WHAT ARE YOU IN THE DARK? THE TRANSFORMATIVE POWERS OF MANITOUMINASUC UPON THE IDENTITIES OF ANISHINABEG IN THE ONTARIO CHILD WELFARE SYSTEM

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A thesis submitted in conformity with the requirements for the degree of Doctor of Philosophy
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University of Toronto

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Abstract

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By Rose Ella Cameron, Factor-Inwentash Faculty of Social Work

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The purpose of this qualitative study is to explore, describe and examine how the child welfare experience affects the personal and social identities of Anishinabe participants. Contextual realities, specifically the cultural and child welfare contexts, and how participants situate themselves in those realities, are explored. A Critical Ekweism conceptual framework is used to inform the design of the study and analyze the unique experiences of participants. The framework seeks to respect and understand the unique historical backgrounds and perspectives of participants as they critically evaluate their contexts as knowers and experts of their own experiences. While participants collectively identified existing dilemmas and practices, they also decided to actively think of ways to re-address and to positively transform these dilemmas and practices.

Methods of inquiry included the Aboriginal Circle paradigm that is interwoven with Phenomenological procedures. The Aboriginal Medicine Wheel was used as an organizational tool to illustrate and explain study findings, and Phenomenological procedures were used to explore the meanings participants append to their experiences. Both sharing circles and individual interviews were used to collect data from twenty-seven participants who were involved in the child welfare system at the time of the study. Some were living in Northern
Ontario, others in a large city. Data were transcribed and Grounded Theory coding procedures used to analyze the data and identify themes. Four main themes emerged: Place of Understanding’, ‘Place of Disconnection’, ‘Place of Identification,’ and ‘Place of Reconnection’ to represent the sacred knowledge-making spaces where participants through the Reality Circle make sense of their contexts. The meanings that underpin each of these sacred spaces are discussed.

An analysis of the meanings of these four sacred spaces further describes how participants’ personal and social identities are juxtaposed in their cultural and child welfare contexts. Of interest is how participants’ child welfare experiences affect their cultural and parenting identities. Child welfare practices are interpreted in terms of parent, social work and First Nations Community responsibilities. A diagram depicting these responsibilities is presented as the ‘Anishinabe Identity Circle.’

The study is significant for the social work profession because an Anishinabe approach to ‘doing’ social work with this particular group of participants is developed and has implications for Aboriginal-based Theory and Aboriginal-based support and policies. Even though this is a small step towards changing some of the existing practices in the Child Welfare System, it may pave the way for larger and more constructive social changes for participants and their children in the future.
Dedication

I would like to dedicate this study to the Anishinabe women and men who stepped forward in order to have their voices heard in an effort to promote practical and social change in the Ontario child welfare system. Without you, we could not have accomplished this study. KiiChiiMiigwetch NiichiiAnishinabeg! Your strong Anishinabe voices will hopefully have a spiritual effect for future generations of Anishinabe parents and social workers.
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It has been through Manitou, or the Creator that I have been blessed to identify and acknowledge the following people who have been instrumental in inspiring and realizing my goal to complete the Doctor of Philosophy Program at the Factor-Inwentash Faculty of Social Work at the University of Toronto. Manitou, Ooshemay, Nug-gii-chii-shin-num (Creator, continue watching over us)!

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experiences. Through your openness to my study, the perspectives and voices of Anishinabeg will be a part of the child welfare discourse. I extend my gratitude to the Casino Rama Award for Excellence and the National Aboriginal Achievement Foundation for providing the grants necessary to complete this study.

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Definitions

**Aboriginal** – An umbrella term used to define the following categories of Indian people in Canada: status Indians, non-status Indians, Métis and the Inuit. The term ‘Aboriginal’ will be used interchangeably with ‘Native’, ‘First Nation(s)’, ‘Indian’, and ‘Anishinabe’ depending on the contexts of participants.

**Anishinabe** – An Ojibway term used by the Chippewa to refer to themselves as the first or original inhabitants of the North American continent. It means “those who make pictographs” (Jefferson-Danziger, 1978, p. 7). Anishinabe will be used to reflect the Cree and Ojibway heritage of participants in this study where appropriate.

**Anishinabeg** – An Ojibway term that used to refer to a group of people of Aboriginal ancestry who originate from the Ojibway Nation.

**Anishinabekwe** – An Ojibway term that is used to refer to a woman with an Ojibway or Aboriginal ancestry.

**Chaazhaotoppiimun KakiizhaAnishinabeoobiigiyun** – An Ojibway, subjective term that describes the process of reclaiming Anishinabe practices or the taking back of one’s Aboriginal ancestry and identity (G. Boyd, personal communication, April 18, 2008).

**Denaturalize** – The act of changing existing natural conditions in society and being non-conventional.

**Ekweism** – An Ojibway term that pertains to Ojibway thought. It is an Indigenous framework used to explain the collective consciousness of Aboriginal peoples as they mediate with the influences of their social environment.

**Internal Practices**- Refers to the conditions and practices that Aboriginal individuals are familiar with in their own cultural contexts.
**External Practices** - Refers to the conditions and practices that are not part of an individual’s cultural practices. For example, external practices could be new ideas that individuals are not familiar with, or they could be the non-Aboriginal practices that are used in an institution like the child welfare system.

**Inday** – An Ojibway term used to describe the “heart” in a person’s body (Nichols & Nyholm, 1995, p. 194).

**Manitouminasuc** – This is an Ojibway term that describes a group of glass beads. In Ojibway culture, beads are viewed to be sacred and are gifts from the Creator that people weave together into beautiful sacred formations.

**Participants** – This term is used to indicate the Aboriginal women and men who were part of this study. This term was used to replace the word “clients” because participants did not like being referred to as “clients” of the Child Welfare System.

**Pimatiziwin** – An Ojibway term that refers to a state of a good living or ‘life.’

**Responsibilities** - These are the ideal skills that are required to empower Anishinabe identities. Responsibilities can also be the tools, or a set of instructions, that are necessary in carrying out positive personal change or change in social contexts.
Foreword

My Connection to the Study

I am an Anishinabe woman from the Ojibway First Nations. As a social worker, my interest in the issue of Identities of Anishinabeg in the Ontario Child Welfare System emerged from two sources: my own experiences as an Anishinabekwe living within a dominant Euro-Canadian society, and my experiences as a social worker working with Aboriginal women clients in a Child Welfare setting.

As an Aboriginal woman originating from a Northwestern Ontario First Nations, a semi-isolated bush Reserve; the Child Welfare System has a direct impact upon my life. My five younger brothers, following the death of my mother, were apprehended from my father by a social worker, due to the abuse of alcohol by my father. I was ten years of age, I do not recall the date that my brothers were apprehended; they just vanished one day. I often wondered about them and how they were doing out there - I missed them dearly. It was not until a group home was built in my community several years later that I had the opportunity to re-introduce myself to my brothers. The placement of my brothers in foster care created a personal interest for me to learn more about the child welfare system and how it was directly related to the Aboriginal population. Furthermore, as an ex-student of the Residential School system, I was curious about how Aboriginal children were treated in foster care; was there a systemic relationship? I decided to explore the inner workings of this Child Welfare System.

Many years later, when I began my work at a child welfare agency, I realized that Aboriginal women and men as clients were often relegated to the margins of society, in part because of current child welfare practices. These practices it seemed to me only benefited the system, but not the Aboriginal people, as they did not attempt to support and improve the
parenting abilities and the identity of clients. The practices employed by workers clearly did not address the real issues for Aboriginal parents and were often disrespectful. I was saddened and appalled to view this social work arena because my own values include the principle that everyone and everything around us is to be respected. What I was witnessing was counter-point to what I believed in.

During my Social work employment of investigations and home-visits with Aboriginal women and men, I often met parents who were angry and frustrated with the local Child Welfare agency. I could empathize with the anger of these parents. Many of my clients had expressed that previously no-one was listening to them, similar to the following statement:

“I didn’t have a chance to speak...whatsoever. That’s what upsets me. Because there was no input on my side they did not hear what I have to say, what was going on. That’s all, [they always] decided without me knowing what’s happening...” (Kellington, 2000, p. 19).

As a front-line social worker, my primary concern was to ensure that children brought to the attention of the child welfare system were safe and well-protected. I was trained to prioritize the needs of children over their parents. Parental needs were often viewed as unimportant by the system, but not by me. Realizing this dilemma, my interactions with these women and men changed over time. I ensured that the needs of the children were definitely met first, but I would also provide an opportunity for clients to discuss child welfare issues in their Ojibway language. Aboriginal women and men continue to endure a stressful life under the constraints of Federal and Provincial government policies that fail to understand the reality, the needs and struggles of Aboriginal communities. I wanted to conduct this study as a way of reaching out to the Aboriginal people that I had met as a social worker. I feel that significant social and political change is required to ameliorate the pejorative treatment imposed upon Aboriginal clients. It is
through the voices of Aboriginal women and men that their concerns and suggestions are disclosed. As their collective voice emerges it will be the responsibility of social workers and policy developers to recognize the need for change and to align the Ontario Child welfare policy with the needs of the Aboriginal clients. Participant’s perspectives and their contributions toward systemic reform of Ontario Child welfare institutions will be reflected in this discourse. Their voices and issues are entitled to due diligence.
CHAPTER ONE: INTRODUCTION

The Child Welfare System has often been exempt from scrutiny by the Aboriginal population it serves. Government institutions such as Child Welfare should not be exempt from such scrutiny (Phillips, 2000). A critical analysis of the Child Welfare System from an Aboriginal perspective is long overdue. This study provides such an analysis, specifically from an Anishinabe perspective. The expansion of the Child Welfare services to include the Aboriginal peoples of Canada, over the last half century, has had significant ramifications for many Aboriginal parents and their children.

The entitlement of Aboriginal children to receive the same legal and social protections as non-Aboriginal children in Child Welfare Systems emerged in 1947. The Canadian Welfare Council and the Canadian Association of Social Workers petitioned the Senate and House Committee to extend its existing Provincial child welfare jurisdiction to Federal lands to include Aboriginal women and their families. The poor living conditions of Aboriginal children residing in First Nations communities were regarded as intolerable and the practices of informal adoptions was considered to need regulation (Fossett-Jones, 1990). Upon approval from the Senate and House Committee, this eventually lead to the amendment of the 1951 Indian Act\(^1\) to include Section 88, that would demand that all provincial laws that did not conflict with treaties or federal laws be applied and enforced on reserve lands (Fournier & Crey, 1997). The extension of these Provincial child welfare policies into reserve lands paved the way, and eventually, legitimized the practice of apprehending Native children from their parents (McKenzie, 1991).

A funding arrangement between the Provincial and Federal governments under the 1965

\(^1\) The Indian Act was first enacted on April 12, 1876 by the government of the Minister of the Interior; an act to amend and consolidate the laws respecting Indians and to reconstruct Aboriginal people into Europeans (DeBrou & Waiser, 1992).
Ontario Welfare Agreement ensured the alignment of institutional government care services for Aboriginal families residing on reserve lands with the rest of society (Technical Assistance and Planning Associates Limited, 1979). The need to provide both universal and accessible provincial services to Aboriginal people was recommended earlier in the 1964-65, Hawthorn Enquiry (Timpson, 1990). This Welfare Agreement outlined the “bilateral cost-sharing responsibility for both the provincial and federal Governments, in which the federal government would reimburse the costs incurred for registered Indians or ‘on-reserve’ services provided under provincial legislation, which is about 95% of most provincial costs of Aboriginal services which include general welfare, child welfare, day-care and homemaker’s services” (Roach, 2000, p. 6). Within a year, all Aboriginal families in Ontario were receiving Child Welfare services (Timpson, 1990).

Prior to the 1951 amendment of the Indian Act, child welfare laws did not apply to First Nation Reserves. During the 1940’s and earlier, issues of suspected child abuse on reserves were addressed by federal government agents, primarily by removing children and placing them into Residential schools, but without the specific authority to do so (Bennett, 2009). In addition, the placement of Aboriginal children in “non-Aboriginal substitute care” continued well into the early 1980s (Hudson, 1997, p. 162). The unregulated apprehending of Aboriginal children and their placement in the dominant institutions appeared to have been practiced long before the provincial and federal Governments secured child welfare services for Aboriginal families in 1966. The over-representation of Aboriginal children in Child Welfare care peaked between years of 1959 to 1980 and is referred to as the ‘sixties scoop’ (Fournier & Crey, 1997). The alarming rates of Aboriginal children in child welfare became visibly apparent in most child welfare institutions (Johnston, 1983), and especially, in First Nations communities.
During the 1970s and 1980s, First Nations political leaders advocated for the establishment of Aboriginal-controlled child welfare agencies in Canada as non-Aboriginal Child Welfare Systems were perceived by First Nations leaders to have a devastating and disrupting effect on the traditional structure of many Aboriginal families (McDonald & Ladd, 2000; Miller, Hoffman, & Turner, 1980; Roach, 2000). The forced separation of children from their families only served to displace parents’ child-rearing practices (Cross, 1986), to sever supportive familial networks (Johnston, 1981); and the System had left many of the children who were placed in foster care with serious psychological problems (McCarthy, 1993). Aboriginal leaders symbolized the process of controlling Child Welfare agencies as advancement toward Native self-determination (Hudson, 1997). It was crucially important that First Nations leaders promote the cultural survival of Aboriginal families and to work against the cultural genocide that was occurring against their communities (Davis, 1992). Two, the existing child policy approach would work to emphasize the bond between parents and their children. Parents would be able to maintain and transmit healthy self-concepts and healthy cultural identity upon their children. Three, the principle of self-government would be advanced through the mechanism of taking control of provincial Child Welfare agencies (Mannes, 1993; McGillivray, 1997). Tripartite agreements were negotiated and signed between tribal governments, and both the federal and provincial governments. As a result of these agreements, there are six Aboriginal-controlled Child Welfare agencies in Ontario for Aboriginal families to work with (Ontario Association of Children's Aid Societies, 2008).

According to Statistics Canada, the ‘Aboriginal Identity Population, by Province and

\footnote{The six Ministry-mandated Aboriginal children’s aid societies in Ontario include: Anishinaabe Abinooji Family Services in Kenora; Dilico Anishinaabek Family Care in Thunder Bay; Tikanagan Child & Family Services in Sioux Lookout; Weechi-it-te-win in Fort Frances; Native Child & Family Services of Toronto; and, Payukatayno James & Hudson Bay Family Services in Moosonee. They use the same policies and procedures as non-Aboriginal agencies.}
‘Summary Table in the Census (2006a) indicates there were 31,241,030 people living in Canada. Out of the total population, 3.8% (1,172,790) of the people who participated in the Census indicated having Aboriginal Ancestry (Census, 2006b). In addition, within the Aboriginal population, 60% identified themselves as First Nations people; 33% were Metis; and 4% identified themselves as being Inuit. The Census also reveals how the Aboriginal population has grown 45% faster than the non-Aboriginal population from 1996 to 2006, “nearly six times faster than the 8% growth rate for the non-Aboriginal population over the same period” (Census, 2006b). It is clear from the above statistics that the birth rate of the Aboriginal population in Canada is growing rapidly.

In Canada, it is common knowledge that there exists an over-representation of Aboriginal children ‘in care’; children who have been removed from their original homes and are residing in foster homes (Gough, Trocme, Brown, Knoke, & Blackstock, 2005). According to Cindy Blackstock, who was interviewed in the Toronto Star newspaper, she states that there are approximately 27,000 Aboriginal children presently in child welfare care in Canada (Monsebraaten, 2009). As children enter the Child Welfare System, they are treated as independent human beings who are void of a historical past, a culture and parents (Kline, 1992). This treatment has detrimental consequences for Aboriginal parents, as their issues and concerns appear unimportant to child welfare administrators who pre-occupy themselves with the children. I strongly support the need of protection for Aboriginal children who have been identified as requiring protection from abuse; but the needs of Aboriginal women and men must also be acknowledged for the benefit of their families. By overlooking the needs of Aboriginal parents, the foundation of the problem of so many Aboriginal children being in the Child Welfare System, serves to perpetuate the historically oppressive policies and practices that Aboriginal
people in Canada continue to endure.

The restrictive focus of the (white) dominant ideology of Child Welfare practice (Johnston, 1983) marginalizes the concerns of Aboriginal women and men. This ideology defines the family, how parents should behave, and how children should be treated – all from a European perspective. Aboriginal women and men come to the attention of the Child Welfare System because they do not appear to fit into the (white dominant) normal caregiver identity that is imposed by the dominant society. There is an assumption that Aboriginal parents, as system clients, need to conform to the dominant society standards of normal (Caucasian) caregivers, therefore Aboriginal parents can become better caregivers for their children. Generally it is assumed by social workers that Aboriginal women and men are inadequate caregivers. Present child welfare practices continue to produce and reproduce boundaries that exclude the voices of Aboriginal women and men as parents. Their concerns as parents, much like other parents who are involved in the child welfare system are perceived to be ‘missing’ (Miller, 1991) and their concerns and perspectives remain absent in the process. At present, no apparent mechanism exists in the Ontario child welfare sphere through which to address the needs and aspirations of Aboriginal women and men as parents.

The Child Welfare mandate to protect vulnerable children from harm and abuse transforms the multi-dimensional identities of Aboriginal women and men into uni-dimensional system beings, that of “clients.” Aboriginal people, however, do not identify themselves solely or primarily as clients, but rather as wholistic beings (Bopp, Bopp, Brown & Lane, 1984). For example, they view themselves as caregivers, community members, aunties, sisters, brothers, fathers and the like. Child Welfare Systems demonstrate no understanding of the support that Aboriginal women and men require in strengthening their caregiver/parenting identities. As such
the current Child Welfare System buries the perspectives of Aboriginal women and men. The system will continue to do so unless those who administer the System make serious efforts to understand the positions and cultural perspectives of Aboriginal women and men.

The ultimate purpose of this qualitative study is to facilitate a process and a space for Aboriginal women and men, who have been categorized as “clients” of the Child Welfare System, are repositioned as “experts”, who critically explore and analyze the clinical skills of social workers and the inner workings of the system in which they are ‘caught up’ or embedded. This process allows Aboriginal parents to become critically conscious of their Child Welfare context and how this may positively enhance their parenting identities and strategies.

In attempting to understand how the Child Welfare experience affects Aboriginal women and men identities, I set out to explore the following question: What changes are needed in the Child Welfare System to support the cultural identities of Anishinabe women and men who are caregivers? I wanted to reveal and explore the concrete experiences of caregivers and learn how current Child Welfare practices could be re-envisioned in order to support Aboriginal parenting identities. It is from the direct perspectives of Aboriginal women and men that the Child Welfare System must be explored in order to identify the type of systemic changes that could be implemented for Aboriginal parents and their children and to benefit society as a whole.

By listening to the voices of Aboriginal women and men involved with the Child Welfare System, this study reveals the meanings for participants as they attempt to understand their identity. My findings of how current Child Welfare practices can be re-envisioned to better serve the identity needs of Aboriginal caregivers, I visually represent in my Anishinabe Identity Circle.
The above Anishinabe Identity Circle is the result of this qualitative study. The image that I have created and placed on the cover page is the abstract representation of this Circle. The circle format I borrowed from the traditional Aboriginal Medicine Wheel concept. I used it to organize and explore the experiences of the twenty-seven study participants by gathering data through sharing circles and individual interviews. The Anishinabe Identity Circle is made up of *manitouminasuc*, which symbolize the weaving together of multiple voices through a common experience – the Child Welfare System.

The Anishinabe Identity Circle is designed to visually inform both parents and social
workers of how social work could be conducted in a more supportive Child Welfare System. Four concentric rings form the circle, and to navigate please read from the center in an outward, clockwise direction. As a starting point, the identities of participants are centrally located in the circle and are represented in red. The next grey inner circle displays the contexts where the identities of participants were explored. For example, the left side of the circle centre represents the Personal Identities of participants in Aboriginal culture; the right side represents their Parenting Identities in Child Welfare. Participants have also identified twelve culturally-informed Anishinabe Responsibilities which are displayed in green manitouminasuc. The two outer circles contain nine blue and eighteen red manitouminasuc which are respectively: Parent Responsibilities (blue) and the Social Work Responsibilities (red), in the Child Welfare System. The last grey manitouminasuc are First Nations Community Responsibilities. The utility of the Anishinabe Identity Circle for the social work profession is a visual representation of an approach that can guide social workers communicating with Anishinabe caregivers. The manitouminasuc mirror the dimensions of the Critical Ekweism framework, which represent the necessary tenets that social workers need to consider in order to support the unique identities of Aboriginal women and men in the context of Child Welfare.

