

# FCSS Calgary Indigenous Healing and Wellbeing Indicator Surveys Companion Document

The following document provides context for each of the surveys from the Indigenous Healing and Wellbeing indicators (surveys 24-34). This background information was taken from documents that were originally created alongside the surveys.

## Surveys 24-26: Indigenous Identity

For the purpose of this document, Aboriginal refers to not only the legal definition contained in Section 35 of the Canadian Constitution (First Nations, Métis and Inuit), but also the historic – individual, familial and communal definitions of what it means to be an Aboriginal, or Indigenous person in Canada. The complex history and current scope of political, cultural, economic and social influences on Aboriginal communities results in a spectrum of Indigenous identity at both the individual and community levels. Good Tracks (1973) suggests the spectrum of individual and collective Indigenous identity ranges from assimilated to traditional. This is further explored by Gone (2006) as he discusses the process of constructing identity as shaped “by the forces of history, power, and tradition” (p.65); these forces include the particular cultural histories, community traditions and institutional relations, among other relationships (Gone, 2006, p. 65).

In review of the different forces influencing the construction of identity, it is important to consider that too often, aboriginal identities “were cemented in the context of a brutal Euro-American colonialism” (Gone, 2006, p.57). As such, respect for the power differentials and pursuit for post-colonial alternatives is an essential part in understanding the construction of Aboriginal identity. Good Tracks (1973) further highlights the need for this in his discussion of individual and collective Indigenous autonomy and decision-making. This autonomy provides the space for each individual to determine his or her self-defined sense of identity that may change over time to reflect the context in which he or she exists.

This context is shaped by the individual and community experience of healing. The process of healing helps recover one’s sense of self and community as “wellness reinforces and is reinforced by a sense of cultural identity” (Weaver, 2002, p.7). For Aboriginal people and community, this identity is connected with teachings related to blood memory and cellular memory. There is an inherent blood and cellular memory associated with all Aboriginal peoples, but this memory was interrupted by the process of colonization and the corresponding intergenerational trauma that continues to exist in Aboriginal communities today. The process of reconnecting to blood and cellular memory is part of reconnecting to an Indigenous identity. It is important to acknowledge that this process respects individual and collective autonomy in the formation of identity, meaning expressions of Indigeneity may occur in less traditional forms.

## Surveys 27 & 28: Social Inclusion

The Social Cohesion Indicators Project assembled in June of 2000 to discuss possible indicators of social inclusion and cohesion (Jackson et al., 2000). Their working definition of social cohesion is that it is “manifested directly in socially cohesive activities and practices: such as participation in formal and informal social networks, group activities and associations, and participation in civic life” (p.3). This participation extends into the areas of education, access to healthcare and wellness programs, economic wellbeing, labour force participation, access to information technology, political participation, mobility and so on (Duhaime et al., 2002, p. 303; Gauthier & Goulet, 2011, p.3).

Social inclusion is understood as an indicator of social cohesion as it measures the level “of access to and participation in various networks of emotional, social and material support (Phipps, 1998) as well as the types of support which are accessed (e.g. government-based or family-based)” (Duhaime et al, 2002, p.304). It is important to consider that these networks are products of the history of Aboriginal peoples in Canada.

Historic inequalities have left First Nations children, youth, and families without much-needed supports and services. Aboriginal people in Canada were deprived of their land, their cultural traditions, and their unique way of life. Children were removed from their families and sent away to residential schools – where many were abused – with well-documented inter-generational effects. Societal prejudices and discrimination against Aboriginal people have created additional challenges (Canadian Council on Social Development, 1996, p.1).

As a result, it is important to consider the indicators of social inclusion in an Aboriginal context. “All too often Western measures and models are applied to non-Western populations without questioning whether they are valid, reliable or useful” (Weaver, 2002, p.14). Participation rates may be lower for Aboriginal peoples because of these challenges; therefore there is a current gap with the indicators of social inclusion as they fail to acknowledge the socio-economic and structural barriers that face Aboriginal communities. This gap may also exist as a result of the definition of community used as part of the measurement process.

## **Surveys 29 & 30: Indigenous families and traditional parenting practices**

Prior to an exploration of Aboriginal family well-being, the impact of intergenerational trauma and its link to the many challenges Aboriginal families face today needs to be acknowledged. The historical repression of: ceremonial life, language, a connection to the land, traditional worldviews and spirituality have all hindered Aboriginal families' abilities to care for their children using traditional parenting practices (Greenwood, 2006; Greenwood & deLeeuw, 2007; Hart, 2002; HeavyRunner, 2007; Kershaw & Harkey, 2011; Mussell, 2008; Ryan, 2011; Simard & Blight, 2011; Turner & Sanders, 2007; Vernies, n.d.; Wesley-Esquimaux & Smolewski, 2004). Elders, parents and community members were replaced by residential schools, the church and Indian Affairs; this removal combined with the loss of language interrupted the oral exchange of wisdom and traditional child rearing practices from generation to generation leaving present day access to this wisdom severely limited (Pettipas, 1994; Richardson & Nelson, 2007).

