Aboriginal Social Service Workers' Perspectives on Theory and Practice

by

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Abstract

The National Capital is undergoing significant demographic changes many of which will shape the way structural social work will be practiced. As urban migration of Aboriginal peoples continues at a steady rate, social workers will face more challenges. Ottawa has one of the fastest rising urban Aboriginal populations in the country and the largest number of Inuit people living outside of the North. There is a growing concern amongst Aboriginal service providers that mainstream social work practices will not be enough to work with Indigenous groups in a successful way. This thesis documents the tensions between structural social work practice and anti-colonial approaches which arise for social workers while providing services to the urban Aboriginal population in Ottawa. This thesis also discusses the ways in which Aboriginal service providers use indigenous knowledge to work in an anti-colonial way. This thesis concludes that social work practice by Aboriginal workers is moving and should continue to move toward an anti-colonial framework, which means that workers must position colonialism as problematic not only for the client but also for themselves.

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CHAPTER ONE: Introduction

I am a descendant of the Black Indians from the five civilized tribes of the Native American territories through my great-grandfather, John Collins, who came from Cherokee territory. I am a Black Scotian Mi'kmaq through my great-grandmother, Rebecca Byard (Paris), from the Mi'kmaq territory of Nova Scotia. I have held a career academically and professionally in social work for the past six years and have felt a tension between my own cultural way of knowing things and what is presented to me through social work theories and perspectives. For this reason I began to question and wonder what are the other ways of helping and how do I, as a racialized worker, inform my own practice in a way that will effect change?

During my undergraduate degree in social work I was taught structural social work practice and many theories that worked with it in combination such as: anti-oppressive, cultural competency and anti-racist approaches. As structural social workers we were taught to commit to the pursuit of social welfare, social change and social justice. It is fair to say that for the most part except for two enlightened professors, that the only history of helping in terms of the evolution of social work as a practice or profession that was presented to us, was that it evolved out of Eurocentric theories, beliefs and values. There was one class on Aboriginal "perspectives". It did not get any better in graduate school. In fact I learned more about helping through using mindfulness

and western psychology than I anticipated. I worked mainly in Aboriginal settings through my undergraduate and graduate career and wish to acknowledge the many traditional teachers, resisters and Elders who brought me to a place to critically look at my own practice as an Indigenous worker still affected by colonialism.

The word Aboriginal in this thesis is used to refer to the Indigenous inhabitants of Canada; First Nations, Inuit and Métis people as defined in the 1982 Constitution Act. The term First Nations refers to those people “defined under the Indian Act as status Indian” and who were the first inhabitants of this geographic space now called Canada (McKenzie & Morrisette, 2003, p.14). The Inuit according to McKenzie and Morrisette (2003) are: “distinct Aboriginal peoples whose geographic origin were primarily in the northern territories of Canada” and, “ Métis refers to distinct Aboriginal peoples whose early ancestors were of mixed heritage, (First Nations and European)” (p.14). Scholars use the term *Indigenous*, to recognize the place of Aboriginal peoples in Canada's late-colonial era. They also use it to acknowledge the length of time that Aboriginal peoples have spent in North America since the term means “native to the area” (National Aboriginal Health Organization, 2006). This thesis will use the terms Aboriginal and Indigenous interchangeably to acknowledge their connection to the land geographically, politically, spiritually and socially. This thesis will defer to the linguistic Canadian Studies standard and capitalize the terms Aboriginal and Indigenous

throughout each section.

The history of colonization of Aboriginal peoples in Canada not only exacerbates their underdevelopment, but continues to characterize the current relationship between them and the Canadian government (McKenzie and Morrisette, 2003, p.15). Directly related to this assertion is the knowledge that the federal government has, over the years, routinely admitted the disparities of health and social equality between Canada's Aboriginal and non-Aboriginal populations yet offers no real solutions. In 2003, then Chief of the Assembly of First Nations, Matthew Coon Come, discussed these disparities and concluded that, "...this government is more preoccupied on spending millions of dollars to impose unwanted colonial legislation on First Nations rather than investing in measures that will improve our quality [of life]" (cited in Adelson, 2005, p.45).

An approach that can be used by Aboriginal social workers in working with Aboriginal peoples is one derived from anti-colonial thought. The anti-colonial approach to practice acknowledges the health and economic disparities that result from federal policies and programs but also identifies colonial legislation as the direct root of social and economic inequality in the Aboriginal community. The anti-colonial approach is derived from anti-colonial thought which arises from an understanding of the inherent colonial relationship reflected in previous historical actions, such as compulsory attendance at residential schools.

With this understanding it is then possible to resist or overcome the negative impacts of such a history (Dei, 2006). When individuals or groups understand that they are oppressed historically, they are then proactively able to resist the various colonial powers as an act of anti-colonialism. Anti-colonialism represents the dynamic perspective or acts of oppressed or colonized persons who actively reject and resist the ideas, beliefs and current personal state to which they have been subjected by the colonial power. Anti-colonialism further affirms the negative impact that the colonial system has had on colonized peoples by acknowledging past history and, when possible, results in their empowerment by their “withdrawing physically from a situation”, or “...remaining to fight and change them [the colonizers]” (Memmi, 1965, p. 19).

Acts of radical resistance, of rejecting the foreign dominant culture and of re-centering the Indigenous people’s worldview, have been a part of the national liberation struggle throughout many nations (Dei & Asgharzadeh, 2001). Dei and Asgharzadeh (2001) explain the anti-colonial approach as a starting point for questioning and challenging institutionalized power, privilege and the dominant Eurocentric view.

The purpose of this thesis is to explore whether or not there are tensions between methods used in the practice of structural social work and the anti-colonial approach. In this thesis it is argued that social work practice by Aboriginal workers is moving and should continue to move toward an anti-colonial framework, which means that workers

must position colonialism as problematic not only for the client but also for the worker. After interviewing eight Aboriginal service providers in the Ottawa area from many different cultures, there is evidence that although some workers have used anti-colonial approaches, tensions remain between the system and the worker, the methods and the theory of structural social work. The majority of the workers believe there is a major struggle occurring between the agencies they work for and the system in which the agency exists. As Aboriginal workers they can either legitimize the system and thus perpetuate acts of colonialism, or they can resist. Part of the way resisting is done in the Aboriginal community is by relying on their own Indigenous ways of knowing or helping. Dei, Hall & Rosenberg (2000) in Shahjahan (2005) argue that by using Indigenous knowledge the colonized individual or group can confront and defy the colonial and post colonial invasions. Indigenous knowledge presented itself anti-colonially through different ideas and approaches around connections, boundaries, shared experiences, processes and experiences of racism or lateral violence.

In this thesis the word “community member” will be used often in place of client or patient. The term community member is commonly used in Aboriginal organizations. In most mainstream social work areas of study “client or patient” still denotes power over; in Aboriginal social work the term “community member” is used to help eliminate the results of colonization and “power over” by acknowledging the relationship and

connection between the worker and client.

I. Statement of the problem

According to the 2006 Canada Census report there is a steady migration of Aboriginal peoples moving into Canada's larger urban areas (Statistics Canada, 2008). It is likely then that urban Aboriginal people will need various social services. While this new urban reality is increasingly the experience of Aboriginal populations, current policies and programs – whether they be federal or provincial – that service urban Aboriginal community members remain tied to Canada's colonial history as evidenced through most social work perspectives. This link between community members, the colonial history and social work is due to the fact that social work perspectives historically have been derived from western worldviews of social problems and issues. It stands to reason that mainstream social work practices currently employed by Aboriginal social workers could be ambiguous in tackling the problems of the urban Aboriginal population, and worse, could be problematic if they are in fact linked to colonialism.

It follows that social work interventions that support these perspectives are reflective of these dominant colonial and subsequent non-Indigenous perspectives and fail to consider the Aboriginal experience. The problem, as articulated by many social work scholars, is that social policies and social work practice methods traditionally have

drawn upon dominant worldviews and do not consider the Aboriginal experience (Allan 2006, Battiste 1998, Baskin 2003, Pon 2009). These policies and practices are also rooted in a dominant, Eurocentric worldview that excludes or “otherizes” Aboriginal values (Dean 2001, Pon 2009). Aboriginal scholars argue that anti-colonial approaches are becoming more important in Canadian social work practice (McKenzie & Morrissette 2003, Waterfall 2003).

The anti-colonial approach can be aligned with structural social work theory because it provides workers with a critical analysis of the dominant worldview which, as Hick and Murray (2008) point out, works towards, “alleviating the negative effects of an exploitative and alienating social order on individuals...” (p.86). Hick and Murray (2008) also argue that structural social work falls into a broader category that supports radical, transformative processes (p.87). However, if structural social work was also created under a dominant worldview and therefore ignores the Aboriginal one, is there a tension between anti-colonial approaches and structural practice?

Before tackling these questions and problems and discussing whether or not transformative change through structural social work and an anti-colonial approach are an answer, it is important to consider the different practice approaches that have been presented to structural social work students. The literature review that will follow will take a look at the different approaches that have been presented in social work

programs and practice.

II. My interest in this subject

Before moving on I want to revisit elements of the introduction where I introduce myself in more depth. As a structural social worker my interest in this subject grows out of my concern that as Canada's urban Aboriginal population increases - specifically in Ottawa - increasing numbers of that population will need and require access to social services. Through my experience working with the urban Aboriginal population these services may or may not be sufficient enough to serve this community. This prognosis is supported by and is based on the data I have already discussed from the 2006 Canada Census.

In addition to the census statistics, the Ministry of Children and Family Development of British Columbia found that not only is the urban Aboriginal population increasing, but that these young, emerging communities face a number of challenges including an overrepresentation in the child welfare system with less than ideal, culturally appropriate services (Ministry of Children and Family Development, 2008). Thus, it follows that as the urban Aboriginal population increases so does its need to access required social services. This is because as Aboriginal people leave their rural home communities they are often met with challenges in the urban setting. Their social cohesion suffers as a result of many factors including poverty, lack of

familial support, loss of culture and loss of connection to land (Toye, 2007).

Baskin (2003) argues that the structural social work approach, while it indeed accounts for the effect of colonial history on clients, fails to facilitate discussion about the community's values and worldview. How then does an Aboriginal worker who subscribes to structural perspectives maintain a successful helping relationship with clients that have Aboriginal worldviews? This question leads to the second reason I am interested in this subject: it is my own social location as a racialized, structural social worker. At first, the consideration of the many perspectives used in structural social work practice – in particular, cultural competency – was what I believed to be important in social work with racialized groups. Now, after working in an Aboriginal agency, I feel that there are possible tensions between structural social work practice, Aboriginal communities, Aboriginal workers and some commonly employed theories. I do not believe that simply because part of my racial and cultural identity is Mi'kmaq and Cherokee that that alone helps me to understand my client's or community member's problems any better than someone without those identities. I am also not sure that structural social work theories that encompass cultural competency acknowledge or help resist replicating power imbalances resulting from past and present events. I am born of mixed race and culture; I am a Black Canadian of Mi'kmaq First Nation, Native American and "Wallonian" Belgian

ancestries, the latter of which is rooted in White European culture. I identify with and as all of these. I now think that cultural competency is shaped by western perspectives. Cultural competency and the ideas that inform it do not help me to operate in an anti-colonial manner because it is assumed that I will understand other Aboriginal people's experiences simply because I share this culture and/or identity with them.

Previously my stance in relation to the theory of cultural competency was that it was more successfully employed by me when used with anti-oppressive practice - including a consideration of the socio-political context of myself and my clients - than by employing the theory alone. However, I have come to realize that theories created within the very system which has used the dominant worldview may be inadequate for my work as a racialized social worker and I have since looked towards adopting an anti-colonial approach which seeks to critique those same systems of power.

Cultural competency used alone casts an illusion over social work practice in that it creates a belief within workers that they can potentially become experts in finding the solution to another person's problem - in this case understanding the Aboriginal experience. This illusion is counterproductive to structural, anti-colonial and anti-oppressive work. Therefore, considering the use of self as a professional development tool and the opportunity to use the learner's stance rather than the practitioner as expert is fundamental to working with Indigenous groups.

In a way I am trying to “unthink” colonialism. Recently I had the opportunity to work on part of the Sisters In Spirit (SIS) project through the Native Women’s Association of Canada (NWAC). During this project I found myself in contradictory circumstances when communicating with family members who were a part of the project. My background as a social worker told me to keep up a boundary of professionalism that would mean a client-worker relationship, however the Indigenous part of me recognized that this would not necessarily work in this case. We were seeking to empower the family members to use their own solutions in dealing with their missing or murdered family member and not those posed by the state. The Indigenous way would be to treat the family members as experts, as would the structural way, but the main difference would be the relationship. I would want to connect with my heart and soul from my own experiences with losing a family member to violence. Opening up this connection on a very personal level would not have worked in conjunction with my structural social work theories. I hope to conclude this project with more research on where a racialized, in particular an Aboriginal worker, locates herself in her work and can gain insight into ethical and progressive practice.

II. SUBJECT

a. What is the subject?

There is little research about the impact on and views of social workers from oppressed groups who are working for the very system that has oppressed them, and even less on Aboriginal social workers who are inside the very system that has caused oppression, and even less on Aboriginal workers. Most of the theoretical argument in social work has been about how to work successfully within the system using such theories as cultural competency and anti-oppressive practice rather than how to rectify the power imbalances caused by historical practices and acts of oppression within the profession such as those associated with the child welfare system, the penal system, and marginalization of overall health. Of course, all of these practices result from colonial domination. Scholars of social work theory who use an anti-colonial framework emphasize the Aboriginal worldview as a part of resistance. The subject and argument of this thesis will be that social work practice by Aboriginal workers is moving and should continue to move toward an anti-colonial framework, which means that workers must position colonialism as problematic not only for the Aboriginal client but also for the Aboriginal worker. In the following section I turn to what an Aboriginal perspective looks like in social work practice which could be interpreted to be an anti-colonial framework.

b. Aboriginal Perspectives on Social Work

The most important perspective unveiled in numerous articles on Aboriginal workers and community members (often labelled clients in social work) is the importance of worldview and social work practice. Scholars such as Smith (1999), Pon (2009), McKenzie & Morrisette (2003) and Hart (1999) all agree that paramount to working as a service provider in the Aboriginal context is an understanding of their worldview. Similarly David Este (2007) writes, "An understanding of world views enables practitioners to become more effective in their practice with different client systems, including individuals, families, and communities" (p.97). A worldview is different from cultural identity because not all Aboriginal people - Native, Inuit and Métis - have different views yet technically they are often thought as having the same or similar cultural experience by non-Aboriginal people simply by virtue of being Aboriginal. This becomes very important in considering the use of theories such as an anti-colonial framework for Aboriginal workers because, as I propose to argue in this thesis, current theories and social work practice are still situated within the western worldview context (Waterfall, 2003 and Pon 2009). Aboriginal worldviews, despite the impact of colonialism, have survived and are attributed to Aboriginal peoples' resiliency and should be considered just as, if not more,

significant than Western ones¹ (Smith, 1999).

It is also important to point out that social work practice in an Aboriginal context is essentially about seeking wholeness and balance (Hart, 1999) and therefore will be the basis of this section. Aboriginal people believe that to live a holistic and healthy life a person, regardless of the issue (whether it be physical, or mental), must regain balance (Hunter et al., 2006). Bopp et al. (1984), Hunter et al. (2006) and McKenzie & Morrisette (2003), explain the major principles or constructs of the Aboriginal worldview that are particularly important to service providers and which differ from the western Eurocentric models. These are: the importance of spirituality and the connection to nature, the concept of holism (harmony and balance), and finally the value of the collective, the community, the family or clan system. The holistic worldview can be taught or implemented, through social work interventions and through the promotion of healthy communities (Bopp et al, 1984, Hunter et al., 2006 & McKenzie and Morrisette, 2003).

In contrast to the Aboriginal worldview there is the western worldview which adheres to the use of the clinical model, whereas the

1

Aboriginal worldview can be considered more significant argue McKenzie & Morrisette (2003) because their meaning systems were created to “transmit this knowledge to future generations”, in order to maintain the environment and its resources (p.20).

Aboriginal worldview includes spirituality and sacredness. Rather than reflecting inward for answers, “the Euro-western worldview, [is] based on a linear model of thinking, is immersed in history of science and scientific reasoning. It rests on a firm belief about human objectivity in the outward pursuit of knowledge and truth”, (McKenzie & Morrisette, 2003, p.20). Despite the fact that structural social workers do not ascribe to the clinical model they often have no choice but to defer to conventional modes of clinical intervention. Service providers who are unable to adapt to or understand these fundamental differences may fail to understand how their Aboriginal community members understand their health and therefore their intervention and prevention.