The structure, methodology, findings and implications of this study are explored in the following sequence. Chapter One reviews the Child Welfare literature as it relates to Aboriginal parents involved with the Child Welfare System. It includes an outline of the concept of identity and the construction of the Critical Ekweism framework which provides the theoretical perspective of this study. Chapter Two describes the methodological format used to accomplish this study and how the data was analyzed and constructed to form the Reality Circle, illustrated on the next page.
Chapter Three introduces the *Healing of Identity Circle* located within the Reality Circle. The preliminary data findings are discussed in terms of the *Cultural* context for participants. The participants as *knowers* and *experts* describe their experiences. Chapter Four introduces the *Child Welfare* circle, which is the outer ring of the Reality Circle. This chapter reveals the preliminary data findings of the *Child Welfare* context. Chapter Five introduces the *Anishinabe Identity Circle* and discusses the implications for an Aboriginal-based Theory. Social workers in the Child Welfare System could use these implications to assist them when working with Aboriginal parents. Chapter Six continues with the *Anishinabe Identity Circle*, but introduces a discussion on the creation of Aboriginal-based support and policies for Aboriginal women and men in the
Child Welfare System. Finally, Chapter Seven is the epilogue of the study. There is a brief review of the teachings that have emerged and I conclude with a personal reflection regarding the participants’ contributions to this study.

**Review of the Relevant Literature**

Numerous Child Welfare scholars have questioned the ‘goodness-of-fit’ of the dominant child welfare ideologies when applied to other cultures; in particular the Aboriginal population (Wharf, 1995). These scholars have also pointed out the need for the social work profession to begin exploring how these Child Welfare policies ‘really’ affect Aboriginal women and their families (Ing, 1991).

To date, there has been limited research conducted concerning Aboriginal women and men in the Child Welfare System. In terms of statistics, the Canadian Incidence Study of Reported Child Abuse and Neglect (Trocme, MacLaurin, Fallon, Daciuk, Billingsley, Tourigny, Mayer, Wright, Barter, Burford, Hornick, Sullivan & McKenzie, 2001) is the first national study to examine child and family welfare services from the investigations of social workers. These authors used a multi-stage sampling design to gather data from fifty-one child welfare service areas in Canada. After analyzing a sample of 7,672 child investigations that social workers had conducted, the study revealed that caregivers who are involved with the Child Welfare System tend to be investigated for: neglect (40%); physical abuse (31%); emotional abuse (19%); and sexual abuse (10%) (p. 29). With respect to the Aboriginal heritage of the 135,573 cases investigated; 13% were Aboriginal caregivers, 84% were non-Aboriginal caregivers and 3% were unknown (p. 87). Within the group of 16,531 Aboriginal caregivers, 62% were living off their reserves while 38% of Aboriginal caregivers were living on their communities. The 10,281 Aboriginal caregivers who were living off their reserves were often reported for neglect (52%);
emotional abuse (26%); physical abuse (17%) and sexual abuse (5%), while the remaining 6,250 Aboriginal caregivers living on their reserves were reported for sexual abuse (19%); neglect (45%); physical abuse (23%), and emotional abuse (13%). This data shows how parents with an Aboriginal ancestry are often reported for incidents of neglect (p. 87).

Trocmé et al. (2001) reports that the general stressors experienced by caregivers were identified in 73% (n=98, 412) of the investigations. For example, these stressors include “alcohol or drug abuse (34%), childhood history of abuse (31%), lack of social support (29%), spousal violence (23%), and mental health problems (24%)” (p. 88). For a complete description of these stressors and their weighted estimates, please see Trocmé et al. (2001) on pages 89 & 90. In addition, the household structure of investigations revealed that 46% of caregivers were either lone female or male parents, 29% were both biological parents of the child, 20% had one biological parent with a blended, step or other parent, and 5% are unknown (p. 74). Sixty-one percent of biological mothers were categorized as the alleged perpetrator of abuse in most of the investigations (p. 49). These findings are supported in qualitative study by Frank Maidman Associates (1998) as he discusses how Aboriginal women are perceived by the System when they come to the attention of Child Welfare authorities.

In most circumstances, Aboriginal caregivers are essentially: …parents with residential school and other institutional backgrounds; families living in communities with high concentration of residential school backgrounds; [and other] negative life-styles [like]…smoking, insufficient exercise; dysfunctional, multi-problem families; socially isolated families…[especially when no protective resources are in place] (23).

Anderson (1998) conducted a qualitative study involving six participants who were living in Toronto. These participants were asked whether or not they would be in favour of having the present Native Child & Family Services Centre, being a Native-run resource centre, transformed into a Child Welfare mandated agency. The findings of this study suggest that these parents
would support such a change. One of the main reasons they wanted this change was because of the negative experiences they had encountered with non-Native Child Welfare agencies. For example, common participant complaints included: 1) Parents were not being listened to; 2) Parents were losing their children to foster care; 3) Parents being made to feel inadequate by comments like, “Take them, she doesn’t deserve these children”; 4) Parents having their children taken away even though the parents were trying to improving their parenting behaviours; 5) Child welfare social workers tried to make them look bad as parents (Anderson, 1998, p. 449). Non-Native Child Welfare Agencies were also seen to promote the loss of Native culture in Aboriginal children who were placed in care. Overall, these participants did not have a problem with Native people running their own Child Welfare agency. As it stands now, the Native-run resource centre has been transformed into a government mandated child and family services centre.

McKenzie, Seidl & Bone (1995) conducted a participatory research study which included eight First Nations communities in Manitoba, under the auspices of a child welfare agency. This study incorporated the voices of both Aboriginal women and men and attempted to identify culturally sensitive Child Welfare standards. An analysis of how the Child Welfare System might be changed from being a punitive to a more supportive, humane organization was one of the underlying aims of this study. Findings indicate that “the focus group participants stressed the importance of culture, including language, ceremonies, and teaching, both as a component of Child Welfare practice and as a method of healing their communities” (p. 646).

The National Action Committee on the Status of Women - British Columbia Region (2000) conducted a qualitative study of approximately seventeen women who were interviewed over an eight-week period in the Vancouver area. The focus of the study was to better understand
the experiences of women in the Child Welfare System. Only one Aboriginal participant was represented in this study. Recommendations indicated: that “support services should be directed at parents through the Child Welfare System…a Mother’s Advocate Office should be instituted…[and there was a need for more culturally appropriate or sensitive policies and services]” (Kellington, 2000, pp. 51, 52).

These four studies illuminate to some extent the experiences of Aboriginal women and men in Child Welfare settings. But there appears to be a general lack of exploration of the Child Welfare literature from an Aboriginal perspective (Weaver, 2002), specifically, in terms of how Child Welfare ideologies and practices affect the social identities of Aboriginal women and men.

**Identity**

The concept of identity that I explore in this study is informed by the ways in which Aboriginal people understand and view themselves in their cultural environment. In situating this concept of identity in the Aboriginal context, I begin by briefly exploring how identity is understood by Western theorists; Second, I identify the key elements of Aboriginal identity that differ from Western concept of identity; Third, I outline how Aboriginal identity is socially constructed within the Aboriginal world view.

In Western literature, the complex nature of identity (Restoule, 2000), has predominately been understood from the psychological and sociological schools of thought. The psychological perspective, as explained by Hogg, Terry & White (1995) emphasizes “the self defining roles that people occupy in society” (p. 256), while the sociological perspective focuses on the processes of “intergroup relations – that is, how people come to see themselves as members of one group/category (the in-group) in comparison with another (out-group), and the consequences of this categorization, such as ethnocentrism” (Stets & Burke, 2000, p. 226).
Until recently, the sociological and psychological schools of identity considered themselves distinct from one another. Stets & Burke (2000), two leading authors of these two schools of thought regarding identity, proposed uniting both frameworks. This could strengthen the basis for examining people at “the macro-level…[looking at] whether participation in social movements increases as one identifies with the group…; the meso-level…[looking at] inter/intra group relations…; [and at the] micro-level…[looking at] an analysis of the group, the role, and the person which may help us to understand motivational process as self-esteem…” (p. 234). The possible merging of the sociological and psychological perspectives of identity is based on several key claims. These include that the creation of self is directly influenced by society; self is constructed ahead of society because it is perceived to be separate from society; self has multifaceted identities; and, self acts as a mediator between the social influences of society and an individual’s behavior (Hogg, et al., 1995). This is how the concept of identity is primarily understood by Western theorists.

Second, Aboriginal identity formation does resemble and take up Western processes of identity formation in some respects, but Aboriginal people approach identity in a different way. The salient features of Aboriginal identity, according to (Nabigon & Mawhiney, 1996) are that identity is as an extension of the Aboriginal worldview, and identity has a spiritual dimension.

Nabigon and Mawhiney (1996) state that the world view of Aboriginal people emphasizes that Aboriginal people “do not see nature as being apart from [them], but rather [they] see it as an extension of [their] being” (p. 19). This world view of being part of nature is understood through the medicine wheel and its four directions, specifically the spiritual, physical, emotional and the psychological (Baskin, 2005a). Generally, it is through these directions that the identities of Aboriginal people are also to be understood. Identity can be seen
as consisting of four aspects within the self in which people attempt to understand who they are through their interactions with others. The medicine wheel can be used to visually contextualize the perplexities of one’s being, along with the influences of the environment in each of the spiritual, physical, emotional and psychological aspects of the person. Being part of nature does not only reinforce the world views of Aboriginal people, but it is also through nature that Aboriginal people are able to socially construct their identities. This is the first step in understanding the uniqueness of Aboriginal identities.

Also important in Aboriginal identity is the notion that identity is spiritual or that it has a “cheejauk” (Johnston, 1976, p. 15). The spiritual aspect of identity can be understood in two ways. First, the circle that is used to form the basis of the medicine wheel is of a sacred nature and, according to Basil Johnston (1976), it denotes spirit. Second, this spiritual influence also symbolizes how the realities of Aboriginal people are symbolically connected to the Creator (Morrisseau, 1998). These are the unique aspects of Aboriginal identity.

Aboriginal people have always held a high regard for maintaining a connection to the Creator “because the spiritual permeates all aspects of Native life” (Hanohano, 1999, p. 210). It is through this connection that Aboriginal people have come to understand who they are and how they are to interact with other spiritual beings. In addition to perceiving human beings as spiritual beings, Aboriginal people also see water, trees, rocks and etc., as having spirit (Longclaws, 1994). It is because of this spiritual recognition that Aboriginal people believe that all things on earth and in the sky must be respected; they are all a sacred part of Creation. This spiritual emphasis that is placed on human beings is also projected on to the notion of identity because identities are part of human beings. Western theorists understand “role identities and social identities…[by looking at] perceptions, affect, and behaviour” (Stets & Burke, 2000, p. 228) but
not from a spiritual understanding. Aboriginal people have a unique worldview from which to understand the notion of identity. Identity can be understood through its link with nature and its spiritual dimension. These are the main features that set Aboriginal identity apart from Western identity theory.

The ways in which identity is socially constructed in the Aboriginal context can be explored in the literature using the medicine wheel. As noted above, identity formation per se has not been empirically researched in the Aboriginal literature, but the work of Judie Bopp and colleagues (1984), Nabigon and Mawhiney (1996), Berry (1999), the Report on the Royal Commission on Aboriginal Peoples [RCAP] (1996) and the work of other Aboriginal authors, to help focus on these concept of identity. In addition, I borrow from the work of Stets & Burke (2000) and other Western theorists of identity to try to articulate how Aboriginal identity, as a complex social process, could be understood from the micro, meso and macro levels.

In the Aboriginal world view, identity is made up of elements which consist of fire, the four directions (Nabigon & Mawhiney, 1996), language, values, vision, relationships (Bopp, et al., 1984), and the larger Aboriginal collective – the nation, clan and ancestors (RCAP, 1996a). There is also a set of beliefs that is attached to the concept of identity (Nabigon and Mawhiney, 1996; Bopp, et al., 1984). The fire; the four directions; language; values; and the vision are situated in the micro level. This is where the person contemplates the ‘who am I?’ question, and according to Stets & Burke (2000), this is where the motivational processes of a person can be conducted through the ‘analysis of the group.’ The fire emphasizes the degree of energy that is put forth by the individual to achieve his or her goal. Fire is synonymous with volition, as used by Bopp and her colleagues (1984), who view it as a force that helps an individual to decide on how to carry out and complete desired action. A series of five steps are prescribed to complete
the desired action, which consist of “attention, goal setting, initiating the action, perseverance and completing the action” (p. 14).

The four directions of identity are the spiritual, physical, emotional and psychological aspects of self. The spiritual aspect comprises the spiritual state of being in the individual. This includes recognizing, understanding, living and appreciating the realms of the unseen or non-material world (Bopp et al., 1984). It is through this link that individuals come to understand that “[they] come from spirit; [they] live and move surrounded by spirit; and when [they] leave this life [they] return to the spirit world” (RCAP, 1996b, p. 628). The physical aspect is concerned with the normative, cultural behaviours of individuals. Individuals must learn to give thanks to the Creator every day, they must respect other children, parents and the wisdom that is often shared by elders; they must be courteous, and they must be able to differentiate between what is good or bad for them. In understanding this, individuals must stay away from the things that might be harmful to them. Individuals must also learn to listen with a good heart (Bopp, et al., 1984). The emotional aspect is concerned with individuals’ feelings; and the fourth psychological or intellectual aspect of identity relates to the cognitive processes of individuals. Cognitive processes would include both the thinking and problem-solving processes. Each of the four directions is in constant flux and each direction is in need of re-balancing as individuals engage with new stimuli at the micro, meso and macro levels. For example, individuals must strive to achieve a sense of balance within themselves, in their relationships with others, and within the group in which they are located.

Language is inseparable from Aboriginal identity. Oral tradition has been used to transmit cultural knowledge from one generation to another; and the language that is used in oral traditions assists “members of a culture [to] communicate meaning and make sense of their
shared experiences. Because language defines the world and experience in cultural terms, it literally shapes [the] world view[s] [of individuals]” (RCAP, 1996c, p. 602). Language is perceived as a gift from the Creator (RCAP, 1996a). It is through language that the meanings which are embedded in Aboriginal culture become alive and reflective of people’s experiences. Language is used to create the meanings of one’s reality and is a part of Aboriginal identity.

The values that individuals espouse also contribute to the way in which identity is conceptualized. For example, some of the values that are important, according to Benton-Banai (1979), to their identity for many individuals are reflected through the seven Grandfather teachings of wisdom, love, respect, bravery, honesty, humility and truth. These values first emerged from a story of a little boy who was cared for by seven spiritual grandfathers. It was the responsibility of the little boy to share these values, which were gifts from the spiritual grandfathers, with other Aboriginal people. Individuals would access wisdom through a process of seeking knowledge: love would bring about peace; respect would be achieved by honouring everything that is part of creation; bravery would encourage the practice of confronting fears; honesty would be achieved by approaching others with an open heart; humility would be achieved by acknowledging one’s place within creation; and truth would be achieved through the recognition and embodiment of all of these values (Benton-Banai, 1979). Additional values that are also important include kindness, sharing, reciprocity and strength (RCAP, 1996d, p. 525). These values are developed within the person’s identity and are reinforced or reproduced through interactions with others.

Vision is also part of Aboriginal identity. One of the ways of achieving acceptable behaviours is through vision (Bopp et al., 1984). Vision, in an identity sense, is synonymous with developing ‘goal states’ in which the “identity standards” (Tsushima & Burke, 1999, p. 173) of
the nation or collective group are reflected in the preferred behaviour that is to be achieved. Within the Aboriginal context, an elder helps a person to gain a vision of the preferred behaviour and it is determined by the individual to attain that vision. The vision propels the individual to try to emulate that behaviour (Bopp, et al., 1984). These are some of the features of identity at the micro level.

The meso level of identity analysis is concerned with “inter/intra group relations” (Stets & Burke, 2000, p. 234) of Aboriginal people. One of the most helpful ways of understanding relationships in the Aboriginal context is by looking at the relationship that individuals as human beings have with their physical world, plants, and the animals. The Creator directed individuals to live in “harmony [with] all things and all creatures” Johnston, 1976, p. 13). It was as a result of this law that individuals were expected to live in harmony with the physical world, plants, animals, and with other human beings. The law meant that Aboriginal people are required to live in harmony with not just the land but also with the “lakes, rivers, streams and seas; the air, sky, moon, planets and stars; and the full range of living and non-living entities that inhabit nature [-] the land [being] the source and sustainer of life” (RCAP, 1996e, p. 117). With other people, there exists reciprocity as “each gives and each receives” (Baskin, 2005, p. 179). Interactions with friends, family and the community help to “project an identity and consequently, that behaviour reflects that identity” (Cast, 2003, p. 41). Building relationships with other non-Aboriginal groups assists individuals to understand how they are similar or different to other groups.

The macro level of analysis examines the influence of broader group systems on identity (Stets & Burke, 2000). The identities of people are created through the membership in groups “together with the value and emotional significance attached to that membership (Tajfel, 1981, p. 255). Macro analysis helps to answer the “who we are?” question (Thoits & Virshup, 1997, p.
Aboriginal group systems include nations, clan and ancestors. For example, nations such as the Ojibway, Cree and Mohawk have unique practices that reinforce identities through “legends, teachings, rituals and ceremonies…” (RCAP, 1996d, p. 525). Identifying with one of these nations would play a role in how identities are to be developed or maintained.

Clans also play a role in reinforcing identities. Each clan exhibits certain unique qualities that individuals who belong to that clan can emulate. According to Johnston (1976) clans or ‘totem’ groups exist in all Aboriginal communities. Each of these clans would have a purpose and each would embody certain characteristics that would be emulated by clan members in the community. In one example, Johnston outlines the migizi (white headed eagle) clan which would be known for ‘leadership’; the myeengun (wolf) clan would provide ‘defence’ for the community; the addik (caribou) clan provided ‘sustenance’; the numae (sturgeon) clan fostered ‘learning’; and the makinauk (turtle) clan would provide the knowledge of medicine in the community. This is how the clan system reinforced the responsibilities which in turn reinforced the identity of Aboriginal people in Traditional culture.

The teachings that were left behind in the physical world by ancestors could also influence identity. The practices of elders are transferred through the retelling of stories. For example, the ‘Seven Fires’ teaching or story by Benton-Banai (1979) provides a wealth of information about the past and present lives of Aboriginal people. This story highlights the major life events that Aboriginal people as a group have encountered since their contact with European people. The teachings that Benton-Banai documents through his writing could have been handed down from his ancestors. The above are some of the group systems that influence the identity of Aboriginal people at the macro level.

Aboriginal identity is wholistic, is always changing and is subjective. Brief discussions
are provided for each of these beliefs. Identities are multifaceted (Hogg, et al., 1995) and they are representative of “all things [that] are interrelated” in a person’s environment (Bopp, et al., 1984, p. 26). Like the medicine wheel, identities consist of the spiritual self, the physical self, the emotional self, and the intellectual self. All of these four aspects of the self must be examined in order to create an understanding of a person in their relation to their micro, meso and macro contexts.

Identities are not static but, like all of creation, are always changing (Bopp, et al., 1984). The identities of people change just like the seasons change. Within Aboriginal world views, the process of change is illustrated through the teachings of the eagle feather. The eagle feather represents life; the stem represents “the path of life…or the Red Road” (Stevenson, 1999, p. 14). The two sides that are separated by the stem are symbolized as the ‘light’ (good) and ‘dark’ (bad) influences on a person’s [identity]” (Nabigon and Mawhiney, 1996, p. 19). They are the discrepancies “between perceptions of self-relevant meanings in the environment and internally held meaning standards” (Tsushima & Burke, 1999, p. 173). When influences from the ‘dark’ side like anger, alcoholism and etc. prevail they bring with them a sense of disharmony – “a form of spiritual disease” (Nabigon and Mawhiney, 1996, p. 19). To achieve harmony; the influences of the ‘dark’ side must be contained or eliminated in order to make room for the ‘light’ influences. Through this teaching, individuals are looked upon as creators of their own identities (Bopp, et al., 1984).

The two sides of the eagle feather could also be used to represent the third belief that Aboriginal identities have subjective and objective capabilities. Berry (1999) quotes the work of Taylor and Dube (1986) describing how the subjective self is able to see itself as “the subject or agent (i.e., the “knower”) while the objective self is able to see itself “as an object (i.e., the
“known””) (p. 2). According to Nabigon and Mawhiney (1996) the subjective self is synonymous with the ‘inner self’ as it is through the personal reflection process that the subjective self is known. The objective or external self is able to see him or herself from various perspectives.

The meanings of identity from the world views of Aboriginal people were explored at the micro, meso and macro levels. The influences on identity are many but through the Aboriginal world view, the elements that seek to inform identity consist of, fire, the four directions, language, values, vision, relationships, nation(s), clan, and ancestors. Some beliefs that surround identity were also explored. Aboriginal individuals each have different experiences and the influences of those experiences socially construct “…many cultural identities…” (RCAP, 1996d, p. 524).

