hiring of lawyers and legal counsel by Aboriginal people. This effectively barred them from fighting for their rights through the legal system. Eventually, these laws expanded to such a point that virtually any gathering was prohibited and could result in a jail term. These amendments presented a significant barrier to Aboriginal political organizing and many organizations had to disband (Carter, 1999; Hanson, 2009).

Essentially, the *Act* mirrored core assumptions held about Aboriginal peoples by the dominant Euro-Canadian society - they were viewed as wards (Milloy, 2008). The *Act* gave federal civil servants the authority to manage band affairs, supervise lands and trust funds, direct the personal and family lives of individual Aboriginal people and deny them basic Canadian civil and personal rights (Furi & Wherrett, 2003; Tobias, 1991). The *Act* declared that all status "Indians" were to be treated as minors without the full privileges of citizenship, such as the right to vote in federal elections. Reserve lands were placed in trust of the Crown and this land could not be mortgaged or seized for defaulted debts, nor could they be taxed. Reserve lands could only be sold with approval of a majority of the adult band members, and only the Crown could purchase them (Coates, 2008: Hanson, 2009).

Fortunately, the *Act,* once the focal point for Aboriginal-government relations, has been declining slowly but steadily in importance (Coates, 2008; Graham, 2010). In 1951 restrictions were lifted on the prohibition of ceremonies like the Potlatch, but prohibitions on voting and alcohol consumption remained until the 1960s (Coates, 2008). In 1985, Bill C-31 passed into law to bring the *Act* into line with gender equality under the *Canadian Charter of Rights and Freedoms (1982).* It proposed modifications to various sections of the *Act*, including significant changes to status and band membership, with three major goals: to address gender discrimination of the *Act;* to restore status to those who had been forcibly enfranchised due to previous discriminatory provisions; to allow bands to control their own band membership as a step towards self-government (Hanson, 2009). As well, new approaches to Aboriginal-government relationships have come to the fore, driven by Aboriginal people's desires for change, numerous Supreme Court decisions which have clarified Aboriginal rights and title and by government initiatives. This has given Aboriginal people greater flexibility in determining the best means of governing their communities (Coates, 2008; Graham, 2010).

Violence towards Aboriginal People

Research by Perreault et al., (2004) found that Aboriginal Canadians are three times more likely than their non-Aboriginal counterparts to be victims of violent crime, specifically sexual assault, robbery and physical assault. The authors also reported that the risk of violent victimization was highest among Aboriginal people aged fifteen to thirty-four, whose rate was about twice the rate for Aboriginal people who were thirty-five years or older. While victimization of Aboriginal people is much higher than non-Aboriginal people, statistics show that it is Aboriginal women who are largely bearing the brunt (Bourassa, McKay-McNabb & Hampton, 2006; Dion Stout et al., 2001; Health Canada, 1997; Oppal, 2012).

Research by Dion Stout et al. (2001) has shown that Aboriginal women were five times more likely to experience violence than non-Aboriginal women. Aboriginal women were over three times more likely to be victims of spousal violence than for non-Aboriginal women, and alcohol is found to be involved in almost half of Aboriginal spousal violence compared to one-third of non-Aboriginal cases (Amnesty International, 2004). Aboriginal women between the ages of twenty-five to forty-four were five times more likely to die of violence than their non-Aboriginal counterparts (Amnesty International, 2004) and the suicide rate among young Aboriginal females has been shown to be eight times higher than the Canadian national average (Cardinal & Adin, 2005; Perreault et al. 2004).

Aboriginal Women Over-Representation in Homicide Rates

According to Statistics Canada (2012), Aboriginal women were over-represented in Canadian homicide rates. Between 1980 and 2012, there were 20,313 homicides across the country, which averaged approximately 615 per year. Females represented 32% of these victims (6,551 victims). There were 1,017 Aboriginal female victims of homicide during this period, which represents roughly 16% of all female homicides - far greater than their representation in Canada's female population, which is about 4.3%. This over-representation holds for most provinces and territories (Statistics Canada, 2012). Perplexingly, the number of Aboriginal female victims of homicide has remained relatively constant during this period; while the number of non-Aboriginal female victims has been declining. Aboriginal women accounted for 8% of female victims in 1984 compared to 23% in 2012 (Royal Canadian Mounted Police, 2014; Statistics Canada, 2012).

Table 1. Female homicide rates in Canada from 1980 to 2012.

Province or Territory	Aboriginal	Non-Aboriginal	Unknown	Percentage Aboriginal
British Columbia	205	890	8	19%
Alberta	206	533	2	28%
Saskatchewan	153	116	7	55%
Manitoba	196	188	13	49%
Ontario	114	1901	48	6%
Quebec	46	1445	11	3%
New Brunswick	5	125	0	4%
Nova Scotia	5	163	4	3%
Prince Edward Isl.	0	10	0	0%
Newfoundland & Labrador	10	57	1	15%
Yukon	10	8	0	56%
Northwest Territories	47	3	1	92%
Nunavut	20	0	0	100%
Totals	**1017**	**5439**	**95**	**16%**

Statistics Canada (2001) also reported that Aboriginal youth are more likely to come into contact with police and the criminal justice system than non-Aboriginal youth are. As well, they reported they are less satisfied with the performance of the police than their non-Aboriginal counterparts reported. Aboriginal youth were over-represented in the prison population, and this over-representation has increased over time. In 1997, Aboriginal youth in BC were three times more likely to be incarcerated than non-Aboriginal youth; by 2006, they were seven times more likely to be incarcerated than other youth in the province (BC Ministry of Children and Family Development, 2006).

Vancouver has the second highest rate of gang related homicides compared to other major Canadian cities (Statistics Canada, 2008), and the increasing proliferation of Aboriginal youth gangs is a significant concern. In a 2002 report, the Canadian Police Survey on Youth

Gangs suggested that Aboriginal youth are more vulnerable to gang recruitment and organized crime than non-Aboriginal youth and gang membership is increasing in numbers, particularly in Western Canada (cited in Public Safety Canada, 2007).

In 2012 the Vancouver Aboriginal Community Policing Centre Society and the Aboriginal Front Door Society conducted a series of public forums titled *Community Dialogues with Aboriginal Community Members on Community Safety Issues.* Some of the themes generated included:

- The importance of culture, cultural practices and ceremonies

- The pervasive discrimination against Aboriginal people

- The lack of safety for people (primarily women)

- The lack of services, particularly Aboriginal specific ones

- The need for the police and service providers to be culturally competent

- The need for more Aboriginal police officers

Recommendations generated from the forums include, in part, the need for cultural competency training for the police and other workers and for more Aboriginal specific services for the community, which include traditional healing practices (Metro Vancouver Urban Aboriginal Strategy, 2012).

Aboriginal People Over-Represented in Federal Prisons

Equally disturbing are the statistics related to the disproportionate number of Aboriginal people, both women and men, in federal prisons. Although Aboriginal women account for approximately 4% of the female population in Canada, on July 27, 2003, they made up 29% of the women in federal correctional facilities. Aboriginal men are also over-represented in federal correctional facilities, but their relative disproportion is smaller. As of July 27, 2003, they

represented 18% of male offenders in federal prison facilities (Canadian Human Rights Commission, 2003).

Historical Trauma

Working with Aboriginal communities in the US, Brave Heart (2000) developed her ground breaking work on the concept of historical trauma, which she used to describe the compounding effects of traumatic experiences over time (Evans-Campbell, 2008). Historical trauma is conceptualized as a "collective complex trauma inflicted on a group of people who share a specific group identity or affiliation - ethnicity, nationality, and religious affiliation" (Evans-Campbell, 2008, p. 321). It is the legacy of numerous traumatic events a community experiences over generations which culminates in guilt, grief and self-hatred; all symptoms of what Brave Heart and DeBruyn (1998) referred to as the "historical trauma response" (p. 61). This guilt, grief and self-hatred manifests in a variety of social problems, such as those we see today, including high rates of violence and victimization (Wesley-Esquimauz & Smolewski, 2004).

Residential School History

"If anything is to be done with the Indian, we must catch him very young.

The children must be kept constantly within the circle of civilized conditions."

(Davin, 1879).

One of the most destructive events in Canada has been the fracturing of Aboriginal communities through the policies and practices of the residential school system. In the 1880's, in conjunction with other assimilation policies, the government established residential schools across Canada. Residential schools and the policies that guided them were developed and sanctioned by the Federal Government and carried out primarily by churches (Deiter, 1999;

McMillan, 1995). In 1920, under the *Act*, it became mandatory for every Aboriginal child to attend a residential school and illegal for them to attend any other educational institution (Anaya, 2014; Roberts, 2006).

This system developed out of a shared vision of the Federal Government and a variety of churches on how to force Aboriginal people to adopt the language and the ways of the dominant society (Deiter, 1999; McMillan, 1995). The purpose of residential schools was to eliminate all aspects of Aboriginal culture. Students had their hair cut short, they were forced to wear uniforms and their days were strictly regimented by timetables. Boys and girls were kept separate, and even siblings rarely interacted, further weakening family ties. In addition, students were strictly forbidden to speak their languages - even though many children knew no other - or to practise Aboriginal customs or traditions. Violations of these rules were severely punished. Authorities frequently took children to schools far from their home communities, part of a strategy to alienate them from their families and familiar surroundings (Roberts, 2006).

Residential schools systematically undermined Aboriginal cultures across Canada and disrupted families for generations, severing the ties through which Aboriginal culture was taught and sustained which has contributed to a general loss of language and culture (University of British Columbia, 2009). In 1907, government medical inspector P.H. Bryce reported that one-quarter of previously healthy Aboriginal children were dying in residential schools. This figure does not include children who died at home, where they were frequently sent when critically ill (Fournier & Crey, 1997). In the 1960's, due to opposition and outrage from Aboriginal people and others, the government began phasing out residential school education (Haig-Brown, 1998); the last one closed in 1984 (McMillan, 1995). The idea that Aboriginal children could receive a

better education if they were transitioned into the public school system became accepted (Hanson, 2009).

Long-Term Impacts

The definition of trauma characterized by Herman (1992) as events that "overwhelm the ordinary systems of care that give people a sense of control, connection, and meaning" (p. 33) fits the descriptions of loss articulated by residential school survivors (Corrado & Cohen, 2003). According to the Manitoba Justice Institute's 1999 report, residential schools laid the foundation for the epidemic we see today of violence against Aboriginal people. Generations of children have grown up without a nurturing family life; consequently, many of them lack adequate parenting skills and, having only experienced abuse, in turn abuse their children and other family members. The high incidence of intimate partner violence among Aboriginal families can work to perpetuate the cycle of abuse and dysfunction over generations (Aboriginal Justice Implementation Commission, 1999).

Moving from the history of colonization and the residential school system to how we understand the long-term consequences found in many Aboriginal communities necessitates we understand how trauma flows through families and communities. Gajdos (2002) describes the flow of trauma as both vertical and horizontal: vertical trauma flows down the generations while horizontal trauma develops in response to present stressors. Aboriginal peoples suffer from these effects and also from discrimination encountered on a daily basis, sometimes referred to as race-based traumatic stress (Bryant-Davis, 2007). According to Herman (1992) this results in the loss of a sense of self and an inability to trust. Hirsch (1999) used the term postmemory to describe the relationship of children of survivors of cultural or collective trauma to the experiences of their parents. Experiences "remembered" only as the stories with which they grew up hearing,

but that are so powerful as to constitute memories in their own right. Postmemory is a powerful

form of memory, because its source is mediated through creation not recollection (Hirsch, 1999).

The Sixties Scoop

The term "Sixties Scoop" was credited to Patrick Johnston. In his 1983 report, *Native*

Children and the Child Welfare System, he referred to the practice, which began in the 1960's

continuing until the 1980's, of apprehending high numbers of Aboriginal children and placing

them with non-Aboriginal families (Johnston, 1983; Sinclair, 2007). In 1951, the *Act* was

amended to make it possible to enforce provincial child welfare legislation on reserves.

Consequently, provincial child welfare authorities began to apprehend Aboriginal children who

lived in reserve communities. This practice resulted in a precipitous increase of Aboriginal

children in care (Hanson, 2009; Johnston, 1983). Prior to the amendment, less than 1% of

children in care in BC were Aboriginal; by the early 1960's approximately 34% of children in

care were Aboriginal (Royal Commission on Aboriginal Peoples, 1996). By 2006, the BC

Ministry of Children and Family Development (2009) reported that 52% of all children in care

were Aboriginal, even though Aboriginal children made up 8% of the child population in BC

(Statistics Canada, 2006).

For some communities the rate of apprehension was shocking; between 1951 and 1979

approximately 67% of the child population of the Spallumcheen First Nation were apprehended

by the provincial child welfare authorities (Union of B.C. Indian Chiefs, 2002).

As Sinclair (2007) stated:

"Aboriginal communities and families have now faced several decades of

fall-out from the Residential school period, which included, as by-products

of an assimilationist agenda, the deliberate destruction of traditionally family,

social, and political systems, intergenerational abuse, and social pathology in

many communities. A logical consequence of the replacement of traditional socialization

with institutional abuse and trauma over several generations is the current high level of

child welfare involvement in the Aboriginal population." (p. 68).

The white social worker, following the practices of the missionary, the priest and the Indian

agent, was convinced that the only hope for the redemption of Aboriginal people lay in the

apprehension of their children (Fournier & Crey, 1997).

At that time, the child welfare system did not require social workers to have specific

training or knowledge about the Aboriginal people they were expected to provide services to.

Many of these social workers were completely unfamiliar with the culture or history of the

Aboriginal communities they worked in. What they believed constituted proper care was

generally based on middle-class Euro-Canadian values (Fournier & Crey, 1997). For example,

when social workers entered the homes of families subsisting on a traditional Aboriginal diet of

dried game, fish and berries they assumed that the adults in the home were not providing for their

children; consequently, these children were at risk for apprehension (Hanson, 2009).

In 1985, Justice Edwin Kimelman released *No Quiet Place: Review Committee on Indian

and Métis Adoptions and Placements,* a highly critical review of Aboriginal child apprehension

in the province of Manitoba. Kimelman concluded that cultural genocide had taken place in a

systematic, routine manner "with the closing of the residential schools, rather than providing the

resources on reserves to build economic security and providing the services to support

responsible parenting, society found it easier and cheap to remove the children from their homes

and apparently fill the market demand for children in Eastern Canada and the United States" (p.

330). Following the publication of Kimelman *Report* and resolutions by First Nations bands,

provinces amended their laws to prioritize prospective placements as follows: first, within the extended family of the child; second, by another Aboriginal family; third, by a non-Aboriginal family (Hanson, 2009).

Post-Colonial Theory and Social Constructionism

Post-Colonial Theory

Post-colonial theory is best conceptualized as a family of theories that share a social, political and ethical concern about the history and legacy of colonialism and how it continues to affect those who have been colonized (Young, 2001). Fanon (1961) is one of the earliest writers associated with post-colonialism. He analyzed the nature of colonialism and those subjugated by it, describing it as a source of violence. Fanon's important contribution was his focus on history. For him, the struggle for those colonized involves, in part, the claiming back of their history; from the negative or non-existent versions of it produced by the colonizers. He stressed the vital importance of the culture and representations of their past being central to the creation of positive forms of social organisation (Fanon, 1961).

Post-colonial theory gives insights into the struggles of colonized people to recover from the effects of colonization which include economic exploitation, war, disease and suppression of culture and spirituality. It highlights the histories and current issues caused by colonization. This approach encourages service providers to consider the effects of colonization when working with Aboriginal people (Tamburro, 2013). When a post-colonial theoretical lens is used in policy development and program delivery it can provide an alternative to the Western Eurocentric perspectives on culture and history (Baskin, 2009), which is imperative if we want to provide culturally safe services to Aboriginal people.