In order to help the community members achieve the harmony and balance reflected in the cultural teachings and to understand the context of holism as service providers to Aboriginal people, it is important to consider the concept of *healing* in the Aboriginal worldview. Healing in the Aboriginal context is the “process that brings parts of one’s self (physical, emotional, mental, and spiritual) together at a deep level of inner knowledge” (Hunter et al., 2006, p.13). It follows then that harmony and balance will come from personal strength. There are cultural processes involved in Aboriginal healing which, in turn, will help lessen the historical ramifications with which Aboriginal people must constantly deal; “Cultural content, particularly in relation to identity and spirituality is embedded in the concept of healing, and there is the need

to deal with any adverse effects from colonization”, as remnants of colonization may get in the way of the healing process (McKenzie & Morrisette, 2003, p.30). The practice of healing used by Aboriginal social service workers working with Aboriginal community members is an anti-colonial practice as it seeks to resist or rectify the historical changes brought upon Aboriginal groups.

c. Anti-colonial framework

Linda Tuhiwai Smith's book, *Decolonizing Methodologies* (1999) argues that anti-colonial thinking goes one step further than Frantz Fanon's original thinking, in that de-colonial thought remains situated within a colonial system, and anti-colonialism is the attempt to position that thought theoretically outside the colonial system. First, in order to interpret the catalyst of underdevelopment and oppression of Aboriginal people in relation to current social work practice one must consider their history. The colonization of Canada's Aboriginal people is the main contributor to their political and social inequality. McKenzie and Morrisette (2003) argue that the etiologic pattern of social problems for Aboriginal people must include how federal and provincial governments undermined Indigenous communities, health, land, family, culture and tribal values. By stripping or undermining peoples of these Aboriginal attributes the state has created marginalized groups who feel disempowered, have low self-esteem and self-worth, and therefore often

choose to use destructive coping mechanisms such as substance abuse. This in turn has created a vicious cycle of intergenerational trauma which is passed down from generation to generation including a lack of healthy parenting skills and/or healthy life choices.

Residential schools and the 'Sixties Scoop'² consolidated these kinds of problems. McKenzie and Morrisette (2003) regard the internalized feelings of low self-worth and inferiority as a main contributor to the underdevelopment of Aboriginal communities and attribute these feelings to the "colonial relationship" which, the authors continue, "encouraged the adoption of behaviours associated with domination and victimization" (p.16). The response to inferiority and internalized oppression often results in negative social behaviour such as coping through alcohol, narcotics, experience of violence and abuse which in turn produces unhealthy persons and communities (McKenzie & Morrisette, 2003). The many problems that Aboriginal people face are intrinsic to the relationship they have with their history including colonialism, imperialism and the inability to avoid the spread and diffusion of Eurocentric thought into their own contemporary societies (Waterfall, 2003). Their marginalized location in current Canadian society leads to encounters with criminality, sexual deviance, violence, sexism

² From the beginning of the 1960s for almost three decades large numbers of Aboriginal children were apprehended from their families and communities and placed in foster care. Eventually most of the children were adopted into non-Aboriginal families in Canada and the United States (Kirmayer et. al, 2003).

and racism which are all linked to the history of colonization and patriarchy (Razack, 2002). In fact, argues Razack (2002), these conditions are sustained in contemporary society due to the process of colonial order such as the history of domination and objectification of Aboriginal people by the colonizer. An anti-colonial framework allows workers, scholars, researchers and others to question and challenge the colonial frameworks as a way to regain control and equality. “[A]nti-colonialism questions institutional power and privilege and the rationale for dominance, and acknowledges the intertwining roles the state, social and institutional structures play in producing and reproducing institutional inequalities” (Hart, 2009,p.30). This is done through the recovery of traditional Indigenous knowledge (Simpson, 2004 in Hart, 2009) and by reclaiming, revitalizing and retelling their own history in an Indigenous context (Tuhiwai Smith, 1999).

d. Structural framework

A structural analysis of problems and issues unmask the socioeconomic structures that oppress the individual or group. Social work frameworks often look at problems, (individual or group), in contrast to the client’s immediate social environment. In particular, workers will view their problems in contrast to their family, friends, peer group or work. A structural framework considers all of those elements but also analyzes oppression within broader social and institutional

structures or political factors. Structural approaches therefore recognize the importance of access to resources and services as a part of self empowerment, and social workers who use these approaches not only look to help clients build their own personal skills but will also advocate and defend the rights of an individual or group as a way of redistributing power. A structural framework always begins with the premise that the existing structures in society are oppressive and that the personal is political. The structural social worker will seek to find the link between the individual's situation and these structures. Bob Mullaly (1997) states specifically that social problems are seen as arising from liberal or neo-conservative capitalist systems that both oppress and exclude certain groups such as Indigenous peoples from fully participating in society. Structural frameworks seek to debunk the myth of equality which entails the belief that as long as individuals work hard enough they can achieve what they want and need, or in other words, that everything is gained through merit. Baskin (2003) states that a structural approach acknowledges that history has an impact on groups of people and that colonization is linked to their present conditions of oppression (p.67). Structural social work understands Indigenous groups' response to oppression as internalized oppression (Baskin, 2003). In other words, followers of structural social work would argue that the powers in dominant society absolve themselves of responsibility for the oppression of Aboriginal and other marginalised peoples because

subconsciously they understand that the marginalisation of these groups serves to maintain their own privilege (Baskin, 2003). This is due to the western, liberal belief in the myth of equality - that Aboriginal people are also able to take advantage of equality of opportunity. This is problematic because it ignores the experience of collective oppression that has disadvantaged many Indigenous groups, such as systemic racism and racist policies like those that arise from the Indian Act. Hill (1995) in Baskin (2003) points out that structural social work is nevertheless derived from a western perspective and is part of western culture. Even though structural frameworks are linked with anti-oppressive approaches it is not a holistic approach reflective of Aboriginal worldviews and therefore is not an inclusive model to use when working with communities (Baskin, 2003).

e. Definition of terms

Throughout this thesis I will be using various terms which will be integral to understanding my argument. What follows is a brief definition of each of these terms. In my own experience I have found that these terms are a part of the structural social work education that I was given or used within my own practice and various jobs I held in the Indigenous social work field. The first few terms are a part of my conceptual framework as some of the key factors or main concepts that relate to Aboriginal social workers' experiences that I look at while conducting

research. The last few are mostly practice approaches that I consider to be a part of my structural social work curriculum.

Firstly, I would like to briefly define *Structural Social Work*. *Structural social work practice* is a social work approach which varies depending on its emphasis, but can include Aboriginal perspectives and acknowledges colonialism as a negative impact when possible. According to this particular emphasis, it is all based on the belief that structural factors have major significance for many types of social work problems. Predominately a Canadian model of practice, when used *within* the system the concept is used to change people's ideology and consciousness on a large scale in order to change society or larger structure. When practiced *outside* the system it is used to change radically the oppressive structural patterns such as patriarchy and racism in order to create a new social reality for people (Mullaly, 1997, p.187).

Although there are a few scholars who define anti-colonial approaches this thesis will employ Waterfall's (2003) and Dei's & Asgharzadeh's (2001) *anti-colonial* framework. Their definitions encompass anti-racist and anti-oppressive perspectives and the contemporary usage of counter/oppositional discourse in understanding colonialism in social work practice and in practitioner's own personal beliefs in order to employ anti-colonial thought. In particular to social work practice, this paper will use Dei & Asgharzadeh's (2001) definition

of anti-colonial framework to acknowledge the epistemologies, realities and methodologies of Aboriginal people.

Although this thesis does not directly site the term *colonial agenda* it is important background for understanding where and how colonialism has diffused across what is now known as Canada. Smith in Waterfall (2003) and Waterfall & Maiter (2003) see the agenda of colonization in Canada as an objective of the British Empire to expand knowledge, trade, and expansion of the empire itself with an outcome to gain access and control of the land's resources, including its people (p. 52). The other way that this is expressed in this thesis is through *diffusionism*, which is a process based on the biased notion that the colonists and European settlers, were culturally and politically superior to all others. Therefore, Aboriginal peoples needed to acquire European culture in order to progress (Waterfall, 2003). This subsequently caused the emergence of a peculiar view of Indigenous knowledge and created a false dichotomy of the civilized and the savage within the colonial system. This refutation of Indigenous knowledge came to be known as Eurocentrism or Eurocentric thought (Battiste, 1998). This false dichotomy often occurs in Canadian society in what Edward Said (1978) coined as 'othering'. *Othering* often involves the process or perceived notion that one group is dominant or civilized and that the other group is less civil or uncivilized and therefore labeled 'the other'. *Othering* exploits the non-dominant group and makes them inferior or worse, can dehumanize them.

Many Indigenous researchers discuss at length the process or theory of *decolonization*. Frantz Fanon asserted early on that decolonization as a theory and process is the introduction of violence by the colonized in order to rupture the dominant colonial paradigm. Since violence was seen by Fanon as the reason for the creation of colonialism it would take violence to bring it down (Waterfall and Maiter, 2003 & Lynes, 2002). This is thought by scholars to be a conscious creation of oppositional analytic and cultural beliefs, spaces and actions, including validating Indigenous knowledge in contemporary society (Dei 2001 in Waterfall and Maiter, 2003).

There are a few concepts that I have learned through the study of Structural Social Work at Carleton University that I refer to throughout this thesis and discuss in length in the section on 'Findings'.

Anti-oppressive practice is a term encompassing a number of social justice oriented approaches. It draws on social activism and collective organizing and integrates an understanding of social problems. It requires radical rethinking of historic, time-honoured theories and concepts and critical re-examination of taken-for-granted assumptions about the helping process (Clarke, 1998, p.247). This term is largely supported as a practice method in structural social work. Clifford (1995) defines the term anti-oppressive as considering the effect of the "use and abuse of power not only in relation to individual or organizational behavior" and how this power may or may not be racist, classist, sexist

or heterosexist (p.65). Practitioners of anti-oppressive practice would relate this to the broader social structures for example: political, economic, health, education and cultural systems as a way to understand a client's or group's experience and social history in order to empower or help them to change their situation.

Boundaries are one of the constant themes that I draw out from the eight interviews. *Boundaries* include professional distance, professional boundaries and objectivity. These terms have been key concepts in education for many social work and health professions. 'Professional objectivity was valued as the quality that allowed the helper to divorce him or herself from subjective feeling, attitudes and beliefs' (Shulman, 1991, p. 15). Shulman's (1991) definition is a concept that is taught in some streams of social work.

Counsellors, social workers and other workers in a helping role usually establish a therapeutic alliance with the community they are helping and can often struggle with *transference*. *Transference* occurs when feelings are unconsciously directed from one person to the other (Shulman, 1991). It is often believed that these 'feelings' come about due to repression of feelings from one's childhood. Along with transference it is also common for social service workers to experience *counter transference* which happens unconsciously when a worker becomes emotionally connected or entangled with a client and fails to see that the emotions they are attributing to the client is from feelings of their own

experiences. Countertransference can be damaging if the worker is not aware (Mandell, 2008).

Use of self (Satir Model definition) is a method that I found was taught in my social work program as a way to work within multicultural environments. The *use of self* occurs when the therapist is in touch and aware of their own personal connections and experiences. Therefore they have the ability to monitor it in order to centre and better prepare themselves for their clients and/or sessions. This includes being aware of one's inner processes, accepting what is, knowing one's self and looking at possibilities. This definition of *use of self* will benefit the client's processing of their own issues (Lum, 2002, pp.182-183). According to Wendy Lum (2002) it is one of the most important aspects of being successful in the helping profession.

Cultural competency is a an approach to clinical practice with diverse clients, that focuses on developing knowledge of a particular cultural group and skills from within a specific context (Lee and Greene, 1999 in Allan, 2006, p.260). The goal of this approach is to reduce stereotyping and oppression, (from the dominant system), and develop a more complex understanding of culture from a practical standpoint. It seeks to deconstruct how a given culture sees the helping relationship and how problems can be solved within a given culture (Nwachuku and Ivey, 1991 & Lee and Greene, 1999 in Allan, 2006, p.260). I discuss *cultural competency* in the thesis because during my experience as a

social work student it was taught to me as a way to work with groups who had been 'othered' and certainly was discussed by some professors as an approach that complemented structural social work theories.

In order for social workers to understand the psyche of an Aboriginal person they must first have knowledge of their *worldview* which is different from the western view of human nature and behavior. Hart (2010) argues that in order to work with Indigenous groups a social worker will be required to act outside of the dominant worldview which is often found in social work environments. A person's worldview affects our belief systems, decision making, assumptions, and modes of problem solving (Hart, 2010). Overholt and Callicot in McKenzie and Morrisette (2003) define an Aboriginal worldview as a "set of related ideas or views to which members of a distinctive culture subscribe" (p.19). Furthermore a worldview can become a "recognized reality" that has the potential to "socialize its citizens and create a political culture" (McKenzie & Morrisette, 2003, p.19). This political culture is one of the challenges faced by service providers. Hart (2010) defines worldview as "cognitive, perceptual, and affective maps that people continuously use to make sense of the social landscape to find their ways to whatever goals they seek... and are developed throughout a person's lifetime through socialization and social interaction" (p.2). Once an Indigenous individual's or group's worldview is understood it is easier to see the Indigenous ways of knowing and helping. Hart (2010) outlines seven

principles of Indigenous worldviews identified by scholar Leanne Simpson: knowledge is holistic; there are many truths dependent on each individual experience; everything is alive; all things are equal; land is sacred; the relationship between people and the spiritual world is important; and lastly, human beings are least important in the world. The worldview is important as it helps consider the perspective of how Indigenous groups view their own knowledge or ways of helping. *Indigenous ways of helping* and/or *Indigenous knowledge* is based on perspectives of the local community, its values and aspirations and the ways that families and different social networks emphasize the relational self (Hart, 2010). There are some examples of Indigenous ways of helping in the 'Findings' section of this thesis. However, before continuing I will mention some that I learned through my own practice and through the research. Holistic art-based approaches are examples of Indigenous ways of transferring knowledge and helping that facilitate healing or reflection on a shared experience; examples include storytelling, drum-making, signing and beading. The reason why these are good examples is because each of these activities gives a person the chance to explore and reflect on their own experiences spiritually, mentally, emotionally and physically. These activities are often done collectively which means that it gives the group a chance to reflect on the effects of colonization through looking at their shared experience in a reflective way. Using Indigenous ways, such as those listed above, will help decolonize Indigenous peoples

in a positive unifying way (Hart 2010).

IV. Current systemic and social barriers confronting Aboriginal people

a. Demographic Information

Some demographic and statistical information is important in this thesis. The information recorded here will hopefully be used by social workers and those working in social work areas as a reason to pay better attention to the general Aboriginal population in the urban area. Urbanization is important for two reasons when discussing anti-colonialism and structural social work. First, the more Aboriginal peoples move into cities areas the harder it is to reclaim and maintain the Indigenous ways of helping and second, as a social worker it is important to take note of the rising numbers as an opportunity to pay more attention to Aboriginal worldviews. It is possible the urban Aboriginal worldview is unnoticed or taken as a part of the general worldview.

In Ontario “Aboriginal peoples are younger, more mobile, experience more single-parent families, are less well educated, experience more unemployment, earn less, and are incarcerated in greater proportions than non- Aboriginal peoples”

(Spotton, Government of Ontario, Ipperwash Inquiry, 2007). In Ontario, the majority of Aboriginal peoples do not live on reserves (or First Nation communities, as reserves are often called). Ottawa has a large migration and population of Inuit people from the north; 61% of Aboriginal people

in Ontario live in cities (Spotton, Government of Ontario, Ipperwash Inquiry, 2007).

The 2006 Canada Census reports that there are approximately 1,172,790 people in Canada who identify as Aboriginal with over 188,000 living in Ontario and about one half of the total Aboriginal identity population living in an urban setting (Statistics Canada, 2008 & Statistics Canada, 2001). 20,590 people in Ottawa-Gatineau identified as Aboriginal in the 2006 Census (Statistics Canada). An urbanization study found more Aboriginal people are living in poverty than those who are on reserve, especially Aboriginal children - "52.1% of all Aboriginal children were poor" (Canadian Council on Social Development, 2003).

It is also important to note the difference in age make up of Canada's population in regards to Aboriginal and non-Aboriginal people. The Aboriginal population is increasing in Canada; in 2001 over 4.4% of Canada's population identified as having Aboriginal ancestry, a rise of 3.3% since the 1996 census (Statistics Canada, 2001). Although Aboriginal people "age prematurely" often in the onset of their 40's and 50's, the Aboriginal population in Canada is, on average, much younger than the non-Aboriginal population with 38% under the age of 15, compared to 21% of the non-Aboriginal population. The youngest citizens live in the Nunavut Territory (NAHO, 2002 & Statistics Canada, 2001). In the Ottawa-Gatineau area the Aboriginal population is young and

growing with a 42% increase in its population since 2001 (Statistics Canada, 2001).

b. Current social, economic and health conditions of Aboriginal people

Maintaining and achieving good health is integral to the Aboriginal worldview yet it presents itself as a challenge to urban Aboriginal communities. It is commonly known that in Canada Aboriginal people are the most marginalized population in terms of their overall socio-economic and health conditions. This is despite the fact that Canada ostensibly has universal health care, a public education system and social services all thought to be equally accessible by all citizens. The reality is when it comes to the overall health of Canadians, there is a significant disparity between the Aboriginal community and the non-Aboriginal one (Adelson, 2005). The fact is there is a correlation between your race and ethnicity when it comes to mental, emotional and physical health in Canada. If you are a member of an Indigenous group and therefore affected by colonization then it is likely that you have also experienced challenges with health either individually or in the greater community. This is due to the detrimental and intergenerational effect that colonization has had on Aboriginal people in Canada.

Specifically in Ontario, the Aboriginal Healing and Wellness Strategy (AHWS) was based on a province-wide study that evaluated the

input of over 7000 people about what areas needed to be improved in order to achieve wellness, healing or health for Aboriginal people:

In December of 1994, the Ontario government created AHWS with the signing of 13 implementation agreements with the major provincial Aboriginal organizations and the Chiefs of the Independent First Nations. Fifteen agreements were signed in 1999 and renewed in 2004 for further five year terms (2008, p.4).