**Critical Ekweism Framework**

A Critical Ekweism framework was constructed and used to guide this study in examining the unique identities of Aboriginal women and men, in both the cultural and child welfare contexts. Being an *Anishinabekwe*, I believed that it was important for this study to examine the cultural and child welfare contexts of Aboriginal women and men through a Critical Ekweism lens. As a researcher, I arranged the two dimensions in this order for the following reasons. In general, I purposely placed the Critical dimension first because this is the overall lens and it provides much of the structure of this study. The Critical dimension lays out the fundamental purpose of my research journey. The second, Ekweism dimension of this framework I have constructed by joining two words. I first took the word *Ekwe*, which means woman in my Ojibway language, because this is my gender. The last syllable of ‘ism’ I borrowed from the word ‘Feminism’ because I am a woman who is exploring how Aboriginal women and
men, as gendered beings, are juxtaposed in the contexts which they find themselves.

Within the Ekweism framework, I focus my attention on two areas. One, I explore and analyze the cultural and child welfare experiences of the participants through an Ekweism lens. Two, I show the unique struggles of the Aboriginal participants and the existing conditions that they are forced to confront in the Child Welfare System. Focusing on these two areas sheds light on some of the major issues and conditions that affect Aboriginal women and men vis-à-vis the Child Welfare System. The following section addresses these two dimensions in this study.

My own understanding of Anishinabe ways of knowing has allowed me to weave into the fabric of this paper other possible complementary strands from Western theories. This was important for me as I wanted to know how these complementary strands could be applicable to Anishinabe ways of knowing. The inclusion of both the Critical and Ekweism dimensions in my framework encouraged me to analyze the experiences of participants from beyond their present cultural contexts.

The first critical dimension of my theoretical framework originates from Critical Social Theory (Calhoun, 1995). Critical social theory has a fundamental role in providing an understanding that the “existing state of affairs in [the Child Welfare System] does not exhaust all possibilities…” (p. 35). A ‘critical account’ of the events that Aboriginal parents are dealing with in the Child Welfare System and the consequences of these events are detailed by the researcher. This theory ‘critically confronts’ how the situations of Aboriginal people are socially explained by other author’s works. Critically confronting the situations of Aboriginal people in the Child Welfare System seeks to reveal how the identities of Aboriginal parents are supported, or not supported. My use of Critical Social Theory allowed for participants to interpret and critique the Child Welfare System through a critical engagement process (Calhoun, 1995).
The four main practical tenets of this theory direct how the state of affairs of participants must be understood and approached. The first tenet speaks to the denaturalization of existing Child Welfare strategies; second, it is important to examine dominant Child Welfare thinking processes; third, the historical and cultural conditions of Aboriginal participants must be explored and considered; and finally, how social change could be accommodated through the implications of existing strategies is explored. Each of these tenets is described.

Using the first of the four tenets of Critical Social Theory, I was able to denaturalize existing and dominant Child Welfare structures or practices (Calhoun, 1995). The primary structure I examined was the existing Child Welfare System. The conditions that I analyzed in this system were the practices that social workers use when working with Aboriginal participants. This tenet helped me to structure how participants would be able to evaluate and question the effectiveness of existing dominant social work practices from their own cultural base. This process would then prepare participants to re-visit and re-envision social work practices that would be more culturally appropriate.

The second tenet of Critical social theory encouraged me to critically understand how the dominant conditions and thinking process of the Child Welfare System have historically affected Aboriginal people (Calhoun, 1995). In general, I was able to isolate and understand how the Child Welfare System has historically affected Aboriginal people within the Canadian context. It was also critical to understand how Aboriginal culture was historically perceived by Westerners because this perception, whether it was negative or positive, was used to inform present Child Welfare practices. This tenet also allowed me to structure this study as participants would be encouraged to explore, understand and to be critically reflective of how their historical and cultural conditions have impacted their present realities.
Some of the ways of understanding the historical and cultural conditions of participants were through historical research and my own knowledge of certain events. First, it was important to recognize how the Indian Act, as a colonization instrument, impacted the lives of participants. The Indian Act was used by the federal government to control and to assimilate all Aboriginal people by forcing them to adopt European values and behaviour in Canada. Within this assimilation regime, I explored the era of, and the impact of the Residential School System.

Residential Schools were created and used by the Canadian government to “civilize” young children by removing them from their parents, their culture and their communities. In 1872, Residential Schools were created to educate Aboriginal children (Indian and Northern Affairs Canada, 1993). Residential Schools were built and scattered across Canada and a large majority of Aboriginal children were forced to live in them. From time to time, Indian agents would identify children who were neglected by their parents and would arbitrarily place them in residential schools (Milloy, 1999). My conceptualization of past government policies and the Residential School era provided me with the base to understand how the Child Welfare System, as a foreign institution to Aboriginal culture, has affected the lives of participants.

Participants were encouraged to revisit a broad range of their past experiences and determine the extent that their past has produced outcomes in their present situation. By doing this, they were able to think through their issues and to identify some of the practices that required change in the future. Participants also examined the significance of Aboriginal culture as a factor in the construction and maintenance of their self-identity.

The third tenet of Critical Social Theory explores and describes how concepts and existing practices may be informed by dominant Child Welfare ideologies and processes (Calhoun, 1995). Creating a space for participants to revisit and describe their Child Welfare
experiences would be crucial for this study. Dominant thinking processes within the Child Welfare System would be identified through the experiences of participants. Participants would be encouraged to critique existing social work practices from their Aboriginal perspective. This process would enable participants to fulfill the next tenet.

The fourth tenet of Critical Social Theory promotes the creation of social change at the personal and collective levels. In pursuit of this goal, participants were encouraged to re-envision existing Child Welfare practices at their discretion. They were able to identify and analyze existing social worker practices and events that were not conducive to their parenting needs. Participants were encouraged to suggest a more acceptable approach for social workers when working with Aboriginal parents.

The four tenets that make up Critical Social Theory are appropriate for this study because, as social workers, we need to understand how significant Aboriginal Child Welfare issues have become for Ontario. Why has this happened? This dimension prepared me to first explore the broader historical and cultural contexts of the participants prior to conducting this study. The theory directed how participants could be encouraged to evaluate the existing practices in their culture and in the Child Welfare System. It was necessary for participants to evaluate the services or practices that they were receiving in the Child Welfare System because, according to Phillips (2000), if an organization such as the Child Welfare System, is exempted from scrutiny by the population it serves, then its practices and policies “become the subjects of just suspicion” (p. 12). Equipped with this critical understanding of the broader cultural contexts of participants, an Anishinabe informed Ekweism dimension can also assist in this analysis in regards to the effectiveness and appropriateness of the Child Welfare System for Aboriginal participants.
Ekweism, the second dimension of this framework is first informed by Aboriginal Theory (Nabigon & Mawhiney, 1996) and it is also grounded in an Anishinabekwe perspective. The Ekweism dimension was applied to explore, interpret and analyze the identities of Aboriginal women and men, vis-à-vis their experiences with the Child Welfare System. From an Aboriginal source, such a perspective does not exist in the Child Welfare literature. The experiences of Aboriginal women and men have been predominately constructed by European settler societies throughout history. Aboriginal experiences were marked by how they differed culturally from the white dominant norm (Ouellette, 2002; Van Kirk, 1980). The Ekweism dimension was constructed to reveal the understandings that contemporary Aboriginal women and men have of the Child Welfare System. The features of Aboriginal theory that informs the Ekweism dimension is first described; and then the augmentation and influence of an Anishinabekwe perspective to this dimension.

Aboriginal Theory is originally viewed from a Cree perspective and it highlights the concept of a wholistic healing process. Aboriginal Theory is an important dimension of analysis as it embraces the inner realities and the broader world views of the study participants. Aboriginal Theory provides a general understanding of how participants understand their own cultural environment and of their relationships with others. Through an Aboriginal worldview, culture is viewed as a way of life (McPherson, 1998). A culture is produced and reproduced through the lived experiences of participants. For example, within the Anishinabe worldview, people try to regulate their lives in accordance to their ancestral teachings and heritage.

Aboriginal Theory has been rearranged into three broad areas or features: 1) cultural values and symbolic objects, 2) medicine wheel circle, and 3) the suitability of the Medicine Wheel Circle in the Child Welfare System. These three features were selected because they are
critical to understanding the experiences of participants in their culture and in the Child Welfare System. The first of these features emphasize the cultural values that are important to Aboriginal people and also the use of symbolic objects during the healing process.

The cultural values that make up Aboriginal theory, according to Nabigon and Mawhiney (1996), are very diverse and these values have been reorganized into thirteen cultural values. They emphasize that the following thirteen values must be acknowledged by social workers when working with Aboriginal people.

One, in the Aboriginal worldview, it is vital to understand that the healing process is a life-long journey and that no human being is exempt from this process. Two, the concept of connectedness, emphasizes that individuals should not be viewed separately from their culture and environment. Even though an individual might be located a distance from their family or culture; he or she is always part of his or her biological family, community, culture and spirit world. Three, the value of acceptance is also very important. It stipulates that other individuals should be accepted regardless of their race, gender, sex, abilities, etc. Accepting others is also a prerequisite of the next value (Nabigon & Mawhiney, 1996). Four, the value of accepting others encourages people to avoid exploiting others, but rather to help others in whichever way they possibly can and always to their best of their knowledge and ability. Helping others could be achieved through the problem-solving process or through other positive, informative methods. Five, the value of listening is also very important in Aboriginal culture. It emphasizes that people should be prepared to listen attentively to the experiences of others. It is also important to take the time to listen to self. Six, the value of constant change enables an understanding that the contexts of participants are always in a state of constant change. Situations do not remain static. Seven, the value of spirit informs an understanding that everything on earth has a spirit. For
example, in addition to human beings, the rock that sits by the ocean, the tall tree that stands by a house, the long, green grass that sways in the wind and the animal that lives in a zoo, all have a spirit. Everything in the world has a spiritual connection to the Creator. Eight, in being spiritually connected to the Creator, the lives of each of the participants are also sacred. It is this value that requires that participants in this study be dealt with in a diligent manner since it is their inner most feelings that are shared. Nine, the value of balance enables an understanding of how the participants might constantly be striving to be in touch with themselves and their environment. Exploring the value of balance in this study might help to reveal how participants mediate their experiences in the child welfare system. Ten, the value of time is also important in Aboriginal theory. It enables an understanding of how the past can become the future. Time is conceptualized as a spiral process. For example, participants in the present might reflect on their past to discover a teaching that they are not presently using in their lives. Through the critical engagement process, the participants may wish to learn more about an ancestral teaching and apply it later at their discretion. In essence, time can be spirally connected to the past, present and the future. Eleven, Aboriginal theory encourages an understanding of how this study could positively impact both parents and their children in the next seven generations. It would be the voices of participants in this study that could be heard by other parents and children in the future. These voices have the potential to create positive change in the lives of Aboriginal parents involved with the child welfare system. Twelve, it also recognizes the integration of the seven grandfather teachings into the study as they are an integral part of Aboriginal existence. To reiterate, the seven Grandfather teachings as noted above, are wisdom, love, respect, bravery, honesty, humility and truth (Benton-Banai, 1979). These teachings are significant for participants since these teachings form the basis of relationships and they are a part of the healing process.
Finally, Aboriginal Theory also highlights the importance of learning from animals and the environment. For example, observing and emulating the behaviours such as the loon into our lives may assist individuals to learn about loyalty. The behaviours of the loon in a natural environment help us to understand how spouses and partners should be committed to each other. By transforming and building upon these behaviours of mother-nature, relative to our human relationships; we learn how to sacrifice our needs for others, to be forgiving, affectionate and compassionate.

These are the thirteen cultural values that underpin Aboriginal Theory. They are the cultural values that are used to understand the worldviews of Aboriginal women and men in this study. In addition to these culture values, symbolic objects are also important to the healing process and so are recognized and integrated into this study. Symbolic objects are used to reinforce the spiritual aspect of sacred places and they were used to facilitate an appropriate atmosphere for participants in this study. For example, the eagle feather, medicines and the medicine wheel were explored for use in this study. An eagle feather, however, was not used in our study as it was not available and it would be difficult to obtain, since it is considered a significant honour to receive one. There is a high significance and esteem placed upon the eagle feather, which is considered sacred to our culture; certainly for my Ojibway nation.

The eagle feather represents balance, and it has various uses. It is sometimes used like a fan to keep the medicines lit. The feather could also be used as a talking stick in a ceremony (Lederman, 1999). Using the feather as a talking stick involves passing the feather amongst participants in a circular manner as participants individually share their experiences. The feather when held, allows a person to share their viewpoints without interruption.

The medicines that are sacred to Aboriginal people include sweet grass, sage, cedar and
tobacco. Tobacco is used for offering or it may be used with the remaining three medicines during the purification or smudging process. The medicines are always lit at the beginning of a ceremony and the smoke from the medicines plays a key role in the smudging process. Aboriginal people tend to use a feather or their hands to gently guide the smoke up towards their eyes, their ears, their mouth, their heart and externally throughout their bodies during the smudging process. The smudging process is a conscious act that aims to remove the negative energies and to replace them with positive energies. Each of the following smudging behaviours is significant to the healing process. For example, the smudging of the eyes encourages individuals to see things from a positive lens. Smudging the ears helps to hear only positive messages. Smudging the mouth encourages the individual to speak positively of others. Smudging the heart encourages the individual to be truthful for themselves and in their relationships with others. Smudging the whole body aims to remove all of the negative influences within the individual. Smudging the body also signifies for the individual’s desire to live positively for the Creator. These are the examples of symbolic objects and how they might be used in ceremonies with Aboriginal women and men. Symbolic objects are used by Aboriginals to reinforce the importance of their culture and the individual’s shared place within.

The second feature of Aboriginal Theory is the traditional Aboriginal Medicine Wheel, which can be used to encapsulate the cultural values and symbolic objects used by Aboriginal people. Brumley (1988) found that the Medicine Circle was originally used by Aboriginal people, specifically, the Plains people in Alberta, Saskatchewan, Montana and Northern Wyoming, for “religious and ceremonial functions” (p. 1) prior to the scientific interests of anthropologists at the end of the nineteenth century (Grinnell, 1922). These circles varied by the number of wedges it held, were much larger as stones were used to construct its form onto the
The symbol of Medicine Wheel Circle is a sacred representation of ‘Kitche Manitou’, the Creator. The circle acts to symbolize the spiritual dimension of the Creator (Johnston, 1976). It is through this concept of the sacred circle and its *four directions*, the identities of participants are to be understood at the micro, meso and macro levels. The personal responsibilities and individual identities of participants are revealed as individuals interact and compare themselves with others in their culture, or of those involved with the Child Welfare System. The Medicine Wheel acts to recapitulate the way individuals understand their experiences through their own voices. This circle, with an intrinsic healing effect, assists individuals to recognize their grievances and to actively work toward a solution. It also encourages individuals to identify their future goals or aspirations. The Traditional circle, whether in the form of the Medicine Wheel or a physical sharing circle, has served Aboriginal people for a very long time. It seems appropriate to utilize this circle throughout this study.

Uniquely important to the Traditional circle are the four quadrants, and the unique values and symbolic objects that are represented within. The four quadrants are referred to as the four directions. The positioning of each direction is similar to a compass. There is an east, south, west and north direction. Each of these directions has specific values and symbolic objects embedded in it. The positive values and symbolic objects that make up the directions become the instructions or teachings that are highly regarded or representative in Aboriginal culture. The circle is read *clockwise* starting from the eastern direction. It is read from the eastern direction because this is where, not only our day, but life events begin. This is where the spiritual dimension of human beings is placed. Bopp, et al. (1984) distinguishes this direction as the place of renewal. The southern direction recognizes the physical dimension of human beings and it can be used to represent patience. The western direction symbolizes the emotional dimensions of
human beings and it is viewed as the place of respect. The northern direction emphasizes the intellectual domain of human beings and in the caring for others. Located in the center of the circle is the hub or the spiritual fire of one’s being. These are the main components of the circle.

The perspective of the circle that Nabigon and Mawhiney (1996) describe predominately originates from Cree and Ojibway teachings. The four colours that are generally used in Medicine Wheel Circles are red, yellow, black and white. These four colours are used to represent a variety of things: the four colours of humans, the four seasons, the four age groups of a population, the importance of clans, the recognition of certain values, various types of feelings, the prominence of certain behaviours, medicines, etc. Values can be positioned in and also taught from the circle. The Circle can help to describe the cultural contexts of Aboriginal women and men and the meanings they attribute to those contexts. Most important to this study, the circle can be used to organize the Child Welfare experiences of the participants.

The third feature of the Circle is in its suitability to assess the concerns of people in the Child Welfare System. Through the work of Nabigon and Mawhiney (1996), the circle can be used to frame assessment tools when working with Aboriginal people in social work. The four directions they represent as four doors and the questions that are placed in each of the doors assist to uncover and understand the present contexts of individuals. For example, the eastern door starts with the aspirations of the individuals. The southern door centers on relationships and time. The western door examines the values of respect and reason, while the northern door explores the behaviours of the individual. The center of the circle looks at healing strategies. The questions they use in their circle were related to understanding the behavioural consequences of participants in the Child Welfare environment (see Nabigon and Mawhiney, 1996, pp. 32-33). The adaptability of this circle relative to the concerns, behaviours and aspirations of participants
in the Child Welfare system is ideally suited to explore how the identities of Aboriginal women and men are influenced. The circle can be used to map a self-reflection process resulting in the changes that participants would like to see implemented in the Child Welfare System. These are the three features of Aboriginal theory. All of the above inspired me to create the: *Anishinabe Identity Circle* and also the *Reality Circle* with sub-components: *Child Welfare Circle*, and *Healing Identity Circle*. These circles serve as analytical and organization tools for this study.

In conjunction with the above Aboriginal Theory, Anishinabekwe perspective also serves to inform the Ekweism dimension. The Ekweism dimension of this framework aims to explore the contexts of Aboriginal people from an Anishinabekwe perspective. It is important to include Anishinabekwe thought since the study was designed and articulated from the perspective of an Aboriginal woman. Anishinabekwe thought is apparently not fully developed in the Feminist literature, but it does exist in the collective consciousness of Aboriginal women, of which I am one.

This collective consciousness is the direct result of the observations Aboriginal women have accumulated as experiences of the social environments in which they are located (Nahanee, 1976). This collective consciousness originated, in part, from the emancipation efforts of Aboriginal women in the past as they attempted to assert their Aboriginal rights. Aboriginal women were instrumental in 1968 in challenging Indian policy, specifically, section 12-1-B of the Indian Act. This section forced Aboriginal women to lose their Indian status upon marrying a non-Aboriginal man. Aboriginal women perceived this section of government policy to be sexist and discriminatory towards Aboriginal women (Jamieson, 1978).

The Indian Act was conceived by the Federal Government of Canada. It serves to assimilate the Aboriginal population by forcing them to conform to alien European ideas, values
and behaviours. Even though Section 12-1-B had regulated women to lose their Indian status and to leave their families and communities; this was very different for Aboriginal men. If an Aboriginal man decided to marry a non-Aboriginal woman, he was not forced to forfeit his Indian status or leave his community. The non-Aboriginal woman that he married would automatically gain Indian status or entitlements and would be allowed to live freely in the community (Jamieson, 1978). Even though Aboriginal women were able to voice their concerns in the court system, their legal rights remained unchanged. It wasn’t until the Indian Act was revised in 1985, that the concerns of Aboriginal women in regaining their Indian status were addressed (Please see Jamieson (1978) for a comprehensive analysis of this court challenge). This is one example of an emergence of a new and informed Anishinabekwe political activism, resulting in the voices of Aboriginal women being distinctly and publicly heard. Anishinabekwe thought is not fully developed in the Feminist literature, but it has the potential to offer an alternative perspective in understanding the experiences of Aboriginal people. As new awareness emerges, Anishinabekwe thought will continue to be refined and will continue to challenge the established political structures in which Aboriginal women are located.

Anishinabe thought can be seen as a strand of Feminism. Feminism has been developing for years and there are many strands of Feminist Theory. The three main streams: the liberal, the radical and the socialist feminist are briefly described. These streams restrict their analyses to the oppressive contexts of, and the emancipation efforts of women (Saulnier, 1996). Western feminists have been articulating and advancing their rights as women particularly their political rights since the eighteenth century (Saulnier, 1996). The feminist consciousness of Western feminists centers on social change, emancipation and transformational principles (Safarik, Wolgemuth, & Lees, 2003). While most Aboriginal women would agree with the perspectives of
Western feminists and their identification of the existing societal injustices at work which reinforce the inequalities of women as a whole in society (Grant, 1994). Aboriginal women would also integrate the Western feminists ideals of social change, emancipation and transformational principles quite differently from Western feminists based on the unique relationship of Aboriginal women to mainstream society.