Grande (2004) maintains that most theoretical perspectives cannot be effectively applied to Aboriginal people; another approach, which includes a post-colonial perspective, is needed; "this means understanding that "the Indian problem" is not a problem of children and families but rather, first and foremost, a problem that has been consciously and historically produced by and through the systems of colonization" (p. 19). Post-colonial theorists (Ashcroft, 2001; Browne & Fiske, 2001; Tamburro, 2013) argue that we need to create an awareness of the effects of colonization in order to create less oppressive ways of delivering services. This culturally safe approach to service delivery incorporates the perspectives and worldviews of Aboriginal people (Tamburro, 2013).

Researchers in the area of cultural safety state that to improve services for Aboriginal people we must recognize the effects of inequalities in power between groups in society (Tamburro, 2013). As well, we must involve Aboriginal people in evaluating their experiences of safety when they access services (Polaschek, 1998; Ramsden, 2002). Other studies that have used cultural safety as a framework for analysis have shown how current policies (and practices) have failed to respond to the historical trauma of residential school experiences and related histories of violence, placing many Aboriginal people at continued risk for cultural harm (Smith, Edwards, Martens & Varcoe, 2007).

Social Constructionism

A social constructionist view proposes that knowledge is a product of culture and history and is constructed through relationships and narrative, as opposed to being a product or possession of an individual or group (Burr, 2003; Gergen, 2009). For trauma to emerge at the level of the collective, the social crisis must become a cultural one. Trauma is not the result of a group experiencing pain; it is the result of this pain entering into the core of the group's sense of

identity (Alexander, Eyerman, Giesen, Smelser & Sztompka, 2004). This viewpoint challenges

the idea of unbiased and objective knowing, calling instead for us to critically reflect on and

question our beliefs about the world. According to Vygotsky (1978), human learning and

development occur in socially and culturally shaped contexts. As historical conditions are

constantly changing, opportunities for learning and change exist. Multiple perspectives and

alternate interpretations can lead to new dialogues and the possibility of a deeper understanding,

social action and healing.

Federal Government Initiatives to Address Aboriginal Issues and Concerns

> "Sadly, our history with respect to the treatment of Aboriginal people is
> not something in which we can take pride. Attitudes of racial and cultural
> superiority led to a suppression of Aboriginal culture and values. As a country,
> we are burdened by past actions that resulted in weakening the identity of
> Aboriginal peoples, suppressing their languages and cultures, and outlawing
> spiritual practices. We must recognize the impact of these actions on the once
> self-sustaining nations that were disaggregated, disrupted, limited or even
> destroyed by the dispossession of traditional territory, by the relocation of
> Aboriginal people, and by some provisions of the Indian Act." (see Appendix C).

Honourable Jane Stewart

Royal Commission on Aboriginal Peoples

In 1991, the Canadian Government established a Royal Commission on Aboriginal

Peoples (RCAP) to address outstanding Aboriginal grievances and concerns: the Commission

was mandated to consult widely and to bring back recommendations that would provide

solutions. Consultations were held with Aboriginal groups on the development of the research

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plan, which was published in 1993. The Plan had four theme areas: governance; land and economy; social and cultural issues and the North. In addition, these themes were addressed from four viewpoints: historical; women; youth and urban (Wortman, 1997). In its public hearings process, the Commission visited Aboriginal communities across Canada, heard briefs from over 2000 people and commissioned more than 350 research studies. After five years of work the 4,000 page, five volume report was released in 1996. The report contains 440 specific recommendations, directed at all levels of Government (Aboriginal Affairs and Northern Development Canada, 1996).

The main conclusion of the report was the need for a "new relationship between Aboriginal and non-Aboriginal people in Canada" based on "mutual recognition" and "mutual respect" (Turpel-Lafond, 1997, p. 1). Specific recommendations included the proposal for a new Royal Proclamation; that is, governmental commitment to a new set of ethical principles respecting the relationship which acknowledged and respected Aboriginal cultures and values (Turpel-Lafond, 1997); the historical origins of Aboriginal nationhood and the inherent right to Aboriginal self-determination. With respect to the theme of "Aboriginal governance," the Commission reviewed a variety of models of self-determination and self-government and related issues of jurisdiction for each of the three Aboriginal groups (First Nations, Inuit, and Métis) including those living in urban centres. Its recommendations on "land and economy" emphasized the importance of adequate land and resources and the need to significantly increase the land base. The scope of recommendations on "social and cultural issues" included the proposed adoption of Aboriginal health and healing strategies, an Aboriginal Peoples international university, educational programs to support self-government and initiatives to

promote cultural sensitivity and understanding among non-Aboriginals (Aboriginal Affairs and Northern Development Canada, 1996; Wortman, 1997).

Gathering Strength: Canada's Aboriginal Action Plan

In 1998, in response to the finding of the Commission, the Government allocated $350 million to support a variety of initiatives to address concerns that were outlined in the Commission's report. The *Action Plan* is a long-term, broad-based policy approach designed to increase the quality of life of Aboriginal people and to promote self-sufficiency. The *Plan's* vision is fairly straightforward:

- To create a new partnership among Aboriginal people and other Canadians that reflects mutual interdependence and enables all Canadians to work together to build a better future

- To develop financially viable Aboriginal Governments able to generate their own revenues and able to operate with secure, predictable Government transfers

- To support the development of Aboriginal Governments reflective of, and responsive to, their communities' needs and values

- To support the enhancement of a quality of life for Aboriginal people like other Canadians (Indian Affairs and Northern Development, 2000)

Numerous initiatives have been undertaken, which include: political forums in BC that bring together the Federal Government and Aboriginal people with the aim of providing a unified voice on policy issues; funding of $36 million to identify new and existing programs for health, justice, employment development and economic development in Manitoba; the implementation of a Formal Partnership Development Unit to assist in the preparation for the transfer of lands to Aboriginal communities; $8 million to support capacity-building for national,

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regional and local Inuit, Métis and Non-Status Indian representative organizations and on-going

treaty negotiations in Ontario (Indian Affairs and Northern Development, 2000).

Residential School Settlement

One of the tasks addressed by the RCAP was to chronicle the origins and characteristics

of residential schools and to determine the effects these schools had on the children who attended

them. In 1996, RCAP made its recommendation calling for a public inquiry into residential

schools (Indian Affairs and Northern Development, 1996). In 1997 Phil Fontaine was elected

National Chief of the Assembly of First Nations (AFN) and began negotiations with the Federal

Government and churches for a settlement for residential school survivors (Stanton, 2011).

AFN's recommendations in its 2004 report called for a lump sum reparations payment,

additional compensation for specific abuses and expedited payments for the sick and elderly. In

November 2005, the parties reached an Agreement in Principle that was finalized in May 2006

and approved by the courts later in the year (Indian Affairs and Northern Development, 2007).

The agreement, which settled the largest class action suit in Canadian history to date, sets

aside $1.9 billion for the approximately 80,000 living survivors of residential schools. The

agreement comprises several mechanisms of redress for survivors, including a Common

Experience Payment, an Independent Assessment Process, a fund for commemorative projects

and a fund for healing projects. As well, the final settlement provided for the establishment of a

Truth and Reconciliation Commission (TRC) (Indian Affairs and Northern Development, 2007;

Stanton, 2011).

Truth and Reconciliation Commission

The TRC was established by Order-in-Council in June 2008 (Truth and Reconciliation

Commission, 2012). The TRC is like other truth and reconciliation commissions in that it is an

official, temporary, non-judicial fact finding body set up to investigate a pattern of abuses of human rights committed over a number of years. The Federal Government sponsored commission, with a five-year mandate, investigated residential schools and their legacy. Like other truth commissions, the TRC's obligation included the creation of a historical record and the making of recommendations. However, aside from the unique mandate and structure that reflect the national context in which the TRC took place, the TRC is distinctive in that it is the only truth commission to be created out of litigation (Stanton, 2011).

In other contexts in which truth commissions have arisen, they have been instigated by a new regime to look into the abuses of a past regime, as in Argentina, Peru and Chile. Occasionally, a truth commission arises as part of a peace accord brokered between parties to a conflict, as in El Salvador, Guatemala and Sierra Leone. In Canada, the TRC is a result of negotiations between multiple parties of class action lawsuits. This means that the TRC will be faced with the need to prompt Canadians to invest in and take ownership of a process that they did not instigate (Stanton, 2011).

An Apology to the Aboriginal Peoples of Canada

In 2008, Prime Minister Stephen Harper publicly apologized for Canada's role in the assimilation of Aboriginal children through the Government-supported, church-run residential school system (see Appendix D). It was a critical moment in Canada's history, one that Aboriginal people had waited decades for. Aboriginal people graciously accepted the apology, although some with a healthy dose of skepticism. The hope was that change would follow and the TRC was seen to be a first step in the process of healing and moving forward (MacKinnon, 2012).

United Nations Declaration on the Rights of Indigenous Peoples

      In 2010, the Canadian Government endorsed the United Nations Declaration on the Rights of Indigenous Peoples. The Declaration is the result of more than two decades of discussions and negotiations, making it one of the most carefully designed instruments to support human rights on an international level (Coulter, 2010). According to Amnesty International (2011) the Declaration builds on existing human rights standards, many of which represent established, legally-binding obligations of states, and applies these standards to the specific needs and circumstances of Indigenous peoples. However, it remains to be seen how the Declaration will affect the attitudes and actions of Canada towards Aboriginal peoples (Coulter, 2010).

CHAPTER 3: CULTURAL COMPETENCY & CULTURAL SAFETY

In this chapter I describe the notions of cultural competency and cultural safety and explore the concept of culture as it relates to community development. I end the chapter outlining my research questions.

Cultural Competence

The concept of cultural competence first appeared in the health care system of the US as they sought to improve access to care for an increasingly diverse population (Brach & Fraser, 2000; Zambrana, Molnar, Munoz, & Lopez, 2000). In the Canadian context, there has been growing recognition of the need for culturally competent care in improving health outcomes, particularly for Aboriginal people (Shah, Svoboda & Goel, 1996). For many Aboriginal Canadians, their experiences with mainstream health care systems have been negative, often due to cultural differences and the inability of service providers to address those differences (National Aboriginal Health Organization (NAHO), 2003). The issue of cultural competence in health care continues to be a major priority in Canada, and the notion of culture is being integrated into theory, practice and research (Browne & Varcoe, 2006).

Many have thought of cultural competence simply as the skills needed to address language barriers or knowledge about specific cultures. Often cultural competency training has aimed to teach service providers about particular groups; the "dos and don'ts" for interacting with them. Arguably, learning about the individuals and communities one provides services to can be helpful; however, this approach can lead to stereotyping and oversimplification of culture (Betancourt, 2004; Nursing Council of New Zealand, 2005). Having bits and pieces of decontextualized knowledge rarely leads to cultural competence, rather this can lead to culturally incompetent actions (Fitzgerald, 2000). A change in knowledge without a subsequent change in

behaviour and attitude is of questionable value: a lack of cultural competence in practice is often

a result of a need to change attitudes and behaviours towards people, not a lack of knowledge

about them (Tervalon & Murray-Garcia, 1998).

The purpose of cultural competence is to foster constructive interactions between people

of different cultures. It is now recognized that cultural competence for one population may not

necessarily translate to another. The traditional cultural values, worldviews, norms and

behaviours that define one group will not always be applicable to another group (Kim, Kim &

Kelly, 2006). Furthermore, Kessaris (2006) argued that seeking only to understand others is

inadequate. Emphasis must be placed on understanding the self in the midst of unbalanced

power relationships, which she maintains operate within and between the various service

delivery and policy sectors.

The skills needed to develop cultural competence include having some understanding of

the cultural group one is providing service to, but also a capacity and willingness to move away

from using one's own cultural values as the benchmark for measuring the behaviour of people

from other cultural backgrounds. Cultural competence includes an understanding of the nature

and dynamics of power as it operates in systems (Kessaris, 2006; Walker & Sonn, 2010). The

issues that arise for people when learning cultural competence can be understood within the

context of the individual, their family and social networks, ethnicity, socio-economic status and

gender and how that interplays with the broader policy, social, cultural and historical setting

(Sue, 2006; Zambrana et al., 2000).

Cultural competence in service delivery is an engagement in a continual process of self-

reflection and self-critique (Tervalon & Murray-Garcia, 1998); it has evolved from making

assumptions about people on the basis of their culture to the implementation of the principles of

client/community-centered approach, including exploration, empathy and responsiveness to the needs, values and preferences of others. Culturally competent service providers expand this repertoire to include skills that are especially useful in cross-cultural interactions (Betancourt, 2004) and adapt in a manner that is consistent with the culture of the client (Purnell, 2002).

Nonetheless, we have few options when interpreting other cultures than starting from our own experiences, which is not necessarily a problem, but issues arise when our interpretations stereotype and judge other cultures based on comparisons with our own (Mikkelsen, 2008). Most people do not believe that they stereotype, however, research on social categorization and stereotyping shows otherwise. Van Ryn and Fu's (2003) study shows that people universally apply stereotypes when trying to know and understand other people. It is a natural function of the human mind: it is an efficient, unconscious and automatic response to simplify cognitive processing in our complex world. Perhaps it is unrealistic and not very helpful to expect people not to stereotype (Leavitt, 2010). As professionals, we must be aware of this tendency and use our perceptions as a starting point from which to gather more information about others. This is where cultural competence plays a pivotal role.

It is important to remember that cultural competence is not about abandoning one's own culture by taking on the attitudes, values and behaviours of another culture or by asking those from different cultures to abandon theirs. It is not about learning everything about all other cultures, which is impossible and unnecessary, or assuming one person speaks for an entire group. It is not a "quick fix" or about being "politically correct" (Leavitt, 2010), rather it is the systematic appraisal of one's attitudes and beliefs. Cross, Bazron, Dennis and Isaacs (1989) describe cultural competence along a continuum, ranging from cultural destructiveness, where

people are dehumanized to cultural proficiency, where cultural differences are highly regarded

and new approaches to enhance cultural competence encouraged.

Essentially, cultural competence is a commitment to interact with people from other

cultures in a respectful way. Becoming culturally competent is an ongoing process that requires

motivation and willingness at both the individual and organizational levels.   At the individual

level, cultural competency is not about being 'tolerant" of other cultures, rather it is the ability to

identify and challenge one's own cultural assumptions, values and beliefs – it is about

developing empathy and the ability to view the world through a different cultural viewpoint

(Fitzgerald, 2000; Sue, 2006). At an organizational level, cultural competence is reflected in

attitudes, policies and practices that enable that organization to work effectively and respectfully

in cross-cultural situations (Cross et al., 1989).

Models of Cultural Competence

Theorists and practitioners, primarily in the field of health care, have developed several

models of cultural competence. Teal and Street (2009) have developed a model that emphasises

communication skills. Their model includes: verbal and non-verbal communication skills; the

need to recognize and explore potential cultural differences; the importance of incorporating and

adapting to cultural knowledge and the ability to negotiate and collaborate with patients from

other cultures. Their model identifies "the incremental development of communication skills for

managing the cross-cultural nature of the clinical encounter" (Teal and Street 2009, p. 541).

Cross et al. (1989) proposed a model whereby one moves through six-stages that include

cultural destructiveness; cultural incapacity; cultural blindness; cultural pre-competence; cultural

competence; to cultural proficiency. Campinah-Bacote (2002) defines cultural competence as

process that includes five inter-dependant stages, cultural desire; cultural awareness; cultural

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knowledge; skills and exposure to other cultures. Bennett (1993) suggests a model of cultural competence that begins with avoidance and progresses to integration as a final stage. Common to these models is the notion that attaining cultural competence is a journey through inter-dependant, "increasingly less ethnocentric phases" (Teal & Street, 2009, p. 536).