AHWS (2008) seeks to integrate culturally competent practices with programs and services in the health sector that specifically deal with Ontario's urban Aboriginal population. It attempts to do this through:

- Provision of equitable access to primary health and healing services and programmes, including prevention, treatment and support, that are culturally appropriate and culturally competent;
- Building on the strengths and enhancing the capacities of communities; and,
- Promotion of equitable, violence-free relationships and healthy environments (p.4).

Strategies such as AHWS are only part of the solution, there are larger political and social structures creating barriers to the overall mental and physical health of Canada's Aboriginal people. However, the AHWS (2008) also states that cultural competency of Aboriginal and non-Aboriginal service providers in health care are crucial to empowering Aboriginal clients to make healthy choices, as well as contributing to the

overall healing process. Currently AHWS has been substantially underfunded by the Conservative federal government.

Baskin (2009) suggests that particular presenting issues: depression, suicide attempts, alcohol and drug misuse, sexual and physical abuse and family violence, are what bring Indigenous adults to the services of a social worker. These services are either mandated by a court, the child welfare system or the community has shown concern for the member which leads them to making their own decision to seek help. Interestingly Baskin (2009) acknowledges that community members often present themselves for service on the urging of a family member or the community as an intervention, for example a partner stating 'I can't stay with you unless you get help'. Aboriginal people have a higher incidence of: infant mortality, low birth weight, accidents and injury, suicide, chronic diseases, children in the child welfare system, incarceration, experience of violence, poverty, substance use and communicable diseases (Day & Naymark, 2007, Statistics Canada, 2008 and McKenzie & Morrisette, 2003). Day and Naymark (2007) state that Aboriginal people have a significantly lower life expectancy than non-Aboriginal people in Canada (p.9). The cause of these social and health disparities in the urban Aboriginal community is due in part to lack of access to services and programs that are culturally appropriate. The social disparity of urban Aboriginal people is arguably the indirect and direct effects of the social determinants of health - social, economic,

cultural and political inequities (Adelson, 2005 and Day & Naymark, 2007). The National Aboriginal Health Organization (NAHO) (2002) describes the current social determinants of health that affect the outcome of Aboriginal health promotion and services that are specific to Canada's Aboriginal population as: income and related social status, poverty, education, housing, the residential school experience, cultural loss and environmental damage. Many national Aboriginal organizations see the effects of colonization as having a lasting effect on the Aboriginal population.

In particular, Aboriginal people have interlocking social and health problems due to *double jeopardy* - a combination of oppression based on their ethnicity and their social status (Behnia, September 26 2007, class notes). There are many examples of Aboriginal health issues and their contributing factors. An example of a contributing factor that affects the urban population is overcrowded housing and less access to safe housing. This results in the spread of communicable diseases with an increase in stress and lateral violence (Adelson, 2005). Another example of disproportionate social marginalization is violence towards Aboriginal women and girls. Canada has more than 582 documented cases of missing and/or murdered Aboriginal women and girls. Twelve percent of cases documented by the Native Women's Association of Canada occurred in Ontario (NWAC, 2010). In Ontario, the size of Aboriginal families is larger than the national average. Out of the seventy

cases documented by NWAC (2010) 90% of the women and girls who were missing or murdered were mothers. NWAC (2010) has stated that because of this crisis more services and access to services are needed for those who are left caring for the children, and in general for support to Ontario's larger families. The services must still be improved and connect back to the community and be culturally appropriate (NWAC, 2010).

The Aboriginal Healing and Wellness Strategy (AHWS) (2008) also argues that more attention needs to be paid to improving the access to services and improving the overall health and social status, by more health education, promotion and outreach from culturally competent framework. Campinha-Bacote (2002) a pioneer in culturally competent health service delivery, furthermore states that there is a direct relationship between health care providers who are culturally competent and their ability to provide culturally responsive health care services and health promotion. This stated, it is important to scholars of Aboriginal issues that the historical origins of problems are revealed and understood before proposing the solutions.

c. Canada's political atmosphere

It is also important to consider the political atmosphere in Canada at the time this research was conducted. The former Liberal and current Conservative federal governments both have diminished justice and

equality for Aboriginal people through eliminating or reducing funding for Aboriginal services, programs, advocacy and education.

This section of the thesis attempts to demonstrate that the information collected substantially reflects the recent effects of current federal and Ontario provincial policies and specifically how they impact Aboriginal programs in the city of Ottawa. The recently released budget for the federal government's fiscal framework is committed to austerity by cutting public servants and services over the next four years (McDonald, 2011). This section is important to the reader as it sets the context for what structural social workers would see as the systems of power that affect Aboriginal workers' methods. Aboriginal workers and the Aboriginal centres that employ them and that offer services to their community will now have even less resources available than they have had in the past ten to fifteen years – and those resources were already less than adequate. It is not all dismal though. Even in the present political reality combined with the evidence of little to no fiscal provisions the situation for the urban Aboriginal community has progressed in some ways. However, this is only because of the acts of the people and not because of government assistance. This is apparent even under the most extreme impacts of conservative policies and there are examples within the Aboriginal community that show an anti-colonial approach throughout this time.

Before looking directly at the results of the research there are, even

now, some commonly known examples of anti-colonialism in Canadian society. A good, recent example of resistance and of the anti-colonial approach is demonstrated by the success of "Shannen's Dream" a movement in Ontario. 2011 was the third anniversary of Prime Minister Stephen Harper's apology to Aboriginal people for the disastrously harmful effects of the residential school system on First Nations, Inuit and Métis people. Yet the federal government has continually capped First Nations education funding and left urban and reserve First Nations in the direst of situations. Less access to an education has meant less access to good, secure employment and housing. "Shannen's Dream" started as a movement in Attawapiskat, a northern Ontario community by a young First Nations student named Shannen Koostachin. She wanted to fight to ensure all schools in the reserve system are raised to the standards of Canadian public schools off-reserve (First Nations Family Child and Family Caring Society, 2012). Reserves want their own educational programs but the schools must be up to the quality and standard of public ones off reserve without necessarily teaching the same material. Shannen's school was built on a toxic diesel spill. On-reserve education funding was then brought forth as a political Motion 571 in the House of Commons. Motion 571 was put forth by the elected MP of James Bay, Charlie Angus in the House of Commons. Due to the persistence of the Aboriginal people the community has been promised a new school in 2012. However, the movement and resistance were

completely initiated by Shannen Koostachin of Attawapiskat First Nation, her siblings and fellow students, all Aboriginal people and Aboriginal workers. Cindy Blackstock, Executive Director of the First Nations Child and Family Caring Society, (FNCFCS) like most Aboriginal workers, assisted the Attawapiskat community with navigating the political system and policies. It was the determination and persistence of the Aboriginal people and the Aboriginal workers who would not take no for an answer from the federal government that resulted in broader lobbying from both mainstream and Aboriginal political groups. There are similar phenomena throughout the research data of this thesis that show by not accepting particular policies the Aboriginal worker is using an anti-colonial approach.

For at least the past decade Aboriginal social workers, Aboriginal community members, structural social workers and their allies have lived and worked under policies initiated by neo-liberal governments which have the intention of promoting the private sector and weakening services in the public sector. In other words, neo-liberal regimes in the Canadian political system have meant that Aboriginal workers have had to rely mainly on support coming from their own communities and on their own worldview. The most recent goal of the federal government to shift responsibilities of the public sector over to the private sector has meant that more often the burden of access to services is placed on the individual when in the past the government has shouldered most

responsibility.

In Canada neither federal Liberal nor Conservative governments have made the situation for First Nations, Inuit or Métis any better. It is yet to be seen whether the newly elected New Democratic Party opposition can influence any policy on Aboriginal issues at the federal level. So far it is not looking good with the recent announcement that the Conservatives have cut Aboriginal housing by 127\$ million dollars since 2008, and will continue to cut housing (APTN National News, 2011).

It is argued that because the political system in Canada has incorporated many principles of colonial laws from former colonies, and in turn into its formal relationship with Aboriginal peoples, social workers really have no reason to believe in the use of legislation to overcome colonization, it is contradictory. Structural social workers believe that you can work within the existing system and its structures to overcome it. This does not necessarily correspond to anti-colonialism, in that to be anti-colonial you are essentially working in opposition to the system.

Many Aboriginal workers have had either little or no choice but to work within the system, although there are also many who do not work within the system. However in many instances of the research where there are anti-colonial approaches, the system is not seen as necessary for the advancement of the community members such as in the interviews with the urban Inuit workers. The relationship of the

Canadian government with Aboriginal peoples has always been viewed through the lens of the dominant society; therefore the government sees Aboriginal people as not progressing or advancing in society but as a people who are still in stages of development. In fact since confederation federal, provincial, municipal and territorial governments have all viewed the Aboriginal population as a “problem”. Over time the federal government in particular has acted and enacted extreme systems of colonization in order to “fix” the Aboriginal problem such as: treaties, reserves, settlements, residential schools, the Indian Act, the “White Paper”, the Royal Commission on Aboriginal Peoples, the child welfare system and many others. The more Aboriginal people have exercised sovereignty over their worldview and values the more backlash from the federal government they have experienced. The reality is that Aboriginal worldviews and their socio- political systems were already fully developed. If it were not for the process of Eurocentric diffusionism, which is based on the theory that the European colonists were culturally and politically superior to all this would have been obvious to the colonizers (Waterfall, 2003)³. The colonizers believed that Aboriginal peoples required indoctrination into European culture in order to progress (Waterfall, 2003). This subsequently caused the emergence of a peculiar pejorative view of Indigenous knowledge and created a false

3 The word colonizer or visitor will be used in this thesis, as an anti-colonial approach rejecting the notion that the colonizers were settlers. The land was already inhabited with “settlers” upon the arrival of the Europeans.

dichotomy of the civilized and the savage within the colonial system. This dismissal of Indigenous knowledge and culture came to be known as Eurocentrism or Eurocentric thought (Battiste, 1998).

For Aboriginal service providers and the Aboriginal communities, the constant underfunding and defunding of services by the colonizer – that is, Canada’s political system – is part of the backlash against any advancement by Aboriginal peoples and has placed an enormous restriction on any further social and economic progress. It is important to note that this does not mean that all of the communities have regressed or have been defeated. It means that many groups and individuals are working through an anti-colonial approach and have to take matters into their own hands. This inequality that results from the Eurocentric “othering” of the Aboriginal worldview and values has led many Aboriginal groups to organize, self-govern and, within their own grass-roots organizations, many have focused on healing their communities and on cultural reclamation. In a way Aboriginal people are and were well aware that it is not possible to use a western colonial political system to undo or “unthink” colonization.

Relying too much on the political system of Canada simply reinforces issues of colonization. The political system which is based on the views and beliefs of colonization still views First Nations, Métis and Inuit peoples as problems that need to be fixed. Even today this still

stems from the belief that the western⁴ worldview is superior and assimilation or tolerance within and toward this system means a person is progressing. These are partly the views of Taiaiake Alfred (2009) who argues that First Nations should reject self-government within the existing system since it only concedes the sovereignty of that system – as well, he argues that First Nations claiming sovereignty is also dubious since the notion of sovereignty is a distinctly European concept. This includes functioning and advancing in the current political arena. What is happening now is that the provision of services for and by Aboriginal people is being drastically cut or eliminated by the current federal Conservative government (McDonald, 2012). Furthermore, the Conservative government is trying to control and stop those grass-roots programs that have been able to advance Aboriginal people without the assistance of the government. A good example of this is the Sisters In Spirit project of the Native Women's Association of Canada (NWAC) created six years ago by community members to advocate research and bring families together around the human rights issue of missing and murdered Aboriginal women and girls. Its federal funding was drastically cut and the program's goals were amended by the federal government in 2010. Based on the Conservative government's basic position and the Minister for the Status of Women, Rona Ambrose, Aboriginal women who work for the Native Women's Association of Canada are no longer

⁴ The term western is used in this thesis as the updated word for European.

permitted to research, advocate or educate anyone, including the Aboriginal community on what is happening in Canada concerning missing and murdered Aboriginal women. If they do it would threaten their newly acquired funding for Evidence to Action, the newly named project that replaced Sisters In Spirit. The federal government would not even allow NWAC to retain the name Sisters In Spirit. This issue has divided the project's allies and workers: those Aboriginal workers who continue to work under the Conservative government's goals through the Evidence to Action project and those who continue as a grass-roots movement as the Families of Sisters In Spirit.

By 2011 it was no longer any surprise that the government sought to control the efforts of those deemed progressive Aboriginal people. This was evident in the Sisters In Spirit example. However, what is shocking is the recent evidence that Prime Minister Harper ordered Indian and Northern Affairs Canada (INAC) to essentially "spy" on these progressive groups (Diabo & Pasternak, 2011). This is the ultimate abuse of Canada's political system, using those people who have been historically oppressed to further oppress their own. This lack of democratic process and the fiscal restraints have left many Aboriginal communities in rural areas to act in modes of self governance. Self governance in terms of being able to work under one's own terms as an Aboriginal worker is slightly more difficult for those who are in the urban setting and must rely on resources from the federal government but at the same time must

fight against the injustices of the system.

There are many examples of funding cuts to direct service. The Aboriginal Healing Foundation (AHF) which serves to fund many front-line Aboriginal service centres and projects was cut by more than a third of its necessary funding (Justice for Missing and Murdered Indigenous Women, 2010). This meant that agencies, such as the Native Women's shelter in Montreal, which had received funding from the federal government for the past decade without question, now experienced funding cuts for the first time. Aboriginal social workers lost their jobs and the Aboriginal community members no longer have access to services. There are another 134 Aboriginal healing projects administered by the Aboriginal Healing Foundation that give direct service to Aboriginal people by Aboriginal workers that will no longer be funded under the AHF. What can be expected then of the federal government's cuts is, that much of funding responsibility will be downloaded to the provinces, municipalities and territories who have in the past considered issues to be the responsibility of the federal government.

Conditions around acquiring and using funding in the four urban Aboriginal agencies where workers were interviewed for this thesis have demonstrated that often the federal and or provincial funding body have meant particular restrictions for the worker in terms of who they can deliver service to. For example one participant mentioned that although the funder wants her to service "mother and children under six only" that

isn't easy in a typical Aboriginal home. Families quite often consist of large extended family member and include many children. Interestingly, all eight workers had very creative ways of sustaining the funding and helping the community out at the same time. For example the Aboriginal community is much younger than the non-Aboriginal one, so much so that the parameters set by the Public Health Agency of Canada (PHAC) around funding programs for young Aboriginal families are less inclusive when they are defined by the funder's concept of a family unit. Workers cannot expect young Aboriginal families to fit into the definition of the western perspective of a family in need. This does not slow the Aboriginal worker down, the worker finds ways of manipulating the system to include the definition of the Aboriginal family. This could mean twice as many people as the western image of a nuclear family. The agency still receives the resources and the community member still receives the service.

Often Aboriginal people are not identified in policies, or in popular terms as being a part of Canada's population. Over Canada's history there have been specific measures taken to keep Aboriginal people outside of what is seen as people who are "attached or part of Canada's" make up. This is seen early on in Canadian history when the colonizers set up colonies or what Dei and Kempf (2006) call 'pseudo nations of Europe' in order to erase or "forget" the culture, history and systems of the original habitants. So much so that it is common practice to leave

out the attachment of Aboriginal people to the history of Canada in something as simple as a school text book.

Even the Liberal government of the seventies and eighties demonstrated a colonial relationship with Aboriginal people. It was not so long ago that Canada was encouraged to support Prime Minister Trudeau's 1969 White Paper and reject the Hawthorn report of 1966 due to the policy recommendation "Citizens Plus" (Burnet, 2000 and Van den Burg, n.d.). Hawthorn had argued that since Canada's *Indian peoples* are deprived of the benefits that come with standard citizenship, such as welfare, that in order to equalize this there should be a "plus" component added to their citizenship. He argued that as citizens of Canada they should be entitled to the same services as other Canadians but, at the same time, their special status and rights within Canada should be recognized by calling them Citizens Plus. Hawthorn argued strongly that the disenfranchisement of Aboriginal peoples in Canada was mostly due to the federal policies about their status and citizenship. The Liberal government rejected this argument and instead developed the White Paper which recommended the elimination of any special interests or rights for Aboriginal people:

the strategy of the Hawthorn Report involves supplementing equal citizenship with a limited form of Aboriginal differentiation, which it calls "citizens plus." In contrast, the White Paper, driven by a fear that Aboriginal expressions of difference might fragment the Canadian political community, opts for an alternative

strategy of forcing Aboriginal people to develop their cultures within a framework defined by equal citizenship. Aboriginal groups mobilized quite famously against the White Paper, adopting the Hawthorn Report's "citizens plus" terminology (Kernermen, 2005, pp 9-10).

In terms of this thesis these are examples which demonstrate how the debate about Aboriginal peoples has actually moved from just a false sense of belonging to the notion of justice for Aboriginal peoples in Canada. The interviews in this thesis support the notion that anti-colonial approaches put the issue of belonging aside in order to support justice and equality, acknowledging that First Nations, Inuit and Métis people were not born to Canada but to their specific regions and territories named in the process of colonization as Canada. This is not the same for structural social work approaches. Some structural social workers still make the issues of belonging a critical part of their work. For the Aboriginal service provider the need for justice and self determination prevails over the need for belonging which was formerly severed by the Canadian government anyway through disenfranchisement. Justice, equality, self governance are all issues that workers face while fighting against the results of historical inequality. The first response to the realization of anti-colonial approaches is to detach from the historical lens of the colonist (Smith, 1999). Aboriginal workers then may see the history of those whom they are helping in a different way.