A majority of Aboriginal women have historically been confined to isolated, federally designated reservations in Canada. Confining Aboriginal women to these reservations has served to separate them, and to conceal their inequalities from mainstream women. As a result, Western feminists have not been supportive of Aboriginal women’s movements (Shanley, 1995) because the political contexts in which the two groups have been socially positioned were, and continue to be very different. In attempting to position Anishinabekwe thought as an aspect of the broader Feminist consciousness, I have aligned it with third-wave Feminism, because this critical study seeks to explore and examine the ‘multiple oppressions’ that exist in women’s lives (Ballou & Mulrooney, 2006). Third-wave Feminism as presented by Naomi Zack is a theory which explains the concept of ‘intesectionality as it relates to the multiple oppressions’ of all women. Third-wave feminism seeks to explore and analyze the oppressions of ‘oppressed peoples’ from an alternative framework when “White, privileged” women working from “modern epistemological framework[s]” were unable to stand for, and relate to the experiences of marginalized and women of colour (Ballou & Mulrooney, 2006, p. 323).

Aboriginal thought informed by third-wave Feminism is used to explore the ‘multiple oppressions’ of Aboriginal men, as well as Aboriginal women, in the Child Welfare System (Nahanee, 1976). Crenshaw’s ‘intersectionality’ concept is used to explore how the cultural and child welfare contexts systematically influence the identities of Aboriginal parents. This process
revealed how social work practices negatively affect parents (Crenshaw, 2002).

Anishinabekwe thought is key to understanding how Aboriginal people through the government’s Indian Act are politically, socially, and culturally positioned within the Canadian context over time. Ouellette (2002) suggests that if Feminists (or any other theorists for that matter) want to genuinely understand the experiences of Aboriginal women and men; they must first understand the context of colonization through the perspectives of those people who are embedded in such a context.

The lens of Anishinabekwe thought reveals inequalities that are uniquely different from the inequalities that would be perceived by Western Feminists in the context of this study. Anishinabekwe thought does not see men as the enemy of women, but rather the emphasis of this perspective is to resist the encroachment of negative external influences upon Aboriginal people. The external influences could include racism, unemployment, education inequalities, foreign legislation (Nahanee, 1976), and practices that are inconsistent with Aboriginal worldviews, or practices. It is the external conditions of government institutions and policies that continue to oppress Aboriginal people (Ouellette, 2002).

Anishinabekwe thought was used to explore the foreign structure of the Child Welfare System through the observations and perspectives of Aboriginal women and men. Their perspectives assist to deconstruct the Child Welfare System and to identify how the internal mechanisms – practices and policies, negatively affect them. Aboriginal thought provides the means from which to understand the subjective and oppressive contexts for Aboriginal people.

Similar to Critical Social Theory, Anishinabekwe thought is also interested in examining and understanding the broader socio-historical contexts of Aboriginal people. It is important to understand how foreign or mainstream institutions have impacted Aboriginal people. For
example, this study attempts to scrutinize the Child Welfare System as a power structure and how it directly impacts the identities of Aboriginal parents. European-based policies, programs and practices in the Child Welfare System are explored and analyzed by the participants themselves. Insight into how the Child Welfare System operates to oppress Aboriginal parents through a ‘power over another’ mentality is crucial to understanding the processes. In a report by Roach (2000), the type of power that many ‘Anishinabeg’ experience within their communities from government-driven agencies is the ‘power over another’ type. Anishinabekwe thought can reveal how the ‘power over another’ is manifested, by observations of the participants themselves.

Participant involvement with the Child Welfare System can be understood from the micro, meso and macro levels. At the micro level, this study encourages participants to uncover and to speak about their experiences from a subjugated lens. Participants disclose how they feel devalued because of their culture as a result of European-based Child Welfare Systems that continually attempts to “convert[] the minds of the colonized [participants]” (Ouellette, 2002, p. 38).

Participants, from a meso level analysis, reveal how the practices of the Child Welfare System affect their parenting needs and identities. The ways in which participants have formed their understandings of their relationships with social workers is important. It could be through this exploration that the spiritual, physical, emotional, and intellectual needs of participants can be known.

The perspective of participants from a macro level analysis, seeks to understand how participants through the de-colonization process can be re-positioned as agents of change in the Child Welfare System. This is the first step towards developing and maintaining a healthy
identity (Ouellette, 2002) as participants must delineate what is important to them. Aboriginal participants in this study are provided with a space where they can share and analyze the meanings of their existing experiences of oppression and to develop ways of dealing with it. This is the how Anishinabekwe thought is used to inform this study.

This unique Critical Ekweism theoretical framework aims to epitomize the ‘situated knowledge’ of Aboriginal people as parents by validating their experiences in their culture and in the Child Welfare Context (Sunseri, 2000). The Critical Ekweism framework aims to augment the cultural appropriateness of the study and to situate the group of participants according to their needs during the study (McKenzie et al., 1995).
CHAPTER TWO: METHODOLOGY

The design of this purposive, exploratory study was structured from the strands of the Aboriginal Circle approach (Graveline, 1998); the Phenomenological approach (Husserl, 1931); Grounded Theory strategy (Strauss & Corbin, 1990). These three approaches originate from different ideological bases. Aboriginal-informed research designs that are specific to identity do not exist but I was able to borrow the most relevant strands from two Western approaches to create a study design suitable for the purpose of this research. The Aboriginal Circle approach was used to accentuate the past, present and future contexts of Aboriginal women and men. A brief overview of each of these three approaches is provided. The sampling methods, description of participants, how the study was carried out and data collections, along with analysis are also described.

Aboriginal Circle Approach

The Aboriginal Circle approach was developed from an Indigenous methodological base by Fyre Jean Graveline (1998). The Circle approach is an alternative methodology that offers a non-Western approach to conducting research with Aboriginal people. I chose the Circle approach because I wanted to be inclusive of Aboriginal realities, metaphysical beliefs and traditional practices. These areas are critically important to consider when creating culturally appropriate research designs, and when ‘doing’ research with Aboriginal participants in education (Bazylak, 2002), health (Rothe, Ozegovic, & Carroll, 2009) and in the Child Welfare Setting (Boyes-Watson, 2005). The Circle approach itself has a strong relationship with the Critical Ekweism framework because it emphasizes the use of the traditional Medicine Wheel which is culturally appropriate for exploring the experiences of participants in this study (Stevenson, 1999). The Circle as a knowledge-making process is highly regarded when working
with Aboriginal people and the procedures that are used to analyze data are ‘combined’ with other qualitative researcher’s work (Graveline, 2000).

**Phenomenology**

Phenomenology is a philosophy, an approach, and a method that is accredited to Edmund Husserl (1859-1938), “the father of phenomenology” (Ray, 1994, p. 118). Phenomenology is derived from philosophy and psychology, and has two main bodies of knowledge and numerous sub-strands within it. Phenomenology as a method, seeks to create new knowledge by extracting distinctive intentional meanings – essences of consciousness, from the natural day-to-day realities of people (Husserl, 1931). ‘Intentional’ referring to “how consciousness is always directed toward an object” (Stewart & Mickunas, 1974). Even though Phenomenology as a method was derived from modern philosophy of the time, in the early 1900s; I decided to implement it into this study because I believe this philosophy is still valid today. The new knowledge it seeks to understand is reflective and grounded from the subjective experiences of human beings within their contexts (Husserl, 1931).

Transcendental Phenomenology is interwoven with the Aboriginal Circle approach and it seeks to ‘show’ how Aboriginal women and men come to understand and know themselves through self-reflection (Ray, 1994). Aboriginal women and men, as the experts, bring forth new knowledge through data that is reflective of their consciousness – “the appearance of objects” (Moustakas, 1994). It is important to situate and to analyze how a priori, the Child Welfare System, brings about change in the lives of participants (Zahavi, 2003). Through a Phenomenological lens, consciousness of participants is compared to a container, where the

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3 Phenomenology can be informed by Husserl’s Transcendental (descriptive) tradition and by Heideggerian’s Hermeneutic (interpretive) tradition (Ray, 1994).
4 For example, the descriptive strand has been extended by Marvin Farber and others, while the interpretive strands of Phenomenology is extended by the work of Husserl’s student, Martin Heidegger (Ray, 1994; Wilcke, 2002).
cultural consciousness of participants is contained separately from the larger world. It is only when information from an external source, the Child Welfare System, has entered into the consciousness of participants that a relationship to that external source can be made. This information that is conveyed, must be understood and articulated by ‘first-person perspectives’, along with the ‘collective consciousness’ of Aboriginal women and men, as they try to relate to what it means to be involved with the Child Welfare System (Zahavi, 2003). Phenomenology through a Husserlian lens also explores how knowledge can be constructed from issues that are important for Aboriginal women and men in their environment (Hanohano, 1999). Moustakas (1994) cites that Husserl’s Transcendental Phenomenology “emphasizes subjectivity and discovery of the essences⁵ of experiences and provides a systematic and disciplined methodology for derivation of knowledge...” (p. 45).

**Grounded Theory Strategy**

Grounded Theory was originally developed by sociologists Barney Glaser and Anselm Strauss. It was Barney Glaser, who was interested in empirical research, while Anselm Strauss was more involved with qualitative-based research designs (Strauss & Corbin, 1990). Grounded Theory is the inductive development of this theory from data. The Grounded Theory strategy that I use in this study, inductively examines how the identities of Aboriginal women and men have been socially influenced by the Child Welfare System, which is the phenomenon of interest in this study.

I chose to integrate Grounded Theory strategy into this study, in part, because its explicit systematic coding procedures are clear. This strategy can be used to support the implicit coding procedures of the Phenomenological and Aboriginal Circle approaches. Grounded Theory

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⁵ Essence is “a linguistic construction, a description of a phenomenon” under study (van Manen, 1990) on page 39.
strategy assisted in creating a preliminary identity model that was elicited from the realities of participants in the study (Strauss & Corbin, 1990). Furthermore, the theory that is generated from the model is able to provide the parameters from which to explore and examine the phenomenon of identity (Strauss & Corbin, 1990), with this group of Aboriginal women and men at a specific time.

The Aboriginal Circle approach, the Phenomenological approach and the Grounded Theory strategy are different; but they have complementary strands that are ideally suited to exploring how Aboriginal women and men socially construct their identities in the child welfare system. All three approaches involve work with inductive studies, as the knowledge-building process is directly formed by the participants.

**Sampling Approach**

Snowball sampling was used to recruit a total of twenty-seven (n=27) Aboriginal women and men who were parents involved with the (Ontario) Child Welfare System. While researchers have stated that a total of 8 (McCracken, 1988), 9 (Caelli, 2001), 8 to 12 (Ray, 1994) persons are sufficient for qualitative studies, additional participants were recruited for the purpose of collecting ‘thick descriptions’ of experiences (Lincoln & Guba, 1985). Within this group, twenty-five were women and two were men. My rationale for including both Aboriginal women and men in this study is emphasized by the Critical Ethnism framework because both genders, as parents, were affected by the Child Welfare System. Fourteen of these participants lived in the North and thirteen of them lived in the City. The initial sample was recruited by means of a recruitment flyer that was posted at local agencies (See Appendix “A”). The snowball sampling technique encouraged the participants to inform other interested parents about this study. Prospective participants telephoned to express their interest. Prospective participants were
conditionally included in the study if they were eighteen years of age or older. They also had to identify themselves as being an Aboriginal person, and they also had to be a parent involved with the Ontario Child Welfare System.

**Description of Participants**

The demographics of the participants are described as part of the *Reality Circle* on page 9. Demographics have been termed *Characteristics* and are located in the *Place of Understanding* direction in the *Healing of Identity Circle* diagram. The characteristics of the participants were placed in the Healing of Identity Circle diagram because they are findings that were used to introduce the backgrounds of participants who have contributed to, and are included in this study.

**How the Study was Carried-Out**

Before carrying out the study with the participants, consent was first obtained from numerous Aboriginal leaders in the community. Obtaining consent from community leaders was important because I would be gathering sensitive data. I selected and then telephoned community leaders regarding my proposed study. I then followed up with a personal visit in order to introduce myself and my study outline. All of the community leaders that I had contacted favoured the study, but it was not until they had agreed to post the recruitment flyer on their administration bulletin boards that I felt I had fully obtained their consent.

The salient features of this study were explained to participants during the informed consent process. These features include that they could either participate in sharing circles, or in individual interviews. A twenty dollar honourarium would be provided, regardless if they answered any of the study questions. Their responses during the study would be audio-taped and transcribed verbatim. It was very important to inform participants that any personal information
shared in this study would be accessed only by the researcher and her supervisor. The only time information would be shared with persons outside the study, was in the event that during questioning, there were any disclosures regarding child abuse. The identities of participants were “stripped” from them (Graveline, 2000, p. 366) and protected by using fictitious names. Participants were requested, but not required, to consent to a second visit with the researcher should any information in the transcripts require clarification. Participants were informed that the research data would be destroyed five years after the study was completed; and that the findings of this study would be disseminated at conferences and published in academic journals. This process would assist in informing the social work profession, the community, social service providers, scholars, and policy-makers about the contemporary Child Welfare issues confronting Aboriginal parents. Counselling resources were made available for participants should service be required as a result of the study process. The above is the information that participants were required to understand before the study data collection process could begin. A copy of the study Consent Form was provided to all and was signed by both the participant and the researcher (See Appendix “B”).

**Data Collection Methods**

Data collection methods were informed by the Aboriginal Circle approach (Graveline, 2000) which is linked directly to the Critical Ekweism framework. Data was collected over a seven month period and transcribed verbatim. Between the months of December 2005 to April 21, 2006, a follow-up visit with participants at both sites was conducted to review their transcripts (Caelli, 2001). A summary of data collection methods is provided in the following Summary of Data Collection Methods table.
### Summary of Data Collection Methods

<table>
<thead>
<tr>
<th>City Site</th>
<th>Date</th>
<th>Number of Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sharing Circle #1</td>
<td>March 12, 2005</td>
<td>-1 (pilot-test)</td>
</tr>
<tr>
<td>Sharing Circle #2</td>
<td>April 24, 2005</td>
<td>3</td>
</tr>
<tr>
<td>Sharing Circle #3</td>
<td>May 24, 2005</td>
<td>0</td>
</tr>
<tr>
<td>Sharing Circle #4</td>
<td>May 28, 2005</td>
<td>3</td>
</tr>
<tr>
<td>Sharing Circle #5</td>
<td>June 7, 2005</td>
<td>2</td>
</tr>
<tr>
<td>Face-to face Interviews</td>
<td>July 15 – October 13, 2005</td>
<td>5</td>
</tr>
</tbody>
</table>

**Northern Site**

| Sharing Circle #1 | November 1, 2005 | 5 |
| Face-to face Interviews | October 31 – November 4, 2005 | 9 |

The Summary of Data Collection Methods Table illustrates how the study used multi-method data collection with a collective group of participants, who were either living in the City or the North. The four out of six sharing circles that were successful are identified, in addition to the fourteen face-to-face-interviews that I conducted. In terms of the literature, I acknowledged the advice of other Aboriginal researchers, to ground the study in a method that would be conducive to the worldviews of Aboriginal people. I initially wanted to use only sharing circles to gather data, but my first sharing circle in the City only produced one out of the five participants that were scheduled to attend. But I was able to benefit from the co-operation of my one participant, as I went ahead with the interviewing process and was able to test-pilot the questionnaire. There were six women who had committed themselves to attend Sharing Circle #3, but no-one showed up. Some of the women who were unable to attend my scheduled sharing circles did however contact me, to inform me that they were absent due to family concerns. An ongoing public transit strike at the time also had an effect on attendance. The few remaining women who failed to attend the sharing circles did not contact me, I assume had other interests.
In my examining the studies of other Aboriginal scholars (Baskin, 2005b; Restoule, 2004), I realize that attendance at sharing circles can be problematic; this is normal as there will often be unforeseeable circumstances that, as researchers, we are unable to account for.

For those participants who did attend the sharing circles, I was clear in presenting myself, not as a social worker from the child welfare system, but as a researcher who wanted to explore the concept of identity from an Aboriginal perspective; with participants involved with the Child Welfare System. It was during the sharing circles, after the women became comfortable with me, that they readily began to share their experiences of involvement with the Ontario Child Welfare System.

The sharing circles and the interviews were conducted at safe and convenient venues such as: community boardrooms, at the residence or workplace of a participant, in classrooms and at local cafes. The time duration of the sharing circles, ranged between 45 minutes to 3 hours; each sharing circle consisted of two to five participants. The duration of each face-to-face interview ranged from 30 thirty minutes to 60 minutes.

The sharing circle and the individual interview each consisted of three segments: the introduction, process and conclusion. This routine began by a formal greeting to the participants in the Ojibway language and in English. Medicine ties were given to symbolize respect for both the researcher and participants, and to commemorate the start of the study. At each sharing circle and interview, information regarding the goals of the study was reviewed by the researcher, who read aloud the Research Procedures Information Form (See Appendix “C”). The Interview Guide, which consisted of ten questions, was also shared with participants during and before each session (See Appendix “D”). Overall it was important to situate the participants as being the experts of their child welfare experiences, because I required their input in order to understand
how their identities as Aboriginal parents were influenced by the Child Welfare System. Participants were encouraged to help themselves to the complementary refreshments of tea or coffee; and snacks of fruit, vegetables and pastries. The participants were encouraged to answer and also to ask questions during the data gathering process.

According to Graveline (1998) the ‘space’ in which the researcher and participant are located during the process is envisioned as a ‘sacred circle’ – a ‘space’ which transforms into a ‘talking’ or ‘sharing’ circle. This study literally used the interviewing space as a ‘sharing’ circle. The sharing circle consisted of four to six participants; the chairs were physically arranged in the traditional circular fashion in order to be inclusive of everyone. A symbolic object - a rock, was passed around in a clockwise direction to encourage an atmosphere of trust and “openness” (Graveline, 1998, p. 141). Whoever was holding the rock would share her/his opinions and ideas about a specific topic with the rest of the circle members. When she/he had finished speaking, the rock was passed to the next participant and so forth until the circle was complete.

It was interesting for me to note, that when the sharing circle had concluded, the participants continued to discuss their involvement with the circle and how much they had enjoyed it. They continued to socialize with each other and they expressed happiness with meeting each other. My contact information was provided if any of the participants desired to speak with me about the study. The participants helped to tidy up the room and put chairs away etc. All surplus beverages and snacks were offered to the participants to take home to their children.

**Data Analysis**

Data was analyzed by use of the grounded theory strategy (Anastas & MacDonald, 1994) combined with analytical procedures from both the Medicine Wheel and Phenomenological
approaches. In the Grounded Theory approach, data analysis usually begins at the time of data collection, but in this study, the data was not analyzed until after participants had verified their transcripts during the follow-up phase. This was how I modified the Grounded Theory strategy. It was important that participants confirm their data before conducting the analysis (Caelli, 2001). Data was analyzed initially between the months of February to June 2006. The use of Grounded Theory revealed how the content was to be “reconstructed in chronological and/or logical order[ed]” (Caelli, 2001, p. 278) themes.

It was also important for me to weave relevant analytical procedures from the Medicine Wheel and Phenomenology approaches. Integrating procedures from the Medicine Wheel approach ensured that the data would be analyzed by using Aboriginal techniques and perspectives. Selected Phenomenological analytic procedures were borrowed from the work of Caelli (2001). Kate Caelli⁶, a Phenomenologist, who explores and critiques a study she had completed on the understandings of health and nursing practices. She articulates how the Phenomenological process can be difficult to conduct by new researchers as the techniques and procedures of such studies are not fully described in Phenomenological research. In the support of new Phenomenological researchers, she describes how the data needs to be audio-taped, transcribed, and to be followed-up with a clarification with the participants before any analysis takes place. These steps I integrated into my study, except the subsequent numerous follow-up interviews that she carried out with each of her nine participants was not adopted; I limited this to a single follow-up interview. Aspects of the method she had used to carry out a Phenomenological study were helpful.

The study data was stored and analyzed in the Nvivo (2000) software program for

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⁶ Kate Caelli is a qualitative nursing Phenomenological scholar and professor at the University of Alberta.
qualitative research. Before analyzing the data, there were some preparatory steps which had to be undertaken. The analysis was approached with an open mind, so I would be able to understanding the meanings from the perspectives of participants (Graveline, 1998). In other words, my own ideological framework needed to be ‘bracketed’ (Husserl, 1931) or to be ‘pushed aside’ in order to concentrate on the essences of meaning that emerged from the data (Caelli, 2001; Moustakas, 1994, p. 45; Wilcke, 2002). This was how I approached the data before analysis.