Cultural Safety

The skills, values, beliefs and behaviours that constitute cultural competence are features of the individuals or/and organizations that provide culturally competent services to others. Cultural safety moves beyond this idea; it refers to the experience of the receiver of those services. According to Ramsden (2002), cultural safety is a mechanism which allows the consumer to say whether or not the service was safe for them to use; she stated "safety is a subjective term chosen to give the power to the consumer" (p. 6). The focus is on health professional behaviours and institutional responses, and there is an emphasis on the recipient of care describing whether services rendered are safe or unsafe. Put simply, "unsafe practitioners diminish, demean and disempower those of other cultures, whilst safe practitioners recognize, respect and acknowledge the rights of others" (Cooney, 1994, p. 6).

The concept of cultural safety was developed in New Zealand in the 1980's by a group of Maori nurses in order to analyze nursing practice from a minority perspective (Polaschek, 1998. As Ramsden (1993) stated, cultural safety is partly about the Maori people asserting the legitimacy and diversity of their worldview and experiences, as well as a response to the difficulties they face with western based models of health care. She further maintained "cultural safety developed from the experience of colonization and recognizes that the social, historical, political diversity of a culture impacts on their contemporary health experience" (Ramsden,

2002, p. 112). The primary focus needs to be on the bi-cultural partnership where each patient-nurse encounter is a genuine meeting of two different and unique cultures (Ramsden, 1993).

Cultural safety is not about cultural practices as such; rather it recognizes the importance of understanding the position of certain groups within a society, such as Aboriginal Canadians, and how they are understood and treated (Polaschek, 1998; Smye & Browne, 2002). Cultural safety is increasingly identified by researchers, practitioners and educators as a useful tool for placing abstract post-colonial theorizing in everyday contexts (Ramsden, 2002). Cultural safety "extends beyond cultural awareness" (Nursing Council of New Zealand (NCNZ), 2005, p. 4), and acknowledges and respects different worldviews, beliefs and practices. Cultural safety is an outcome of nursing education that enables a safe, appropriate and acceptable service that has been defined by those who receive it (Clear, 2008) and provides a focus for thinking about power relationships and the rights of groups who have often been marginalized (Kessaris, 2006; Papps, 2002).

Ramsden (2002) combines the practical and the theoretical notions of cultural safety by depicting it as an extension of cultural competence. Arguably one needs to be culturally competent in order to provide culturally safe services. The idea of cultural safety as depicted on the culture continuum is helpful in terms of the design and implementation of policy and programs. Cultural safety, building on the skills of competence, implies the reversal of cultural damage, and necessitates not just the agreement and understanding that cultural differences matter, but also the need to make a real difference in methods of program development and delivery. Cultural safety is not just a process of developing and improving services; it is also part of outcomes (Brascoupé & Waters, 2009). Clear (2008) maintains that unsafe cultural practice diminishes or demeans the cultural identity and well-being of others. This is a crucial

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point in practice - cultural safety is about acting in ways that enhance the cultural identities of individuals and communities and promotes well-being.

Brascoupé and Waters (2009) described and analyzed the concept of cultural safety as it relates to Aboriginal health policy and service delivery in a Canadian context. The authors maintained that the concept of cultural safety has extended beyond its origins in the literature concerning nursing in New Zealand and resonates with Indigenous peoples around the world, particularly where people are disadvantaged in areas such as education, economic opportunity and criminal justice. However, they further state it remains mostly confined to academic studies and government reports, with little evidence that it has been applied to professional practice: "It seems that the practicalities of cultural safety as an *outcome* rather than a *concept* have yet to be realized" (Brascoupé & Waters, 2009, p. 28).

Unfortunately, statistical evidence of the benefits of cultural safety is scarce. The most concentrated investigation of the applicability of culturally safe practice is found in the literature from the New Zealand and Australian health care field largely focused on nursing (Smye & Browne, 2002). In Canada, the body of literature examining wider issues of culture in health care delivery, focusing on cultural competence, is more extensive and shows that cultural consideration improves health outcomes for Aboriginal people (Brascoupé & Waters, 2009). Still less evidence exists on how the concept of cultural safety can be used in relation to communities at risk. The studies on nursing focus on the interaction between non-Aboriginal health care professionals and Aboriginal patients; they do not extend the discussion of cultural safety to wider issues of community and social well-being, such as the failings of the educational system, drug and alcohol abuse and violence and victimization (Brascoupé & Waters, 2009). Little information is available about the knowledge, skills and strategies needed to address

discrimination, inequity and disparity (St. Onge, 2009). However, employing culturally safe methods of program development and delivery could "strengthen the capacity of communities to resist stressors and build resilience to those forces that push them from risk to crisis" (Brascoupé & Waters, 2009, p. 7).

<u>Guidelines for Cultural Safety</u>

Ball (2007) has identified characteristics that indicate unsafe cultural practices, at least in a health care setting, which include the under-utilization of available services by patients or clients; non-compliance with prescribed interventions; reticence in interactions with health care providers and complaints about the lack of culturally appropriate services. She further articulated several principles that engender cultural safety. These included being culturally aware, having knowledge about other cultures one is providing services to; being culturally sensitive and mindful of one's own cultural identity; collaborating with those seeking help, engaging in mutual learning and ensuring there is a good probability that patient's goals are realized. Further, Brascoupé and Waters (2009) asserted that practioners and organizations must ensure client confidentiality; develop and communicate a code of ethics and guiding principles and advocate for clients.

The NCNZ has developed guidelines for cultural safety in nursing which are outlined in the Treaty of Waitangi and Maori Health (2005). The authors stated that the purpose of cultural safety was to "extend education beyond the description of practices, beliefs and values of ethnic groups" (p. 5). The following is a summary of the principles that underpin their cultural safety education:

1. *Cultural safety aims to improve the health status of New Zealanders and applies to all relationships through an emphasis on health gains and positive outcomes.* Nurses

acknowledge the beliefs and practices of those who differ from them. This may be by age; gender; sexual orientation; occupation and socioeconomic status; ethnic origin; religious or spiritual beliefs; disability.

2. *Cultural safety aims to enhance the delivery of health and disability services through a culturally safe nursing workforce by:* identifying power relationships between service providers and the people who use the services; empowering the users of the service; preparing nurses to understand diversity; relating and responding effectively to people with diverse needs.

3. *Cultural safety is broad in its application by:* recognizing inequalities within health care interactions; addressing the cause and effect of history, political, social and employment status, housing education, gender and personal experience.

4. *Cultural safety has a close focus on:* understanding the impact of the nurse as a bearer of his/her own culture, history, attitudes and life experiences and the response other people make to these factors; challenging nurses to examine their practice carefully, recognizing the power relationship in nursing is biased toward the provider; balancing the power relationships; preparing nurses to resolve any tension between the cultures of nursing and the people using the service and understanding that such power imbalances can be examined, negotiated and changed (pp. 6-8).

Culture and Community Development

A recent review of the literature aimed at understanding communities attitudes towards the development of their natural resources found that indigenous peoples are not averse to development or to policies aimed at bettering their livelihoods; they are, however, skeptical about the way such policies are developed and feel that they fail to take into account their

interests, customary laws and cultural heritage, often resulting in violations of their basic human rights (Pisupati 2010).   Indigenous rights are, however, protected in numerous international treaties and declarations, such as the United Nations' Declaration on the Rights of Indigenous Peoples that was adopted in 2007 (Bavikatte & Jonas, 2009; Office of the High Commissioner for Human Rights, 2011). Several approaches to community development work have been articulated which place importance on the protection of Indigenous rights, two of these approaches are the rights-based approach and the endogenous development approach.

Rights-Based Approach

A rights-based approach to development, as outlined in Mikkelsen (2008) is a framework for the process of development based on international human rights standards.   A rights-based approach means recognizing everyone's equal rights, including the right to cultural integrity. Over the last decade rights-based approaches have gained more attention in the developmental discourses; however, "there is no single, universally agreed rights-based approach" (p. 200).

Pisupati (2010) states that one way of implementing a rights-based approach is the development of bio-cultural community protocols (BCPs). BCPs are tools that facilitate culturally-rooted, participatory decision-making aimed at achieving community well-being. They support the communities' right to self-determination, particularly regarding access to and control over communally managed lands, traditional knowledge and cultural. They also draw on communities' customary norms and laws to set out, among other things, community commitments to manage their natural resources. Every community protocol is unique, owing to the unique biological and cultural diversity of the community that develops it. However, according to Mikkelsen (2008), there are many challenges facing organizations in developing a

rights-based approach, due, in part, to a lack of knowledge about human rights and inconsistences between law and practice.

The Endogenous Development Approach

Endogenous development refers to development that is mainly, although not exclusively, based on local knowledge, skills, values, leadership and the way that people have organized themselves. External knowledge and resources are often used to complement local resources. Endogenous development seeks to address local needs and issues by utilizing local potential. Indigenous knowledge and practices may not have all the answers to present-day challenges; however, this approach to development supports communities to define their relationships with outside agencies based on their own cultures and values. For development organizations and practioners to be effective, they need to understand the basic characteristics of local forms of knowledge and the world views on which they are based (Pisupati (2010).

A vast and diverse group of development workers, consultants, researchers, policy analysts, program developers and service providers are continually involved in developmental activities. The services they provide to communities are equally vast and diverse and can include technical assistance, crisis management, resource development, poverty reduction and ending violence programs. Open dialogue, transparency, adaptability and participatory methods are fundamental when we design and deliver interventions in other people's worlds: we need to carefully reflect on what we are doing when we intervene in other people's lives. Fortunately, there are treaties and declarations designed to protect and promote indigenous human rights, and models and approaches that underpin culturally safe practices. The challenge lies in transforming these ideas into best practices for organizations, institutions and practioners.

Research Questions

The principle research questions are: What were the experiences of Vancouver's Aboriginal community members when they attempted to access victim support services? Were their cultural needs met? What changes would they want to see in the services provided to them? In order to answer that query, participants will be asked to discuss the following questions:

- Is it necessary to be able to participate in traditional healing practices?

- Is it important to have the support of an elder?

- It is necessary that victim support services be provided by an agency that has an Aboriginal focus?

- Is it important that the victim support worker be Aboriginal?

- What were your experiences when accessing services?

- How could these services better support Aboriginal people?

- What changes, if any, would you want to see in the services that are provided to Aboriginal people?

CHAPTER 4: QUALITTIVE RESEARCH & DATA ANALYSIS

In this chapter I describe the qualitative approach, research procedures and processes I used to gather the data. I then go on to explain in detail how I analyzed the data and developed the themes from it. I also explore ethical concerns, methodological challenges and the issue of validity.

Analysis

Qualitative Approach

The primary purpose of this research was to consult with Aboriginal community members who have used victim support services with the goal of exploring and making explicit their experiences with the services they received. In order to accomplish that I used a qualitative approach: qualitative research is concerned with the opinions, experiences and feelings of individuals and describes social phenomena as they occur naturally. Understanding is gained through a holistic perspective (Hancock, 2002), and the approach advocates for a respectful, collaborative relationship between researcher and participant (Creswell, 2009).

Aboriginal research methodologies are tied to traditional systems of knowledge and the spiritual nature of Aboriginal peoples. Methods may include qualitative approaches such as narrative inquiry, storytelling, face-to-face interviews and focus groups. Whatever method is used, all are guided by an Aboriginal worldview (Hart, 2010), described by Graham (2002) as a relational worldview. Key within a relational worldview is the emphasis on spirit and spirituality, community and respectful individualism (Hart, 2010). Respectful individualism supports freedom in self-expression because it is understood by all that individuals take into consideration the needs of the community as opposed to acting on self-interest alone (Gross, 2003, cited in Hart, 2010).

In order to incorporate an Aboriginal worldview into the research and to develop collaborative relationships with participants, I utilized sharing circles as the method of collecting data. Lavallée (2009) describes the use of a sharing circle as a way to gather information that is respectful of and includes Aboriginal protocols, values and beliefs. Sharing circles are used to capture people's experiences; they are similar to focus groups in qualitative research where researchers gather information on a particular topic through group discussion (Berg, 1995); however, they differ in that the purpose of a sharing circle is to give participants an opportunity to share their personal experiences (Soleil, St.Denis & Deer, 2009). In a sharing circle participants (including the facilitator/researcher) are viewed as equal and information, spirituality and emotionality are shared (Lavallée, 2009).

Nabigon, Hagey, Webster & MacKay (1999) state that the focus of this approach to research is not easily understood from a western perspective, "it is not "external" empirical research. Instead, it is interested in historical experiences, in the expression of the roots of problems, in reflecting on situations; it is not oriented to extracting data but rather to acts of sharing" (p. 126). The authors further state the following are important considerations for the circle:

- Each person has autonomy in terms of how much they will disclose
- Each person is free to speak without interruption or questioning
- There is recognition that the Creator is present in the circle
- The circle is nonjudgmental, helpful and supportive
- Respect is important, and this includes listening to others

Although sharing circles are concerned with gaining knowledge through discussion, the principles behind a sharing circle are quite different than other methods of gathering data.

Circles are acts of sharing all aspects of the individual and permission is given to the facilitator to report on the discussions (Nabigon et al, 1999).

Social Constructionism and the Narrative Inquiry

Social constructionism views knowledge and the knower as interdependent and embedded within history, context, culture, language, experience and understandings. It dispenses with notion of "absolute truth" and takes a pluralist position suggesting we critically reflect on our own truths (Vygotsky, 1978).   Narrative inquiry reflects social, historical and cultural conditions (Chase, 2003); it is an approach that encourages the unique voice of each participant as stories are told about personal experiences (Cortazzi, 2001). Narrative inquiry seeks to collect data to describe and interpret the lives of others in the search for understanding and meaning (Barton, 2004).   "Narratives not only give meaningful form to experiences already lived through, they can also provide a forward glance, helping us to anticipate situations even before we encounter them, allowing us to envision alternative futures" (Flyvberg, 2001, cited in Mikkelsen, 2005, p. 94).

Ethical Considerations

A major ethical concern in utilizing the sharing circle was the challenge of exploring participant's experiences while protecting their safety and privacy. With my background as a counsellor and victim support educator I am aware of the thoughtfulness and sensitivity required in approaching participants with any history of trauma or victimization. Establishing safety for the participants was a priority. I completed the Institutional Review Board CITI training through NDSU and equivalent Canadian training through the Government of Canada's Panel on Research Ethics. As well, a letter of consent (see Appendix C) which clearly articulates the expectations

for confidentiality, was given and explained to all participants. Safety concerns were discussed at the beginning of the circles.

Recent work has been done through the Canadian Institute of Health Research (CIHR) in the development of ethical guidelines for research with Aboriginal populations. In March 2004, as part of a broader national endeavor to develop research guidelines for Aboriginal people, the CIHR established the Aboriginal Ethics Working Group (AEWG). The AEWG was representative of Aboriginal interest and academic disciplines and provided advice and support for the development of the Guidelines (CIHR, 2007). The Guidelines include, in part, the following:

1. The researcher should understand and respect Aboriginal world views

2. Concerns of individual participants and their community regarding anonymity, privacy and confidentiality should be respected, and should be addressed in a research agreement

3. Aboriginal people and their communities retain their inherent rights to any cultural knowledge, sacred knowledge, and cultural practices and traditions, which are shared with the researcher

4. Research should be of benefit to the community as well as to the researcher and

5. A researcher has an obligation to learn about, and apply Aboriginal cultural protocols relevant to the Aboriginal community involved in the research

The design of my research attempted to incorporate these guidelines. As a non-Aboriginal researcher it was crucial that I focused on the experiences and interpretations of those experiences that Aboriginal people had when accessing services. Researchers have the potential to increase knowledge or to preserve ignorance and stereotypes (Tuhiwai Smith, 2012). It is my hope that I am able to add to our knowledge.