The 1987 Meech Lake Accord was an attempt to reform the

Canadian Constitution by the Mulroney Progressive Conservative government (Dupras, 1992). However, the attempt was made without the agreement of any Aboriginal groups and worked to catalyse an anti-colonial reaction from the First Nations communities in Canada. The Accord needed to be endorsed by all ten provinces but completely ignored the rights and opinions of Aboriginal people. It was defeated in part through the actions of Elijah Harper, an Aboriginal member of the Manitoba legislature whose deciding vote against the accord ensured that provincial unanimity would not be possible. It was evident to Aboriginal people that the Canadian government still believed that Aboriginal people should assimilate into Canadian society while at the same time acknowledging the special history of Quebec and its need to be recognized as a distinct society. It was outright policy discrimination and favouritism by the Mulroney government. The province of Quebec was to be granted special rights including linguistic conservation and educational rights (O'Neil, 1995 and Van den Burg, n.d.). These were all things that Aboriginal people had been fighting for.

In November of 2010 Prime Minister Stephen Harper finally yielded to international pressures and endorsed the United Nations Declaration of the Rights of Indigenous Peoples (UNDRIP). Since then his Conservative government has done nothing with respect to the linguistic, cultural, spiritual or educational rights of Aboriginal people in Canada. This is not surprising since it was less than a year earlier at the G20

summit that Harper boasted that Canada did not have a history of colonialism (Simard, 2009). The UNDRIP acknowledges what Aboriginal workers have already unmasked: that policies and doctrines relating to colonialism and assimilation will not build a better Canada or ratify the injustices experienced by Aboriginal people in Canada. The federal government's inability to keep Aboriginal people from progressing has backfired and given more space to anti-colonial approaches.

V. Brief History of Social Work

a. Social work before colonization

The history of social work before colonization is difficult to expand on because social work as a profession is a modern western concept (Payne, 2005). As such, it can be linked to European and colonial values. Western social work practice started in the 19th century but before it had a professional term helping was done in the form of charity work. Charity work was used to try to lessen the effects of poverty and the injustices that result from it. In Europe, during the Middle Ages, the Christian church and its clergy influenced the main practices of charity work. Charity work was directly linked to the Christian value systems that emphasize the importance of sharing resources, such as money, food, shelter and other material items. Charity work differs from the structural perspective of social work that seeks to change social systems and root causes of injustices and inequality.

In terms of Indigenous groups, trying to determine how their helping systems would have functioned prior to European contact is a challenge. Linda Tuhiwai Smith notes that in most historical accounts or records of activity in lands that have been colonized even pre-colonial information is not free from the influence of Euro-centric worldviews (1999, p.29). The lack of accurate recorded history is due to the fact that the visitors believed the First Nations and Inuit systems were primitive and under developed so when it was documented by the Europeans (if at all) it was done inaccurately. Smith (1999) also argues that oral history was often dismissed by the dominant society so if Indigenous history was not recorded in a conventional manner it was not documented by the Europeans. The colonizers discounted Aboriginal accounts of their own history, because these accounts are how groups explained their worldviews. This negation of Aboriginal worldview is simply an act of colonization. Aboriginal social workers can turn to their own teachings, oral traditions and wisdom keepers in order to reclaim the ways of the past; however, this is difficult if they have lost connection to their cultures, ancestral lands, and live in an urban setting. Aboriginal social workers must understand the history and impact of colonial contact in order to work from an anti-colonial perspective and to reclaim the way of traditional practices. Aboriginal communities and societies have always had inherent systems of healing, government, teaching, knowledge, philosophy. The knowledge of these are nearly all communicated orally

(Loppie, 2007 in Lavallée, 2009). Ceremonial rituals, shamanism and engagement with spirituality are some examples of what “social or charity work” would have looked like before colonization. It is also important to explain that there was already a collective sense of kinship, sharing and caring built into the sociology of Indigenous communities. There already existed strong beliefs in social responsibility and reciprocity. For example, in the Pacific Northwest the First Nations potlatch ceremonies were a way that Aboriginal peoples redistributed wealth. This was done by gift giving and sharing food. It was not important to acknowledge who had the most but who gave away the most. Concepts of capitalism brought about by diffusionism meant that the visitors would work against the potlatch system and reinforce the need of white European colonists to make capital.

The values held by First Nations and Inuit communities, such as the Inuit Qaujimajatuqangit (or Inuit IQ) or the Seven Grandfather teachings, were concepts that most people strive to live by. They were life-long lessons of respect, love, sharing and caring and balance. These values were also associated with particular beliefs and practices concerning the environment that were arguably superior to European beliefs about conservation. In sum, there were already Indigenous ways of knowing. It was the shift from folk society to urban society and the subsequent changes in the traditional roles of individuals that fractured the Indigenous concepts of extended village and family networks (Hart,

2009). Also, even on the reserves, these roles were gradually forced to change because of requirements of the Indian Act. These role changes as well as the loss of family and clan connections make it difficult for many Aboriginal individuals to help themselves now. This shift, compounded by the modern concept of paid helping roles as a part of the colonial system of free market capitalism, has changed the way Aboriginal people are able to help others in their urban or reserve communities (Hart,2009). The way that the dominant class in Canadian society has defined and controlled the social work arena is a part of the larger hegemonic structure that structural social work and Indigenous beliefs work to break down or sustain themselves in. Thus, the purpose of anti-colonial approaches is to work against the hegemony of defined social work practice and of the helping professions (Hart, 2009, Sinclair 2009 and Waterfall, 2003).

b. Social work during the period known as 'post-colonial'

In the above section I argued that social work was built around Judeo-Christian influences from the white European worldview through various aspects of charity work brought into the urban centres and rural communities. Kreitzer (2006), in Sinclair (2009), argues that the focus of social work in the post-colonial context was to help eradicate poverty and child neglect. In regards to Canada's Aboriginal population in this setting Sinclair (2009) argues that their first interaction with

professional social workers was through their relationship as federal 'wards' and as the responsibility of the Department of Indian Affairs (p.20). In the early 1900s "Indian Agents" were tasked with forcing First Nations and Inuit children into the residential school system. Then, in the 1960s and '70s, social workers through provincial government systems tacitly supported by federal policy apprehended hundreds of First Nations children in what is known as the Sixties Scoop. It was during the 'scoop' that Elders from many different Aboriginal cultures called on Aboriginal persons to go into the profession of social work in hopes that they would address the social challenges of their people instead of relying on the western "helping system" introduced through social work practice. Aboriginal social work programs were first implemented in Alberta and Saskatchewan and in the mid 70s Canada's first formal social workers who identified as Aboriginal, graduated into the field (Sinclair, 2009).

Although more Aboriginal scholars now write on Aboriginal social work approaches, Aboriginal and non-Aboriginal practitioners still need to understand how colonization has affected Indigenous ways of helping. Aside from the colonial systems, residential schools, and the sixties scoop, Aboriginal ways of helping have been colonized by simply being discounted or ridiculed through disenfranchisement, marginalization and appropriation (Hart, 2009). Through marginalization and social exclusion Aboriginal people have been considered the problem in society. In other

words, they are the client. As clients you are not considered the one to have the tools to fix your social and economic problems. Aboriginal social workers and other Aboriginal practitioners in the helping field have also been affected by exclusion, marginalization and appropriation (Hart, 2009 and Waterfall, 2003). In particular Aboriginal social workers have had their views and methods of helping not only excluded from the dominant society's everyday practices and worldview, the Aboriginal way of helping is marginalized as it is ignored in mainstream social work curriculum. Mainstream social work curricula are based on western values and individualism and the ideas of achieving individual competency, whereas Hart (2009), Sinclair (2009) and Morrisette & Morrisette (2003) argue that Indigenous ways of helping focus on the collective and the way individuals fit into their community or circle. Duran and Duran, (1995) in Hart (2009) further point out that the problem is bigger than the exclusion of Indigenous approaches and methods. It is the absolute ignorance of and scepticism accorded to Aboriginal methods opposed to the absolute faith in western approaches that is problematic. This means that an Aboriginal social work student in most Canadian schools in a structural social work program will find that Aboriginal approaches are taught separately from the base curriculum and are not integrated in western ways but posed as an alternative. This is equally damaging to the Indigenous student. When I was picking a program it appeared that all of the structural schools that

have not designated themselves as an Aboriginal program offer a course in Aboriginal approaches or native approaches. It is just a small component of the entire curricula rather than an embedded theme. However the instructors could indeed make space for discussion around different ways of helping when possible.

Waterfall and Maiter (2003) and Waterfall (2003) are sharply critical of the fact that Aboriginal social workers and scholars have to succeed off their communities' marginalization, exclusion and general misfortune; their success is part of the act of colonization. Dei & Asgharzadeh (2002), Waterfall and Maiter (2003), Waterfall (2003), Sinclair (2009) and Hart (2009) all argue that by positioning colonialism as a persistent on-going process of domination while utilizing anti-colonial approaches Aboriginal scholars and workers can challenge the western framework and resist further exclusion, marginalization and appropriation.

c. Colonialism and Structural Social Work

Colonialism, Mohanty (1988) argues, reproduces western (European) structures and knowledge among the colonized and non-western knowledge and structures – familial and legal systems, for example – are seen and judged through a Euro-centric lens. In other words, structures such as the familial, legal and cultural are in fact judged through Eurocentric thought. Because structural social work is

based in Western thought and knowledge it follows that scholars of structural social work will also assess “other” systems from a western, mainstream perspective. Scholars of structural social work can consider that since the discourse and accreditation of the profession is located within western systems then it too judges “other” systems from a colonial western mainstream position. Allan (2006) points out that social work’s involvement with Aboriginal populations is a reflection of its complicity with government policies and practices which were and are embedded in colonial acts. These impacts of colonial relations continue to exist in the lives of Aboriginal people as assimilation processes through racism, exclusion, marginalization and oppression (Allan, 2006, Baskin, 2003 and Waterfall, 2003). A good example of the complicity of social work practice with government colonial processes is the role of social workers in the child welfare system.

The oppressive impact of Residential Schools and the Sixties Scoop was mentioned earlier to show how the state continued to act as a colonizing power within Aboriginal communities. This has not stopped but instead has become more systemic, embedded in the larger structure, such as the Canadian education system, the political system and the child welfare system. Currently, First Nations, Inuit and Métis children are overrepresented in the child welfare system. Despite the fact that Aboriginal people only make up a small percentage of the overall population, studies have shown that their children are over represented

in the child welfare system (McKenzie & Morrisette, 2003 and Waterfall, 2003). Allan (2006) argues that as a part of decolonizing social work practice, the profession as a whole:

must undertake to move from a state of complicity with this status quo oppression, to action in order to dissemble it. This movement requires the bringing forth of new ways of thinking into social work education, research and literature to enable social work practice capable of resisting oppression and recreating the role of social work in the lives of the oppressed (p.259).

d. Social Work and Anti-colonial Thought

In order for structural social workers to learn to resist applying colonial processes in Aboriginal communities they must consider Frantz Fanon's process of decolonization as a starting point when working with oppressed populations. For example, in what appears to be defiance by the Aboriginal client toward contemporary society or assimilation is actually resistance to the colonial process in neo-liberal times. "[T]he colonized, in the face of the emphasis given by the colonist to this or that aspect of his traditions, reacts very violently" and seeking to change their worldview in Aboriginal clients can, "weave a whole universe of resistances" (Fanon, 1959, p.171). Without advocating violence but encouraging resistance Dei and Asgharzadeh (2001) agree that social workers applying an anti-colonial discursive framework can, "question, interrogate, and challenge the foundations of institutionalized power and

privilege, and the accompanying rationale for dominance in social relations" (p.300). The anti-colonial discursive framework "is an epistemology of the colonized, anchored in the Indigenous sense of collective and common colonial consciousness" (Dei and Asgharzadeh, 2001, p.300). Even though there is an understanding in structural social work that the government structures have sought to serve the economic and socio-political interests of the dominant classes, which has led to the stratification of Aboriginal people, the anti-colonial discursive framework recognizes that somehow through the collective will of Indigenous people they have, to some extent, survived colonial encounters. In other words, the power and discourse are not solely owned by the colonizers (Dei and Asgharzadeh, 2001). The way in which social workers can apply this theory to practice is by first understanding anti-colonialism and to challenge how colonialism seeks to sustain their way of thinking by fostering the dissemination of Eurocentric thought. Second, by using the Aboriginal worldview and Indigenous knowledge, "the anti-colonial theorist seeks to work with alternative, oppositional paradigms based on the use of Indigenous concepts and analytical systems and cultural frames of reference" (Dei and Asgharzadeh, 2001, p.301). Battiste (1998) concludes that Canadian structures should exist in conjunction with Indigenous knowledge and culture without being paternalistic or condescending and by not assuming superiority. McKenzie & Morrisette (2003) agree and suggest that social workers use

a strengths based approach to avoid condescension. The last section of this chapter will review whether it is possible for social workers to do that within anti-colonialism.

e. Social Work in anti-colonialism

One of the key elements of social transformation under anti-colonial approaches is the rejection of colonial power and the restoration of local or Indigenous control. Dei (2000) and Waterfall (2003) explain that anti-colonialism is the understanding that colonialism is a persistent and dominating process that seeks to entrench itself in the Indigenous collective consciousness and worldview in order to retain social and political control over Aboriginal land, resources, beliefs, ways, values and culture. Michael Hart (2009) argues that Aboriginal social work in an anti-colonial arena would seek to regain social and political control of those Indigenous entities for Indigenous people by Indigenous people. In the concluding chapter I will discuss whether anti-colonial approaches with Aboriginal people can be practised through structural social work.

CHAPTER TWO: LITERATURE REVIEW

I. Primary Literature

For this thesis I have compiled information on practice and policy from Canadian, American, Australian and New Zealand literature. The main literature used is broadly on anti-colonial approaches to social work practice. Little has been researched about the impact and views of Indigenous social workers who are inside the very system that caused oppression, and even less on the Aboriginal social worker and on structural social work. Most of the debate around theory has been on how to work successfully from within using structural social work theories and anti-oppressive practice. Little is available on how to rectify the power imbalances caused by historical acts of oppression by the profession, such as those committed by it in the child welfare and penal systems, and to some extent the marginalization of overall Aboriginal health all of which are outcomes of colonialism. In terms of the future, social work scholars will look to emphasize the impact of colonization and racism in order to resist the dominant structures.

Most of the current literature by Indigenous social work scholars and researchers discusses the Aboriginal perspective on social work and approaches to anti-colonial theories. However this literature does not discuss whether the anti-colonial approach is a part of Aboriginal social work practice. In other words it does not directly name the perspectives as “anti-colonial”. The current literature on general social work practice

and anti-colonial approaches demonstrates that if scholars of structural social work consider that the discourse and accreditation of the profession is located within western systems of knowledge then, as a profession and practice social work judges “other” systems from a colonial, western mainstream position. As mentioned previously social work practice has been complicit with government policies and practices which were and are embedded in colonial relations. Because social workers are significantly involved with the Aboriginal people, social work practice and education must find approaches that will catalyze social change and transformation of the individual client and in turn the broader Aboriginal community in order to undo previous colonial actions (Allan,2006). Colonial relations continue to permeate the lives of Aboriginal people. Their impacts can be felt through processes of assimilation, through racism, exclusion and oppression (Allan, 2006, Baskin, 2003 and Waterfall, 2003). Anti-colonial researchers argue that once the impact of colonial relations is unmasked practitioners and scholars can unpack and reposition themselves in de-colonial thought through using an anti-colonial framework with practice.

Literature on the anti-colonial approach recognizes and encourages Indigenous and cultural worldviews as important for conceptualizing day to day experiences of Aboriginal people and their social interactions (Dei & Asgharzadeh, 2001). Additionally, Baskin (2003) links the idea that structural social work practice can understand the oppression of

Aboriginal people through the impacts of colonization by further understanding their worldview as practitioners. Using an anti-colonial approach, practitioners will become aware that conventional social work practice is situated within the dominant paradigm and thus conventional social workers benefit from the process of colonization through the creation of dependent clients and prestigious positions of employment (Battiste, 1998, McKenzie & Morrisette, 2003, Razack, 2002, Shahjahan, 2005, Waterfall, 2003 and Waterfall & Maiter, 2003). In conclusion I should point out that the preceding literature reviewed includes service providers who identify as Indigenous, which demonstrates that some workers do literally name anti-colonial practices and some do not in their research. However, those researchers that do not name the approach as anti-colonial does not indicate that the concept is not anti-colonial.

II. Additional Literature

Since the interviews in this thesis explore what kind of work a worker actually does, I will also rely on literature that discusses the approaches to social work practice and any past qualitative studies which directly inquire into social workers' opinions about how they classify their work as either successful and valued or unsuccessful. However, as stated above there is little research that looks at either the

racialized or the Canadian Aboriginal social worker except in the case of First Nations and to some extent Métis workers. Hart (1999), McKenzie & Morrisette (2003) and Sinclair et al. (2009) have many articles on the importance of using Aboriginal perspectives with respect to Aboriginal workers. However, most are based on First Nations teachings, but are not specific to any individual culture.