As a result of this loss, restoring connections back to the community and with traditional worldviews are at the core of the healing and decolonization process. Current research stresses that the restoration of culture, ceremony, language, and stories are essential to healing Aboriginal families and communities (Ball & Simpkins, 2004; Byers, 2010; Gerlach, 2008; Glover, 2001; Greenwood, 2006; Greenwood, 2007; Hart, 2007; HeavyRunner, 2001; Martin-Hill, 2009; McShane & Hastings, 2004; Mussell, 2008; Ryan, 2011; Simard & Bright, 2011; Wesley-Esquimaux & Smolewski, 2004). "It is widely acknowledged that Aboriginal children 'need a careful balance of teachings about their traditions, tribal values, and languages. Tribal children need to experience and recognize that their center of strength and identity comes from feeling and understanding the sacred meanings behind their tribal practices'" (Ball & Simpkins, 2004, p.485). Reclaiming these values and traditions are important sources of strength and healing for Aboriginal people and strengthening future generations of children (Anderson, 2000).

Consequently, it is important to support this process in programs supporting Aboriginal families. This includes a recognition that the existing models of parent education and support stem from a Western cultural background (Dionne, 2009; Gerlach, 2008; Neckoway, Brownlee, & Castellan, 2007; Simard & Bright, 2011, Verniest, n.d.). Applying non-Aboriginal models of parenting does not provide a complete picture of positive Aboriginal parenting practices due to the differing approaches to caregiving within each worldview (Gerlach, 2008; Neckoway, Brownlee, & Castellan, 2007; Simard & Bright, 2011). Differences in the definition of family; approaches to discipline and child autonomy; interaction with the spiritual realm; and interaction with the land, among other aspects, are important to explore in understanding the worldview of the child, family, community and service provider as well (Ball & Simpkins, 2004; Byers, 2010; Gerlach, 2008; Glover, 2001; Greenwood & deLeeuw, 2007; Hart, 2002; Hart, 2007; HeavyRunner, 2007; McShane & Hastings, 2004; Ryan, 2011; Simard & Bright, 2011; Verniest, n.d.; Wenger-Nabigon, 2010; Wesley-Esquimaux & Smolewski, 2004).

This understanding needs to be carried through to the evaluation of family programs for Aboriginal families and children as current resources reflect Western culture, values and traditions. It is essential for resources to support positive parenting and childhood development, but culturally appropriate practice highlights the lack of an inclusive Western model which acknowledges the core teachings and wisdom within Aboriginal worldviews (Gowen, 2012; Morawska, 2011; Neckoway, Brownlee, & Castellan, 2007; Simard & Bright, 2011; Verniest, n.d.; Wenger-Nabigon, 2010).

Understanding the trauma that stems from Canada's history of colonization helps provide insight into the many challenges Aboriginal communities face today. The systematic and purposeful decimation of ceremonial life, language, connection to the land, traditional worldviews, and spirituality have all hindered Aboriginal community members' ability to care for each other (Greenwood, 2006; Greenwood & deLeeuw, 2007; Hart, 2002; HeavyRunner, 2007; Kershaw & Harkey, 2011; Mussell, 2008; Ryan, 2011; Simard & Blight, 2011; Turner & Sanders, 2007; Vernies, n.d.; Wesley-Equimaux & Smolewski, 2004). These losses, such as a loss of access to traditional wisdom, the loss of connectedness with language, loss of collective support, loss of control over land and resources and so on are all identified community impacts of trauma, as is a loss of support from Elders and communal caregiving.

The loss of communal caregiving and guidance through traditional parenting practices has a trickle-down effect of traumatic impacts on families. Elders, parents and community members were replaced by residential schools, the church and Indian Affairs. This removal, combined with the loss of language, interrupted the oral exchange of wisdom from generation to generation leaving present day access severely limited (Goforth, 2007, Pettipas, 1994; Richardson & Nelson, 2007). Aboriginal parents are left to raise their children without a model of effective parenting as they themselves were raised in an institutional environment without the love and attentive caregiving that supports children to thrive. These conditions are now exacerbated by "the breakdown of families that has resulted in spousal and child abuse, desertion, alcoholism, and substance abuse" (Goforth, 2007, p. 16) as community and family members attempt to cope with the products of historical trauma in the community.