Data was then analyzed using the Grounded Theory strategy. The themes that were generated from this process were derived from the open, axial and selective coding procedures (Anastas & MacDonald, 1994). How each of the three coding procedures contributed to this study are discussed below.

The open coding procedure started with the constant “examining, comparing, conceptualizing” (Strauss & Corbin, 1990, p. 61) of participants’ “behavioural actions” and “words” (Strauss, 1987, p. 15). The units of analysis were the ‘descriptions or meanings’ used in each of the sentences within the paragraphs. The responses to each question were carefully read and were coded directly to correspond to the question that had been asked. For example, if participants openly shared their age in response to the age question; then the whole sentence would directly be linked and coded to the theme of age. If answers were not directly connected to the question then provisional codes were initiated.

Provisional codes were used to code responses that did not fit with direct questions. Provisional codes were used to highlight emerging responses that seemed important to participants in the study (Anastas & MacDonald, 1994). These new responses were left floating or suspended at this time and were clustered at the next axial coding process. One hundred and
forty (n=140) themes emerged at the beginning of this procedure and by the end of this procedure; there were a total of six hundred and ninety (n=690) themes. The open coding process encouraged me to become familiar with some of the nuances that were embedded in the data. This procedure also showed how the data were rich in detail (Graveline, 1989; Caelli, 2001). Codes were saturated after coding eighteen interviews.

The second procedure of the Grounded Theory data analysis is axial coding. This procedure yielded twenty-four (n=24) provisional codes and six hundred and sixty-six (n=666) direct codes. The direct codes were then clustered into fifty-three (n=53) categories. For example, codes that described the age, number of dependents, employment status, marital status etc., of participants were clustered together in the characteristics category. Both direct and provisional codes that appeared to reflect the same idea were clustered together. The process of working back and forth with the data was exercised in order to make sure categories were independent of each other (Anastas & MacDonald, 1994; Graveline, 1998). Out of the fifty-three (n=53) categories, twelve (n=12) dominant themes were selected and are encapsulated within the medicine wheel format and represented in the Reality Circle. Each of the twelve themes constitutes the dominant perspectives of participants and selected quotes are used to illustrate each theme. The twelve themes reveal how participants as parents are juxtaposed with both their cultural context and the Child Welfare context.

At first glance, the overall structure of the Reality Circle is similar to the circle that Nabigon and Mawhiney (1996) previously described, but this new circle is reflective of participants’ experiences in the this study. The Reality Circle is informed by the Critical Ekweism framework as it positions participants as being the experts, or knowers of their own contextual realities. The voices of participants are acknowledged in the Reality Circle and are
encapsulated as findings for this study.

**Reality Circle**

The Reality Circle is used to organize the findings of the study and it symbolically consolidates the reflective experiences of the participants. Two intersecting lines that make up the four directions are used to highlight significant parts of the whole experience of participants. Each direction is represented by a *place of knowing* which participants had identified during the self-reflection process. The self-reflection process was tense as it encouraged participants to confront their concerns and to share their inner most feelings and perceptions of Child Welfare System. It was through this self-reflection that the four quadrants or places of knowing emerged. The term *place* is relative to *process*, because the type of place in which participants find themselves is both complex and dynamic. Their realities are not static but are multidimensional. These “places” are not mutually exhaustive but are interconnected and overlapping. This overlap is most evident in Chapters 5 and 6 as there is unavoidable repetition of key points vis-à-vis these two chapters. But together, they assist to reveal how Aboriginal women and men can interpret their own situations as they reflect on key aspects of their social world. How each of the four places of knowing and the respective four colours are used to frame the experiences of participants in both the Healing of Identity and Child Welfare Circles will now be briefly described.

**Healing of Identity Circle**

The four places of knowing are found in the ‘Reality Circle’ and in both sub-components: the ‘Healing of Identity’ and ‘Child Welfare Circles.’ You will see that in the central inner sphere, the findings in the Healing of Identity Circle are described first. The *east* direction of the quadrant is the ‘Place of Understanding’ where participants come to understand their purpose in
this study. This place also symbolizes the start of the study process with participants. The themes that are explored in this direction are the “Who am I” questions. For example, the ‘Characteristics’ of participants are introduced, along with the importance of their ‘Culture.’ In the south, the ‘Place of Disconnection’ is where participants were able to name some of the things in their environment that have contributed to their sense of disconnection. Participants shared the types of concerns that they were struggling with in their lives. For example, participants described their ‘Past and Present Trauma’ and their disconnection to ‘Aboriginal Culture.’ In the west direction is the ‘Place of Identification’ where participants begin to identify certain things that are required for self-change. The main theme that is explored in this place is the ‘Internal (Anishinabe) Responsibilities’ for participants. In the direction of north is the ‘Place of Reconnection’ where participants continue to resolve their feelings of discontent. The concept of healing is also part of this direction because it allowed participants to think through their situations and to devise suitable solutions for social change. The theme that is explored in this north direction is ‘External (Anishinabe) Responsibilities.’ These are the aspects of the Healing of Identity Circle. The next outer sphere, the Child Welfare Circle has some similar aspects.

**Child Welfare Circle**

The Child Welfare Circle has the same directions and shares the same quadrants as the Healing of Identity Circle, but it explores different themes. For example, in the east is where the ‘Place of Understanding’ is located, the theme of ‘Services’ is explored as it is helpful to understand some of the services participants are receiving in the Child Welfare System. The south is the ‘Place of Disconnection’ where participants again share some of their perplexing experiences in the Child Welfare System. The two themes that are explored in this place are participants’ ‘Traumatic Reactions’ that are created from social workers and the perception from
participants of how social workers ‘Work Against Me.’ In the west, participants are located in the ‘Place of Identification’ where they again identify ways of self-change. Participants think of ways to help themselves as they negotiate and work with social workers in the Child Welfare System. The major theme that is explored in the western direction is the ‘Parent Responsibilities’ of participants.’ Finally, in the north, the ‘Place of Reconnection’ seeks to identify how social workers and the communities of participants could support the healing process for participants in the child welfare system. The purpose of the healing process is to identify ways to support and strengthen the parenting identities of participants. The themes that are explored in this direction are ‘Social Work Responsibilities’ and ‘First Nations Responsibilities.’ The colours that are used to represent each of the four places of knowing are also unique.

The four colours of the Reality Circle are different from that of the Medicine Wheel in the Native literature. The conventional colours noted by Nabigon and Mawhiney (1996) and other Aboriginal authors to describe the Medicine Wheel are represented in the following manner: generally, the east is visually represented by the colour of yellow, the south is often represented in the colour of red, the west is colour of black and the colour of the north direction is white. But in my Reality Circle, green is used to symbolize the eastern direction, the south is represented in red; the west is blue and the north is white. These four colours are meaningful to me personally as they are the spirit colours of my daughter. The colour blue also represents the ‘spirit’ name of my eldest son who has passed on to the spirit world during this study. The colour green is important because it symbolizes the aspect of the healing process (Nabigon and Mawhiney, 1996) which is significant to this study. The colours of red and white, I borrowed from the Medicine Wheel. The arrows around the perimeter of the Reality Circle illustrate the direction the circle is to be read. For the purpose of this study, the Reality Circle, like the Critical
Ekweism framework, starts in the eastern quadrant and moves in a clockwise direction toward the north. This is how the Reality Circle is read.

Finally, in the center of the Reality Circle is the central focus of this study – identity. It is the purpose of this study to try to understand how participants, as individuals and as parents, view themselves and their parental roles in both their Aboriginal culture and the Child Welfare contexts. The above are a description of the unique features of the Reality Circle. The Reality Circle is intended to explore and describe how the identities of participants are constructed. By the use of axial coding procedures, the preliminary results of this study are presented through the concept of the Reality Circle.

The data that had emerged from the axial coding process was assisted in refinement by the selection coding procedure of the Grounded Theory strategy. The selection coding procedure was used to work with data beyond the Medicine Wheel format. This process is reflected and discussed in the Anishinabe Identity Circle (See diagram on page 7).

Anishinabe Identity Circle

The Anishinabe Identity Circle highlights the implications for Aboriginal-based theory; and the implications for Aboriginal-based policies and practices from the findings of this study. The former is the result of a theory that can be used to understand the identities and realities of participants in their own culture. The latter is the result of how the parenting identities of participants could be supported by both social workers in the Child Welfare System and by the community. The ‘Anishinabe Identity Circle’ uses the same colour of manitouminasuc that were used in the Reality Circle. The manitouminasuc represent the major themes of this study.

The Anishinabe Identity Circle consists of five concentric circles. The first red circle represents the identities of participants which are situated in the cultural and Child Welfare
contexts. Both the personal and the parenting identities of participants are explored in each of these two environments. Second, the next grey circle shows the major participant social processes. In the ‘Culture’ contexts, participants were grappling with ‘Struggles’ in their lives, their ‘Healing’ processes and the importance of ‘Aboriginal Culture.’ In the ‘Child Welfare’ context, participants were preoccupied with their ‘Involvement’ with the Child Welfare System, the ‘Disadvantages’ of their Child Welfare experiences, and their desire for a ‘Relationship Change’ with social workers and with people in their communities. Third, the next circle: ‘Anishinabe Responsibilities’ are represented by twelve green manitouminasuc, which are necessary for the healing process. The twelve ‘Anishinabe Responsibilities’ have been arranged as both internal and external responsibilities. Four, the two outer circles have a combination of blue and red manitouminasuc which reflect the responsibilities of parents and social workers in the ‘Child Welfare’ context. The nine blue manitouminasuc identify the emerging responsibilities of parents in the child welfare system. In addition, the eighteen red manitouminasuc represent the responsibilities of social workers. Five, the one grey manitouminasuc represents the responsibility of ‘First Nations Communities.’ This is how the selection coding procedure contributed to the creation of the Anishinabe Identity Circle.

To summarize, the Anishinabe Circle approach used strands from both the Phenomenology approach and the modified Grounded Theory strategy to inform this study. Data collection methods, specifically the use of sharing circles and individual interviews, were also informed by the Critical Ekweism framework, for the inclusion of participants’ Aboriginal realities, metaphysical beliefs and traditional practices. By weaving the above strands together, the ‘Reality Circle’ and the ‘Anishinabe Identity Circle’ were developed during the data analysis process. The ‘Reality Circle’ reflects the preliminary findings of this study while the ‘Anishinabe
Identity Circle’ serves to identify the Anishinabe, Social Work and First Nations responsibilities. The content of the ‘Reality Circle’, specifically, The Healing of Identity and The Child Welfare circles are first described in detail in the Chapters 3 and 4 while the components of the ‘Anishinabe Identity Circle’ are further analyzed in Chapters 5 and 6.
CHAPTER THREE: THE REALITY CIRCLE

As displayed in the Reality Circle diagram, preliminary data findings reveal the present multi-dimensional contexts of participants by exploring how their identities are socially located and influenced by Aboriginal culture and the Child Welfare System. In this chapter, the themes of the Healing of Identity Circle are described.

Healing of Identity Circle

The Healing of Identity Circle explores how participants view themselves with respect to their culture by using each of the four directions of the Medicine Wheel. These four directions assist the participants to situate themselves in accordance with their Place of Understanding, Place of Disconnection, Place of Identification and Place of Reconnection. The identities of participants are to be understood within this Critical Ekweism framework. Selected quotes which ground the responsibilities to the experiences of participants within their present settings are used throughout this chapter, to exemplify what most of the other participants have collectively said in the study.

Identity

The Healing of Identity Circle, the center being Identity, describes how participants initially see themselves within their Aboriginal culture. Due to the limited scope of this study only the first identified role that was expressed by participants is used. Study findings revealed that twenty-two of the participants saw their foremost role as either being mothers, women, parents, and a child.

“Absolutely mother, woman, Aboriginal woman, you know, cause I think that a lot of the way I've been treated over the years is because I'm an Aboriginal woman” (Corrine).

“Being a parent, I guess” (Brad)?

“Woman and mother. When I deal with C.A.S. I don't act like a woman. I don't act in an
organized way. I act like an upset mom, like an upset mom” (Wendy).

“Well for me to be really honest I feel like a child still. I feel like a child of the Creator because my life as this..., I don't know how to put it into words, things that I'm learning and the people that I'm learning from and where my path is right now is very profound. I'm like a child right now. I'm obviously a mother and I struggle to mother my fifteen month old daughter. I struggle very hard because I doubt myself. And it's just the seeds that were planted by the CAS and the system of what was bad about me or what I was incapable of. Trying to undo these things I feel like I'm a child, still learning and growing” (Marion).

*Foremost role* was a key question to ask of participants at the beginning of the study because it helped to establish how each of the participants understood their role within a cultural context. Corrine, Brad, Wendy and Marion revealed that most of the female participants primarily viewed themselves as mothers, as women, or, in one case, as a child. The male participants saw themselves as parents. Wendy thoughtfully revealed how she was able to simultaneously project herself as foremost being both a woman and a mother, but relative to the child welfare system context, she only saw herself as an upset mother. The initial identity of one participant was unknown. These responses from participants highlight the emerging multi-dimensional identities that are culturally important to them.

**Place of Understanding**

In the Place of Understanding of the East quadrant, participants move beyond their central roles and share their broader experiences with each other. This place focuses on the *Who am I* question, and the social location of participants through two key themes: the social *Characteristics* of the participants and *Culture*.

**Characteristics**

In addition to their foremost roles, the twenty-seven participants in this study were able to share their broad social contexts. The following characteristics are used to describe the group composition of the participants. These characteristics include the participants’ Gender,
Aboriginal Heritage, Marital Status, Age, Education, Employment and their use of Language.

The twenty-seven Aboriginal participants who were involved in this study consisted of twenty-five women and two males. The Aboriginal Heritage of the participants included: sixteen Ojibway, six Cree, two Aboriginals, and one of each - Inuit, Carrier and Saulteaux. It was interesting to note that the original geographic residency of the participants was wide ranging throughout Canada. Twenty of the study participants originated from Ontario, four from Saskatchewan, and three participants respectively originated from Labrador, British Columbia and Alberta.

The Marital Status of participants indicated that nine of the participants were single; six participants were living in a common-law relationship; one participant was married; and the marital status of eleven participants was unknown.

The Age of participants in this study also varied. There were four participants in each of the 21-25 and 26-36 age categories; three were between 31-35 years of age; six were between 36-40 years of age; three between 41-45 years of age; one between 46-50 years of age; one between 51-55 years of age; while the ages of the remaining five participants are unknown.

The Education level of the participants was also revealed. Three of the participants had earned a high school diploma, while a total of fifteen participants had not completed high school. One participant was enrolled in a College program, but had not yet completed college. Two of the participants have earned a University Degree, while two other participants have obtained a few credits toward a degree. The education attainment level of four of the participants is unknown.

The Employment status of participants indicated that seven of the participants were employed full-time; thirteen of the participants were unemployed. The employment status of
seven participants was unknown. Employed participants worked primarily in the Social Services sector; they either worked in offices or with children in community centres. Some unemployed participants responded that they would occasionally volunteer their services at local community centers.

The Language that participants were most comfortable speaking indicated that fourteen of the participants preferred to use the English language when communicating with others. Six of the participants felt comfortable speaking in either Ojibway or English, while five participants preferred to speak using the Cree or English languages. One participant, originally from Northwestern Ontario, preferred to speak in either English or French. The language preference of one English speaking participant is unknown. It was interesting to note that slightly more than half of the participants in this study were unable to speak their first language - their traditional Aboriginal language.

In summary, there were twenty-seven adult, Aboriginal participants, in this study of which twenty-five were women. A majority of the participants were single and between twenty-one to thirty-six years of age. Only three participants had obtained a secondary school diploma and two of this group a university degree. While a few participants were employed in their communities, a large majority of the participants were unemployed. All of the participants spoke English and more than half of the participants could not speak their own Aboriginal language. These are the Characteristics of the participants in this study.

Culture (Preference)

The second theme in the Place of Understanding, Eastern direction is the Culture (primary cultural identification) of participants. As participants thoughtfully expressed their initial roles, it was important to understand how these roles were linked to their culture. In
identifying culture, participants disclosed that they were either linked to a Christian culture, a traditional Aboriginal culture; or both. It was important to this study to understand how these cultures assist to inform the lives of the participants.

The participants who felt a connection to Christianity was described by Brad, Meagan, Maryanne, Ginny, Cynthia and Kihew in this study. But I selected Ginny and Cynthia’s responses to show how Christianity has influenced their lives.

“Sobriety and being an Anishinabe female, I dress like a female. I don't wear jeans, slacks, but I would rather show an example of who I am and who called me in the first place in my sobriety walk.

Rose; So, when you talk about sobriety, you're sober all the time?
Ginny: Yes.
Rose: And you wear the dress all the time.
Ginny: Yes.
Rose: Do you smudge, dance or do the pow wow?
Ginny: No. I guess I had hard teachings when my parents were alive and they told us this and that and then after my mom passed away everything failed until the Creator called. When I came to the light to believe him and then everything started changing and then I started using what my parents were teaching me to be a good parent and to love my children as they [my parents] have loved me when I was growing up. It is hard especially when you're an Ojibway, an Anishinabe person to try and live, but I get my strength from the Creator. I don't get my strength from my own community. That's where all my strengths come from. It is hard. It is not easy” (Ginny).

“I'm a firm believer in God. I believe that without, the person that I believe is God, I wouldn't be here today. I've been involved in a lot of abused relationships. I ran away and I smartened up. This person plays a significant role by giving me the courage to run and to leave and to give me strength to stick it out through the really hard times that I had to go through. Things are still happening so, good for me. I hope it still continues to happen” (Cynthia).

In accepting Christianity, Ginny as an Anishinabe female who believes in the Creator (God), feels that she has to be sober, wear a dress and not smudge or dance at pow wows. She recalls feeling very displaced as a young person after her parents died, and her connection to the Creator has been beneficial. She has been able to reclaim her lost teachings of parenthood, and to love her children as her parents had loved her. Ginny’s life has been a difficult one as she struggles to
be an Ojibway woman feeling a connection to the Creator. She uses the term “Creator” with reference to the Christian God. Ginny says that she receives her strength from the Creator and not from her traditional community. Cynthia also believes in God. She shares how her existence is dependent on knowing God and this has helped her to overcome some difficulties in her life. For example, she feels that God has continued to guide her and has given her courage to leave abusive relationships with men.

On the other hand, some participants in this study feel a connection with traditional Aboriginal culture. For example, Brad, Annie, Margaret, Michael, Rainbow woman, Annie, Corrine, Cynthia and Yvonne all emphatically spoke of their Traditional culture. This sentiment, how traditional culture can establish a sense of personal well-being, is reflected in the response of Rainbow woman.

“Yes. My grandparents. In my daily rituals I do the, what I call the, spiritual energy exercises. I do that every morning whenever I can and there's another set of energy exercises I do for my spirit. There’s four sets, those ones are almost daily. Any other time I do my own pipe and I do that prayer with my pipe alone. And sometimes I will do it when requested by my elders. The smudging I do at least four days in a row almost every month, at sunrise, just waking up and greeting the sunrise. Doing the sunrise prayers…and I've been doing that a lot on a daily basis and I was doing that a lot with my son. My baby is fifteen. And my baby left this last Saturday because since we've been back here July 1st, we had to live separately for a month cause we didn't have a place to come back to here and we lost, we gave up a lot of those activities, the rituals until we came back together again at my mother's house. The impact of the absence of those traditional ways of life for my son has really made him feel isolated, depressed and lonely. And it took us two weeks to work through those issues and we finally came to a conclusion that he wanted to go back east where he can live that traditional way of life, in an alcohol and drug free environment. He can't have that here and I had to look at that and I'm busy with a lot of other things. And today has been an eye opening morning seeing all the alcohol and drug related violence going on around here and wondering how to get past that? Will the people ever get out of that alcohol and drug life style? The cultural activities around that, I, my belief system comes into play a lot. I live with the trusting spirit and that's all I have to rely on I'm living here since I've been back. The other cultural activities are going to sweat lodges since I've been back here, the gatherings at different places and also, having my own gatherings at home, either with my mother, my siblings and my children. And a lot of that has been happening in my bedroom. I get my children to come or they come in on their own. And sometimes other
people will come. And they seem to find my bed comfortable to have that circle right on
my bed and I just let it be. I'm not sure if that's a cultural activity because we talk, we
laugh, we share and after that we come out of that feeling better. And we don't look for
coming out of that circle with a fixed world. We come out of it at least to be strong
enough to face life as it is” (Rainbow woman).