Ashford's and Timms' (1990) case study looks at how the values underlying the social work profession go hand in hand with practice, in that by workers understanding the value of their work, i.e. "the goods of practice", they then understand the impact of their work. This could be useful in deciphering just how Aboriginal workers might view their work and through which perspective. The Ashford and Timms (1990) study also compares a satisfying experience between worker and client with a frustrating one, explaining there are critical value differences in each case. Social work values are important to my thesis as the Aboriginal community and their workers value different aspects of the client worker relationship and experience (McKenzie & Morrisette, 2003). The Ashford and Timms study argues that sometimes social work regardless of the goal will value a relationship and classify the situation as successful. This happens even if the original goals are never met. Their study also discussed how social workers not only value their practice but the actual helping relationship they have with their clients. Some workers appeared more satisfied when the client conformed to and appreciated what the

social worker did because it then satisfied the value system upon which the intervention was based, and to which the social worker subscribed. However, many other workers did not see that as the only reason to value their work.

Case management as a method has been argued as an important part of the role of the social worker (Gibelman, 1995). Consequently, I was interested in my research to see how Aboriginal workers proceed in case work and to see what kinds of helping skills they employ to find out if they agree with the above statement. This is relevant to the theoretical perspectives that may be employed by the Aboriginal worker which, according to Hart (2009) and Allan (2006), set the Indigenous worker apart from the mainstream one.

In this thesis I demonstrate how social workers define the problem and solution and in what context, as a colonial act or otherwise. Over thirty years ago Noel Timms (1970) demonstrated that social problems dealt with by using solutions from other older historical frameworks were not useful for workers helping “othered” groups because these approaches failed to understand the social conditions of “others”. This was due to their lack of a progressive understanding of social issues. In order to understand a society, a social worker must treat each group as new, separate and diverse. These writings about the historical roots of practice help support the concept of anti-colonial approaches by allowing workers to move past these former roots and place themselves in a

contemporary context which anti-colonial scholars argue is necessary.

Since I began my career in social work there has been a noticeable increase in interest and concrete recommendations made for agencies and organizations to create culturally appropriate and relevant services in Ontario and Canada as one way to restore the socio-economic and health status of Aboriginal peoples. However whether these ideas are adopted or not by an agency is another story. It is important to raise these different approaches, such as “the use of self” and “cultural competency”, because they are approaches that are believed to facilitate work with Aboriginal people. There is a significant literature that discusses the mainstream approach of cultural competency for the last fifteen years that is easily accessible and part of structural social work education.

As more practitioners from mainstream social work became interested in servicing the diverse Canadian demographic there has been an increase in academic and practitioner articles on ways to use culturally relevant ways to work with ethnic and racially diverse people (Thomas, Bernard & Moriah 2007). As a result there is now a considerable literature that focuses on understanding “cultural competence” (Este, 2007). Much of the literature looks at social work and Aboriginal social workers and includes the work of Raven Sinclair and Michael Anthony Hart in *Wicihitowin: Aboriginal Social Work in Canada* and Brad McKenzie’s and Vern Morrisette’s various articles.

The latter researchers write specifically about diversity of cultural expressions and about various methods for workers to work with these diversities. Sinclair and Hart discuss anti-colonial approaches in relation to Indigenous ways of helping.

The literature examining anticolonialism and education is more widely available than that on anti-colonialism and structural social work. However, it is possible to find information on the Aboriginal perspectives on social work and indigenism, and indigenism and anti-colonial approaches. Hart (2009) defines indigenism as taking an anti-colonial stance and that it is a progressive way of opposing colonialism through an Indigenous worldview. A key part of the anti-colonial approach is knowing the history of those who have been oppressed. This complements indigenism in that it is important to understand Indigenous history including its colonial and post-colonial components. Hart (2009) argues that anti-colonial approaches are needed in order to appreciate how the dominating oppressive force of colonization still exists, especially in the Aboriginal arena. Hart (2009) does outline some limitations of using an "Aboriginal approach" to helping. Waterfall (2003) criticizes social work discourse in that it is written in English and created in the western paradigms. Both scholars agree that despite the effort to create an Aboriginal perspective because social work is a part of western belief and discourse it will always limit the success of the worker and community member. In fact the word Aboriginal itself reflects this

argument in that it is a western concept and English word.

There is considerably more literature and studies on cultural competency and social workers than on anti-colonial approaches. However, one gap appears to be that the views and experiences of racialized workers on cultural competency and practice have not yet been substantially researched, especially in Canada. In fact, a good example of this is the National Aboriginal Health Organization's (NAHO) agency guidelines on culture and health. NAHO has stated that it promotes cultural safety and practice first before other approaches when working with Indigenous communities, (NAHO, 2006). Yet, if social work education programs continue to teach cultural competency then it is important that more research be done around this area to expose its limitations. The remaining literature reviewed in this section is sparse in regards to specific attitudes and views of Aboriginal workers as it mainly speaks only to mainstream workers in cross-cultural situations or it demonstrates the inadequacy of culturally competent services available to Aboriginal clients. There does, however, appear to be some research on the problems with mainstream workers and the theory of cultural safety. It is useful to this thesis to review some of these documents as culture and the connection to culture as a part of practice came up in many of the interviews.

In striving for cultural competence Hilary Weaver states that a "recognition of the profession's ethnocentric foundation" is necessary

(1999, p.217). Cultural competency arose in professional social work in order to evaluate how social workers could move from a universal approach of cultural sensitivity to greater awareness of the power differences between social workers and racialized groups when attempting to work together. As multiculturalism became more important in society so did the problem-solving around how to work with diverse populations, moving from pathology into the view of colorblindness, which did not make the power imbalance any more equal since it still ignored the cultural entities of a client as separate and unique. Este (2007) also asserts that there was an acknowledgement that conventional methods no longer sufficed after the 90s:

The growing realization that traditional approaches were not addressing the needs and issues of individuals and communities from diverse populations contributed to the need to develop innovative and effective methods to address their concerns. As well, members of diverse communities have demanded greater opportunities to become involved in the planning and delivery of services to ensure that services are sensitive and responsive to their concerns. Their involvement was based on the assumption that community members were more knowledgeable about the needs and strengths of their communities (p.94).

The main criticism of cultural competency from a theoretical point of view is that its positioning began with changing the “other” (Allan, 2006 & Dean 2001). There is a tension between implementing skills from cultural competency and the use of self “is that it requires that the practitioner use empathy but exclude their own cultural experiences. A

practitioner can unintentionally impose inter-subjectivity when applying the “use of self” (Mandell, 2008). Intersubjectivity of the practitioner applying their feelings and meanings from an experience can cause a worker to impose a “common-sense” value toward their client. However, as much as Mandell (2008) implies that this possibility of countertransference is already known in social work practice, (Allan, 2006, Dean, 2001, Laird, 1998 and Weaver 1999) all agree that it is difficult to separate ourselves as practitioners from our own “cultural baggage” unless we have the awareness to become fully congruent. Este (2007) argues that Canadian social workers need to consider their own cultural backgrounds and their location in society amidst the dynamic nature of culture. The reader would assume this would include Aboriginal or racialized workers however none of these above studies indicate the distinct characteristics of an Aboriginal service provider.

Recent research shows that the overrepresentation of Aboriginal children and families involved with child welfare system, the penal system and the general socioeconomic marginalization of people conforms with the systemic assimilation policies that were prevalent in the past: Residential schools, the 60s scoop and colonization (Brubachen, 2006, Harris et. al, 2007 McKenzie et. al, 2003, Tromce et al, 2004, and Zon, 2004). The main issues that are commonly found in all the literature reviewed surrounding access and service needs of Aboriginal families include: inadequate services, cultural diversity issues

and socioeconomic oppressions (Levitt and Wharf, 1985, p. 126).

In reality most articles on cultural competency and social work discuss the issues surrounding the changing face of multiculturalism in relation to the broader Canadian public. However Aboriginal people have such a specific history and culture that this discourse does not always contribute to their reality (Este, 2007, and Pon, 2009). Este (2007) further notes in his study on cultural competency and social work practice in Canada that for the past five years since 2002 the Canadian Association of Social Workers has supported an emphasis on this theory and have suggested that all diverse groups will benefit from its use:

all groups, including ethnic, cultural, racial, and religious, are entitled to receive competent professional services. Inherent in this principle is the recognition that the values, beliefs, and norms of the client systems receiving services must be taken into account (pp.94).

III. Summary

Based on the literature review I anticipate that the interviews for this thesis will reveal the tensions between conventional methods used in structural social work practice and the practice of Aboriginal social work by Aboriginal service providers. Although several social work scholars have shown that social work methods that arise from colonization are problematic to the Aboriginal client and worker there is no significant body of research that points an Aboriginal worker to solutions on how to work through those tensions.

In order for structural social workers to engage with or change the larger social structures they must expose the domination and violence exerted by those people in power. In general social work practice with racialized groups evolved from the idea of pathologizing “the other”, or “orientalising⁵” clients as being either similar or dissimilar in regards to social work practitioners’ understanding of client behaviour (Allan, 2006 and Dean 2001). It is still not uncommon in some social work practice for workers either to see the client in her own image or not, and if not then they pathologize or make of the client a problem. In sum, I hope that my thesis gives more insight into how to implement anti-colonial social work while still working within the system, so that racialized social workers who work with other racialized and/or Aboriginal communities will have a better understanding of how to combine their own worldviews with social work practice methods.

5

Edward Said (1978) defines orientalising as the way the Europeans divided the world in their perspective as a way to justify colonization. The division is based on the east and the west (or the occident and the orient) those who have the attributes of oriental are uncivilised and those who are occidental are civilised. Said argues that the main flaw of orientalism is that the Europeans began to generalize all Orientals in the western world.

CHAPTER THREE: METHODOLOGY

I. Research Question

This thesis examines and evaluates the relationships between structural social work practice and the anti-colonial approach through an examination of the work of Aboriginal social service providers. The research explores the tensions that arise among Aboriginal social service workers who draw, consciously or not, upon various structural social work theories in their practice while attempting to redistribute power in the urban Aboriginal community. In conducting the research I wanted to understand how Aboriginal workers made sense of the different approaches, theories and practices in their day to day provision of service. This was done by investigating what it is they actually do on the job and the potential effects of their practice on their community members rather than what they understand about the various approaches. In particular, I was interested in determining if Aboriginal workers practice from an anti-colonial approach or how their practice is congruent with or different from more mainstream perspectives in social work, for example, cultural competency.

I expected to find Aboriginal workers who would state that part of their work is about cultural reclamation or cultural competency. These are descriptive terms which in my experience are used to describe approaches in Aboriginal social work. However, I do not expect to find workers who described their job responsibilities as consciously rectifying

or resisting the acts of colonization. In this thesis I found that Aboriginal social workers hold the belief that colonization still negatively impacts them and their communities, due to the current relationship the state has with the Aboriginal population through social work practices such as child protection and case management. This belief was uncovered through interviews with Aboriginal social service workers. By using grounded theory, I was able to code theoretically what my participants said and then found meaning from this rather than from direct statements by the participants (Auberbach, 2003). Rather than measure participants' responses, the thesis seeks information that will reveal through analysis what an Aboriginal worker does on the job and these data and their analysis will represent the research outcome (Auberbach, 2003).

The thesis uses the interviews as a process of storytelling or the retelling of our histories, experiences and work through an Indigenous lens which Linda Tuhiwai Smith (1999) indicates is an important process both in resisting the colonial powers and in avoiding misinterpretation of Aboriginal experiences. In this thesis I set out to answer the question of whether Aboriginal workers are moving toward an anti-colonial framework, or possibly are already using one by realizing that the acts of colonialism are problematic not only for the Aboriginal community member but also for the Aboriginal worker (Waterfall, 2003). This I anticipated would become evident after the interviews thus confirming

which approaches the workers were in fact using.

II. What I am investigating

This is a qualitative thesis investigating Aboriginal social service or social workers who are practising in the field with urban Aboriginal community members and the different theoretical approaches they may use. Sin's (2007) study of the Chinese communities in Montreal could be applied to other non-mainstream or marginalized populations. For example, Sin argues that positivist research is premised on direct observation and experimentation, but this alone may lead to a complete misunderstanding of the beliefs and values of the community or a person being observed. The positivist approach therefore can undermine Indigenous values and understanding which place a value on storytelling as a way of transferring knowledge. For this reason the thesis will rely only on qualitative data and reach out only to Aboriginal workers in order to collect data on their work experiences. In this way I will try to avoid undermining their values and maintain an anti-colonial framework within the thesis itself.

There is also a need for more research on Indigenous and Aboriginal people by other Aboriginal researchers. Baskin (2003), Tuhiwai Smith (1997) and Gilchrist (1997) maintain that very little research has been done on Aboriginal or Indigenous people by their own Aboriginal community. Hart (2009), Baskin (2003), Cochran et al. (2008)

are concerned that although there are more social work researchers and educators who are graduating from Indigenous programs and/or Aboriginal peoples coming out of the mainstream system there are still significant moments where the values of the western academic system conflict with the Indigenous way of transferring and acquiring information. Cochran et al. (2008) discuss how it is important to understand that when looking to develop projects, such as an academic thesis, that the researcher determines what kinds of methods pre-exist in the community. With reference to this thesis, the method of narrative and storytelling is used in the urban Aboriginal community by front-line workers and community members.

The interviews were used mainly to determine whether anti-colonial approaches have a role in these workers' practice. This research is important and relevant as the complexities of the effects of colonization are still being felt despite the fact that Aboriginal groups have achieved a so-called level of self-government. Scholars such as Tuhiwai Smith, (1999) have argued repeatedly that "the reach of imperialism in our heads challenges those who belong to colonized communities to understand how this [meaning the outcomes of colonization] occurred partly because we need to decolonize our minds, to recover ourselves, to claim a space in which to develop a sense of authentic humanity" (p.23). This is often referred to as post-colonial discourse and extends into practice by way of theories often used in structural social work practice

including anti-oppression, cultural competency and possibly anti-colonial theories.

There is also the question of the role of Aboriginal workers within the dominant system and that is why I interviewed self-identified Aboriginal workers only. Waterfall (2003) and Smith (1999) explain that it is important that as Indigenous workers we reflect, consider the conflicts, privilege, and experiences that we have in relation to practice. Smith (1999) argues that history is often still told from the point of view of the colonizer and therefore it is important that to be congruent with an anti-colonial approach it is preferable that those affected by acts of colonialism tell their stories.

III. Purpose of Interviews

Interviews are the most significant part of the thesis as they allowed workers to tell their own histories and experiences. I interviewed eight prominent front-line Aboriginal workers who also work with urban Aboriginal community members. Through qualitative data analysis of the interviews I determined categories to code through use of grounded theory through which I found common themes and patterns used by workers (Auberbach, 2003). These patterns were then analyzed further and discussed in the context of current discourse as well as definitions of the different approaches used in structural social work practice. The focus of the interviews was to investigate what Aboriginal workers do and say in practice when helping members of their urban community and

what approach by inference was being used. In asking these questions I thought the patterns revealed would or would not demonstrate tension between theory and practice with the Aboriginal worker.

IV. Sampling procedures

Silver et. al (2006) demonstrate that in order to have effective work with Aboriginal groups it is important that agency and community both have invitations in order to facilitate participant buy-in. This is done first by speaking with the agencies, their managers and employees. I found participants by contacting the different local urban Aboriginal Agencies by phone in the Ottawa-Gatineau region and asked to put up posters in a staff area. I also asked the director of the agency to recommend participants. A small incentive was offered to those who participated in the form of a coffee card. Through the initial interviews I used the snowball approach to find the remaining participants. To avoid any conflict of interest I excluded any employees who worked at the Wabano Centre for Aboriginal Health in Ottawa during the time I was also employed there which includes the year 2008 and January to July 2009. Interviews were conducted outside client hours depending on the schedule of each agency. I found participants from four urban Aboriginal agencies in the city of Ottawa which all offer different services to the community. The four centres were: Minwaashin Lodge an Aboriginal women's support centre which offers service under the context of

reclaiming the wisdom of our First Nations, Métis and Inuit teachings, the Odawa Native Friendship Centre where many different cultural and traditional programs are offered to Aboriginal people who need support in an urban environment, The Ottawa Inuit Children's Centre (OICC) who offers a full program for Inuit families that seeks to retain the Inuit culture in the urban setting, the Wabano Centre for Aboriginal Health which provides holistic, culturally relevant health services and programs to urban Aboriginal people by using traditional healing practices.

Interviews with Indigenous groups historically have influenced participant buy-in and trust with researchers. As mentioned in the section "My interest in the subject", I am a person of Indigenous descent and therefore may have biases through my own anti-colonizing process. I needed to consider the privilege that colonization has given me. For example, growing up in a white middle class area with high quality education and the opportunity to attend several university programs, could influence in part how I interpreted the data collected. I understand that how I see myself is not the same as an Aboriginal person who has grown up under the circumstances of colonial legacies, e.g.) poverty, violence, intergenerational trauma, etc. A much more inclusive list of ethical considerations was presented to the Ethics Committee.