Research Procedures and Process

After feedback from my supervisor and committee members I applied for and received

ethics approval from the North Dakota State University (NDSU) (see Appendix E). The

following guidelines helped to direct the study:

1. The study only included Aboriginal people who had accessed victim services

2. The study only included participants who freely volunteered to participate in the circle

   and be audiotaped

3. The research needed to be completed by March 31, 2017 as specified by NDSU

Location of the Circles

In order to make it easy for participants to attend, I chose Carnegie Centre as the location

to conduct the circles. Carnegie Centre, which is part of Vancouver Park's Board, is located in

the Downtown Eastside (DTES). The DTES and the adjacent areas of Grandview Woodland and

Strathcona (see Appendix F) have the highest concentration of Aboriginal people in Vancouver

(Centre for Urban and Community Studies, 2008). As well, the Centre is on a major bus route

and is easily accessible for community members.

I approached the assistant director at the Centre and explained my study to her. She

agreed to allow me to use space to conduct the circles and I reserved a fairly large room on the

third floor. As well, she made arrangements with Carnegie's kitchen staff to provide light

refreshments for the circle participants.

Quest for Participants

Posters were created inviting participants to join in the circles. I visited Aboriginal

focused agencies in the area informing them of the upcoming circles and requested they allow

me to display a poster at their locations. All agreed and posters were displayed at PACE Society,

the Aboriginal Front Door, the Aboriginal Policing Centre, the Friendship Centre and Carnegie

Centre. Potential participants were asked to contact me by telephone to discuss inclusion into the

study. I was honoured by the number of potential participants who responded. I was contacted

by over thirty people who were interested in being involved, and twenty-nine people fitted the

criteria and were put on to the list.

The Circles

Two hour-long sharing circles were conducted on April 22, 2014; the first at 1:00 pm and

the second at 2:30 pm. The first circle was attended by eight participants, all women, and the

second circle by ten participants, eight women and two men. As participants arrived they were

given a copy of the Letter of Consent (see Appendix G); I asked them to read it and answered

any questions about the Letter they had. All participants signed the letter. Participants were

given a copy of the Letter for their own records and informed they could contact my supervisor,

Dr. Goreham, North Dakota State University or I if they had questions or concerns about the

study.

I started each circle by recognizing that we were on Coast Salish Territory and giving

thanks for that. Participants were informed about their rights to privacy and that they could

withdraw from the research at any time. We then went around the circle, introducing ourselves

to each other. Participants were then informed that the circles were focused in nature, and we

would not be discussing the trauma that led them to seek the victim services. It was explained

that this was a safety measure, as I did not want participants leaving the circle feeling open and

vulnerable. All participants agreed to the structure of the circle. We then went over the

questions that were the focus of the circles (see Appendix H); these questions were posted on the

wall. Participants were informed that the circles would be audiotaped; all agreed they were comfortable with that.

Consistent with traditional Aboriginal values light refreshments were served during the circles and an honorarium of $10.00 was given to each participant at the conclusion. Participants inquired how they could find out the results of the study. I informed them they could contact me via telephone, text or email; as well, I would be writing an article outlining the findings of the study to be published in the Carnegie Centre Newsletter (as pre-arranged with Carnegie staff).

The Process of Transcription

The process of analysis began when I started transcribing the circles. I listened to the recordings from beginning to end, paying careful attention to the words and phrases used to describe events, experiences and emotions. I tried to recall the non-verbal communications I had observed during the circles which had provided depth to the stories I had heard. I then re-listened to the circles again, typing the text until I felt that I had captured the content. I then made a paper copy of the transcript.

Coding

The principle research questions were: What were the experiences of Vancouver's Aboriginal community members when they attempted to access victim support services? Were their cultural needs met? What changes would they want to see in the services provided to them? In order to answer these questions I needed an efficient and effective way to organize and sort the data. I chose to use an Excel™ spreadsheet; subsequently, one was created which included columns for codes, phrases and phrase identification numbers.

Prior to coding I read through the entire data set several times looking for possible patterns (Braun & Clarke, 2006). I then went on to manually analyse the content of the

transcript, specifically looking for phrases that were similar to each other, as described by Ryan and Bernard (2003). Working systematically and going through the entire data set numerous times, I gave equal attention to each item; using different coloured markers I identified interesting aspects in the data that indicated repeated patterns. I looked for as many potential categories (codes) as possible because data can be un-coded later on (Ryan & Bernard, 2003; Braun & Clarke, 2006).

Each phrase was given a unique identification number. I then recorded the phrases under their relevant research questions and codes into the Excel™ spreadsheet. The conceptual codes were broad; the goal of this phase was to begin formulating an understanding of the participant's experiences. The codes included: *Discrimination; Trauma; Historical Trauma; Needs Unmet; They Get Off; Cultural Blindness; Having no Voice; Loss; Positive Experiences; Cultural Needs Unmet, Cultural Needs Met; Need for a Cultural Focus; Need for More Aboriginal Service Providers and Services Needed.*

Table 2. What were your experiences when you tried to access victim services?

Codes	Sample Phrases
Discrimination	They treat us more badly than anyone else
	The first missing woman, she was Aboriginal, they didn't care
	The police have a bad attitude towards Natives
	You're on your own if you're Aboriginal
	They stereotype us
	I'm Native and the police services don't care
	Aboriginal women are forced to leave their homes
	People here assume I'm a prostitute
	They tell us we have no rights
	It is because we are Aboriginal
	We don't want to go to the police because they treat us badly
	A lot of damage done because they ignore our calls

Table 2. What were your experiences when you tried to access victim services? (continued)

Codes	Sample Phrases
Trauma	I'm scared I was black and blue when I was in court It brings up a lot of things inside of me I was a victim last year My ex came back after me I was hiding It was murder There's so much violence My abuse has been on-going for 20 years I was attacked I never feel safe They get raped
Historical Trauma	You know, colonization People don't get it, they don't understand what colonization does Since residential school This has been going on for centuries This is our land and how come we have no rights We were here first and we get treated the worst
Cultural Blindness	When I access services they don't understand They don't understand what colonization does I think it has to do with a lot of ignorance They don't know about Native culture They have no understanding They don't understand an Aboriginal perspective They don't get it and we don't get the help we need
Having no Voice	I didn't talk to anyone They made it hard for me to complain They tell us we have no rights I don't call anyone They don't listen to our story I am tired of voicing my opinion and not being heard
Positive Experiences	She helped me through the court process The liaison services were good I had a positive experience They were understanding They had an Aboriginal focus The worker was Aboriginal She's awesome She's not Aboriginal but she's great She doesn't judge She respects my culture I used victim services, she was really helpful

Table 3. Were your cultural needs met?

Codes	Sample Phrases
Cultural Needs Unmet	We all know what it's like to be Native and be in mainstream services They have no understanding They need to know more about us But they don't get it I think it has to do with a lot of ignorance There has got to be a better way
Cultural Needs Met	They had an Aboriginal focus They had a cultural focus She respects my culture The worker was Aboriginal I had a positive experience…they were understanding, they had an Aboriginal perspective She understands, she doesn't judge me

Table 4. What changes in the services would you like to see?

Codes	Sample Phrases
Need for a Cultural Focus	That would be important to have a cultural focus I want an Elder available An Elder is important We need to have an Elder who really understands us Traditional healing practices I want to see Aboriginal oriented stuff More Aboriginal police Workers have to be more compassionate about Aboriginal people
Need for More Aboriginal Service Providers	It is important to have an Aboriginal worker We don't have a choice, we have to go to a service provider who is Non-Aboriginal Most of them who work in those programs are not Aboriginal They are white people who are there for the money, not the people I only want to work with Aboriginal people Better doctors who are Aboriginal I have only seen one Native cop, we need more More Aboriginal nurses and counsellors
Services Needed	The Native liaison services were good, that's the kind of service I want We need something 24 hours a day More Aboriginal workers Having an Elder is important Maybe give them some training down here Workshops would be good, life skills and computers

Thematic Analysis

"Theme identification is one of the most fundamental tasks in qualitative research. It also is one of the most mysterious" (Ryan & Bernard, 2003, p. 85). Complaints have been made about the lack of clear instructions for qualitative analysis (McCance, McKenna, & Boore, 2001), which may be due to the "inherently intuitive process of researchers working intimately with their data and the difficulties in articulating this to others" (Simons & Squire, 2008, p. 120). This challenge suggested to me the need for an analytical framework; Ryan and Bernard (2003) have developed one that I found helpful. The authors describe several techniques, ranging from repetitions in text to metaphors, to help identify themes in the data. They have also created a useful table on how to determine which techniques to use given the type of data collected.

Using Ryan and Bernard's (2003) framework I determined that, because my data was generated from open-ended questions and the answers to those questions were relatively short, the most appropriate techniques to use included: cutting and sorting, repetitions and similarities and differences.
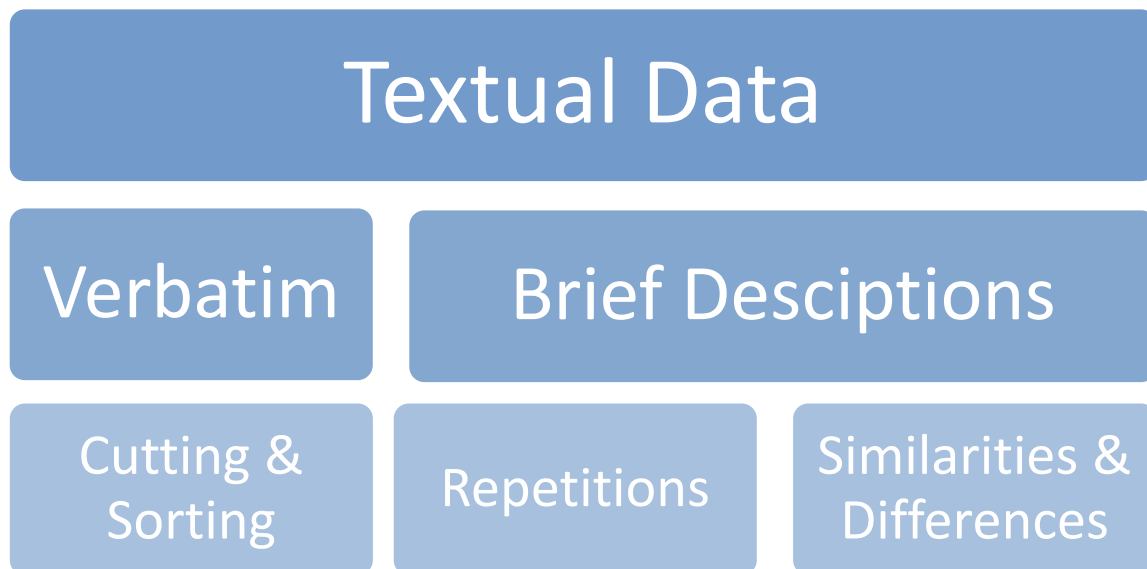
Textual Data

Verbatim

Brief Desciptions

Cutting & Sorting

Repetitions

Similarities & Differences

Figure 2. Thematic Analysis Framework

Another decision I needed to make was to determine at what level the themes would be identified at: a semantic or explicit level, or at a latent or interpretative level (Boyatzis, 1998, cited in Braun & Clarke, 2006). A thematic analysis typically focuses at one level only. With a semantic approach, the themes are identified within the explicit meanings of the data and the researcher does not look for anything beyond what was said. This process involves a progression from organizing and describing the data, searching for themes in it and then attempting to theorize the significance of these themes. In contrast, an analysis at the latent level goes beyond the semantic content of the data, examining the underlying ideas, assumptions and ideologies that are theorized as shaping that content (Braun & Clarke, 2006). Since my goal was to remain true to the participants' stories about their experiences I chose to analyse the data at the semantic level which I hoped would prevent me from colouring the findings with my own assumptions and biases.

Using the sort function in Excel™ I was able to determine which phrases appeared across codes in the data. I then went on to look for phrases that were similar across and within codes, using coloured markers to highlight them; this produced a hierarchy of what was most relevant to participants when they attempted to access services, or when they used them. I then went on to determine the differences within and between each code (Braun & Clarke, 2006; Ryan & Bernard, 2003). During this process I referred to the transcript several times in order to keep as true as possible to what participants shared in the circles. I was then able to develop a set of candidate themes. I then went over the data again to ensure that the data within each theme cohered together meaningfully and that the themes were distinct from each other (Braun & Clarke, 2006).

I then went on to consider the validity of individual themes in relation to the data set as a whole and to my research questions (Braun & Clarke, 2006).   At this point I was able to identify the participant's "stories" in the themes as expressed in the narratives.
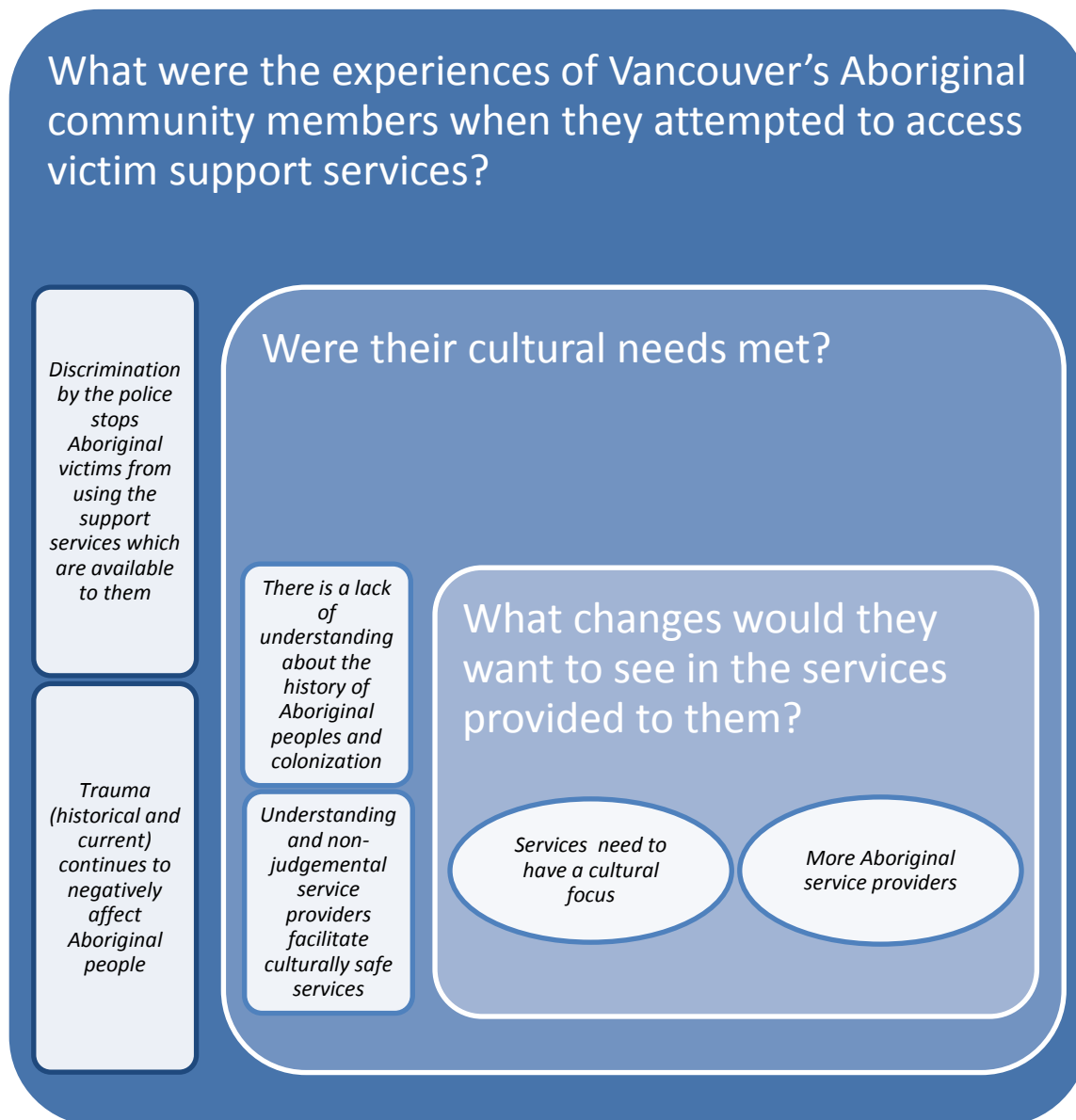

Figure 3. Research Questions and Themes

Research Question 1: What were the experiences of Vancouver's Aboriginal community members when they attempted to access victim support services?