Rainbow woman spoke of how she was influenced by her grandmother to embrace her traditional
culture. She shares how she has conducted ‘spiritual energy exercises’ daily and sharing circles
with her family. She shares her cultural pipe with others, and she smudges to greet the sun. She
also will occasionally involve her son with her spiritual activities since he was finding it difficult
to practice traditional teachings in his community, partly because they do not live their own
house. Her son was also finding it difficult to practice because of the prevalent abuse of alcohol
and drugs in the community and he was feeling very ‘isolated, depressed and lonely.’ Rainbow
woman questions whether her community will recognize that they have a major problem with
alcohol and drugs. Rainbow woman in contrast feels sad that her son has left her to return to their
former community; but she is happy that her son will be now able to practice his traditional
teachings. Rainbow woman is energized by her traditions which augment a ‘trusting spirit’ to
help her overcome the issues that she has to face daily in her community.

These findings reveal that participants were connected to two types of culture in this
study: Christian culture and a traditional Aboriginal culture. While some participants preferred a
Christian culture, most of the identities of participants were informed by their traditional
Aboriginal culture.

The two themes, specifically Characteristics and Culture, were explored in the Place of
Understanding, East direction. These themes provided an introduction of the participants in the
study. The next quadrant seeks to uncover the experiences of disconnection for participants.
Place of Disconnection

The Place of Disconnection is located in the Southern direction of the Reality Circle. The focus of this quadrant is on specific events that have contributed to a participant’s sense of disconnection from their Aboriginal culture. This sense of disconnection appears to be a direct outcome of a negative experience or a perceived negative impression. This place provides a context from which participants can reflect upon any Past and Present Trauma that they have experienced. These apparent types of trauma will first be examined, followed by how the participants can feel deprived by not knowing their Aboriginal Culture.

Past and Present Trauma

The Past and Present Trauma experienced by participants was disclosed during the interviews and sharing circles. This included the participants’ childhood traumas, grief, perceived loss of identity, alcoholism and racism. Each of these traumas is described using the responses of participants.

“Neglect, physical, emotional and sexual, I guess all of them. But when my mom was with my dad it was kind of like a neglect thing where they would, due to drinking and stuff. There was physical abuse among that, emotional from both my parents. The sexual was when my mother separated from my dad and she had a [new] husband. She married after that and had a husband, and him and his father sexually harassed me …” (Darlene).

“…And my parents in a lot of ways played a negative role in my life. I'm an incest survivor. My father had an incestuous relationship throughout my childhood till I was thirteen... it seems like the first time as an incest survivor. I went to this [child protection] worker who came to [my community] and I still remember her name. I tried to tell her that my father was sexually abusing me and she went to talk to my father and I ended up getting beaten up so I shut up. Then the second time, my parents were out drinking and I don't know how long we were alone and I was the oldest of eight. We already lost one brother so I had six siblings. And my youngest brother was two weeks old and both parents had gone off drinking. That was my second involvement with [child protection] and that was neglect. We were all taken away and I ended up alone in a foster home” (Rainbow woman).

“I grew up in the reserve. I had no choice. Not in a bad way but I mean like...as far as being Aboriginal I was very confused. I was the only bi-racial child on my reservation
and the only person that was even anything close to African Canadian that they would ever see. I was extremely mistreated for it for the first ten years of my life. It was a horrible experience. It was unbelievable…and [they] want to fight me and I just knew I didn't want to feel like that anymore…That was the first time I felt like I was at home because black people didn't call me names and pick on me or want to fight me, or be very ignorant. So, in the beginning…I didn't want anything to do with it” (Marion).

From the perspectives of these three women, Darlene also shared that she had experienced multiple abuses as a child. She recalls her parents often leaving her at home alone while they went out drinking. When they returned home intoxicated, Darlene was abused by both parents. Furthermore, Darlene would later be sexually abused by her new step father. Rainbow woman also revealed that her parents had played a negative role in her life. She was sexually abused by her father when she was a young girl. When Rainbow woman told a social worker about this abuse, the only result was further physical abuse by her father who was angry that she had divulged this information. Similar to Darlene and several other participants, Rainbow woman and her siblings were neglected by her parents as the parents would often leave the children home alone so they could go out to obtain and consume alcohol. This abuse of alcohol eventually resulted in Rainbow woman and her siblings being removed from their home and placed in foster care. Marion, who is of combined Black and Native ancestry, was constantly abused by her peers as she grew up on a reserve. She was verbally abused and physically attacked by other youths in her community until she was approximately ten years of age. At one point she left her reserve to visit with her dad and found it quite shocking that ‘black people’ were more accepting of her than at home. Finally, Anne shared how she was dealing with the sexual abuse of her sixteen year old daughter while she was in the custody of the Children’s Aid Society (C.A.S.). According to Anne’s understanding, her daughter and the pedophile who abused her were both charged; and the judge hearing the case at the time insinuated that any sexual abuse was also the fault of Anne’s daughter.
“And my daughter was down...my daughter was abused, sexually abused in [child welfare]. And it wasn't taken [seriously]...yeah, there was a violence charge, she was sixteen when all of them came out. She was attacked by a pedophile. They charged her too because he [unclear] and I just feel like they treated that whole case real bad, you know? Instead of understanding my daughter as a young woman, a young teenage girl who is in the system, who is angry at a lot of things in her life, and being separated with her birth mother. We know each other. It's not like she didn't know who I was. So, it was very hard for her to be separated from her mother and [with] these stuff happening. This abuse, and for her to hear the Judge say and making her like a slut, whore. They didn't say it in those forms of words but they did say it was her fault instead of seeing her as a victim of the system. So that's where I am at with my daughter. I am trying to deal with my issues while I try to help her with her issues. It's very disturbing when [child welfare] puts my child down [and] [to] say that she is at fault. She was only twelve years old when things started to happen to her. Instead of blaming her, they should try to understand where she is coming from. Like trying to get her some help. Trying to get her into counselling to be able to yell out. She's still very angry. And then, they kicked her out” (Anne).

Anne felt distraught about the sexual abuse of her child for obvious reasons, but she was most disappointed that she was not able be with her daughter to guide her. Anne remains bitter and feels resentment toward the C.A.S., which she views as uncaring and not sympathetic to her daughter’s situation. The above are some examples of childhood trauma and varying degrees of abuse experienced by some participants in this study. The specific question of sexual abuse was not a part of the questionnaire, but through the voices of participants it was a very distressing issue that had emerged.

Trauma from grief was also of salient concern for participants. In some cases, women continued to lose loved ones often within a close time period of each other, resulting in multiple episodes of grief. The closeness of death between two family members does not give participants time to properly grieve each individual loss. Grieving for deceased family members included their immediate sisters, brothers, parents and close friends. The following responses provide accounts of grief experienced by participants:

“I have [Anita] and [Stacey] but my sister passed away. I am the oldest” (Allison).
"…This week we started a four day feast for my great grandfather because my family is at that stage where we all know and we've all come to accept, except my mother, that my brother is dying and we're having a four day feast for him. I'm not sure how to say it in English but, Nii-much-it-tay-way-nun [Sacred fire for my Great Grandfather] Dunn-coobe-tay-way-nun Ju-chi-way-way-kii-nay-dau-goo-zit, Nii-she-may [and to bless my brother with whatever he needs]. That's why we're doing that right now. This is our third day and tomorrow is our last day. And it helps us to get ready. And I think also with all my brothers and sisters and my children, it's also to help our mom. And that's the way my brothers want it. He wants our mom to be ready to accept the inevitable. We can't change it but she's resisting. And through our cultural customs we hope that it'll help her to accept what is gonna happen…” (Rainbow woman).

“But eventually when I started to get to know my parents then it was something new to me. With my mom like she was about the four colours, stuff about the past, how it use to be. Mainly, things like dealing with the medicine wheel…But seeing that at my parent's funeral…I'm half and half confused cause my mom barely didn't get to, she showed me some parts and there's a lot of things that still need to be taught to me and she died last year and there's block s here and there” (Darlene).

“Being an Aboriginal women my chances of encountering violence is very high. My chances of dying from violence are higher. That's how I lost my sister and my mother…I lost my best friend. We came here together from out west. She was two years younger than me. And she got caught up in the big drug scene and she died when I was…she went away. She went to Montreal on a trip. She was always going on trips to Vancouver, she'd go down to L.A, she'd go down to Miami but she would always come back and see me. And one day she went away and she never came back. I was pregnant when I last saw her. And I found out from a friend, she became my friend after, a friend of mine who was at Carlton, She was going for her Masters of social work, that my best friend had died in Montreal the year before. You know, that was devastating…” (Christa).

In the above responses, Allison shared that her sister had passed away last year and she is still very much affected by her loss. Rainbow woman brings forward an interesting perspective in preparing for the death of her brother. She was able to provide a spiritual dimension to the concept of grief through her testimony. Rainbow woman spoke of a cultural ceremony that would help her mother and family come to terms with her brother’s impending death. She is facilitating a four day feast in which there will be a call upon the spirit of her deceased great-grandfather to bless and care for her brother and his impending arrival to the spirit world. Darlene shared how she had lost both of her parents, but her mother had a significant influence in
helping her to understand more about traditional culture. Christa shared how she had lost both her sister and mother as a result of the violence that exists against Aboriginal women from the larger mainstream culture. It was apparent to Christa that few people in the mainstream culture seemed to be interested or overly concerned regarding the issue of violence against Aboriginal women. Christa, as an Aboriginal woman, felt that she was very much at risk from this same violence. Christa furthermore shared that she has lost a younger friend who had been involved with illicit drugs and who had died in Montreal. The news of the death of her friend was shocking and devastating for Christa. She feels that she still has more to learn about her own culture. This question regarding the trauma of grief was not a part of the questionnaire, but several participants felt compelled to address this issue. It was evident that this group of women remain greatly impacted by the death of loved ones.

The third type of trauma for participants in the Place of Disconnection direction is that of loss of identity. The two main factors that have attributed to participants’ perceived loss of identity are: the Residential School and Child Welfare System. Most of the participants were ex-students, adoptees or crown wards of either or both of these systems. The perceptions of participants regarding these institutions relative to their identities are shared in the following examples.

“Yeah for me it is. It's just the second coming of these white people. They just want to assimilate us into their culture. It's not the way it should be. It's just another way for them to take our people. It's another way. And when they do take you away from your own people then they take away your identity. You have to speak their language when you're over there and you loose everything. You loose who you are. They don't know where they fit. I hate to say that but they kind of get ostracized from your own people and they call you an apple because you don't know your language and you're acting more like a white man than a native person. Even though some of them came out of there better off for going in there, but not very many. Most of them come out of there mad because of how they were treated. They don't even know their own people from their own cousins and grandfathers” (Brad).
“Yes, I was a ward of the government. I was eight years old. I was in residential school. So I was about thirteen. At thirteen, I went right straight to the street. I was pregnant when I was sixteen. Not really knowing what the word parent was. And then I had a baby. And I had to train myself how to be everything and I did it. I had six children in all. And I brought them up really good until one day something went wrong, "boom" in your life, and my kids are gone and I haven't seen them since. I seen them on two different occasions” (Cynthia).

“I was put into care when I was about nine months old. From nine months till I was four years old, I was in about six different foster homes. And then I was adopted when I was about four and half years and brought to [the city] with non-Native people. And I grew up in a nice non-Native setting, you know? Two cars in the driveway, a condo in [a big city] like it was completely away from my culture. I had no idea about anything in my culture. And because of that I went through a real big identity crisis when I was about fifteen or sixteen. My parents had split up, my adopted parents had split up and I, you know, I had this culture, and this family out there that I didn't know anything about. So I found them…I meet my own biological family. I was the youngest of, I believe it was nine children. And I met them and they all came to [the city] to come and see me cause, you know, I was taken away from them like right from practically my birth. And they were really happy to see me. Honestly, that was probably the biggest mistake of my life was finding them at that time. Like you know, if I knew now, or knew then what I know now then I would have waited, you know, until I was more emotionally able to handle that kind of reconnection because I didn't fit in. Like you know, even today, I'm not like them. You know, like I am under a different...there's resentments there because I was brought up with things they didn't have. And so, it's been an interesting experience” (Corrine).

In understanding how the Residential School and the Child Welfare System contributed to the loss of Aboriginal identity for participants, Brad in his analogy of the Child Welfare System saw a relationship to his experience as a student of the Residential School era. Brad described that practices of the Child Welfare System were like the ‘second coming of these white people’ because they want to assimilate Aboriginal people to white norms. The Child Welfare System is continuing to remove Aboriginal children from their communities. Once Aboriginal people are removed from their community, their identities are less clear because they have to speak English and try to fit into mainstream society. Aboriginal people have a tendency to experience a very strong sense of dislocation and often are ostracized by members of their own community due to their absence. They are often referred to as “apples” (red on the outside and white on the inside)
because although they look Aboriginal, but they are unable to speak their native language and they behave like white people. Brad also realized that a few Aboriginal people can adapt to a certain degree into the mainstream society, however some return to their reserve feeling anger as a result of their treatment in the Child Welfare System. Many children who have been placed in the system are denied information regarding close relatives.

Cynthia also shared how she had attended Residential School, beginning at eight years of age. By the age of thirteen, she began living on urban streets and then became pregnant at sixteen years of age. Upon having a baby, Cynthia struggled to be a good parent. She believes that she was a good parent for her six children until the day she lost her children to the Child Welfare System. It was only recently, on two occasions, that she saw her children. Corrine on the other hand was placed in Child Welfare care at age nine months until she was four years of age, then she was adopted by a white family. She remembers being placed in six different foster homes. She shared how she grew up in a nice city condominium, with two cars. During this period she was not aware of her culture. At the age of fifteen or sixteen, Corrine experienced a significant identity crisis and consequently she was determined to find her biological family. Upon finally meeting her family she discovered that she was the youngest of her nine siblings. In retrospect, Corrine now feels that she should have waited to meet with her biological family at a time when she was more emotionally mature. She discovered that she does not fit in with her biological siblings because they did not share common childhood experiences.

Participants shared how they themselves have experienced a loss of identity through the Residential School and Child Welfare Systems. Brad spoke about the similarity of practices between Residential Schools and the present Child Welfare Systems. Cynthia, by losing her children to the system, feels that she has lost her identity as a mother. Corrine shared the difficult
experience it was for her to reunite with her biological family following her placement in the system. The above are three examples of participants experiencing a reformation of self-identity.

The fourth trauma identified by the participants is the abuse of alcohol. It was apparent that most of the participants had either observed a family member overly consuming alcohol or they themselves had done so. Participants shared some of their experiences and the meanings behind the use of alcohol. Some of the ways of understanding alcohol abuse was through their parents, workers, themselves and their children as detailed in the following responses.

“…My dad taught, although he was an alcoholic, at the end of his life, he died an alcoholic. He taught me a lot about people, not to put down your own people, the drinkers. He said, never put them down or else you might end up like that. I believe that because that's how I become. And so, he always brought home people in the middle of the night and he'd give them a place to stay. And he would tell my mom to feed them. And my mom told him, well, we don't have enough to eat. I just saved you enough for yourself. And he would tell my mom, you take my food and you feed these people. So he always taught us to share. So in that way they helped me about sharing and love. So those are the significant things that I've learned from my parents” (Maryanne).

Maryanne knew that her father was an alcoholic, but she was able to look beyond this. She remembers her father’s teachings on how not to put down others at the risk of becoming similar to them. She had learned from her father about compassion and empathy.

Darlene shared how she learned about family alcohol abuse through a depiction of her parents as alcoholics by a social worker.

“Well to me it kind of did because not of the culture, but in an Aboriginal way. Because my parents they were alcoholics. When I was living in foster home like I would hear stories, my worker's telling me that, “Oh well, you didn't have a visit because your parents were drinking”, or “Your dad didn't phone or your mom didn't phone.” That kind of made me go the other way. You know, to realize, to kind of not to, I don't know how to say that? I don't know, about the Aboriginal way and like the way, she made it seem to me like to me though as if the drinking wise and stuff like that. But in a way, I kind of know about that there's other ways from that than dealing with how my worker showed me” (Darlene).

Darlene shared how the use of alcohol was not a part of traditional Aboriginal culture, but rather
she felt that alcohol abuse had become entrenched and was too often associated with the Aboriginal way. The negative depictions of her parents as alcoholics encouraged her to not follow their example. Darlene also feels that her worker could have used a more diplomatic approach in informing her about her parents.

Young parents such as Corrine, Keesha and Ruby openly discussed their personal experiences with alcohol abuse.

“...I still stumble along the way I'm not...like I know what I want and sometimes I have trouble getting there like I might slip up, you know, with addictions or whatever, or I get so riled up over something that my emotions get the better of me and, get head strung and I'm fighting for all the wrong reasons. For the most part, I think my kids have really, really done a lot to help me to be the person I am” (Corrine).

“Even though my children are not with me I find that my life is kind of messed up right now, but I still find that for me being a women is top priority list because I keep telling myself like because of my addiction problems right now” (Keesha).

“A mother but also someone who struggles.... I have been sober for eight years. I'm an alcoholic but I'm a single parent with struggles” (Ruby).

Corrine acknowledged that she sometimes will consume alcohol in order to relieve stress, but her children help to keep her grounded. Keesha views herself as foremost a woman, but she continues to struggle with alcohol and feels that her life is ‘messed up’. Ruby shared that she did abuse alcohol in the past, but she has now remained sober for the past eight years, however she continues to view herself as an alcoholic.

The abuse of alcohol is recognized by the participants as a most serious concern and is contrary to the well being of their children. I selected Ruby, Corrine and Rainbow woman responses to show how alcohol abuse has affected their children.

“It's with my teenage daughter. She has alcohol...she just drinks on Fridays. Two times now she has been hospitalized within four hours of starting to drink and that scares me cause I'm always afraid of alcohol poisoning. But when she is gone to the hospital, CAS is called. And the first time she didn't want to come back to [the community]. She wanted to go to jail instead. CAS was there in the middle of the night. They helped me I guess,
trying to figure out what we're gonna do here. They realized that I was trying to be a parent and trying to discipline, but at the same time they need to ensure that she was gonna be safe in [the community]. I couldn't guarantee that because I don't know what she's gonna do when she gets here. Is she gonna take off and go hitch-hiking like it's in the middle of winter. I recognize what they need to do…” (Ruby).

“Well once you've got that problem too, then that child has to grow up and deal with other social problems because of that, addictions...relationships, and the list goes on and on. I can relate to every single one of them…[b]ut during those two years you're still in a scrutinizing event, you know what I mean” (Corrine).

“The impact of the absence of those traditional ways of life for my son has really made him feel isolated, depressed and lonely. And it took us two weeks to work through those issues and we finally came to a conclusion that he wanted to go back east where he can live that traditional way of life, in an alcohol and drug free environment. He can't have that here and I had to look at that and I'm busy with a lot of other things. And today has been an eye opening morning seeing all the alcohol and drug related violence going on around here and wondering how to get past that? Will the people ever get out of that alcohol and drug life style?” (Rainbow woman).

Ruby remarked that her daughter has been hospitalized twice as a result of alcohol abuse and she has a deep concern regarding alcohol poisoning. Ruby receives visits from C.A.S. worker concerning the situation of her daughter. This worker apparently was cognizant that Ruby was trying to be a good parent, but Ruby realizes that ultimately it is her daughter who decides her own actions. Corrine shares how the children brought up in a problematic family environment will have to deal with the same social problems (addictions, relationships and etc.) as their parents. Rainbow woman shared how her son tries to live by traditional teachings, but he often felt ‘isolated, depressed and lonely’ in his new community because of the rampant abuse of alcohol.

The final trauma that participants have experienced is that of racism. Many of the participants identify specific examples when they have often felt discriminated against because of their Aboriginal ancestry. Participants voiced multiple ways of understanding racism. For example, Christa explained the effects of racism in her personal life; Anne speaks of how racism
has created division within her family; Darlene reiterates how issues of race can be transparent in the social work setting; and Michael shares how his moving to a northern Aboriginal community has affected him. Participants share their meanings regarding racism in the following responses at the micro, meso and macro levels.

“...I find growing up and being discriminated against from my own people, it made me feel powerful because they were calling me moo-nii-os-kwe? which is little white girl. And I found that was powerful because if I looked white then I was more powerful than them because obviously the white people felt very poorly of them because they looked native and they sounded native and that's why I made a very conscious attempt to lose my accent and I stopped speaking the language. So when I was growing up I thought that made me very powerful and that's why it was so easy to discriminate against my own people. They in turn, of course, when I'd leave my house and they were all waiting for me to like beat the crap out of me and stuff like, I didn't feel powerful then, I felt really, really bad and I felt ashamed of being Native. Certainly I felt very powerful and I also felt really, really ashamed” (Christa).

Christa explained how the negative stereotypes of Aboriginal people and their Culture became so prominent in her life that she did not want to identify herself as an Aboriginal woman. She associated herself with white people and strived for an air of superiority toward her Native peers that at times resulted in painful consequences. She deliberately tried to remove any trace of her Aboriginal accent and she did not want to speak her native language. Christa made every effort to disassociate herself from her culture. Situating herself with white people made it easy for her to discriminate against Aboriginals. Christa expressed a remarkable shame of her Aboriginal identity.