V. Interview guide

The interview guide was based on a 30 to 45 minute period to ask a set of open-ended questions through which I could investigate whether or not their practice methods subscribe to any particular theoretical perspective. I recorded the information by typing the participant's answers on a laptop. My questions for the interview were as follows:

1. *What is your job at the current agency you work for?*
2. *What is your role, what do you do at your job? Describe what you actually do at your job.*
3. *Who are you seeing or serving as a client in this community?*
4. *Can you briefly describe a recent successful or satisfying case where you had to advocate or help your client in a difficult situation? What was the issue you were dealing with? How did you help that person? What was the outcome?*
5. *Can you briefly describe a recent unsuccessful or frustrating case where you had to advocate or help your client in a difficult situation? What was the issue? How did you help that person? What was the outcome?*
6. *Case study question, how would you have or had advocated or designed a plan of care this client or clients:*

Wanda, a young Ojibwe mother who lives in the city, recently gave birth to a baby girl. This is her first baby. Wanda took care of herself during her pregnancy and is excited about bringing her baby home. Wanda managed to reduce her cigarette consumption from two packs a day to ten cigarettes while she was pregnant, she did not drink or use drugs during this time either. She plans to smoke outside now that baby is here. She attended mainstream prenatal classes with the father of her baby for the last four months of her pregnancy. He has since gone back to his home reserve but plans to return later this year. Wanda breastfed in the hospital and she plans to continue this at home. The baby is considered healthy in all respects. While at home Wanda will have many supportive family members including, her

grandparents, two aunts, her parents, two sisters and a brother. They all plan on supporting her as a new mother. Still Wanda is considered a high-risk mother because she is living in an urban setting and is only seventeen years of age. While in the hospital the Children's Aid Society was called in by the hospital social worker. Her doctor has also referred her to the City's Healthy Babies Healthy Children program and only discharged her because she agreed to home visits from them and said she would attend a parenting course.

- 7. Do you believe that because you self identify as an Aboriginal person that you have a different way of practicing social work than someone who is non-Aboriginal? What makes what you do Aboriginal? How is it different from what someone non-Aboriginal might do? Could someone not Aboriginal learn to practice social work in the same way you do?*
- 8. How does your experience as an Aboriginal social worker affect the work that you do in the urban Aboriginal community? Does being an Aboriginal person yourself affect your work?*

CHAPTER FOUR: FINDINGS AND DISCUSSION

I. Introduction

I received stories in the form of interviews from two Inuit, one Métis, and five First Nations workers who are practising in social work settings in the Ottawa urban area. It is important in this thesis to talk about the way that Indigenous knowledge was and is transmitted to and from Aboriginal people. Before speaking directly about the findings in this section I will also briefly discuss storytelling and story-listening as a way of conveying personal and professional experiences to academic researchers. I would also like to acknowledge that the stories I received from the participants are honoured as gifts. Baskin (2003) and Anderson (2000) write respectively about the different ways Aboriginal researchers and people have shown, through storytelling, resistance in the past to the dominant society's agenda. Not surprisingly just as there is discourse that is western there are also methodologies of research that are valued and used more so by the dominant society. In this sense, the act of drawing out stories and telling stories as a research method is an act of anti-colonization. Anderson (2000) proposes in her research that Aboriginal women in particular need and can realise self-identification through storytelling in a four-step process that allows them to reclaim who they are and how their experiences and histories can be used as positive examples. The same kinds of desired outcomes applied to the stories in this thesis. The outcomes of the workers' experiences may not

have had value in mainstream society but for Indigenous workers the insights will be passed down and used among other workers as a way to reclaim an understanding of how helping is achieved by Aboriginals in a modern context.

Although participants were asked a set of questions, and each meeting was set up as an interview, as an Indigenous researcher I am aware of some of the critiques and possibilities for employing unethical methods around the research of Aboriginal people and groups. There is no denying that Indigenous people are the most researched group (Rigney, 1999 and Cochran et al. 2008). Historically Aboriginal people in Canada would transfer knowledge and experiences through stories and oral legends not through academic journals or other written works. In fact, in the past the more that Aboriginal groups were researched the political objective of the colonizers were often made possible (Cochran et al. 2008, Hart, 2009 and Smith 1999). Collaboration and understanding of this history are necessary when researching Aboriginal issues. Therefore the questions were as open-ended as possible. I also did not take notes but listened to what the participants were saying. I did however record the voices so I could re-listen to their stories and experiences in order to re-record their histories as a part of the anti-colonial approach (Smith 1999). I am aware that my own worldview as a racially diverse woman and social worker informed how I interpreted the stories and their themes. I am locating myself in this for any potential

biases and because this is the way I was taught by my Elders and Elders from the urban Aboriginal community. This is necessary when working in an Indigenous and anti-colonial framework as the following quote observes.

Within many Indigenous communities we begin by Identifying ourselves: who we are, where we are from, who our ancestors are. This identification allows people to know who we are, which, in turn, helps to establish trust (Absolon & Willett, 2005) as people can then identify the worldview from which they speak. The practice extends into research. Indigenous scholars and researchers identify themselves within the research (Lavallée, 2009).

All of the workers I interviewed were hired because of their cultural identity as Aboriginal and because they all work with the urban Aboriginal community. In addition, some of them were also hired because of their personal experiences, formal education or the combination of both. Throughout the interview process it became apparent early on that there were major themes arising, all of which had to do with anti-colonial approaches. These included shared experiences and the worker/community member relationship, boundaries as a worker, resisting the process of the system, the experience of identity racism and Indigenous knowledge. As implied in sections of the thesis, once an individual or group is able and willing to identify the colonial dynamics that still exist in our country and society, applying an anti-colonial approach becomes clearer (Dei and Asgharzadeh, 2001). Anti-colonial is to oppose anything that is dominating or imposed and is helpful for

workers who want to resist any type of western domination. This was indicated in many different instances via the interviews. Some indicators found were: remembering one's connection to loss due to colonization, one's connection to land, territories and reserves, the rejection of essentialism and racial boundaries, and the acknowledgement of social inequities. There were also instances of social work practices that fit well with anti-colonial approaches, such as the use of self. The use of self is based on the model of therapist Virginia Satir. The model helps uncover and develop ways for the social worker to bring internal, unresolved issues to the surface. For example, when a worker looks at her own family origin or construction she will be able to make better choices and help increase her own self esteem, which in turn will help clients (Lum, 2002). Surprisingly, many of the workers identified the systems that they were working in as counterproductive to Indigenous ways of being. Almost all the participants believed that they worked differently from mainstream workers. However, there is no way to compare whether this is true or not without further research.

As a way to maintain an anti-colonial approach and to resist western ways of transferring knowledge I have chosen to highlight actual segments of stories given to me by the participants. The italicised words are all different stories and perspectives from Aboriginal front-line workers. It is important to me to honour the words of generous storytellers.

II. Boundaries and Relationships

a. Boundaries as a Worker

My role isn't limited to the title, because I work in a community that I am a part of. This is very different if you look at mainstream life because you do your job and then go home your home life is much different. When I go home my family and community are all people who use services here. The community is my family, whether I am at home or at work I am in multiple roles. In some ways this crosses boundaries, this can be an advantage or a disadvantage. I go home and I will get a call from a parent, this would never happen in a mainstream organization. Would you ever get the personal phone number of a CAS worker? Well a lot of people know me because this community is the one I grew up in clients know that if they ask one of my sisters for my number and they will get it, it's unavoidable and will never stop. That's what I actually love about being here in this work.

Within the interview guide there were questions around Aboriginal identity and how this affects the work that Aboriginal workers do. These questions often yielded responses about boundaries. Also when workers were asked about successful cases, the answer reflected whether or not there were challenges around boundaries. Surprisingly every participant expressed the same value around boundaries, transference and counter-transference. In fact it was the differences in the ways that the Aboriginal worker viewed and used boundaries that was the most anti-colonial of any approach taken within their agencies. Most workers had mobilized or organized themselves to be able to deal with unique situations that require deliberate and unintentional blurring of boundaries. All participants believe that that was necessary to practice Indigenous social work and that for the most part it was unavoidable. There were general examples given such as the participant statement listed above, to very

specific examples such as meeting community members for coffee or dinner outside the normal hours of operation. All of these examples given by the participants are a part of their Indigenous Knowledge. One interesting moment in the interviews is when a participant told the story about attending a funeral. The participant expressed that it was not only completely 'normal' for a First Nations worker to attend a community member's funeral but the Indigenous thing to do.

There was a funeral for one of our clients; it was mostly attended by workers which was surprising for some of my non-native and native counterparts. Realistically this was her family because of her life circumstances these are the people who were in her life mostly. I think native workers need to remind themselves of where some of them came from.

Not only does the worker feel like this boundary is normal to break or blur but the fact that it is mostly attended by social workers completely understood in a familial or communal way. This worker perceives the whole urban Aboriginal community to be a part of the late community member's family simply because they are Aboriginal. The Aboriginal worker focuses on the individual but also considers the current situation in the context of family and community.

Looking at boundaries especially, I am completely aware of boundaries mine and the agency's. I do think there are times when we need to put those aside; I don't feel like my non-native co workers can really get behind that.

All eight workers interviewed believed that they needed to blur or

“put aside” these boundaries in order to work in a caring way. Most workers actually believed this was one of the top reasons that set them apart from non-Aboriginal or mainstream workers. The most anti-colonial characteristic surrounding participants’ views around client -worker boundaries were that in most cases they were aware of what boundaries they were breaking: their own limits, the agency's limits and the limits of social work curriculum. This is anti-colonial because the act of boundary breaking is in complete opposition for the most part to what is taught in social work curriculum. The Indigenous workers had control over their work and the Indigenous community member has a chance to equalize the power that was and is taken from them in a colonial system.

Boundaries can be controlled because when you are out in the community you don't often have to think about what the service is going to be, a mainstream person would always have to interpret this as a service. Not overly concerned about transference or counter transference because of this ability to separate an act in my community and an act of providing a service.

Since the workers all worked within an Aboriginal agency many of them believed that they had methods of controlling any situation that could potentially lead to inappropriate relationships, transference or counter-transference. Half of the participants talked about the trust they had built and how because of this trusting relationship the worker believed the community member wouldn't betray them by taking advantage of them or over stepping a boundary. In the case mentioned above the worker gave out her/his home 'phone number. S/he felt that it

was unavoidable, even a part of an obligation in belonging to a community. In another example, in an interview a worker talked about showing affection toward community members, who were young Aboriginal children. The worker explained that s/he was not afraid of losing control of the situation and didn't need boundaries as a protective measure because s/he believed it was precisely what the children needed in order to heal. By denying the children affection would have meant denying them their own healing. This worker particularly believed that having too many boundaries meant that every contact made with community members would be a "service" whereas healing from the Aboriginal worldview meant connecting to the community and doing something because it is the right thing to do not just because the worker is a paid expert.

b. Shared Experience and the worker-community member relationship

Yes being Aboriginal I have a different way of practicing, they are all my aunts and sisters they are all my family, that's why I talk to them with respect. I am not afraid to open up about myself and give. In mainstream they don't have this relationship; it's hard to gain trust when you don't open up about yourself and your experiences.

According to Wendy Lum the use of self, and the exploration of a worker's own family origins and social constructions are compatible with anti-colonial approaches, Lum argues that is one of the most important aspects of being successful in a helping profession (2002). It is compatible with Aboriginal workers since they reflect upon their own ancestors' ways and their connections to the family and community and

use this knowledge as ways to inform problem solving and choices in their practice. In keeping with the use of self in the anti-colonial approach each person spoke about their family and their own origins as Aboriginal people and how that has shaped their practice. Each person spoke about the relationship and how they used their own experiences to help those in their community and agency. The connection that Aboriginal workers have to their own sense of loss of history, culture, land and identity helps them to connect to the community members to whom they are giving service. The relationship goes further than just trust; it means that for Aboriginal social workers there is a need to connect on all levels with their community member. This connection is what is valued in the eyes of the worker and probably in the eyes of the community member. During the course of the interviews each worker was asked to talk about a successful time or case and this nearly always yielded a response about how it was the connection with the community member that initially gave them a sense of satisfaction, whether the outcome was great or not. For example, in cases where the parents had their children apprehended the worker would see it as a success if the parents trusted the Aboriginal worker enough that they would come back to the centre and ask for help, even in their worst of times. When asked about unsuccessful cases respondents still mentioned the connection in the relationship. All eight respondents said that it was the system or process that failed them in the specific situation but that the only good

thing was the connection made with the community member. Aboriginal workers do not believe this connection is possible in mainstream organizations. I think that the connection is not on the same level in a mainstream organization, it is more about empathy where as in an Aboriginal organization it is important to relate. They relate on more than one level. There is a blood, community, cultural and historical relatedness but the worker also has a reference to many of the experiences that the community has. This relatedness is either because the worker experienced the exact same thing or they have a significant connection to the community member and their issue.

I think mainly it's hard for a mainstream worker to relate to an Aboriginal one because we are community orientated; we are not afraid to share; we are open to that; we have a whole different way that goes way back to colonization and understanding that history. A lot of people who aren't Aboriginal don't understand it; it's on a blood level which is hard for other people to understand and hard to explain.

The workers interviewed were all working in urban settings. However, they see the urban Aboriginal community as its own community. Most of their relationships formed by the Aboriginal workers were also based on how connected they and the community member were to the urban Aboriginal situations or challenges. The Inuit worker in particular saw "clients" as not only community members but anyone who is connected to Ottawa's urban Inuit community. Therefore it could be an educator, foster parent or even an entire school. For Aboriginal workers the "client" is not just someone mandated to use a service, it is anyone who has a

relationship or connection to the people, to family members, to workers and to the broader community that the “client” interacts in. This is a completely and intentionally inclusive relationship. This isn’t necessarily the case in a mainstream community.

If you are connected to the culture for example, if you have lived in the north or have an Inuit child you still can be at the front of our issues. So if I was not Aboriginal I would want to gain the respect of the community and think about how I connect.

Shared experiences almost as much as cultural or racial identity appeared to be just as important to most of the Aboriginal workers. Many of them spoke of their own connections and shared experiences with community members and many talked about “others”, such as support workers, educators etc., all having a connection to the Aboriginal community. Most workers spoke about having more trust with those from outside the community only if they had an experience or connection to the people or that particular community. It is thought that if you have shared experience then you may understand what kinds of mechanisms are needed to fight oppression. In the story below this Aboriginal Social Worker spoke about how she was able to intervene in a life-threatening situation where a community member could have been marginalized beyond help. What made the difference she explains is the fact that their relationship was more on an equal level and there was trust and connection.

One of my clients recently decided she wanted to stop taking her medications which she had been on for more than 25 years. She deteriorated quite quickly and we encouraged her to access services, fill her prescriptions and try to eliminate any barriers of why she couldn't access services or take her Rx, ex) money. She still chose not to and at the end of the day she became a safety risk for me to continue working with her. She was actively homicidal and suicidal so providing outreach services didn't provide safety at all. She became too unpredictable to provide services to as an outreach client. When someone comes in you have the panic button or other staff, or a transport vehicle available to you. She was very trusting with me because she believed her issues were related to trauma more so than mental health and I supported her, we had a connection , we had a different relationship then she had with other workers at other agencies, we were on more equal playing field, more on her level, we related, she trusted me.

Because of the overwhelming and unique sense of loss experienced by Aboriginal people there were others that felt the main connection was that of their shared racial and cultural experiences of oppression. It is more important for some workers that they have shared oppression. When one participant was asked specifically what it meant to have a shared experience with the community and how does it help their work as social worker they spoke about the connections they had through their more traditional family members.

Staying connected to other Aboriginal people have given me that, meeting my mother's friends and friends at school, traditional family members, I think just having that knowledge and exposure has made me more adept.

Every example given in response to this question and throughout most of the interviews centred around an Aboriginal approach to helping which focuses not only on just the person seeking help but also on those

offering it. Hart (2009) explains the importance of the helping relationship and the use of indigenism and anti-colonial approaches to social work:

Helping processes are focused on the relationships of the people being helped, including the relationship between the people seeking help and those offering help. The people offering help are not the experts. Instead, there is a focus on speaking from the heart, which suggests speaking with personal emotional experience, intuition and honesty. Finally the helping process is a shared experience, thus the experience of the helping process is relevant to both the life of the person seeking help as well as the person offering help (p.37).

III. Systems and Processes

a. The process of the system

I think what is most frustrating for me is when you can't do anything to help a client because the process gets in the way.

Five of the participants spoke in detail about what it meant to have an unsuccessful situation or a moment when they were challenged to the point of frustration. In most instances they did not mention the individuals' or community members' actions or responsibilities in the failure. What was talked about was the specific barriers in the mainstream system and the interruptions in healing that were caused by the system. For example, some workers interviewed worked at one point with community members who were also engaged with the provincial health care system or the Children's Aid Society. What made their work

difficult was trying to connect their agency's way of working with the mainstream one.

Because I recognize that certain process is a part of the dominant system I understand what is happening. I really believe that being involved in the circle of care process that we are trying and, that the dominant system acknowledges that they have been doing things wrong and the way they have been treating families is no different than residential school it's just the continuation of colonization, and saying no wonder this is happening. I really believe they are trying.