Discrimination by the Police Stops Aboriginal Victims From

Using the Support Services Which is Available to Them

When one is a victim of violence or crime here in Vancouver the first contact with the criminal justice system and victim services is usually a member of the Vancouver Police Department (VPD). Discrimination against Aboriginal people was mentioned numerous times by participants; specific to this research question, discrimination by the police was of particular interest. Participants related stories of having the police "banging on their door," of "being handcuffed" and "put in jail overnight" even though "[they were] the victims." They said if you are "not Native you will get services from the police," that the police "don't care" about Aboriginal people and they get "charged even when [they] are the victims."

> "When I was talking to the police, they said you've been here for a few
>
> years, the cops said you must have been arrested a few times. I said I've
>
> never been arrested. They just assumed I had been in trouble, been in
>
> jail and stuff."

Participants went on to describe situations where Aboriginal women were forced from their homes when assaulted by their partners, saying this "only happens to Aboriginal women, not white women" and when the police see they are Aboriginal they "do what they want to do," often "don't follow the rules" and reports about incidents that have occurred "are not filed." Participants said the police "do not listen to their side" and that a "white person [gets] treated differently." They believe the police "stereotype them" and automatically assume because they are "Native they are on crack or a drug addict." The police "ignore their calls" or they "end up

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waiting hours" for help; and if you "live in the DTES and are Native the cops take their time,"
and when they finally attend, they "don't listen to our story and we get blamed."

> "The police have a nasty attitude towards Natives. I don't drink very much
> but I walk around the neighbourhood and see how they treat us, they even
> laugh at me. I was put in handcuffs because they thought I was a drug dealer.
> I wanted to make a complaint about it, but when I called they kept telling me to
> call other numbers. They made it hard for me to complain"

Further, participants claimed that the police "don't do their jobs," they "don't get the help
they need" and they "don't want to go to the police because they treat [them] badly." As one
participant stated she "doesn't call anyone, I go it on my own" or as another said she only calls
the police "if it's really serious." Participants also reported that even when they do report a
crime the accused person "gets to walk free" or "gets away with it because they are white,"
further isolating and marginalizing Aboriginal victims. The fractured relationship between VPD
and the Aboriginal community has historical roots. Governments have used the police to pre-
emptively attempt to resolve Aboriginal rights disputes by arresting those attempting to exercise
those rights prior to any determination as to the validity of the claims. In addition, police have
been used to apprehend children in order to have them attend residential school and were used to
support many of the most egregious provisions of the *Act* (Rudin, 2007).

> "The police won't follow through; I think it's a cultural thing. When the police
> show up, they see you're Aboriginal and they just do what they're going to do,
> they just make up their own minds, they just do whatever they want. If they
> want to put you in jail overnight they do."

One unfortunate consequence of this strained relationship between the VPD and the Aboriginal community is that it may be preventing Aboriginal people from using services that are available to them; as Ball (2007) maintains, this is an indicator that the services provided are culturally unsafe.   As well, participants are unconvinced that this relationship will change, as one stated "do you know how many surveys about the police that have been done here, and nothing changes. It's getting worse." In my work in victim services, even though I worked within the health authority in an Aboriginal specific program and was not connected to the VPD, community members were reluctant to use the services we provided. Given their experiences with the "system" they shared in the circles this reluctance is understandable.

Trauma (Historical and Current) Continues to

Negatively Affect Aboriginal People

Participant's statements about trauma were the most frequent comments made across the data set. In the context of historical trauma one participant claimed that the mistreatment and resulting trauma "had been going on for centuries" and is related to "you know, colonization." One participant said that they "were here first and get treated the worst," that it had been going on "since residential school" and another stated that there has been "a lot of damage done." Participants expressed intense frustration about this issue. Their stories illustrated how historical trauma intersects with their current interactions with service providers.

"The excuse they give us is that they never heard of trauma, even though they

know the book inside and out, and they tell us we have no rights. This is our

land and how come we have no rights. They're Caucasian, come from half way around

the world. If I had the money I'd send you all back."

However, many of the comments related to trauma referred to recent, current or on-going experiences. Participants agreed that in "this neighbourhood Aboriginal people get treated badly," "there is so much violence" and they had witnessed it "happen many times." They shared their experiences of being "scared to go" to Court, of being "black and blue when in Court" and that they had been "victims." One participant shared how she had to "hide" when her "ex came back after her," how "scared" she was and how little help from the police she received.

"Victim support didn't even call me back. I called them to let them know my

ex came back after me, I was hiding at Insite[3] for 3 hours, my ex was at the

corner and police were sitting out front texting on their phones, but did

not even come to Insite, even after staff called them."

One participant shared her story of long-term abuse which had "been on-going for twenty years," and another said that mainstream service providers "don't know how to work with people who are traumatized" which may, as another participant claimed, explain why "a lot of women go back to abusive men." One participant said the violence they witness towards Aboriginal people "brings up a lot of things inside of [her]" and another stated that after she was victimized she " used to walk with [her] head down, it was the trauma." Another told the story of a young man from Prince George who was found dead, the police insisted it "was suicide" but the mother "followed through because she wanted to know" and it was eventually determined that "it was murder." He "was Aboriginal." Participants also raised the issue of young Aboriginal girls who get exploited by "pimps."

"I am seeing a lot of young Aboriginal girls down here, I saw one who

was 14, and they get addicted to drugs. They walk around like zombies.

The get used by pimps, who get them addicted. We need help."

---

[3] Insite is Canada's first supervised safe injection site, operated and funded by Vancouver Coastal Health Authority.

Other concerns voiced were that, even when they proceed to report incidents to the police there are little, if any, consequence for the accused; "the assaulter gets to walk free," "they didn't do anything about the perpetrator" and "this guy cut someone's head off and six years later he's walking around[4]" They view this as "unfair." "These acts of violence may be motivated by discrimination, or may be carried out in the expectation that societal indifference to the welfare and safety of Indigenous women will allow the perpetrator to escape justice" (Amnesty International, 2004, p. 5). They also say that if the perpetrator does go to jail, they "are not being protected when they get released."

> "I used victim services when I got raped, now I am in a whole different
>
> situation, I need help. They're not letting me know when the rapist is
>
> getting out of jail. They're not letting me know at all. Lots of girls get
>
> hurt when their ex-partners get out of jail. Girls aren't being informed,
>
> they continue to get hurt, stabbed and murdered."

The trauma Aboriginal people experience from colonization flows vertically, from one generation to the next, and horizontally, as seen in the anxiety they experience to present day stressors (Gajdos, 2002). Aboriginal people suffer from these effects and also from discrimination encountered on a daily basis, sometimes referred to as race-based traumatic stress (Bryant-Davis, 2007). According to Herman (1992) this results in the loss of a sense of self and an inability to trust. Without an understanding of the effects of colonization, service providers who work with Aboriginal clients will be less prepared to encourage positive change (Tamburro, 2013).

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[4] Referring to the 2008 murder of Tim McLean, a young Aboriginal man travelling by bus from Alberta to his home in Manitoba, the accused was found not criminally responsible for the crime.

Research Question 2: Were their cultural needs met?

There is a Lack of Understanding about the History

of Aboriginal Peoples and Colonization

When participants described their interactions with non-Aboriginal service providers (and sometimes Aboriginal ones), they maintained that "they don't get it, they don't understand what colonization does," "they don't know how we've been treated" and "they don't know about our culture." Participants expressed frustration by this lack of "understanding [about] Aboriginal people and what has happened to [them].' "People don't get it; they have no understanding of First Nation issues," and they agreed that because of this lack of understanding they "don't get the help [they] need." They believe they are "classified as losers," made to "feel guilty" about the situations they find themselves in and that it is somehow "their fault" when they are victimized. They also shared their experiences of being "stereotyped," and that they believe "no one cared because we are Native."

> "They wouldn't want what was done to us to be done to them. Even some
>
> Aboriginal workers look down their noses at us, and they don't get it."
>
> "I get madder and madder, why I am I letting these people get to me. This
>
> has been going on for centuries."

The participants shared their experiences about "what it is like to be Native and be in mainstream services;" when service providers are often "very judgemental" and believe that Aboriginal people "like to be abused." They stated that they are "uncomfortable when they [service providers] have no understanding of First Nations issues." The apparent lack of understanding regarding the devastating legacy of colonization works to further marginalize Aboriginal people. Service providers need to understand the history and current issues created

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by colonization; to understand the source of what can appear as dysfunctional behaviour of Aboriginal people in order to work effectively and respectfully with those who have been colonized (Tamburro, 2013).

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Understanding and Non-judgemental Service Providers

Facilitate Culturally Safe Services

</div>

Only three participants stated they had positive experiences with victim services; however, this theme is important because it suggests how we can design and deliver better programs and services for Aboriginal victims. The qualities participants described as being necessary in order to provide culturally safe services included: having a support worker who is "understanding," has a "cultural focus," "doesn't judge" and has "respect for [the] culture." Another participant said that her worker keeps her informed and up-to-date about the status of the perpetrator, she "always lets me know when he is getting out of jail." Another participant shared that her worker "came to get me at home, made sure I could go to court" and "calmed me down while I was there."

> "I feel when we are all trying to get our services we are uncomfortable when they have no understanding of First Nations issues."

> "I have a domestic violence worker, from the police. She's been awesome. She calls me back, she follows through with things. She's not Aboriginal but she's great. She understands, she doesn't judge me. I have had nothing but positive with her, she really understands."

> "I finally found someone, she is Native, who understands and I can let go."

Research Question 3: What changes would they want to see in the services provided to them?

Aboriginal People Want Services that have a Cultural Focus

One participant mentioned the" Native Liaison Society"[5] that had been in operation several years ago, she stated they "were good, that's the kind of services I want." The Society provided support services to Aboriginal victims and witnesses of crime through information and referral to other community services, assistance with compensation claims, information about case progression, crime prevention techniques, and support and court accompaniment. Unfortunately, in 2003, the Society's funding was withdrawn without consultation with the community (Oppal, 2012).

Another participant said that service providers "need to know more about us," "it would be important to have a cultural focus" and to combine "traditional healing practices with western practices." "Workers have to be more compassionate about Aboriginal people" one participant said, another stated they want someone "who has a heart and really listens." "We need counselling and good doctors all the way around" as one participant stated and "someone always there to answer our calls." They also went on to say they "want to see Aboriginal oriented staff," "maybe give them some training down here."

"I used victim services before. I think it would be important to have

an element of culture, an understanding of culture."

"She respects my culture."

"The 911 operators need some training. They don't know about our

culture or about how we have been treated…you know, colonized."

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[5] Vancouver Police and Native Liaison Society, an organization that was connected to the force and had an office in the department's detachment in the DTES.

Aboriginal People Want More Aboriginal Service Providers

While only one participant stated she would only access services from an Aboriginal worker, other participants agreed that more Aboriginal service providers are necessary and would "help make services better" for them. They affirmed they want "more Aboriginal nurses and counsellors" and "more Aboriginal police." Several others said that having an "Elder available" was important, "an Elder who really understands us."

"I want an Elder to be there. When you are going mainstream, Aboriginal women find it uncomfortable because they don't understand an Aboriginal perspective."

"I had a positive experience when I was dealing with the victim service worker, they were understanding, they had an Aboriginal focus. They had a cultural focus. The worker was Aboriginal."

Methodological Challenges

Methodological challenges can emerge when conducting cross-cultural qualitative research. These challenges often relate to the researcher's experiences, biases, theoretical perspective (Mill & Ogilvie, 2003) and, specific to this study, race. Although race has no legitimacy as a biological construct, race and racism shape social experience and have a profound effects on peoples' lives (Varcoe, 2006), including participants in this study. Often populations are exposed to risk when researched by those who belong to the dominant group and who ignore the traditional practices, protocols and histories of those they are researching (Varcoe, 2006). The usefulness of research from the perspective of those being researched depends upon researchers having a commitment to understanding their history and socio-cultural reality (Bishop, 2005).

Validity

Maxwell (2013) stated that striving for validity in qualitative research is not a search for some irrefutable truth; there are no guaranteed methods to achieve perfect validly, rather validity gives people a reason to believe that your research is credible. "A key concept for validity is thus the *validity threat*: a way you might be wrong" (p. 123). Maxwell maintained that these threats are events or processes that can lead to invalid conclusions rather than variables that need to be controlled for. The two broad type of threats to validity he described were (1) researcher bias and (2) reactivity (Maxwell, 2013).

Researcher bias includes selecting data that fit the researcher's existing theory, goals, or preconceptions and/or selecting data that somehow "stand out" to the researcher. Maxwell (2013) went on to say that both of these involve the subjectivity of the researcher. Since it is impossible to eliminate my beliefs and values I was acutely aware that I needed to know what biases I held and be mindful that they may influence my findings. I had worked in an Aboriginal specific victim services program and had come to believe that the services we provided were not meeting the needs of Aboriginal victims; however, I was unsure of why. It was essential for me to discover the participants subjective experiences, which was why I chose to use sharing circles as a means for collecting data. As well, since my goal was to remain true to their stories I chose to analyse the data at the sematic level, which I hoped would prevent me from colouring the findings with my own assumptions and biases.

Reactivity, described by Maxwell (2013) as the "influence of the researcher on the setting or individuals studied" (p. 124). Again, eliminating the actual influence of the researchers is impossible but what was important to me was to understanding how I may have influenced the situation. Klein and Meyers (1999, cited in Urquhart, 2013) stated that even in interpretive

research there are guidelines to follow to address the issues of researcher bias and reactivity. These guidelines include the need to reflect on the socially constructed nature of the findings as a consequence of the interaction between the researcher and the participants; being sensitive to the possible contradictions between theoretical preconceptions and what the actual findings are; being sensitive to the differences in participants' interpretations of the same events. Self-reflection was an on-going part of the data gathering and analysis.

CHAPTER 5: RACISM, HEALING & MOVING FORWARD

In chapter 5 I discuss the results of the research, focusing on themes generated from the data. I explore the issues of democratic, systemic and instructional racism and then go on discuss a variety of solutions to these problems.

Discussion

The goal of this study was to make explicit the experiences of Vancouver's Aboriginal community members when they accessed victim support services in order to (1) determine if the services that are available to them met their cultural needs and (2) if they did not, to explore with participants ways these services could be developed and delivered in order to make them culturally safe for them. The research uncovered several concerning themes:

- Aboriginal people continue to experience discrimination in their contacts with victim support service providers, particularly the police, which may stop them from using services that available to them

- There is a lack of understanding among service providers about colonization and the effect it has on Aboriginal people

- Aboriginal people continue to struggle with historical and current trauma, often unrecognized and misunderstood

- There is a lack of Aboriginal service providers

- For the most part, the services they receive are not culturally safe for them

Research participants also suggested ways that services could be improved:

- Services for them need to have a cultural focus

- There needs to be more Aboriginal service providers

Participants also stated that when service providers were non-judgemental professionals who understood the history of Aboriginal peoples and the effects that colonization has had on them they were more likely to receive culturally safe services.