Anne, on the other hand, shares how racism was problematic in the following response.

“For myself and my children, my daughter is Native and her skin is part white. Her dad is Metis. My son, my eighteen year old is...I don't know how he looks. [Sonny] and [Andrew] are both part black. They have different dads...I was very angry that my family never accepted my children. I don't care now. My children are just Native, like all of us. I don't hang around people who are racist. The oldest son is very racist against his brothers. To have a mixed-child, if they look part white they are accepted like my daughter, my family love her, they spoil here and adore her. They accepted, my other son right away because he is Native. My two who are part black, I know it’s still very hard for them. My
son went to a gathering, the thirteen year old; he was the only black person there amongst Native parents…” (Anne).

Anne explained how the skin colour of two of her children resulted in their mistreatment by their family members. For example, both her oldest son who is native and her daughter who had a mixed white and native ancestry were readily more accepted by her family. Her two sons, who had a mixed black and native ancestry, were not accepted by her family and were often ridiculed by their siblings and other relatives.

Michael also shares a comparative observation of the effects of racism when he moved from one community to another.

“Yeah, it's sort of different back east. It's the same system but it's different. Even when I came up, when I first moved back I felt it was, even as the same laws are applied, I find it's different...from Toronto or Kitchener and Muskoka. It's the same laws and everything it just the different way they practise things. Even culture shock...the racism, I didn't know the racism up here was that bad. That was one of the cultural shocks for me was that because back east it's multicultural - like there's all different kind of races” (Michael).

Michael observed how he felt more accepted in his former south-eastern community. Since moving back to his Native Reserve in the north-west, some Caucasian people in a nearby town seemed to not like Michael because they viewed him as being part of the surrounding native communities. As a Native person living in the south-eastern part of Canada, he did not experience overt racism. This geographically situated arena of racism was shocking for Michael.

Aboriginal women and men in this study have described some of the ways in which they have personally experienced racism. Participants tend to experience racism in almost any social milieu. They shared how racism is prevalent in their families, in social work, and in their own Aboriginal communities.

The above section has explored some of the Past and Present Trauma that participants have experienced. Continuing in a south direction, the second theme of Aboriginal Culture is
Aboriginal Culture

The emergence of the participants not having a full understanding of their traditional Aboriginal Culture is the second dominant theme in the Place of Disconnection quadrant. While most of the participants gravitated towards the significance of their Aboriginal culture, as was shown in the Place of Understanding direction; further data revealed that participants were struggling to connect themselves to their culture. Annie, Darlene, Kihew and Christa share the sentiments of many of the participants as not having the opportunity to learn about their Aboriginal culture in the past as highlighted in the following responses.

“…it's not a part of my daily living but it's something that I think about. I have practiced a little and I've learned some stuff but growing up it was never a part of my life, my dad never allowed it. Not even to speak” (Annie).

“…cause I wasn't raised, when I was in C.A.S., I wasn't raised or taught” (Darlene).

“There was no culture at all when we were brought up. We were more brought up like the Catholic way. Yeah, so there was nothing for me. So, it was hard for me to get into those things cause I still believe that how I was brought up that time I bring up the kids. Rose: What did you have to do to be Catholic?
Kihew: Be born a Catholic. You have to go to church. Get baptized. Go to…spill your sins to a priest. That's one thing I don't do cause why I should I say things to the priest when I'm like confessing. They call it confession. That's one thing I don't believe in Catholic church confessions.
Rose: Have you since learned about Aboriginal culture?
Kihew: Yeah I do know about it but I don't bother with it. I know a lot about the drumming, the smudging, the Creator and all that but I just don't pay attention to that” (Kihew).

“No, no, I used to dance when I was little until my family started making fun of me and then I just stopped. That's what happens when you shame a child, right” (Christa)?

These four women shared their thoughts as examples to how they felt a disconnection toward their Aboriginal culture. Annie recalled how her own father would not allow her to speak the Native language at home or to experience her culture. Darlene, as a child in the care of C.A.S.,
was not encouraged to seek or acquire knowledge about her Aboriginal culture. Kihew who grew up with Roman Catholic doctrine and practised the Catholic faith, had no knowledge of Aboriginal culture. Although she is now aware of some Aboriginal rituals, she remains apathetic toward Aboriginal culture. She continues to teach her children the things that she has learned as a Catholic. Christa shared that at a young age she desired to be a dancer, but her Aboriginal family ridiculed her; hence she felt ashamed and she stopped dancing.

The above are a few examples that participants have described regarding their feeling of disconnection from Aboriginal culture. The Place of Disconnection has described the meanings that underpin the two dominant themes of: Past and Present Trauma and Aboriginal Culture.

**Place of Identification**

The *Place of Identification* is the title of the West quadrant of the *Reality Circle*. This is the place where participants begin to identify their need for personal change. In becoming cognizant of their present circumstances, they are able to take a step back to learn and discover new ways of helping themselves.

**Internal (Anishinabe) Responsibilities**

These responsibilities are informed from the Aboriginal culture and they are the roles and the skills that participants need to know and incorporate into their personal lives. These responsibilities are described as *Internal (Anishinabe) Responsibilities* which are part of the inner self-change processes of the individual. The six internal responsibilities, in the *Place of Identification*, have emerged from the experiences of participants and are viewed as being important for Aboriginal parents. According to this finding, the emerging responsibilities of parents are to Relearn Aboriginal Culture, Respect Self, Strengthen Spirituality, Inform Self of Parenting Skills, Self as an Example and to Shun Negative (-) Behaviour. The meanings of each
of these six internal responsibilities are explored in the following pages.

The focus of the first internal responsibility is to understand the participants’ desire to 

Relearn Aboriginal Culture. Responses from Yvonne and Ruby are noted.

“Well for me it wasn’t important growing up. My parents weren't into it because they were alcoholics. And the only person in my family that was Native was my dad who was obviously too drunk. This was the culture in my family. I think I kind of discovered it on my own. Well first I hated it cause I seen Aboriginal people down town and they were always drunk. I didn't want to be Aboriginal. I denied it like over my teenage years. I think when I did start to accept who I was, when I was around eighteen or so, it was going through the [local centre] and I had a youth worker and I think she got me in that direction to get involved with the Native stuff. And she went to the [another centre], and I got involved there and I sort of learned some stuff. I started learning bits and pieces here and there. But now, it wasn’t important then but it's important now” (Yvonne).

“Yes, rock bottom. It's always been in the back of my mind, I guess, when I was a young girl even. I always knew, you know, just to identify, like I think I was the only Indian in a white family home but at the same time there was something that drawn me over here, and drawn me to find out who my mother was” (Ruby).

Both the Yvonne and Ruby quotes exemplify what most of the women have shared in this study. Yvonne consciously denied her Aboriginal culture during her youth because she believed it provided a negative self-image. Now as an adult, she is able to understand the positive aspects of a relationship to her culture. When Ruby matured to adulthood, she became curious regarding her Native ancestry and was drawn to it during a search for her biological mother and her community. Both Yvonne and Ruby have accepted their Aboriginal culture and are exploring connections in order to identify themselves through their culture.

The second internal responsibility that was identified by participants is Respect Self. To understand self within the healing process, one must be able to appreciate who they are as Aboriginal women and men. Rainbow woman, Anne, Christa and Keesha explain what the responsibility of Respect Self means to them.

“Looking at myself as a woman, I began sort of like half and half when my grandmother died. I just wanted to just let go and leave it alone and I did that. I isolated myself away
from that from 84 to 1990. From 1990 I looked at some of myself but not all of myself as a woman. That's when I started to recover the incest abuse that I went through from my father. In the year 2000 that's when I began to go more within and started to look at myself as a woman. And my children, my oldest son especially kept reminding me that with the way I was working and how often I was gone out there working, I remember hearing them tell me, you can't keep doing everything for everybody at the same time. You have to take care of yourself. I didn't listen until I couldn't breathe anymore cause I have tumours in my lungs. And that's what made me turn around and look at myself as a woman. And I went back into my culture to look at myself as a woman and begin my own healing physically because I already started my emotional healing, my spiritual healing, and healing mentally. I'm on my physical healing now and I'm still working on that and I've accepted that as a way of life” (Rainbow woman).

“Just that learning the parts of mother earth and our goal as caregivers, as teacher and women in our culture as respected as so is our children. We learn to take care of yourself” (Anne).

“... my Aboriginal culture right now, it is very positive and powerful cause I have a twenty month old now. And I realize now what a gift he is and I'm thirty-six. I think people should hav children when they're older. I realized what he brought to me. He's like my little teacher. He teaches me so much. He's just sunshine whereas when I was young and I had my other two, I can say that my son has a better me cause back then I didn't know me. I couldn't really appreciate me, how could I appreciate them?” (Christa).

“And as a woman because I have a hard time right now liking myself a lot. So my culture reminds me of how important I am. And again I need to get out and see more people” (Keesha).

The above women shared their perceptions of their experiences in relation to the responsibility of Respecting Self. Rainbow woman speaks of how important it is to attend to the physical, spiritual, emotional and mental aspects of self. Anne understands that it as an act of caring for herself. Christa sees respecting self as a way of learning how to appreciate self through others. Christa recalls being too young to appreciate herself when her first two children were born, but now being more mature she can fully appreciate her infant son. Keesha is also now learning how to respect herself through the teachings of her culture.

The third internal responsibility is to Strengthen Spirituality. Understanding your place within a culture, can play a role in the strengthening of personal spirituality. It was evident
throughout the data that a simple understanding of Aboriginal culture was not sufficient to enhance spirituality. The theme of accomplishing or Strengthen Spirituality has different meanings for participants as can be seen in earlier responses from Ginny and Rainbow woman. Ginny described how she ‘came to the light to believe in her [Creator]’ after her parents died, and her spirit was re-energized through her relationships with the Creator. Rainbow woman also referred to her traditional ‘belief system’ and a ‘trusting spirit’ which she has relied on to help overcome her difficulties with her community. Both the Christian and Aboriginal cultures have been helpful in the development and the maintaining of their spiritual connection to their Creator. It is through this connection with the Creator that these women are strengthened spiritually.

The fourth internal responsibility identified by participants is to Inform Self of Parenting Skills. Aboriginal women and men identify the importance of understanding their parenting responsibilities by re-examining how behaviours of the past have influenced their skills as parents today. In recognizing the need to uphold the responsibility and the understanding of their parenting identity, both Anne and Christa comment on what this means for them personally.

“Cause you're finding out a lot of your identity of who you are, and why your life is the way it is. Why our parents were where they were, and their involvement with residential things going on for five generations and it kinda like makes you understand why our parents can't parent either. So it kind of brings you up to why our family was dysfunctional and to heal ourselves, and we're healing, we're smudging. Understanding who we are and like letting a lot of our past go so we can go ahead and pass it to the next generation. I'm still learning and we're all learning” (Anne).

“I find us being as Aboriginal women having all this experience of not having the experience as a parent and knowing where that comes from now, the whole residential school impact...Plus, it's not just you that's impacted, it's generational. All, every single Aboriginal person needs to, and so too, the non-Aboriginal people, they're the ones that still have the biases, you know...” (Christa)?

Both Anne and Christa understand the intergenerational effect of improper parenting skills in
their families. Anne describes how her family was dysfunctional throughout her youth. She realizes the importance of changing this negative trend in her family and to relearn how to be a better parent. Christa connects the loss of parenting skills to the Residential Schools; an environment where parenting skills were not a component of the curriculum. Christa also feels that many non-Aboriginal people are quick to judge Aboriginals as inadequate parents without understanding the social background of Aboriginal parents. Revisiting historical events such as the Residential Schools and the resulting affect upon Aboriginal families has encouraged both Anne and Christa to become aware of their present situations.

The fifth internal responsibility of using Self as an Example also emerged from the data. Self as an Example was understood to be a way of modelling positive behaviour toward parenting. Understanding self and how we interact with others assists in the types of behaviours and attitudes that we could incorporate as parents and women. Both Rainbow woman and Ruby acknowledge how positive self behaviour is desired in parenting.

“As a parent, the communication is the strongest, the strength because of the healing circle, the talking circle. I have that with my children either with one child or with all of them or with a few of my children. And sometimes my oldest grandson becomes a part of that. There were times when my children were out drinking. And I would be smudging the house, smudging my son's room, his belongings. And there was one time when I was in a crisis over my son's drinking. One of my son went through something that took his life for a while and it was during that time when my oldest grandson, I didn't know where he was and I found him in my son's bedroom. He was smudging everything in that room, every piece of clothing, the window and I asked why he was doing that? He said, I want the spirits to help my dad. I didn't know that he was aware that my son had 'coded blue [chronically dead and needs to be revived] in the hospital. I thought I had isolated him from that information. From him, I learned that what children see they learn and they are pretty good at copying what they see, like he knew how to set up the smudge. He knew what shell to use. He knew what direction to go. He learned what to smudge. And out of desperation he smudged everything that he knew belonged to his father. And he taught me that children are very observant, and yes, you do have to be very careful how you express everything, every part of you your children learn even your grandchildren. That's the eye-opener he gave me from that experience” (Rainbow woman).

“I use to see people, wished I was like them. They would be sober with their kids and
they looked happy. I always wanted to have that but I never did for a long time because I was drinking. I think if there was more education, awareness, cultural and preventive stuff available that maybe it would change, maybe more people would come out and get involved” (Ruby).

Through these opinions, Rainbow woman remarked how her cultural behaviours have been reinforced through the smudging activity of her grandson to assist in the spiritual comfort of his father. Ruby understood that she needed to change her present parenting lifestyle in order to fit the model of sober parents caring for their children. These are two of the responses that participants explored as self-reflection in terms of parenting.

The sixth internal responsibility, to *Shun Negative (-) Behaviour*, can also assist participants to act in the appropriate manner toward their children and families. Both Mary and Cynthia share how they were able to shun negative behaviour and to assertively replace this with positive attitudes and behaviours.

“For me, it was being myself and not trying to be anybody else that I'm not. But I had to overcome some obstacles like the addiction I had and to let it go. Just to let some things go too that was interfering with my life like the father of my children because he didn't want to change and I knew I wanted to change. And being more assertive. I don't want to let any man ever try and control me again. I control my own destiny; I mean my life for now while I'm here” (Mary).

“As an Aboriginal woman, there's more respect in yourself to me. It's not about going around the street or fighting and you know, doing all the negative stuff. It's just like all the positive feeling for me when you said Aboriginal woman” (Cynthia).

In understanding this sixth internal responsibility, Mary understood that to break away from her addictions, she had to leave her partner. She continues to feel assertive and is in control of her life. On the other hand, Cynthia brings forward the negative images of the things some Aboriginal women are involved with on the street. But she notes that a respectful tone creates a ‘positive feeling’, rather than a negative stereotype. Cynthia begins to understand that other Aboriginal women can augment positive images of Aboriginal women in general. Both Mary and
Cynthia show examples of how Aboriginal women can take the responsibility of shunning negative behaviours and attitudes of self.

The above are the six Internal (Anishinabe) Responsibilities that participants identified and emerged as an outcome in the data. These responsibilities were categorized as internal processes because they play a role in creating change at the personal level. External responsibilities were revealed in the data and are also of practical significance.

**Place of Reconnection**

In the *Place of Reconnection* which is located in the Northern direction of the *Healing of Identity Circle*, a total of six External (Anishinabe) Responsibilities were also identified by participants in this study. These are the types of responsibilities that participants should recognize and retain, as well. Reconnecting to the Aboriginal culture was a way for participants to heal themselves. The six external responsibilities for participants are to: Respect Next Generations, Immerse in Aboriginal Culture, Expose Children in Aboriginal Culture, Learn Cultural Roles, Reach Out, and to Actively Attend to [their] Responsibilities. The meanings that underpin each of these six themes are provided in the following pages.

**External (Anishinabe) Responsibilities**

The first external cultural responsibility, as expressed through the experiences of participants, is that of *Respecting [the] Next Generation*. This sentiment was expressed by Anne and Christa earlier in the Inform self of Parenting Skills section. Anne described how important it was for parents to explore why their own ‘families [were] dysfunctional’ and methods required for ‘healing.’ Anne also indicated that it was important to ‘let go of our past so we can go ahead and pass [all of what is beneficial] to the next generation’. Christa’s perspective speaks to how things that occur in the past will likely impact the next generation.
The second external responsibility of participants is to Immerse [themselves] in Aboriginal Culture. Both Marion and Mary share how they immerse themselves into Aboriginal culture.

“…I smudge everyday. I have this one cup of cedar tea everyday. I have a cedar bath once a week. I plan on going to as this, not as many sweats as I can but under the advice of my elder how many sweats I should do this year for my recovery. And the medicines I'm using for my recovery are snake root. I'm also using dandelion because that builds your liver, so you know, all the medicines I can get. So, everyday, it's an everyday process. I know who I am. With all those three things combined I know who I am. I clearly know who I am. I know who my spirit is. I know who she is. I know where she wants me to go so that I can live in balance…” (Marion).

“Oh, yes very much so. I didn't understand it when I was growing up because I was just a child but I was always quiet and observing people but now I understand where I inherited that from. That's part of me and my culture” (Mary).

Marion’s opinion which is reflective of other participants in the study, illustrates how she has been able to reclaim Traditional practices into her life and what this means to her. These practices have helped her to achieve a sense of balance within herself and with her external surroundings. Mary indicated that she had not in the past been familiar with Aboriginal culture, however by observing others, she now takes part in ceremonies and feels a stronger connection to her community.

Generally the types of Aboriginal ceremonies that participants have been involved with are included in the following Ceremonies Table.

**Ceremonies Table**

<table>
<thead>
<tr>
<th>Type of Ceremony</th>
<th>Attended</th>
</tr>
</thead>
<tbody>
<tr>
<td>Berry Fest</td>
<td>1</td>
</tr>
<tr>
<td>Four Colours</td>
<td>3</td>
</tr>
<tr>
<td>Fall Harvest</td>
<td>1</td>
</tr>
<tr>
<td>Fasting</td>
<td>1</td>
</tr>
<tr>
<td>Feasting of Feather</td>
<td>1</td>
</tr>
<tr>
<td>Ceremony</td>
<td>Count</td>
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<tr>
<td>------------------------</td>
<td>-------</td>
</tr>
<tr>
<td>Full Moon</td>
<td>6</td>
</tr>
<tr>
<td>Healing Circle*</td>
<td>4</td>
</tr>
<tr>
<td>Pow Wows</td>
<td>13</td>
</tr>
<tr>
<td>Shaking Tent (Lodge)</td>
<td>2</td>
</tr>
<tr>
<td>Sharing Circle</td>
<td>4</td>
</tr>
<tr>
<td>Spirit Name*</td>
<td>4</td>
</tr>
<tr>
<td>Sundance</td>
<td>2</td>
</tr>
<tr>
<td>Sweat Lodge</td>
<td>13</td>
</tr>
</tbody>
</table>

* Ceremonies that are briefly described.

The above is of interest as the table reveals that most participants are connecting with their culture: the Sweat Lodge and Pow Wows being the most popular. It is not my intent to describe each ceremony in detail, but only provide brief summaries of both the Healing Circle and Spirit Name ceremonies.

The *Healing Circle* ceremony may be conducted with varying numbers of participants who sit together in a circle. The shape of the circle allows for the inclusion of all members. Depending on the issue, the circle can include women or men, or both genders. Healing Circles encourage participants to openly discuss any issue or serious problem in order to expunge any personal negative feelings resulting in a sense of communal healing. The outcome of this circular meeting is solutions through consensus.

*Spirit Name* is also referred to as the Indian Naming Ceremony. Parents will provide tobacco and ask a respected elder of the community to provide their child with a Spirit Name. The elder will fast for a couple days in order to seek the appropriate name for the child. The spirit name is either derived from dreams, visions, ancestors, personality or characteristics of the child, or from the accomplishments of the child. Spirit names are now primarily ceremonial as almost all present day Aboriginals use an Anglo-Saxon derived first name. Receiving a Spirit name from an elder is an honour and is acknowledged during seasonal community feasts.
throughout the year. These were two of the ways that participants were proactive in cultural immersion.

The third external responsibility of participants was to *Expose Children to Aboriginal Culture*. A child taking part, or observing any number of the above listed ceremonies would clearly be exposed to their culture. Corrine shares her experience as she exposes her children to Aboriginal cultural activities.