One worker from each of the three urban Aboriginal cultural communities believed that the mainstream agencies were beginning to become aware of their mistakes when it came to working with diverse groups in particular, First Nations, Métis and Inuit groups. All of the workers interviewed believed that at this point in time Aboriginal and mainstream organizations still have to find a way to work together. The example of the Circle of Care is a new process that creates a liaison system between the two different kinds of agencies, Aboriginal and mainstream, in this case the child welfare system. This model is a collaborative practice in planning and decision-making with Inuit, Métis and First Nation families involved with child welfare services in Ottawa. The child welfare system has acknowledged that there is an obvious problem with previous ways of working with the urban Aboriginal community in Ottawa. Thus, the Circle of Care is a space where the Aboriginal worldview and family structure are considered during the time the child or family is involved with the Children's Aid Society. The Circle

puts Aboriginal workers right in the process similar to what mainstream agencies would call a cultural liaison. Some of the ways this is done is through using Aboriginal methods of resolution for example one participant talked about having all the workers including the child protection workers from the Children's Aid Society be in a healing circle with the family members.

In some of the interviews the participants told stories about specific structural barriers such as, racism, public transportation or lack of a child care system and how these structural barriers along with having issues in mental health would make it even harder to navigate the process to healing. The participant in this case believed that the process was less daunting because they were able to accompany their community member.

Mental health is a barrier in terms of their racial identity, in terms of accessing service, they need to feel comfortable accessing service, some people have a real hard time advocating for their own needs or they just can't say what they need because of trust to a mainstream person so they just need someone like me to make that call to explain what it is they need. Some barriers are transportation, child care when accessing these services. If I can go with them for example to CAS and make them feel more comfortable, then I really enjoy doing that for them.

The only thing worse for the worker than having an outside system and process stall their community member's progress is when the community member cannot understand why it is happening, but the worker does. On the one hand community members see how quickly and

easily the Aboriginal worker can navigate through the dominant system and work with the mainstream workers. On the other hand the community member has not experienced this kind of success in a mainstream agency. This difference between the worker's and community member's experience of the mainstream system would often lead to trust issues between the worker and the community member or it led to families and clients giving up.

You have to get frustrated with the system because time and time again it sets us up to fail. Having to go from agency to agency I would imagine is frustrating from both sides.

There were countless examples given by the participants about having to be involved with more than one agency in order to gain the healing they needed. This may be similar to the experience a client has in a mainstream organization however, for the community the lack of holism within the agencies goes against their worldview on the healing process. For decades Indigenous groups have told mainstream society and the various government systems that they themselves know what they need to restore and better their social, economic, mental and physical health realities. In my own practice I also struggled with the "hot potatoeing" of client issues and of the lack of integrated services in mainstream agencies. One reason for this is the lack of resources available at particular organizations. Sometimes it is simply racism, in that mainstream organizations do not want to deal with the "urban

Aboriginal problem” or want to take control and rescue Aboriginal people.

When I am most frustrated it is usually because the client needs multiple services and the multiple services don't see eye to eye. If you have been working with a family and you have known them for years, you were at the birth of their child, then that child got apprehended and then the family is required to do extra work. The CAS worker walks in and gives them completely different info then what we have been giving them ex) co-sleeping. It creates hostility between organizations, between us and the client. I know our funders want to know how they are being helped and are we giving them the right referral, but at the end of the day I don't care if it's here or somewhere else as long as what that child needs is what they are getting.

In an Indigenous setting a holistic approach is always preferred (Baskin, 2009, Hart 1999, Hart, 2002, Hart 2009 and McKenzie and Morrisette 2003). Imagine then if this is the system and structure that you are used to and you must now engage with one that you perceive does not understand the connection between your own physical, emotional, spiritual and mental health and your ability to raise your children. It is possible this is because of the different values placed on parenting and on healing in mainstream organizations, and this is what Aboriginal workers are picking up on. Aboriginal workers with similar cases will approach the community member and the situation more holistically rather than as unconnected. Another example of something that I have often found in my own practice is the lack of integrated services and the effect it has on one's ability to heal. In some cases a parent is not able to work because the child welfare system has mandated them to attend a parenting class in one centre during the day and an anger management in another centre at another time and then be

available to an access centre for supervised visits at the other end of town. In many Aboriginal centres workers will try and combine all of the needs of parenting and healing together in one program. This way a community member can still go to work or school plus heal in a way that complements their belief system, sometimes in the end the very system that claims to want to help your family has weakened your ability to be economically stable.

We can still work together while respecting our mandates and boards. It should not matter if I am Aboriginal or mainstream, system integration is important any parent should be able to get what they need for their child without having to go to many different sources. The redundancy is ridiculous and orgs that won't refer to this one and that one won't work with this one, should not become that parent's problem.

Many of the workers interviewed recognized that there is value in working together as mainstream and Aboriginal agencies, and that it is possible to try and create a holistic system for their shared client. It is interesting for future study to understand better what integrated systems and processes mean to each other and whether there is evidence that integrated services are indeed helpful. However the message in the interviews was more about having services that a user can easily navigate and that are less disjointed rather than a one stop shop. It appears that for Aboriginal workers most community members usually end up receiving many services from one location. Workers believe that, by combining services, boundaries would weaken to some extent and both mainstream and Aboriginal organizations would be able to work

together better. Social work approaches, such as risk assessments, would be more accurate if each organization could communicate and refer more seamlessly.

IV. Racism

a. the experience of identity racism

So if I had grown up with the life in Ottawa but minus that connection I don't think I would be or do the position justice it's hard enough from me that people have to hear my story before they trust me unlike someone who is visibly Aboriginal they will trust that person right away, this could be dangerous because that person might not know where the client is coming from. Its racism but it is unavoidable. The people who don't make those assumptions are the people who have been exposed to ceremony and to our culture and I find that if I meet an elder or someone who is on that path they can see right away they don't make judgements right away, but someone who has had a hurtful or difficult experience with mainstream western society may. I think it is a form of racism that we all have it is unavoidable.

Questions 7 and 8 in the interview schedule focused on self-identity and being Aboriginal. These questions yielded discussion and accounts of different experiences of racism. Experiences of particular interest are the ones where the worker-community member relationship displays or encounters tension based on perceived racial identity. It is not surprising that racism exists amongst Aboriginal people, since we have discussed already how racism against Aboriginal peoples is entrenched in Canada's institutions, for example the school systems. It follows that Aboriginal people have learned to be racist toward each other based on the system that has oppressed them; it is an effect of

colonization. Also there have been many other stereotypes that are affecting Aboriginal workers, such as racial essentialism.

The idea that in order to be accepted as Aboriginal within the group you must have particular biological characteristics is another example where the views of the dominant society have over shadowed the Indigenous one.

I asked the teacher to fill out an evaluation form after we were done. One of the questions is "if there is an Inuit child in your class did that presentation help that child?" and the teacher wrote I don't have any Inuit students in my class. After the Inuit child had done the whole presentation the teacher still did not believe that he was Inuit. All because he doesn't look stereotypically Inuit. The next thing was the teacher asked me how long we had been living in Canada. I just laughed it off; I get this all my life. I did point out that teachers should pay attention but most of the time they use this as a break to do paperwork, this teacher only started to pay attention once the children were interested, this is most frustrating.

Workers are also dealing with racism and racial essentialism from the outside as well. In the urban Inuit community a lot of liaison work is done with the schools. Part of their cultural way of helping is by becoming partners and allies with the different non-Inuit communities that are connected to the community. This would include the school system especially if there are children from the urban Inuit community attending. Exclusion of Aboriginal children in the public school system is another form of racism and not uncommon such as, not acknowledging their cultural and racial uniqueness in a positive way. At this point in time one could argue that the exclusion is not as intentional as in the

days of segregated schooling. However there is a deep sense of aversive racism being experienced by the workers, in that the teacher in this example may not exhibit overt racism but has simply avoided interaction with the Inuit student and the Inuit workers. The aversion is based on “othering”, the teacher knows the student isn’t like them but isn’t willing to acknowledge this in a positive way. The teacher in this example cannot really see the purpose of the workers actions not only because the child doesn’t look stereotypically Inuit but also because he still cannot recognize the fact that Aboriginal people are not foreigners.

There has been this kind of tension before here “what do you know about this life”, “what do you know about living on the res”. This racism has affected my work and creates barriers. I even feel it with the kids now sometimes. That day I got called all sorts of names “you probably never spent one day on the res in your life” “you’re just a city Indian”. The fact that it turned to racism is why this is so dissatisfying, it wasn’t the first time I had felt it from the women before; “what do you know about the situation that I’m in?”.

In order to survive the effects of racism the workers had different ways of coping. Much of the solutions toward racism came from within the culture itself. The racism experienced by Aboriginal workers from the Aboriginal community is a form of lateral violence or internalised colonization and includes name calling, bullying and other displays of violence. What is occurring is that within the marginalized group itself the oppressed become the oppressors of themselves and others in their circle. At times, it is relayed in the interviews that this behaviour would keep positive relationships and transformative change from happening.

Some Aboriginal researchers, such as First Nations feminist Lee Maracle, have argued that lateral violence is an expression of anti-colonial rage,

Since "Uncle Willie" started giving us "hush money", we have stepped up the campaign against ourselves where the Europeans left off. We fight against each other with a fierceness we have not shown since forefathers' early resistance. The anger inside has accumulated generation by generation, and because it was left to decay, it has become hatred. By its very nature, racism only permits the victimized race to engage in hatred among its own. Lateral violence among Native people is about our anti-colonial rage working itself out in an expression of hate for one another (1996, p11).

In other words Maracle means to say that the hate is not real but it is a cover for the anger that we feel as Indigenous individuals, and it is systemic. Knowing this, workers use their own traditions including the use of Indigenous ways of helping such as kindness and love in order to persevere in an Aboriginal and anti-colonial approach.

We might not have an MSW but we have skills and they recognize that. The university degree hasn't really done anything for me. I think I would have been in the exact same position whether I had one or not. But I know it's helped me at least change my viewpoint because I was educated in the dominant system. I grew up hating myself and culture once I got here I reclaimed myself. Because I went to university I try and find a balance between that and my culture. I think I finally found it, because I use to ignore my culture even my white side and where I am now I am ok. Especially the racism I receive from Inuk people who don't see me as Inuit because I am urban and mixed. I know I am Inuk that is just their position. I hope I can instill that in people here that everyone expresses themselves differently. This comes from a strengths perspective.

Most of the workers were challenged by overcoming their own internalized racism on a positive note this is a clear step toward an anti-colonial approach. The workers all challenged their own feelings about

feeling and being Aboriginal in order to confront the internalized beliefs. Most of them are aware of the advantage they have over others in their community. The challenge is to unpack and use this information as a way to shift the power and help others in their community realize their own potential.

I physically look Aboriginal and the meeting changes, I have credibility and I don't even have to say anything. Most of the things I got from my culture were from being around the community and being connected to it. I know though that my experience as an Inuit is different from others and I try and teach this to mainstream people. "we don't all eat raw meat.

A lot of people don't think I'm Aboriginal when they find out then they take me more seriously.

Understanding your privilege as an Aboriginal social worker has enabled many of the workers to advocate on behalf of their community. Privilege is due to various factors one of which can be a social work education background coupled with the realization that you are benefitting from the other disadvantages of others. The Aboriginal worker sees these disadvantages as a way to seek balance in society and restore the role of Aboriginal communities in Canada and not a duty to rescue.

V. Aboriginal Social Service Workers use of Indigenous Knowledge

Throughout the thesis the concept of Indigenous ways of knowing and helping have been discussed as ways in which a worker can resist the dominant system. Indigenous knowledge is not a concept that is

uniform or pan-Aboriginal in Canada (Shahjahan, 2005). Hart (2010) and McKenzie & Morrisette (2003) affirm that there is a close connection between Indigenous worldviews and Indigenous knowledge. This was evident in the interviews, many participants told stories in which they spoke about traditional norms and social values that helped them work through a problem or make sense of a community member's situation. When asked about the case study one of the participants talked specifically about using some of this knowledge rather than calling on mainstream tools. This Aboriginal worker believes that by using traditional knowledge - such as drum-making or crafts - in a circle setting will work better than sending 'Wanda' to a program.

In the urban Aboriginal community there are zero supports for young Aboriginal mothers, its either youth, adults, children and seniors and mothers not young Aboriginal moms (because of funding issues). You would be putting the girl in a situation where she is isolated; she will either feel left out because she can't partake with the other youth or maybe less comfortable with adults and other moms because she is younger. There is a gap. So we make up for it. There are things she can do: drum making, more events and structured things, like craft where you are focused more on the task rather than the peer or social setting. Most of these events have childcare.

In this case the participant even related back to her own experiences and how she used her own small piece of Indigenous knowledge to find her way out of her own oppression and move from the mainstream system to an urban Aboriginal one. She also acknowledges that being with her own community empowered her. She felt she knew what she needed and remembered her connection to Indigenous values.

With all of our street youth services YSB (Youth Services Bureau), OGH (Ottawa General Hospital), it was over two years on the street that I learned there were Aboriginal ones and that was only because someone came to a drop in to do a little powwow. And then I knew that they were there I had no idea, even when I have lived here since I was 4 years old. Eventually when I was 18 and expecting my first child I remember that powwow and I remembered meeting that worker, and running into my cousin. So I went to the friendship centre and I told them I wanted an Aboriginal doctor and that I wanted prenatal classes, it was good to know that they were there.

The example below is also in regards to 'Wanda' the young Ojibwe mother in the case study. The participants talk about using Indigenous ways of helping where the values of holism and use of culturally specific programs such as, Aboriginal Healthy Babies Healthy Children (AHBHC), a program similar to the City run Healthy Babies Healthy Children (HBHC), except the nurses and social workers are all Aboriginal and promote Aboriginal values.

If I knew more about her, if she used in the past then I would have put more supports in place for her, more things to maintain a healthy lifestyle. I would have put more supports in place that were holistic in perspective because she seemed to take good care of herself during pregnancy. This is a typical scenario I don't like that it appears to read negatively that she is 17 when I have seen younger girls parent well. Also the point about her being urban Aboriginal appears to read as if it is a risk factor. I am not sure if there is a need to call in a CAS (Children's Aid Society) or a social worker right away she has support there with her, also they should also give her the option of AHBHC (Aboriginal Healthy Babies Healthy Children) since it is also available in the urban setting. Why is it necessary to label her at all? 17 should be seen as an age where it is possible to support not as a negative.

Holism comes up in many of the interviews as a part of the Indigenous Worldview and the Aboriginal way of doing things.

What was most satisfying was the combination of seeing her quit smoking and seeing both systems work together to help an Aboriginal woman. But most of all to have her make a complete change holistically, and learned more about her culture she made a 360 degree turn around inside and outside. She now had to try and get off the 'system' she wanted something to get up for in the morning. She was even able to decrease her depression medication; this has all been very rewarding.

I feel coming from an Aboriginal background, within a mainstream life, off-reserve, brought up in a white culture as well. I also have a connection to the reserve life. I can navigate both sides, the white system and the Aboriginal one. Working in an Aboriginal health centre and being Aboriginal I see how we really have a holistic approach in what we do, we don't just see one thing we have to encompass everything in all that we do. That is not always the way in social work and especially mainstream social work.

Many participants felt like the case study scenario about 'Wanda' was very realistic but it demonstrated the fact that mainstream organizations do not take the time to connect with their clients.

This is a typical scenario to me. I wouldn't have advocated to the CAS worker that she got involved with traditional or community organization because mainstream healthy babies is fantastic but for my community it is very different. AHBHC doesn't have a checklist like the mainstream one asking how much money you make, how much schooling which is mandated by the City to develop a plan of care. We go in to the homes and talk and share together and develop a plan of care together, which is almost completely opposite to what is happening here.

As far as her being high risk I can see it happening to all 17 year olds, but they aren't considering all her family supports which are traditional supports for us. She has realistic plan already with healthy choices where she puts her child first.

At our organizations we have the time to take care and become more connected and involved with our clients and community. We understand

what is happening to our clients because of this time we take. We sit and meet about her/their care as a group.

The participants all gave examples about the importance of intergenerational knowledge as being a part of the healing process and embedded in the Indigenous ways of helping and knowing. Either they feel that it is their responsibility as Aboriginal service providers to create a circle that includes all ages, Elders and the young, or use the circle to pass down Indigenous Knowledge. Along with intergenerational values the participants talk about the importance of connecting community members to services where the Aboriginal way of doing things is supported and promoted. In Ottawa, services such as diversion programs, Aboriginal Healthy Babies Healthy Children (AHBHC) and programs facilitated by other Aboriginal people are cited.

I have seen this before with even younger girls. What first comes to mind is that when this happened in our centre so many workers said "oh I wish I could just take her home" but and I wish I could raise her and her baby. But in this situation the supports are clearly in place. I don't know much about the HBHC (Healthy Babies Healthy Children) program I assume she gets visits from to her home. There are obviously Aboriginal resources right here in Ottawa in place already, Perinatal programs at our centre and exposure to the cultural approaches and traditional approaches to therapy which I think are obviously extremely important. That should have definitely an option I don't think that should have even been questioned, especially when you are Aboriginal. For example the justice system should refer our youth to our diversion programs instead of right to somewhere like the boys and girls club which then has to refer back to us anyway. They should recognize that they are Aboriginal so that that person does not have to go through their story over and over again, until they agree that the Aboriginal program is the place for them. Especially when they have a client who clearly has a direct connection to a physical community and not just "oh my great grandmother was Aboriginal". This girl is obviously connected to her culture; I don't think you would find this

same sort of intergenerational traditional support system with a mainstream family like in this example. Recognizing that support and that there are more culturally appropriate way, and give her the benefit of the doubt to in recognizing that family started early in life is a value and not just some mistake that happened. Some girls make this choice; large families early on and get an education later, this is completely acceptable instead of treating them like they can't handle a baby. Instead say "congratulations you are starting a family, how can we support you".