Racism[6] in Canada

<u>Multiculturalism</u>

Multiculturalism as a policy was officially adopted by the Federal Government in 1971 (Kobayashi, 1983). The government of that time, led by liberal Prime Minister Pierre Trudeau, is credited as the initiator of multiculturalism as an ideology because of its public emphasis on the social importance of immigration (Wayland, 1997). Multiculturalism, and the liberal values that underpin it, has become increasingly central to the identities of Canadians (Singh, 2004). Multiculturalism is reflected in the law through the *Canadian Multiculturalism Act (1988)* and is protected under Section 27 of the *Canadian Charter of Rights and Freedoms (1982)* (Dewing, 2009). The term "multiculturalism" has been used prescriptively, as a political ideology and descriptively, as a sociological fact. In the second sense multiculturalism is a description of the many different religious, traditions and cultural influences that, in their unity and coexistence, make up Canadian culture (Dewing, 2009; Singh, 2004).

Culture, when framed in the context of multiculturalism, is seen as something to be celebrated, appreciated and preserved (Henry & Tator, 2000). Although multiculturalism has raised awareness of the importance of supporting diversity, it is based on a narrow understanding of culture and focuses attention on practices such as the customs, food preferences and the artistic works of cultural groups who are seen to be different from the dominant cultural norm (Browne & Varcoe, 2006). Critiques of multiculturalism and related policies have focused on

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[6] I use the terms racism and discrimination in this document. Racism, which is a type of discrimination, refers to the differential treatment of Aboriginal Canadians due to their race, discrimination is used more broadly and is inclusive of race, gender, socio-economic status etc.

how this narrow view of culture provides a veneer for liberal discourses without providing a way

of addressing the existing structural disadvantages and inequalities which persist (Bannerji,

2000; Henry & Tator, 2000). As well, according to Browne and Varcoe (2006) the framing of

culture in the context of multiculturalism is a feature of democratic racism.

<u>Democratic Racism</u>

Democratic racism refers to an ideology in which two sets of values coexist yet

fundamentally conflict - that is, members of the dominant society espouse outward commitments

to democratic principles of egalitarianism and equal opportunity and at the same time operate on

the basis of discriminatory attitudes (Henry & Tator, 2010). The concept of democratic racism

helps to explain how Canadians can hold negative views of Aboriginal people while at the same

time promoting liberal principles of equality, fairness and justice (Browne & Varcoe, 2006).

This does not imply that members of society are intentionally discriminatory or are even aware

of the biases they hold (Hoxie, 2008). As Henry & Tator (2000) explain, organizations and

institutions are:

> "filled with individuals who are deeply committed to their professional
>
> work, who are regarded as highly skilled practitioners, who believe
>
> themselves to be liberal human beings - and yet they unknowingly,
>
> unwittingly contribute to racial inequality" (p. 383).

Racist beliefs and practices, although widespread and persistent, are frequently invisible to

everyone but those who suffer from them (Hoxie, 2008). White Canadians tend to dismiss

evidence of their racial prejudice and their differential treatment of minorities (Henry and Tator,

2010).

Institutional and Systemic Racism

Over the last two decades there has been a growing field of inquiry analysing and documenting institutional forms of racism. This form of discrimination is manifested in the policies, practices, procedures, values and norms that operate within an organization or institution such as educational facilities, health authorities and police departments. For example, indicators of institutional racism in education refers to racially biased attitudes and practices of teachers and administrators, Eurocentric curriculum, unacknowledged harassment of minority students, streaming of minority students into non-academic programs and the assimilationist culture of the school (Dei, 1996, cited in Henry & Tator, 2000).

Systemic discrimination, although similar to institutional discrimination, refers more broadly to the laws, rules and norms woven into the social system that results in the unequal distribution of economic, political and social resources and rewards among various groups (Henry & Tator, 2000). For example, the *Act* regulated almost every aspect of life for Aboriginal peoples (Coates, 2008); defined who was and was not an "Indian"; (Hanson, 2009) and reinforced negative assumptions held about Aboriginal peoples by the dominant culture (Furi & Wherrett, 2003; Tobias, 1991). Kobayashi (1990) maintained that these systems of governance and the law itself has been used to create a "common sense justification of racial differences" (p. 40) and to reinforce common understandings, albeit racist ones, deeply entrenched within Canadian culture. The Supreme Court of Canada (1984) defined systemic discrimination in this way:

"practices or attitudes that have, whether by design or impact, the

effect of limiting an individual's or a group's right to the opportunities

generally available because of attributed rather than actual characteristics…

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It is not a question of whether this discrimination is motivated by an

intentional desire to obstruct someone's potential, or whether it is the

accidental by-product of innocently motivated practices or systems.

If the barrier is affecting certain groups in a disproportionately

negative way, it is a signal that the practices that lead to this adverse

impact may be discriminatory." (p. 1138-1139).

The term "racism" tends to be associated with overt bias, intentional prejudice and

negative stereotyping; however, systemic discrimination often operates in more subtle ways

reflecting broader patterns of social inequality. Direct, indirect and systemic discrimination all

result in detrimental effects that further reinforce disadvantage. Moreover, systemic

discrimination perpetuates the view that certain individuals or groups are less worthy of

recognition or value as a human being or as a member of Canadian society, or less deserving of

concern, respect, consideration or help (Oppal, 2012).

Many people resist anti-racism and equity initiatives because they are unwilling to

question their own beliefs and value systems, their organizational and professional norms and

their positions of power and privilege within the workplaces and society in general. Thus, they

are unable to explore the relational aspects of cultural and racial differences and the power

dynamics that are constructed around ideas about differences (Henry & Tator, 2000). As well,

Aboriginal people risk being portrayed as unreasonable and demanding if they advance the

notion of racism; Métis scholar LaRocque (1991) notes that merely talking about or attempting

to address discrimination towards Aboriginal people can bring about strong rebuke that one is

being prejudiced oneself.

<u>Over-Policing</u>

Patterns of policing and the attitudes and behaviours of police officers towards Aboriginal people are still marked by racialized beliefs and practices, resulting in differential treatment (Henry & Tator, 2010; Rudin, 2007).   Research participants in this study complained repeatedly that they are singled out for enforcement action and subjected to stereotyping by the VPD. According to the Aboriginal Justice Implementation Commissions (2001), many of the Aboriginal people who appeared before them complained about the same thing; of being stopped on the street or on a country road and questioned about their activities; of being charged with offences more often than their white counterparts; of being charged with a multiplicity of offences arising out of the same incident. Many such charges were never proceeded with and appeared to be harassment. The Commission was given an example of such stereotyping by a young Aboriginal woman:

> "She told them that her boyfriend had been stopped by police simply because
>
> he was running down a city street to meet her. The sight of an Aboriginal
>
> man running apparently provided the police officer with a cue for action. The
>
> police officer's attitude and reaction were stereotypical and discriminatory."

The Commission concluded that many Aboriginal people are arrested and held in custody when a white person in the same circumstances either might not be arrested at all, or if arrested, might not be held.

<u>Under-Policing</u>

Research participants shared stories of being under-police; waiting hours for help and not getting the help they needed when the police attended. Aboriginal people who appeared before the Commission also complained of under-policing, with some lamenting that they saw the

police only when they came to their community to make an arrest. The Commission concluded that this is not adequate and would not be tolerated among non-Aboriginal community members. Complaints of over- and under-policing are deep-rooted and stem from the police taking a narrow view of their role. This view emphasizes crime investigation to the exclusion of a broader approach, which might better address the underlying problems facing many Aboriginal people and involve the community in the policing process. Appropriate corrective measures must be based upon a fresh understanding of the nature of the police function itself (Aboriginal Justice Implementation Commissions, 2001).

Addressing the Issue of Racial Discrimination

If we ever want to provide culturally safe services to Aboriginal people, services they will want to use, the issue of wide-spread racial discrimination against them must be acknowledged and addressed. At the broader national level, the establishment of the Royal Commission on Aboriginal Peoples, which addressed outstanding Aboriginal grievances and concerns; the development of the Aboriginal Action Plan, which was designed to increase the quality of life of Aboriginal people and to promote self-sufficiency and the Residential School Apology and Settlement, which not only recognized the egregious harm done to Aboriginal children at these schools but also compensated adult survivors for this harm, are all important initiatives because, firstly, they make explicit the prolonged and relentless traumas and differential treatment experienced by generations of Canada's Aboriginal people and secondly, they are part of the process of deconstructing colonial myths of Aboriginal people as "savages" and the "white man's burden to civilize" (Coast, 2013).

Equally important is the Truth and Reconciliation Commission, established in 2008, with the objective to investigate residential schools and their legacy. Like other truth commissions,

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their mandate includes the creation of a historical record, not only from official government and

church records, but also from the narratives courageously shared with the Commission by

residential school survivors (Stanton, 2011):

> "To reveal to Canadians the complex truth about the history and ongoing
>
> legacy of the church-run residential schools, in a manner that fully documents
>
> the individual and collective harms perpetrated against Aboriginal peoples, and
>
> honours the resiliency and courage of former students, their families, and communities;
>
> and guide and inspire a process of truth and healing, leading toward reconciliation
>
> within Aboriginal families, and between Aboriginal peoples and non-Aboriginal
>
> communities, churches, governments, and Canadians generally. The process will work
>
> to renew relationships on a basis of inclusion, mutual understanding, and respect."
>
> Truth and Reconciliation Commission (2012)

A social constructionist view proposes that knowledge is a product of culture and history and is

constructed, in part, through narratives (Burr, 2003; Gergen, 2009). The historical record the

Commission will eventually produce may effectively challenge many Canadians to critically

reflect on and question their beliefs and views about Aboriginal people. According to Vygotsky

(1978) this presents opportunities for learning and change. Multiple perspectives and alternate

interpretations can lead to new dialogues and the possibility of a deeper understanding, social

action and healing.

However, while these undertakings are important and are indicative of a changing

governmental attitude towards and relationship with Aboriginal peoples, they are not in and of

themselves sufficient to address the issues of the systemic, institutionalized discrimination as

described by participants in this study. As Spence (2005) maintains, in order to provide

culturally safe services, one must have an understanding of the mechanisms by which oppression and discrimination are institutionalized. New Zealand nurses have led a movement toward culturally safe practice, but a need to implement the structures that support genuine and ongoing collaboration and power sharing at the institutional level remains (Brascoupé and Waters (2009).

Until recently much of the discussion on cultural safety focused on individual health care professionals (primarily nurses); however, key is the recognition that institutions must demonstrate cultural competency and cultural safety in order to achieve cultural change in the design and delivery of services - culturally safe behaviour and knowledge must be institutionalized. The effect of a single good service provider, who builds respect, equality and trust into the relationship, while important, is not enough if the underlying policies and structures are culturally unsafe (Brascoupé and Waters, 2009). The post-colonial analyses of discourses in Canadian health care similarly argue for action at the institutional level (Browne & Fiske, 2001; Browne & Smye, 2002).

Policy

The BC Ministry of Justice is responsible for policing and victim service programs province-wide. In their 2014 to 2017 *Service Plan* (Ministry of Justice, 2014) they do not reference directly how they plan on providing services to Aboriginal people; they do, however, state they are "firmly committed to building a legacy of safety and security for women and [will] continue to address the recommendations in *Forsaken: The Report of the Missing Women Commission of Inquiry"* (p. 4). The recommendations in the *Report* include, in part, that the Provincial Government provide funding for:

- A community consultation process led by Aboriginal organizations to develop and implement a pilot project designed to ensure the safety of vulnerable Aboriginal youth

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- Aboriginal women's organizations to create programs addressing violence on reserves, so that fewer women and youth are forced to escape to urban areas

- Aboriginal women's organizations to provide more safe houses and counselling programs run for and by Aboriginal women and youth (Oppal, 2012)

While it is commendable that the Ministry is considering supporting some Aboriginal programing, this is not sufficient to effectively tackle the issues uncovered in this research - much more must be done. Aboriginal people need to be able to safely access all services provided by government, including policing and victim services. This begins with policy. Fortunately, cultural safety can provide us with a framework for the development of policy that supports culturally safe services (Smye, Josewski & Kendall, 2010). This approach is promoted by the United Nations because it advances the goals of effective and efficient programming with strong community acceptance. It is an analytical and programming tool that helps policy makers to analyse, understand and utilize positive cultural values, assets and structures in their planning and programming processes (United Nations Population Fund, 2014).

Cultural safety is increasingly used as a practical tool for placing abstract post-colonial theorizing into everyday contexts (Ramsden, 2002). Using cultural safety as a framework for policy development ensures that international human rights standards which recognize everyone's equal rights, including the right to cultural integrity (Mikkelsen, 2008) are part of the policy development process. It also incorporates the values central to endogenous development, where external knowledge and resources are used to compliment local knowledge, skills, values, leadership and the way that people have organized themselves (Pisupati (2010). A cultural safety framework focuses on:

- Rectifying past errors and ensuring inclusiveness in the future

- Ensuring a working partnership with Aboriginal people, agencies and communities

- Helping to identify barriers and steps needed to avoid unintended negative consequences of government policy and

- Supporting policies that produce equality, equity, advantage or cultural safety (Carroll, Russell & Turpin, 2014).

Discrimination by Police

The legal framework for policing in Canada is complex and consists of written and unwritten constitutional principles, including the rule of law, federalism and the *Charter of Rights*, Aboriginal rights, statutory standards, common law administrative and private law duties, internal codes, rules and guidelines, as well as Canada's legal obligations under a variety of international human rights conventions (Oppal, 2012). The police have a three-fold duty to enforce the law, maintain law and order, and prevent crime (Police Act, 1996). In carrying out these duties, the police must provide an impartial service to all people without regard to race, national or ethnic origin, colour, religion, gender, age, sexual orientation, belief or social standing, all of which underpins human rights (Oppal, 2012). However, discriminatory behaviours towards them by the VPD were declared numerous times by participants in this research.

Interestingly, the Missing Women Commission of Inquiry (2012) found that even though Aboriginal people who testified before the Commission consistently reported being discriminated against by members of the VPD, police members who testified adamantly denied that bias or discrimination against Aboriginal people exists in the force (Oppal, 2012). As Henry and Tator (2010) and Hoxie (2008) explain, often people are unaware of the biases they hold; that racist beliefs and practices are frequently invisible to everyone but those who suffer from

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them, particularly if that discrimination is systemic. The Canadian Human Rights Commission (2003) concluded that:

> "Systemic discrimination…is the creation, perpetuation or reinforcement of persistent patterns of inequality among disadvantaged groups. It is usually the result of seemingly neutral legislation, policies, procedures, practices or organizational structures. Systemic discrimination tends to be more difficult to detect." (p. 15).

Cultural safety could provide the VPD with a framework to analyse current policies and practices and make changes as necessary that would support the development and delivery of culturally safe services to Aboriginal people (Smye, Josewski & Kendall, 2010). It may also help the VPD to recruit more Aboriginal police. According to the VPD (2013) the force is comprised of 389 civilian employees and 1,327 officers, of which only 1.5% identify as Aboriginal, which is not representative of the area's population in general.