## Surveys 31 & 32: Colonization and healing

The historical trauma experienced by Aboriginal communities today needs to be acknowledged in understanding the process of healing. This process occurs over time and is reflective of the many elements that influence our day-to-day lived experience. An Aboriginal perspective on healing refers to a lifelong journey that involves a return to balance within oneself, in one's relationships with others, and with the natural and spiritual worlds (AHF, 2006; Aitken & Haller, 1990; Brave Heart, M.Y.H., 1995; Castellano, 2010; Duran, 2006; Hart, 2002; HeavyRunner, 2007; Verniest, n.d.; Wenger-Nabigon, 2010; Wesley-Esquimaux & Smolewski, 2004). This return to balance refers to living in harmony with the Natural Laws and Seven Teachings that are at the core of Aboriginal culture.

Healing can take place within the context of an individual, a family, a community, an organization, an institution, and a nation. In this context, healing is not merely the absence of disease or challenges, but instead a holistic focus on well-being. This requires attending to the physical, mental, emotional, and spiritual dimensions of persons, across the life span for children, youth, adults, and elders (Brave Heart, 1995; Duran, 2006; Hart, 2002; Pettipas, 1994; Royal Commission on Aboriginal People, 1996; Verniest, n.d.; Wesley-Esquimaux & Smolewski, 2004).

The discussions of healing in an Aboriginal context reflect the understanding that healing is a process that occurs over time. Addressing historical abuse and intergenerational trauma means understanding and considering individual healing within a larger picture of the healing required for the family, community, and nation. It is extremely important that we find a way to move beyond the negative messages that are a product of a long history of systemic racism. Healing Aboriginal communities begins with recovery from the wounding that has occurred as a result of colonization and then continues on as communities rebuild and restore healthy patterns of life. Please refer to the 2013 FCSS Calgary Aboriginal Research Brief for healing frameworks or elements of healing practices to use in program development.

## Surveys 33 & 34: Spirituality and ceremony

The essence of Aboriginal spirituality is an understanding that all matter has a spirit and must be respected. This respect is shown through relational accountability which is recognition that all forms of life are connected, and it is both the individual and community responsibility to remain present to these relationships (Wilson, 2002). Relational accountability requires that genuine interaction between all relations is guided by the Natural Laws and Seven Teachings. This accountability includes an awareness of the need for the relationship to be reciprocal, and includes a responsibility to maintain this balance.

It is understood that health is the result of an interconnected balance of physical, spiritual, mental and emotional well-being (AHF, 2002; AHF, 2009); a healthy state of being is connected to one's relationship with the physical and the supernatural worlds. The understanding of this relationship is carried through a blood memory, a memory of historical ways of being and doing that have been carried at a spiritual level and held by the ancestors. Maintaining a balanced connection to one's relationship with physical and spiritual worlds helps keep this memory present. Although, it is important to acknowledge that a disconnect to the blood memory is not permanent if one's spirit is wounded. A reconnection to ceremony helps restore this memory as ceremonies carry fundamental teachings on values that can guide the healing work not only individually, but in working with each other. Spirituality, health and wellness, therefore, require individuals and communities to acknowledge and tend to these relationships.

The Aboriginal Healing Foundation (2002; 2009) supports cultural intervention strategies that honour the holistic process of traditional healing and involve both the physical and spiritual worlds. Honouring the spirit within each person through ceremony will naturally promote balance and health. The restoration of ceremony and traditional wisdom is seen as the core of promoting well-being across many programs serving Aboriginal clients (Greenwood, 2006; Greenwood & deLeeuw, 2007; Hart, 2002; HeavyRunner, 2007; Kershaw & Harkey, 2011; Mussell, 2008; Ryan, 2011; Simard & Blight, 2011; Turner & Sanders, 2007; Vernies, n.d.; Wesley-Equimaux & Smolewski, 2004)

There is extensive support in honouring the process of ceremony as a support for healing and balance in Aboriginal communities. Spirituality has a very deep and personal meaning where the expressions of spirituality and use of ceremony are upheld as sacred. Discussions about the evaluation of spirituality are rooted in first defining spirituality. The creation of a definition of spirituality ignores the deeply personal understanding of one's spiritual connections and minimizes the dynamic ways Aboriginal spirituality represent a way of being (Limb & Hodge, 2011). Bruce, Sheilds & Molzhan (2012) argue that this ambiguity in defining the components of spirituality is not necessarily a negative because of the scope of the human phenomenon. This is further supported by Fleming and Ledogar (2008) as they recognize "the exact content of the spirituality component in any preventive program is difficult to specify because Aboriginal spirituality is deeply embedded in each person's own cultural traditions which may well involve knowledge and practices that are sacred to those traditions and can be tapped in ways that differ somewhat with each tradition" (p.8). These examples show the challenges of honouring, through program evaluation, the role ceremony plays in healing. Yet, it is important for program evaluation to reflect the widespread support of ceremony and spirituality in service delivery.

Ceremony and spirituality are essential to the promotion of health and well-being and so a need to acknowledge this role is vital.

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