The value placed upon intergenerational knowledge is apparent even for many of the workers themselves not just for the community members' healing plans. One participant speaks about the Seven Grandfather Teachings, (wisdom, love, respect, courage, honesty, humility and truth), and the teachings of the 'circle'. The participant explains that it was her own Grandmother who gave her this knowledge in order for her to pass down to others.

My grandmother has a deep nostalgic respect for our culture, as 100% Algonquin, her and her whole family were tricked off the reserve, an Indian agent tricked her father into signing documents saying that they were not Native and he could not read English he thought it was for hunting rights. But for my great-grandmother she knew her language and culture. Our family is a success story because the government wanted to take the Indian out of our family and did not succeed; it is in my heart it is there and in that way I would always learn as much as I could soak up. I go to ceremonies all across the country and my new teachers are not my relatives but they are still me family. So when I decided to go into the social work setting it was really obvious that I wanted to work in an Aboriginal setting because to me social work is so mainstream and so cut and dry, yes or no but when you can put it into a circle context especially here in Canada or anywhere around the world and use those values of the Seven Grandfather Teachings listen in a good way it seems to be a natural way to problem solve. It feels like you are going with the flow of the river rather than against it.

Reid (2009) agrees that the Indigenous helper or social worker learns from the generations that came before and that, they, the next generation passes that knowledge or 'teaching' through the worker-community relationship to the next generation and so on. One participant explains in the interview that sometimes the funders can put an age restriction on their programs which is problematic because Aboriginal people do not always fit into mainstream definitions in regards to age and development. Aboriginal communities value the collective structure and often include all ages and stages of development to foster healing.

Mainly Native youth 13 to 18 but I also serve the younger children; I am not restricted by ages that are designated by the funders. Which is good for me because this the more Aboriginal way of doing things anyway.

Along with a value placed over helping people of all ages in a collective setting the Aboriginal service providers interviewed felt strongly that community could include many people in the circle not just only Aboriginal people. It depended on the context but sometimes the circle needs to include more than just the Aboriginal members to create a healing atmosphere. Instead it must include everyone who has had a hand in the healing or been a part of the individual's journey, once again reiterating that the individual is seen in the context of family, the local community or the collective and not just in isolation (Hart, 2010 & Shahjahan, 2005).

Essentially I would say it's the Inuit community of Ottawa, but really it is more than that. It can be someone who has an Inuk child who does not have their Inuk partner anymore. It is all the people connected to this community mainstream included. It could be the mainstream worker even that calls me for information. My funder would say we are to serve Inuit children. But children don't come on their own they are connected to a family, that family is connected to a kinship of grandparents, uncles, aunties, cousins or maybe not even a blood relation, they are connected to a community. If you have an interest in one of our children's lives then you are a part of it (our community).

Indigenous ways of helping are important to Aboriginal service providers. Many of them speak about giving back to our community and being a part of the healing journey. The Aboriginal social service workers interviewed all discussed the process that they go through to understand their own Indigenous ways of knowing with the mainstream social work knowledge they have. Negotiating and translating both the traditional and the mainstream ways continue to be a challenge but are all believed to be necessary in order to weaken the harm that the process of colonization has done to the urban Aboriginal community. Reid (2009) argues that when an Indigenous worker negotiates the mainstream and traditional systems the Indigenous social workers are currently, "in the process of defining how their traditional values, beliefs and approaches to helping apply within the various social work areas" (p.203). Indigenous social workers have to work within mainstream laws and to some extent within the dominant systems' values and practices. However, by using Indigenous knowledge they advocate for the cultural and human rights of their Indigenous community. As mentioned before, there is no pan-

Aboriginal approach and as we see in the interviews all of the workers had a different perspective on their racial or cultural identity and how it helped them work with their urban community. As the various workers told their stories many of them mentioned the different cultural or traditional tools they would use when working, they listed simple protocols such as: offering food at all group meetings, having traditional eating utensils available at feasts, making use of Aboriginal spaces like the Cedar Lodge or Woman's Lodge for sessions, and making sure there were Elders, wisdom keepers or traditional teachers available or present during programs. Although there may be differences in the ways these eight workers understand and use their Indigenous knowledge they all conveyed the same message: they all wish to be a part of creating and sustaining a healthy urban Aboriginal community in which they are a part of and can pass on the resistance and resiliency of their ancestors and relations.

I have honestly only worked at Native organizations, and I probably wouldn't work anywhere else. It is important to help my people, my people are important to me and that's where I would like to be right now. If I could be a part of one person's or a couple peoples healing journey right now then that is what I want to do.

CHAPTER FIVE: Conclusions and Recommendations

Through the research in this thesis I was able to identify the strengths and weaknesses of the Aboriginal front-line worker. In particular, I uncovered how they deconstruct the ways the effects of colonization have on the ways they cared for their community. Within this deconstruction there were tensions present between what the Indigenous ways of knowing is compared to or in contrast to mainstream beliefs or approaches. The Indigenous ways of knowing presented themselves anti-colonially through different ideas and approaches around connections, boundaries, shared experiences, processes and experiences of racism or lateral violence. Sometimes this is a conscious decision made by the worker to employ an anti-colonial approach through the Indigenous way of helping and sometimes not. The most apparent emphasis of anti-colonial approaches is the focus Aboriginal workers have on the community. The community and its members represent what would have been similar to a clan system or family system before colonization worked to weaken that system (Bopp et al, 1984, Hunter et al., 2006 & McKenzie and Morrisette, 2003). Aboriginal workers' use of the power of the collective and the traditional values of the community ultimately create power and relationships that help resist the effects of colonialism. Ultimately it was their beliefs and love for their community that reflect the way the workers use anti-

colonial approaches.

The urban Aboriginal Ottawa population and the general Aboriginal population in Canada are growing, meaning there will be a need for more access to urban social services. It is imperative that Aboriginal service providers consider anti-colonial practice as an ongoing approach while caring for the Aboriginal community. Within the last five years the Aboriginal population in Canada has grown by 22% (Statistics Canada, 2008). One of the fastest growing urban Aboriginal populations is in the national capital which also houses the largest Inuit population outside of the Northern territories (Statistics Canada, 2008). Particularly with respect to this thesis it is apparent that anti-colonial approaches to the Inuit population are a means to continue their own way of caring which extends to anyone connected to their environment, people and culture.

Aboriginal people in Canada do not share the same quality of life as their non-Aboriginal counterparts and there is a long process ahead for activists, advocates and social workers to rectify this. However, the Aboriginal community of Ottawa is aware of what services they need in order to do this. The structural causes of inequality including systemic racism, poverty, and inadequate economic, social and cultural opportunities all contribute to the social disparities that Aboriginal people experience. Compliance with the non-traditional mainstream methods of social work is not possible for Aboriginal people without

breaking down the multiple risks they experience. This is why anti-colonial approaches can reaffirm their own ways of helping and caring. Anti-colonial approaches used by Aboriginal social workers break down the many risks that the community may experience and re-affirms the strengths of the community as a way to resist the ongoing influence of colonization.

Researchers agree that there is a clear need for Aboriginal people to reclaim their culture as part of the healing process (Hart, 2010, Shahjahan, 2005, McKenzie & Morrisette 2003 and Reid 2010). Policies that consider the collective and special political and social circumstances of Aboriginal people in Canada, such as the historical relationship, will also contribute to the process of healing. Although social services have improved and developed since the post World War II period, there still needs to be more consideration of what it means for Aboriginal people to reclaim their culture as part of social and economic processes, especially in the process of social policy development. Aboriginal people need far better access to services on and off-reserve that reflect their perspectives on wellness and collectivity in order to help revive their cultures and restore some of the autonomy lost through colonization and through more specific experiences like residential schooling and child welfare interventions.

There must also be more collaboration between Aboriginal and non-Aboriginal social services and systems as well as a conscious

effort by the Aboriginal community in recruiting and retaining their own social workers and healers. The National Aboriginal Health Organization's (2006) research suggests that policy makers ought to consider a framework of cultural safety when developing health and social programs in Canada. This could then result in better access to culturally relevant services as well as the empowerment of both providers and users.

Most of the workers interviewed saw the lack of the two systems collaborating as a main problem when working with the Aboriginal community. Although they had their own way to work through this challenge structurally in order for social work to remain progressive there remains a need change the way that mainstream organizations work with the urban Aboriginal ones.

Waterfall (2003) argues that Aboriginal experiences continue to be controlled by those in power and that even social workers have been trained by western Eurocentric universities which have further confused the issues brought on by colonialism. Aboriginal people have the potential to have agency through their own lives and structural social work can be a means to enable this by incorporating Indigenous ways of helping with the practice. Structural social work will help provide the worker and community member fill a gap in understanding their own personal situation and its link to structures with the traditional ways of helping. This can provide a vehicle toward healing. A crucial step in

applying an anti-colonial approach to practice is first to acknowledge the colonial processes inherent in mainstream social work and second to acknowledge that all discourse and most social work curriculum are constructed within the context of colonial relations (Dei & Asgharzadeh, 2001 and Waterfall, 2003). Using oppositional paradigms based on the validity of Indigenous knowledge and thus incorporating it into everyday practice with Aboriginal clients is progressive and necessary for ethical practice as a structural social worker. Understanding cultural frames of reference and analyzing systems through the lens of Indigenous knowledge means working within an anti-colonial, discursive framework (Dei & Asgharzadeh, 2001).

Morgan (2003) in Sinclair et al. (2009) explains that our Indigenous ways, thoughts, beliefs, approaches and practices are marginalized due to neglect or through the direct effect of colonial-influenced writings about our way of helping and in turn as Aboriginal workers we have little choice but sometimes to participate fully in this marginalization. Therefore, in regards to Aboriginal or racialized social workers and educators, actively resisting colonial paradigms and aligning themselves with anti-colonial thought are difficult yet necessary positions to take. As well, both Allan (2006) and Battiste (1998) argue that a “postcolonial” experience for Aboriginal people is impossible without the incorporation of Indigenous knowledge and worldview. Shahjahan (2005) argues that it is Indigenous worldview and knowledge that helps an

Indigenous service provider work in an anti-colonial framework. If Aboriginal and/or racialized workers don't acknowledge this then there stands a chance that they will undoubtedly subscribe to western ways of helping in the mainstream and Aboriginal helping professions.

Whether or not the Canadian social work profession has the capability of helping Aboriginal people within a neo-colonial reality really depends on how much the profession acknowledges that specific historical encounters have produced theory, discourse and curriculum that are based predominately on western principles of helping that do not often include Indigenous ones. In other words, the profession needs to purposefully position itself in opposition to western diffusionism. Western diffusionism is the belief that colonial values were superior to Aboriginal ones and needed to be spread across the continent in order for Aboriginal people to progress (Waterfall, 2003). Waterfall (2003) that Aboriginal social workers need to understand this process and the colonial thoughts and systems in order to successfully work with populations affected by the Western agenda. In order to successfully work with Indigenous people structural social work and other anti-oppressive schools of thought will need to critically reflect on their position in the current colonial context. Although acknowledging that colonization took place is a start it is not enough to care about and offer services to the Aboriginal community. What needs to happen is the inclusion of ways of helping that are central to the practice that are not

considered the “other” way or another “perspective”. If structural social work does not do this than there is the threat that the history of Canada and the relationship between the state and Indigenous people are actually being deliberately ignored or forgotten. This doesn’t just apply to the structural programs but to all western or Eurocentric programs that are taught on Aboriginal territories whether they be urban or rural.

Most important for racialized workers and those who identify and express themselves as Indigenous people is the idea that in addition to anti-colonial approaches there is an argument that decolonization may be necessary to re-balance their practice. This is difficult in itself as it requires dialogue between Indigenous groups and non-Indigenous people. The interviews displayed a number of examples of internalized colonization where workers had accepted the values of the mainstream and had learned to marginalize their own cultural way of knowing. Before I started this thesis I really didn’t think it was possible to decolonize oneself, especially if someone had no connection to her/his ancestors of the land. However, I now see that decolonizing oneself in the social work profession is having an honest conversation with non-Aboriginal and Aboriginal groups about the different ways of helping and, rather than just completely rejecting the mainstream I want to try to “unthink” the western perspective and assert my ancestral values even if there is little support within the agency. I am not arguing to break the mandate of mainstream organizations but for them to take seriously the

history of colonial relations and Aboriginal cultural approaches. Furthermore, the mainstream organizations need to see these approaches as an adequate if not better solution to re-balancing society and restoring the role of our Indigenous way of being. By doing this and by retelling and reinterpreting our history it becomes validated within the history of Canada and thus helps with the healing in an ethical and honest way. This would be our way of helping rather than re-asserting colonial acts. For example, to remember that boundaries can be defined in different ways that are still healthy would reflect a more realistic atmosphere for an Aboriginal person to heal in. This could simply mean some workers see their community members out of the agency or simply a way of sharing one's self with the community as seen in many of the stories during the interviews.

Structural Social Workers who are either mainstream or racialized can be ethical and successful within a culturally competent framework by relying on the skill acquired through the *use of self*. The most important aspect is to be careful to not assume that there is a shared cognition of cultural feelings and meanings, by being aware as a practitioner of the possibility of intersubjectivity. Practitioners can strive for a conscious level of subjectivity through critical self reflection and by taking a learner's stance. Cultural competency used alone casts an illusion over social work practice in that it creates a belief within workers that they can potentially become experts in finding the solution to

another person's problem and in this case understanding the Aboriginal experience, which is counterproductive to structural, anti-colonial and anti-oppressive work. Therefore, considering the use of self as a professional development tool and the opportunity to use the learner's stance rather than the practitioner as expert is fundamental to working with Indigenous groups. Considering the importance of the shared experience in the Aboriginal community this concept of the use of self may go even further for those who identify as Aboriginal workers. In fact based on anti-colonial perspectives and the interviews there seems to be less tension and more resistance when workers share their experiences either directly or indirectly with the community. It would be interesting for further research to examine whether this is true in a situation where the worker is non-racialized and/or non-Aboriginal but is willing to use these approaches. How deep and unique is the Aboriginal connection to their community and culture especially in consideration that some cultural knowledge is and will remain unattainable within this neo-liberal society?

Combining anti-oppressive practice with cultural safety helps reveal the sociopolitical context thus informing us about power imbalances which help foster workers' awareness of the importance of 'unthinking' dominant western values. Aboriginal workers can take this further by using anti-colonial approaches. Remembering and retelling Indigenous ways of helping is one way that workers are resisting the

colonial impacts on their own practice, thus helping their community in an empowering way. Using Indigenous ways in everyday social work is a clear way that Aboriginal workers in an urban environment are using anti-colonial approaches. One recommendation for further research would be to explore further Lee Maracle's concept of lateral violence as anti-colonial rage. The greatest challenge that followed incidents of non-collaboration between mainstream and Aboriginal processes was the workers' experience of lateral violence or racism within the community. Interestingly, this corresponded well with the ideas around workers' identities and whether or not they believed their "Aboriginalness" impacted their work. On the one hand community members would chastise them for not being "real Indians" or an "urban Inuit" yet, on the other hand most of the workers believed that it was the authenticity of their identity - mixed or whole - that helped them make connections to the work and approach practice in an anti-colonial manner. In further research I would like to look at the value of a mainstream education as well. Part of working anti-colonially is to accept life experience at almost the same level as a formal education. At times there seemed to be less racial tension between worker and community when the experience was legitimized yet, when collaborating with mainstream organizations and funders, a formal education and "looking Aboriginal " went a long way. Therefore if an Aboriginal worker had particular racial characteristics that are attributed to Aboriginal people it helped clients and other

organizations take them seriously. However in the experiences of the participants, Aboriginal community members would take the worker seriously if they had a shared experience and not just essential racial characteristics.

The most insidious challenge for Aboriginal workers who are already using an anti-colonial approach to practice is Canada's continued movement toward a neo-liberal society. Researchers argue that more Aboriginal people need to be engaged in social work scholarship with an anti-colonial lens. This can be said to apply to electing progressive federal, provincial, territorial and municipal governments in Canada. By this I mean that Canada needs more progressive, social democratic Aboriginal men and women to lead in various government establishments, primarily within the federal government. Shamefully, the Aboriginal worldview is completely missing from most of the provinces policy frameworks and to a large extent from the Conservative majority government and the New Democratic Party opposition on the federal level. This makes for a challenging future when securing funding and programming for services that are culturally relevant and safe. Within the research there is a clear understanding that when it comes to funding and government expectations the Aboriginal worker must be creative in coming up with a solution. One could argue that this is a great example of resisting since the workers are not allowing the government to define the way they offer service. One

step better would be to completely reject the parameters if they do not fit in with the Aboriginal worldview. However, in today's political and economic environment this is not realistic. Canada at this time is increasingly neo-liberal in its ideological approach to government and favours austerity measures to reduce funding and cut public services in all areas not just Aboriginal ones.

Despite the influence of the dominant society's way of helping this thesis concludes that Aboriginal workers are successful in reinvigorating the Indigenous way of helping, through indigenism and anti-colonial approaches. Moving toward the future Aboriginal workers can rely on acknowledging that there is an external and internal oppression at work in the present and that by maintaining Indigenous beliefs, strengths and values of collectivism, love, caring and sharing they will set an anti-colonial agenda for the next generations of workers to come.

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