Raising Awareness

Cultural safety is based on the idea that the education of service providers can remedy inequities by shifting the attention from the consumer of services to the power differentials inherent in the care system itself (Ramsden, 2002; Spence, 2005). To create and nurture such a learning environment requires that we support all students, Aboriginal and non-Aboriginal, from elementary school onward, to develop an understanding of Aboriginal history and culture (Smye et al., 2010) and the effects that colonization has had on Aboriginal peoples (Tamburro, 2013).

Research participants stated that their experiences with victim services were enhanced and culturally safe for them when the service provider had an understanding of Aboriginal history and the effects of colonization, was non-judgmental and caring. Introducing a cultural

safety approach early on will ensure students know how to provide the most effective care to Aboriginal populations when they enter the workforce (NAHO, 2008). As well, it is essential we advance the notion that cultural safety be part of all curricula, not just in the discipline of health care, for example in the fields of social work, education, counselling and community development.

Fortunately, Canada has taken critical steps in promoting cultural safety, at least in health care (Smye et al., 2010). In 2008 NAHO released their cultural safety guide for health care practioners, administrators and educators. They maintain that changes must occur through three main areas:

1. Governments: federal, provincial and territorial

2. Educational institutions, accreditation and regulatory bodies

3. Stakeholders, such as the Assembly of First Nations; Congress of Aboriginal Peoples; Native Women's Association of Canada; Métis National Council; NAHO; Indigenous Physicians Association of Canada; Aboriginal Nurses Association of Canada

They state that if these three areas worked together, sharing guidance and wisdom through changes in policy and planning, a new health system would emerge which would, arguably, help improve the health status of Aboriginal Peoples (NAHO, 2008).

The discrimination that participants described in their interactions with the police and other support providers is one of the reasons they are reluctant to access services that are available to them. Ball (2007) has identified this reluctance as one of the characteristics of unsafe cultural practices. Employees who provide services to Aboriginal people need to learn to provide culturally safe care. Learning these skills can benefit them, the organizations they work

for, the individuals they provide services to and the community in general. It can lead to increased confidence on the job by having the ability to address the needs of various groups in society. The resulting increase in job satisfaction may help to increase retention rates in rural and remote communities (NAHO, 2008).

The responsibility for supporting culturally safe care is shared between individual employees, professional associations, regulatory bodies and services delivery organizations (NAHO, 2008).   There are several principles that engender cultural safety. These include being culturally aware, having knowledge about other cultures one is providing services to; being culturally sensitive and mindful of one's own cultural identity; collaborating with those seeking help, engaging in mutual learning and ensuring there is a good probability that patient's goals are realized (Ball, 2007).

Providing culturally safe services is an ongoing process that requires motivation and willingness at both the individual and organizational levels. At the individual level, it is not about being 'tolerant" of other cultures, rather it is the ability to identify and challenge one's own cultural assumptions, values and beliefs – it is about developing empathy and the ability to view the world through a different cultural viewpoint (Fitzgerald, 2000; Sue, 2006). At an organizational level, it is reflected in attitudes, policies, practices and training opportunities for employees that help create an organization that works effectively and respectfully with Aboriginal people (Cross et al., 1989).

Supporting Aboriginal Learners

Research participants identified the lack of Aboriginal service providers as a major concern. According to the NAHO (2008), the need for culturally safe care for Aboriginal people is matched by the need for culturally safe learning to improve educational outcomes for

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Aboriginal students. Academic approaches and curricula content of Canada's educational institutions have been dominated by a Western ideology, placing Aboriginal students and teachers and, by extension, Aboriginal people who will seek their services, at cultural risk (Smye et al., 2010). The Canadian Association of Schools of Nursing and the Aboriginal Nurses Association of Canada both recognized the need to increase the presence of Aboriginal nurses within the profession. They have actively engaged with several schools of nursing in efforts to increase the number of Aboriginal nursing students, particularly in undergraduate programs. These schools are demonstrating success in the recruitment of Aboriginal people (Aboriginal Nursing Association of Canada, 2009).

Over the past few years educational outcomes for BC's Aboriginal students has improved significantly. In 1995 the Ministry for Advanced Education (AVED) developed the Aboriginal *Post-Secondary Education and Training Policy Framework*, to increase participation, retention and success in post-secondary training for Aboriginal people by employing three strategies which include:

1. Strengthening public post-secondary institutions in meeting the needs of Aboriginal people

2. Stabilising partnership agreements between public and Aboriginal-controlled institutes

3. Providing for designation of Aboriginal-controlled institutes as public post-secondary institutions (AVED, 2012)

BC's twenty-five public post-secondary institutions have increased programs and services for Aboriginal students throughout the province and have attempted to respond to and accommodate the needs of Aboriginal people and their communities. Currently, there are approximately forty

Aboriginal-controlled institutions throughout BC which deliver adult education and post-secondary programs and services, primarily on reserves (AVED, 2012).

According to Statistics Canada (2008) the number of Aboriginal people who hold university degrees has grown consistently from 1981 to 2006. Information about Aboriginal
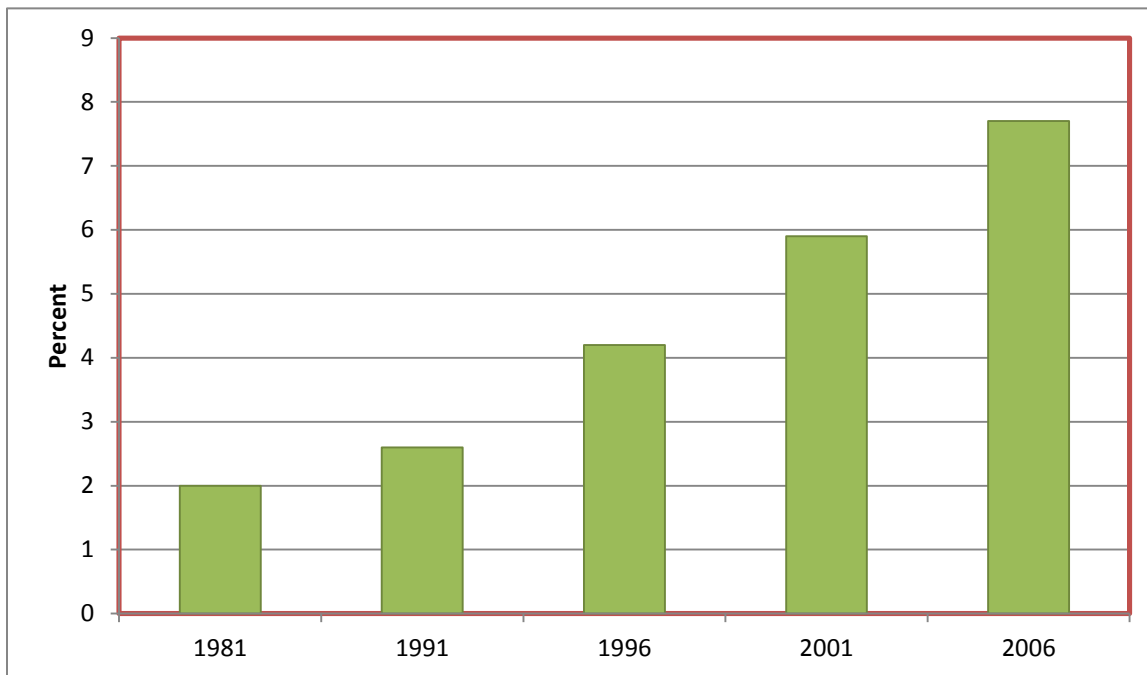

Figure 4. Aboriginal Population between 25 and 65 with a University Degree

Canadians enrolled on university campuses comes from a variety of sources, as there is no single group which gathers comprehensive information about Aboriginal students. The Canadian University Survey Consortium (2011) estimates that there are between 20,000 and 25,000 Aboriginal students in Canadian universities today, which is up from the early 1970's when the number of Aboriginal students was just over 300. This number has been growing at the same rate as overall student numbers over much of the last decade.

Understanding and Recognizing Trauma

Historical and current trauma and its effects were talked about by participants in this study. According to the Manitoba Justice Institute, residential schools laid the foundation for the epidemic we see today of violence against Aboriginal people. Generations of children have grown up without a nurturing family life; consequently, many of them lack adequate parenting skills and, having only experienced abuse, in turn abuse their children and other family members. The high incidence of intimate partner violence among Aboriginal families can work to perpetuate the cycle of abuse and dysfunction over generations (Aboriginal Justice Implementation Commission, 1999). Unfortunately, most Canadians are only aware of the most egregious examples of institutional child abuse from the residential school system, but do not understand the long-term effects of this abuse (Law Commission of Canada, 2000).

Moving from the history of colonization and the residential school system to understanding the long-term consequences found in many Aboriginal communities necessitates we understand how trauma flows through families and communities. Gajdos (2002) describes the flow of trauma as both vertical and horizontal: vertical anxiety flows down the generations while horizontal anxiety develops in response to present stressors. Aboriginal peoples suffer from these effects and also from discrimination encountered on a daily basis, sometimes referred to as race-based traumatic stress (Bryant-Davis, 2007). According to Herman (1992) these experiences have resulted in the loss of a sense of self and an inability to trust.

Victim support professionals frequently work with clients who struggle daily with trauma; trauma that often goes unrecognized and unacknowledged (Crossley, 2000). Practitioners who plan on working with Aboriginal clients need to be acutely aware of this and be able to understand the connection between the residential school experience and other

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colonization practices, with high levels of addiction and other health disorders, family and community disintegration and high mortality and suicide rates among this population (Corrado & Cohen, 2003).

Healing

"For many years now, Aboriginal people have been on a healing journey" (Erasmus, 2009, p xi); we have witnessed a revival of Aboriginal strength and determination (Mussell & Martin, 2006). There are several factors contributing to this renaissance, one of them is the declining pressure of active colonization (Wesley-Esquimaux & Smolewski, 2004). Aboriginal people have spoken openly about their experiences, creating their own narratives about them, which have helped them to start to heal (Mussell, Cardiff, & White, 2004). They have been able to create enough cultural space to analyze and integrate their losses on their own terms. They have worked to develop new relationships with the dominant culture, and to create renewed links between themselves. This has the effect of bringing Aboriginal people together to work on issues that have long been dormant and hidden, even from their own view (Wesley-Esquimaux & Smolewski, 2004).

Since the early 1980's, an ever-increasing number of Aboriginal communities have been exploring the challenges of healing. The earliest initiatives focused on addressing the problem of alcohol and drug abuse. But as communities began to have some success with these efforts, it became clear that alcohol and drug abuse were symptoms of other problems that had remained hidden beneath the surface of community life. Subsequently, new programs were developed to address problems such as: sexual abuse; domestic violence; depression; suicide, anger and rage and eventually issues related to the residential school experience (Lane, Bopp, Bopp & Norris, 2002).

With these many and varied programs, there also emerged a wide variety of approaches. Strategies to promote healing range from residential treatment programs (based on a variety of treatment models), one-to-one counselling programs, personal growth workshops, retreats and traditional practices such as sweat lodges, healing ceremonies, smudging and the application of traditional teachings (Lane et al., 2002). Incorporating traditional Aboriginal healing methods may encourage increased access to treatment by Aboriginal peoples (Browne & Varcoe, 2006; Mussell & Martin, 2006). It is believed that Aboriginal clients that access treatment options consistent with cultural beliefs will experience improved care and outcomes (National Aboriginal Women's Summit, 2007). As well, Elders, because of the traditional knowledge they impart, are an important part of Aboriginal healing. Reserve communities typically have a band council and engage specified elders to act as advisers. In an urban setting the Aboriginal community does not have a band council; however, there are recognized elders that can provide support and teachings to community members (Lavallée, 2009).

Moving Forward

The literature relating to Aboriginal healing is just beginning to emerge as a recognizable body of work and it is anticipated that this trend will continue. From that work a systematically draw together model can be developed (Hunter, Logan, Barton, & Goulet, 2004). When that model has been developed it needs to be communicated to all health care professionals, Aboriginal and non-Aboriginal, in order to ensure that culturally safe services will be available to our Aboriginal population. In this way, we can support Aboriginal peoples and communities to fully experience "healing" (Lane et al., 2002).

As a society, we can question our responsibility for the misguided policies of the past, but that is not sufficient. We have a moral and shared obligation to restore opportunities to

Aboriginal people that have been taken from them. Providing culturally safe victim support

services may not suffice in undoing the numerous social ills that trouble so many Aboriginal

people, but it is an important step to helping restore their well-being. Policy makers and program

developers, whether they are Aboriginal or not, need to learn what is relevant to the Aboriginal

people they plan on providing services to. In order to accomplish this goal, Aboriginal people

must be consulted. Traditionally, at least in victim services, policy and program decisions are

made with little or no input from the Aboriginal community (personal experience). This needs to

change, it is only through their guidance that culturally safe victim service programs can be

developed and implemented.

The goal of this study was to explore the experiences of Vancouver's Aboriginal

community in relation to victim support services; however, it has broader implications for the

vast and diverse group of development workers, consultants, researchers, policy analysts and

program developers from public and private organizations involved in developmental activities

with culturally diverse communities, particularly those who have experienced colonization.

Understanding the theoretical underpinnings of cultural competency and developing the skills to

provide culturally safe services represent best practices and, as Clear (2008) points out if we

have these skills we can support the well-being of others.

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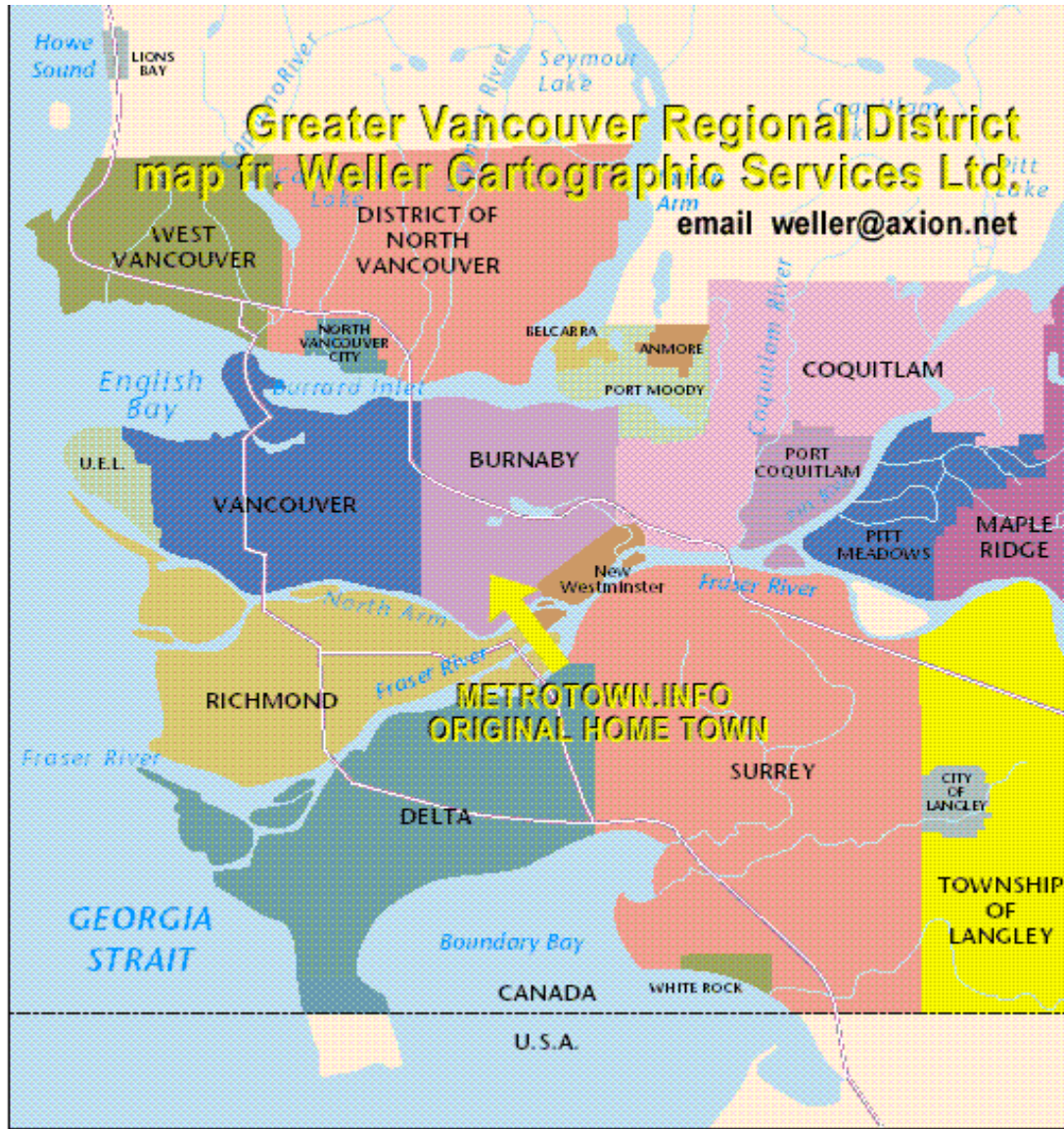
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APPENDIX A: METRO VANCOUVER

Weller Cartographic Services Ltd (2002).

DEPARTMENT OF INDIAN AFFAIRS

CIRCULAR.   OTTAWA, 15th December, 1921.

Sir,-

It is observed with alarm that the holding of dances by the Indians on their reserves is on the increase, and that these practices tend to disorganize the efforts which the Department is putting forth to make them self-supporting.

I have, therefore, to direct you to use your utmost endeavours to dissuade the Indians from excessive indulgence in the practice of dancing. You should suppress any dances which cause waste of time, interfere with the occupations of the Indians, unsettle them for serious work, injure their health or encourage them in sloth and idleness. You should also dissuade, and, if possible, prevent them from leaving their reserves for the purpose of attending fairs, exhibitions, etc., when their absence would result in their own farming and other interests being neglected. It is realized that reasonable amusement and recreation should be enjoyed by Indians, but they should not be allowed to dissipate their energies and abandon themselves to demoralizing amusements. By the use of tact and firmness you can obtain control and keep it, and this obstacle to continued progress will then disappear.

The rooms, halls or other places in which Indians congregate should be under constant inspection. They should be scrubbed, fumigated, cleansed or disinfected to prevent the dissemination of disease. The Indians should be instructed in regard to the matter of proper ventilation and the avoidance of over-crowding rooms where public assemblies are being held, and proper arrangement should be made for the shelter of their horses and ponies. The Agent will avail himself of the services of the medical attendant of his agency in this connection.

Except where further information is desired, there will be no necessity to acknowledge the receipt of this circular.

Yours very truly,

Duncan C. Scott

Deputy Superintendent General.

Thos. Graham, Esq.,
Indian Agent.

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APPENDIX C: LETTER OF RECONCILIATION

As Aboriginal and non-Aboriginal Canadians seek to move forward together in a process of renewal, it is essential that we deal with the legacies of the past affecting the Aboriginal peoples of Canada, including the First Nations, Inuit and Métis. Our purpose is not to rewrite history but, rather, to learn from our past and to find ways to deal with the negative impacts that certain historical decisions continue to have in our society today.

The ancestors of First Nations, Inuit and Métis peoples lived on this continent long before explorers from other continents first came to North America. For thousands of years before this country was founded, they enjoyed their own forms of government. Diverse, vibrant Aboriginal nations had ways of life rooted in fundamental values concerning their relationships to the Creator, the environment and each other, in the role of Elders as the living memory of their ancestors, and in their responsibilities as custodians of the lands, waters and resources of their homelands.

The assistance and spiritual values of the Aboriginal peoples who welcomed the newcomers to this continent too often have been forgotten. The contributions made by all Aboriginal peoples to Canada's development, and the contributions that they continue to make to our society today, have not been properly acknowledged. The Government of Canada today, on behalf of all Canadians, acknowledges those contributions.

Sadly, our history with respect to the treatment of Aboriginal people is not something in which we can take pride. Attitudes of racial and cultural superiority led to a suppression of Aboriginal culture and values. As a country, we are burdened by past actions that resulted in weakening the identity of Aboriginal peoples, suppressing their languages and cultures, and outlawing spiritual practices. We must recognize the impact of these actions on the once self-sustaining nations that were disaggregated, disrupted, limited or even destroyed by the dispossession of traditional territory, by the relocation of Aboriginal people, and by some provisions of the Indian Act. We must acknowledge that the result of these actions was the erosion of the political, economic and social systems of Aboriginal people and nations.

Against the backdrop of these historical legacies, it is a remarkable tribute to the strength and endurance of Aboriginal people that they have maintained their historic diversity and identity. The Government of Canada today formally expresses to all Aboriginal people in Canada our profound regret for past actions of the Federal Government which have contributed to these difficult pages in the history of our relationship together.

One aspect of our relationship with Aboriginal people over this period that requires particular attention is the Residential School system. This system separated many children from their families and communities and prevented them from speaking their own languages and from learning about their heritage and cultures. In the worst cases, it left legacies of personal pain and distress that continue to reverberate in Aboriginal communities to this day. Tragically, some children were the victims of physical and sexual abuse.

The Government of Canada acknowledges the role it played in the development and administration of these schools. Particularly to those individuals who experienced the tragedy of sexual and physical abuse at residential schools, and who have carried this burden believing that in some way they must be responsible, we wish to emphasize that what you experienced was not your fault and should never have happened. To those of you who suffered this tragedy at residential schools, we are deeply sorry.

In dealing with the legacies of the Residential School system, the Government of Canada proposes to work with First Nations, Inuit and Métis people, the Churches and other interested parties to resolve the longstanding issues that must be addressed. We need to work together on a healing strategy to assist individuals and communities in dealing with the consequences of this sad era of our history.

No attempt at reconciliation with Aboriginal people can be complete without reference to the sad events culminating in the death of Métis leader Louis Riel. These events cannot be undone; however, we can and will continue to look for ways of affirming the contributions of Métis people in Canada and of reflecting Louis Riel's proper place in Canada's history.

Reconciliation is an ongoing process. In renewing our partnership, we must ensure that the mistakes which marked our past relationship are not repeated. The Government of Canada recognizes that policies that sought to assimilate Aboriginal people, women and men, were not the way to build a strong country. We must instead continue to find ways in which Aboriginal people can participate fully in the economic, political, cultural and social life of Canada in a manner which preserves and enhances the collective identities of Aboriginal communities, and allows them to evolve and flourish in the future. Working together to achieve our shared goals will benefit all Canadians, Aboriginal and non-Aboriginal alike.

APPENDIX D: STATEMENT OF APOLOGY

The treatment of children in Indian Residential Schools is a sad chapter in our history.

For more than a century, Indian Residential Schools separated over 150,000 Aboriginal children from their families and communities. In the 1870's, the federal government, partly in order to meet its obligation to educate Aboriginal children, began to play a role in the development and administration of these schools. Two primary objectives of the Residential Schools system were to remove and isolate children from the influence of their homes, families, traditions and cultures, and to assimilate them into the dominant culture. These objectives were based on the assumption Aboriginal cultures and spiritual beliefs were inferior and unequal. Indeed, some sought, as it was infamously said, "to kill the Indian in the child". Today, we recognize that this policy of assimilation was wrong, has caused great harm, and has no place in our country.

One hundred and thirty-two federally-supported schools were located in every province and territory, except Newfoundland, New Brunswick and Prince Edward Island. Most schools were operated as "joint ventures" with Anglican, Catholic, Presbyterian or United Churches. The Government of Canada built an educational system in which very young children were often forcibly removed from their homes, often taken far from their communities. Many were inadequately fed, clothed and housed. All were deprived of the care and nurturing of their parents, grandparents and communities. First Nations, Inuit and Métis languages and cultural practices were prohibited in these schools. Tragically, some of these children died while attending residential schools and others never returned home.

The government now recognizes that the consequences of the Indian Residential Schools policy were profoundly negative and that this policy has had a lasting and damaging impact on Aboriginal culture, heritage and language. While some former students have spoken positively about their experiences at residential schools, these stories are far overshadowed by tragic accounts of the emotional, physical and sexual abuse and neglect of helpless children, and their separation from powerless families and communities.

The legacy of Indian Residential Schools has contributed to social problems that continue to exist in many communities today.

It has taken extraordinary courage for the thousands of survivors that have come forward to speak publicly about the abuse they suffered. It is a testament to their resilience as individuals and to the strength of their cultures. Regrettably, many former students are not with us today and died never having received a full apology from the Government of Canada.

The government recognizes that the absence of an apology has been an impediment to healing and reconciliation. Therefore, on behalf of the Government of Canada and all Canadians, I stand before you, in this Chamber so central to our life as a country, to apologize to Aboriginal peoples for Canada's role in the Indian Residential Schools system.

To the approximately 80,000 living former students, and all family members and communities, the Government of Canada now recognizes that it was wrong to forcibly remove children from

their homes and we apologize for having done this. We now recognize that it was wrong to separate children from rich and vibrant cultures and traditions that it created a void in many lives and communities, and we apologize for having done this. We now recognize that, in separating children from their families, we undermined the ability of many to adequately parent their own children and sowed the seeds for generations to follow, and we apologize for having done this. We now recognize that, far too often, these institutions gave rise to abuse or neglect and were inadequately controlled, and we apologize for failing to protect you. Not only did you suffer these abuses as children, but as you became parents, you were powerless to protect your own children from suffering the same experience, and for this we are sorry.

The burden of this experience has been on your shoulders for far too long. The burden is properly ours as a Government, and as a country. There is no place in Canada for the attitudes that inspired the Indian Residential Schools system to ever prevail again. You have been working on recovering from this experience for a long time and in a very real sense, we are now joining you on this journey. The Government of Canada sincerely apologizes and asks the forgiveness of the Aboriginal peoples of this country for failing them so profoundly.

Nous le regrettons
We are sorry
Nimitataynan
Niminchinowesamin
Mamiattugut

In moving towards healing, reconciliation and resolution of the sad legacy of Indian Residential Schools, implementation of the Indian Residential Schools Settlement Agreement began on September 19, 2007. Years of work by survivors, communities, and Aboriginal organizations culminated in an agreement that gives us a new beginning and an opportunity to move forward together in partnership.

A cornerstone of the Settlement Agreement is the Indian Residential Schools Truth and Reconciliation Commission. This Commission presents a unique opportunity to educate all Canadians on the Indian Residential Schools system. It will be a positive step in forging a new relationship between Aboriginal peoples and other Canadians, a relationship based on the knowledge of our shared history, a respect for each other and a desire to move forward together with a renewed understanding that strong families, strong communities and vibrant cultures and traditions will contribute to a stronger Canada for all of us.

On behalf of the Government of Canada
The Right Honourable Stephen Harper,

Prime Minister of Canada

APPENDIX E: IRB CERTIFICATION

NDSU NORTH DAKOTA
STATE UNIVERSITY

April 1, 2014   FederalWide Assurance FWA00002439

Dr. Gary Goreham
Sociology & Anthropology

Re: IRB Certification of Exempt Human Subjects Research:
            Protocol **#HS14232** , **"Violence Toward Aboriginal People: Consulting with community
            members to develop culturally safe vicim services"**

Co-investigator(s) and research team: **Marie Haldane**

Certification Date: 4/1/14   Expiration Date: 3/31/17
Study site(s): **Carnegie Centre, Vancouver**
Funding: **n/a**

The above referenced human subjects research project has been certified as exempt (category # 2) in
accordance with federal regulations (Code of Federal Regulations, Title 45, Part 46, *Protection of Human
Subjects*). This determination is based on revised protocol materials and consent form (received 3/28/14).

Please also note the following:
- If you wish to continue the research after the expiration, submit a request for recertification
  several weeks prior to the expiration.
- Conduct the study as described in the approved protocol. If you wish to make changes, obtain
  approval from the IRB prior to initiating, unless the changes are necessary to eliminate an
  immediate hazard to subjects.
- Notify the IRB promptly of any adverse events, complaints, or unanticipated problems involving
  risks to subjects or others related to this project.
- Report any significant new findings that may affect the risks and benefits to the participants and
  the IRB.
- Research records may be subject to a random or directed audit at any time to verify compliance
  with IRB standard operating procedures.

Thank you for your cooperation with NDSU IRB procedures. Best wishes for a successful study.
Sincerely,

Kristy Shirley

Kristy Shirley, CIP, Research Compliance Administrator

APPENDIX F: METRO VANCOUVER MUNICIPALITIES

Blockwalk Information Services (2010).

APPENDIX G: LETTER OF CONSENT

You are being invited to participate in a study titled *Violence towards Aboriginal People: Consulting with community to develop culturally safe victim services* that is being conducted by Marie Haldane. Marie is pursuing a master's degree in community development at North Dakota State University. As a graduate student, Marie is required to conduct research as part of her program. She can be reached by telephone at 604-732-4886 or by email at haldanemarie@gmail.com if you have any questions.

The research is being supervised by Dr. Gary Goreham. You may contact Dr. Goreham by telephone at 701-231-7637 or by email at gary.goreham@ndsu.edu if you have any questions about this research.

The purpose of this research project is to understand the experiences Aboriginal people have had with victim support services. Research of this type is important in identifying if victim services needs to change to meet the needs of Aboriginal people. Participants must be nineteen years of age or older.

You are being asked to participate in this study because you identify as an Aboriginal person, you have experienced violence or crime (any time in your life) and you have used victim support services. If you agree to participate you will be asked to be part of a Sharing Circle. This Circle will take about one hour and consist of discussion regarding your experiences with victim services.

Your participation in this research is completely voluntary. You may withdraw at any time without any consequences or any explanation.

In terms of protecting your privacy, no identifying information will be attached to results of the research. All data will be encrypted until it is destroyed. Signed consent forms will be secured in a locked cabinet. The Circles will be audio taped. All tapes will be secured in a locked cabinet. All consent forms and audio tapes will be destroyed within one year of completion of the research. All data from this study will be disposed of (shredded or deleted) in one year.

All those involved in the Circle must agree that the identities of participants in the Circle and their personal stories are confidential and do not leave the Circle.

The results of this study may be shared with others in the following ways: findings will be shared with the Ministry of Justice; at the thesis defense; in the published thesis; at scholarly presentations and in published articles.

Light refreshments and an honorarium of $10.00 will be provided to all participants.

If you have any questions about your rights as a subject of this research, or if you wish to file a complaint regarding this research you may contact North Dakota State University Human Research Protection Office by telephone at 701-231-8908, toll-free at 1-855-800-6717 or by email at ndsu.irb@ndsu.edu.

Your signature below indicates that you are freely making a decision whether to be in this research study. Signing this form means that:
1. You have read and understood this consent form
2. You have had your questions answered, and
3. You have decided to be in the study

_____ _____
Name of Participant   *Signature*   *Date*

A copy of this consent will be left with you, and a copy will be taken by the researcher.
Thank you for your participation

APPENDIX H: SHARING CIRCLE QUESTIONS

When accessing victim support services:

- Is it necessary to be able to participate in traditional healing practices?

- Is it important to have the support of an elder?

- It is necessary that victim support services be provided by an agency which has an Aboriginal focus?

- Is it important that the victim support worker be Aboriginal?

When you used the services:

- What were your experiences with the services you received?

- How could these services better support Aboriginal people?

- What changes, if any, would you want to see in the services that are provided to Aboriginal people?