“I don't know why that is but it's very important for me to be with Aboriginal people. It's very important for me to do so socials and powwows. Not even so much for me but more for my kids because I want them to identify with their Aboriginal culture….my children and I have been only solid, knew each other's lives like we've consistently been there throughout each other's lives. Since they've entered my life anyway. They need their culture. I've always encouraged to experience that as much as possible. Like, for example, when my daughters were smaller, I lived in [my community], they were introduced to the drum, they were given outfits. I got them named. They've got their spirit names. Everybody's actually named, we all are, except for the baby. Will be given next month. But it's just really important because I don't want my kids to have to go through what I went through, this whole identity crisis thing. Not knowing who you are and where you come from. And then having to make a choice of well, ok well, it doesn't matter if I'm from here or I'm from there. I'm just me. Well if people can't accept that, well then that's too bad. Like it shouldn't have to be that way. I should belong somewhere. You know, but I had to make my own place in this world. And I don't want my kids to have to do that. I don' want them to...and they did. They recognize their culture. They're proud of their culture. And they probably know more about their culture than I do. You know I've only experienced this culture since I met my biological family when I was fifteen. So it's only been twenty-three years. I've come a long way in twenty-three years in terms of what I understand about my culture, you know, the teachings and stuff like that. Again, I don't necessarily belong there but my kids do. That's the difference and I think they're happy because of that. They have a place in this world and they know who they are. And that what's important. I think that's it” (Corrine).

From the stand-point of Corrine, she strives to strengthen the cultural identities of her children, by encouraging them to observe and learn from cultural teachings. She does not want her children to experience the same *identity crisis* that she experienced as a child. Corrine is pleased to see her children connect and participate with their culture, which serves to enhance their happiness and sense of membership with Aboriginal culture.
The fourth external responsibility identified by the participants was to Learn Cultural Roles. It is through a cultural lens that Faye, Annie and Christa view types of teachings that are informed by Aboriginal culture and by grandparents.

“Faye: From what I understand is that we're water people and the men are fire keepers. Rose: Water meaning? Faye: I can't remember but it's like we have to provide the water because at birth like the womb, they say when we give birth the water comes out or something. I forgot but it's like life. I'm learning too…” (Faye).

“I listened to some women elders and I learned a lot from the one about being a woman, a mother and giving life. Certain things you should or shouldn't do like especially with boys, not stepping over their belonging or stepping over them. She told us we're not suppose to share our cutlery and our plates or share our food with our sons when we're on our time but you know, that's hard for me to do when my children are small and that's not something that I really, like I try to prevent it but sometimes I slip up and it happens anyway but I try to acknowledge things like that that I made a mistake. And just the teachings like around daily living and how you should be treated and how you should treat others and you spend them in honesty and it guides me in my behaviour and in the expectations of my children” (Annie).

“…And being just a girl growing up on the reserve, my goodness that's when my grandmother would keep us inside all the time and she never let us out...I remember my grandmother holding my hand taking me to the baseball practice, holding my hand back like I was going to try to run away from her. I was so embarrassed but at that time I probably would have, oh, I want to have sex with my cousins, right? But I didn't cause she wouldn't allow that. I am thankful but she never told us that. She wasn't a woman to teach you by speaking to you. She taught us about our culture just by motion. She'd ask us to pick certain plants and stuff like that. And then she would show us how to make it and then what it was used for. She never verbalized it” (Christa).

Within Aboriginal culture there are role expectations for both women and men. While most of the participants were in the process of relearning their Aboriginal culture, Faye, Annie and Christa provided an insight of Aboriginal culture. Faye is learning how women are water keepers and that men are the fire keepers. Annie knows that traditional roles exist for women and mothers as life-givers. She has learned that during her moon-time she is not to step on or over, any possessions of her son, as this could result in bad luck for her son while hunting. Although difficult at times with her young children, Annie admits to making mistakes, but in general she is
comforted and guided by the teachings. Faye refers to the expectation of mothers as life-givers through the water that surrounds the fetus during pregnancy. The water symbolizes life as it is released with the fetus at birth. Christa recalls that her grandmother would protect and guide her from immoral activities at a young age. Furthermore, her grandmother also showed her various plants and how they were to be used as medicines. Christa recognizes and is grateful that her grandmother was an effective teacher of cultural roles, guidance primarily through body language and demonstration.

The fifth external responsibility is to Reach Out. Some participants experienced difficulty with socializing and in establishing new friendships. Participant responses overall indicated that establishing social connections was important because it enhanced a sense of belonging to a group. Being a group member assisted participants to understand how they, as Aboriginal women and men, were spiritually, physically, emotional and intellectually connected to their culture. Marion, Maryanne and Keesha describe how they interact with people in their community.

“I do, I do socialize a lot, a lot. I go to full-moon ceremonies, which is specifically for women. I go...I haven't done a lot of sharing circles because I have been really into educating myself of my addictions in the past year. I think this is the key to my true awakenings to become fully educated on it. But everyone that's in my life as far as support is an Aboriginal woman, my mentor, my elders, my addiction counsellor. I live in a [home]. We go to the pow wow together. We do everything together. The important thing is that I truly feel like I'm at home. Which makes me secure to cry when I need to cry, be angry when I need to be angry...To just be alive and feel like I belong cause when I was out there involved in all the things that I tried to hide myself in, I was always lonely. And it drove me to go more and more out there to feel like I was needed or cared for. And when I'm at the Aboriginal home I don't feel like that. So it sustains me. It gives me life. I feel useful” (Marion).

“I like socializing with other people, and other Aboriginal women and also men. I especially like meeting people from other reserves cause they have their own stories and that's how I learn from them. I learn a thing or two from each reserve and sometimes I apply it to my life. And as for around here I like to visit when I have the time but I have been so busy lately” (Maryanne).
“My culture is very important to me. I always say and I feel a lot times that if it wasn't for my culture I don't think I would be here. That's what keeps me going” (Keesha).

Marion, Maryanne and Keesha, like other participants in the study, perceive the importance of connecting with various resources in the community. Socializing with other women, men, elders and professionals around them encourages them to think through some of the difficulties that they encounter in their lives. For example, through ceremony Marion seeks spiritual comfort which enables her to feel good about being an Aboriginal woman. From her perspective, Aboriginal culture further works to ‘awaken’ her spiritual, physical, emotional and intellectual self and brings meaning to her existence. Maryanne shares her fondness of meeting new people from other reserves and to learn from them. Keesha views her culture as being vital to her life. The responsibility of reaching out to positive resources assists in the strengthening of identities.

The sixth and final external responsibility to emerge from the data is to Actively Attend to [one’s] Responsibility. Participants acknowledged the importance of learning from their past experiences. Both Brad and Mary share the meaning behind this responsibility.

“Not really, it's what you learn as you go on in life. Where I was, what I learned to be a man I use that loosely cause at times I don't like myself because of how I conducted myself in my life. I'm pretty down on myself actually. Like I guess I have to live with the things that I've done now and there's nothing I can do about it and I have to go on with my life. Many times I wish that I could have lived my life different but....
Rose: I think many of us go through that phase?
Brad: Not the way I've lived my life! There's a lot of things that I'm ashamed of. That's why I put myself down quite a bit. I use the term very loosely about me being a man. Sometimes I don't feel like it because of the way I lived my past. I don't get into specifics as to why because it's very personal to me.
Rose: Ok” (Brad).

“I wish I knew these things back then. I wish I practiced that when I was young, I mean as a parent. I was very, I didn't know these things. I didn't know anything about native culture. But I knew that there was something in my life and I know now” (Mary)

As a unique way of understanding themselves, Brad understood how problematic it is for him to
portray himself as a man today; he expressed shame and low self-esteem. He shared his story to a certain extent, but he clearly regrets his past life and with hindsight realizes that he was on the wrong path. Mary also regrets her past in terms of lacking parental skills. Her reconnection to Aboriginal culture has given her a new way of understanding herself as a parent. In both examples, not actively attending to their responsibilities when they were young parents is an uncomfortable issue for both Brad and Mary.

The above are the six External (Anishinabe) Responsibilities that have emerged from the data and they are located in the Northern direction of the ‘Healing of Identity Circle’. In completing these responsibilities; the four quadrants of knowing within the Healing of Identity Circle have been described. It was in the Place of Understanding of the East quadrant, the Characteristics and the Culture of participants were explored. The Place of Disconnection of the South quadrant explored the Past and Present Trauma and Aboriginal Culture of participants. The Internal (Anishinabe) Responsibilities of participants were discussed in the West quadrant labelled as the Place of Identification. Finally, the External ‘(Anishinabe) Responsibilities were explored in the Place of Reconnection of the North quadrant. The content of the Healing of Identity Circle emerged from the grounded experiences of participants in the study. The meanings that participants share of their Child Welfare experience through the Child Welfare Circle are provided in next Chapter.
CHAPTER FOUR: THE CHILD WELFARE CIRCLE

The Child Welfare Circle highlights the dominant experiences of participants involved with the Child Welfare system. This outer circle is read the same way as the previous Healing of Identity Circle. For example, the concept of Identity that is located in the center is first explored. Next, data in the Place of Understanding direction, which is located in the East is explored; then progressing in a clockwise direction the: Place of Disconnection, Place of Identification and Place of Reconnection. The overall focus of the Reality Circle is to reveal and understand the present circumstances of the study participants, vis-à-vis the Child Welfare System. How participants identify themselves in this context is explored first. I then explore how participant experiences are affected by the broader system influences, as we move clockwise through the four directions. Selected quotes which ground the responsibilities to the experiences of participants are used throughout this chapter to exemplify what most of the other participants have said in the study.

Identity

In understanding the perceived identities of participants, they were encouraged to think about their Child Welfare experience and how they understood their self-identity relative to this system. Michael, Corrine, Keesha and Tina share an understanding of their identities.

“The parent issue is the most important right now. I guess I'll explain that later why it is important to me as a parent” (Micheal).

“If I share the many identities that I have of myself, I'd say, number one identity would be a mother because I am a mother of six children” (Corrine).

“A woman. Even though my children are not with me I find that my life is kind of messed up right now but I still find that for me being a women is top priority list because I keep telling myself like because of my addiction problems right now, I keep telling myself, years go by quickly they are gonna be coming back to you. So for me it's important to get myself together as a woman so when they get back I can be a mother. I hope they accept me. So that's what is important to me” (Keesha).
“Didn't really have time to deal with this when first involved with child welfare. I was frustrated. They were at my door. They were knocking at my window. I was frustrated. I had an anxiety attack; too much people around” (Tina).

Findings indicated that the most of the participants understood themselves through the following identities. The primary identity of both of the males in the study, Brad and Michael, continue to see themselves as parents. Nine female participants, as indicated by Corrine, saw themselves as being mothers as their primary identity, regardless of whether or not they had their children presently in their care. Four participants identified themselves as foremost being a woman as illustrated by Keesha’s response. Keesha also shared that she wanted to straighten out her life by controlling personal addictions so that if her children returned they would accept her. Tina, on the other hand, felt bewildered as she described how she could not pinpoint how she saw herself in the Child Welfare context. Her anxiety was heightened when social workers suddenly came knocking on her door. These are the preliminary findings on how participants initially saw themselves in the context of Child Welfare.

Place of Understanding

The first direction, that being positioned East in the Child Welfare Circle, is labeled the Place of Understanding. The dominant theme of Services for participants in the Child Welfare was the starting point for this circle.

Services

The Child Welfare Services Table below describes the types of services participants were receiving during the study.

<table>
<thead>
<tr>
<th>CHILD WELFARE SERVICES TABLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>NEGLECT</td>
</tr>
<tr>
<td>15</td>
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</tbody>
</table>
With reference to the above table, clearly most participants were receiving services due to Neglect. For the purpose of this study, only the services for Neglect, Physical Abuse and (Risk of) Sexual Abuse are explored because the emotional affects of participants as a result of these events are sometimes tacitly reflected in their responses. Each of these services is briefly described.

A total of fifteen participants were receiving services for Neglect. The issues regarding Neglect for participants varied as can be seen in the following detailed responses.

“Neglect. Well first of all I became involved with them because I made a call on my own of course to the mental health and addiction line. I was involved. My husband he's [a different nationality], whom we've been living [in another community]. We've already been living together for like nine years. [He] was extremely violent. Nearly took my life on two separate occasions and he had been [sent away] for the second time back to [his community]. I had never been involved with child welfare at all at this time my son was two years old. He somehow made it back into [my community] and of course I went back to him. But in that time when we were apart, in the six month time we were apart I did gain some substantial self-esteem just learning how to do things on my own. Through the physical abuse with him I drank just to survive all that he had put me through. And when he was away I managed to put the alcohol down. I hadn't become yet involved with drugs at all. It was not just my high at the time it was just alcohol. So I drank to survive you know the extremely physically abusive marriage. But in the time we separated because of his [status] I found myself gaining some self-esteem. I was quite happy just me and my son. I gained some freedom from just the oppressive way of controlling an individual is like that. I was just happy to just be with my child. And I consider that to be the high point of my life before my addiction became raging which was when my son went into care. So I phoned the mental health and addiction line because my husband had taken up beating me again. I ran from him and had phoned saying, you know, I'm gonna drink again and I know what that is gonna lead to and I can't do this anymore, you know? I can't be beat up and I can't beat myself up any more. And I was staying at a bachelor apartment that he had rented. And on that same day I made that phone call, on the next day my son was apprehended. Because of that question, “Have I ever dranked when he was in the house”, and I said, “Yes”. So, neglect and I guess that was it” (Marion).

“They were taken from me. The circumstances, I think it was just expected when I had my first child. I just expected someday that I was gonna be involved with CAS. Just as I knew then that I was gonna be a single mom even though I was still with the child's dad. I just knew it. It almost like I knew it. It was a fact and to just get use to it. And when they first ever became involved, and this was certainly before they apprehended my children, it was because they get calls from like community they call it, right? It could have been my neighbour or whatever. And they'd say, “Oh, she's not feeding her children.
Children are crying because they're hungry or something like that.” And of course that certainly wasn't true but I remember when I first became involved they were like, well, your child is saying that, or this person called consistently your child says she's hungry all the time. And I said, well, this is what I feed my child at home. The other time I was trying to do the organic, feeding my children organic meals and we weren't eating meat because we were gonna be vegetarians. So, I was feeding them like the split peas, legumes, trying to mix the rice whatever the dishes properly but I wasn't. I knew that because I got ill. And my daughter and son they wouldn't eat this food, right? It was this big brown glut or whatever. They wouldn't eat it. It wasn't like I wasn't feeding them. They didn't like the food. So, they said, we have some food vouchers for you so I can go shopping for food with my children and what they liked, right? So I went out and I bought them the little cans of spaghettios and stuff like which was quite alright to feed children, you know, and I thought that was very hypocritical but I guess they have certain expectations cause we did eat a lot of vegetables. We did have a lot of fruit but I was feeding food that they didn't like. So, that was their first time they came involved because the community had called. And when they apprehended my children and I believe that this is just the whole like...ughhh, I didn't get along with one of the people in the day care where my children were. It was one of the child care workers and that should have been just something that a little red flag should have went up when that happened because...then, the Children’s Aid Society [C.A.S] started going to the school and visiting my children while they were in school and I didn't know this until I'd get a letter, they'd send a letter home saying, that C.A.S. give so and so a call at this number and I was like...I didn't know C.A.S can just go into the school and talk to my children. And at that time I had no idea of my rights or any of that stuff…” (Christa).

Both Marion and Christa provide different examples of their receiving services for Neglect. Marion, like most of the participants in this study, became a focus of attention by the Child Welfare System because of alcohol concerns. She had a two year old son and at the time she was receiving services due to neglect because of alcohol abuse. Marion drank alcohol she says, ‘to survive the physical abuse’ directed at her by her husband. She phoned her local Mental Health call center for assistance because she wanted to drink to escape her beatings; consequently her son was apprehended a day later. She also acknowledged that leaving her husband helped her positive self-esteem and independence; she was happy to be now living with her son. Christa also explained that she had received services due to neglect on two occasions. Being an Aboriginal parent, she commented that she expected to become ‘involved with the C.A.S.’ Christa’s first experience with the C.A.S occurred when a community member contacted the society because of
Christa’s perceived inability to feed her children. Christa felt that she was feeding her children, but it was her children who refused to eat her ‘organic’ meals. Apparently her children were not impressed with her new vegan meals. To help remediate the situation, Christa was provided with food vouchers by the C.A.S for her children. During her second experience with the C.A.S., Christa’s children were visited at school and then apprehended from her care. She was surprised that the Society had intervened due to perceived neglect and she did not know what her rights were as a parent.

The second dominant theme of Physical Abuse is illustrated by the experiences of Rainbow woman and Ruby.

“The third time, I was a parent then. I physically abused my oldest son and my son went, when he found out that there was a receiving home in [the community]. He went to that receiving home and told the receiving home parent what I did to him” (Rainbow woman).

“Physical abuse…actually because of my teenage daughter like they, ok is she at hospital again. They say, what's wrong again? Did she run away? I said, No, she didn't come home. So I understand what they need to do. It's a process of, even with my baby. She had fallen off the couch and hit the base board heater and she had different kind of marks on her leg but I didn't take her in. I was putting ointment on there and she was running around and nothing was broken and she was playing and I thought it would heal. And the father ending up taking her in and then C.A.S was called and he came back without her. And I was just really angry cause she was just one at the time, but I was mad at C.A.S then because I felt it was on the weekend. My doctor was not on duty, my baby was there and they wouldn't let her leave the hospital. Not until they did a safety check at my home. So, I stayed the night with her. I stayed the two nights with her and waited till Monday morning. And I just was very angry cause she needed to be at home. You know when we were at the hospital she was just crying her eyeballs out. You know, I think if I was there maybe it would have been different I would have been able to explain but the father I told him, she doesn't need to go and she has no broken bones. She's Ok like these burns will heal but he said that they were real bad and he brought her in and we had to go through that experience and I didn't like it. Not at all” (Ruby).

Both Rainbow woman and Ruby explained why they received C.A.S services due to physical abuse. Rainbow woman admitted that she had hit her son when he was a young boy. The son then reported the incident to the Receiving Home staff in their community. Rainbow woman
later recognized the harmful and inappropriate consequences of her actions. On the other hand, in Ruby’s case, she shared how her one-year-old daughter fell off the couch and apparently burned her leg on a base-board heater. She felt that her daughter did not have to stay in the hospital for the entire weekend since she could care for her child at home. Ruby expressed anger with the C.A.S because a safety check of her home had to be completed before her baby could be discharged from the hospital. Her doctor was not on call that weekend to help her out.

The third type of service participants were receiving was that of *(Risk of) Sexual Abuse.* Corrine provides one example below, which is representative of several participants who had their children in care due to actual, or the possibility of sexual abuse.

“This baby's father is in jail and he's from [this community] and it turned out that he was, like I dated him for a while and it turned out that he had some addiction problems which I didn't know about and he also had some past violent history. So he did spend a lot of time in jail and when he actually assaulted me. The [nearby] children's aid had to get involved. And they turned and got me and and said [Corrine], ‘You have to stay away from this man. He's very dangerous. He has a past history of sexually assaulting children. And you can't go near him, you can't have contact with him. If you do then we'll take your kids away’. And [they] sent me [to a place]. That's the last time I had to do with [that] children's aid but this guy is still in jail for assaulting me. He should be getting out in a couple days I think. And he's the father of this baby. I'm kinda of worried, like I'm not his partner anymore and I don't want to see him but he has a right to see his child. I don't know how that's gonna work. They'll have to obviously be supervised access and I mean he's got a lot of stipulations on me. So I don't know if that means I have to be there. Actually, you know what? Despite everything, despite all of the stuff in his past or whatever? I still care for him...” (Corrine)

Corrine, who was pregnant, described how she was charged with sexual abuse even though she was not the perpetrator. The C.A.S was concerned about the safety of Corrine’s children after she was physically beaten by her partner who had a violent, sexual assault history. Corrine was informed by her worker to stay away from her partner or her children would be taken away from her. The C.A.S has relocated Corrine and her children to another community and her ex-partner is in jail. Corrine knows that her ex-partner will be out of jail soon and feels that her ex-partner
should be allowed to see his child. Corrine openly shared that she still cares for him.

These are the main services that participants were receiving from the Child Welfare System as represented in the Place of Understanding direction. Services include: Neglect, Physical Abuse and Sexual Abuse. This direction explored and introduced some of the reasons why these participants were involved in the child welfare system. The next place of knowing explores provides a deeper exploration in how participants understand themselves in their Child Welfare environments.

**Place of Disconnection**

The southern direction focus of the Child Welfare Circle is the Place of Disconnection, where participants examine their existing relationships with social workers. The Place of Disconnection highlights how the Child Welfare environment contributes to the sense of disconnection for participants. The first theme of this quadrant explores the perceived **Traumatic Reactions** of participants during the investigation phase. The second theme, **Work Against Me**, illustrates how social workers treat participants in the Child Welfare System. These themes are discussed separately in this section.

**Traumatic Reactions**

In exploring this theme, participants eagerly shared information about their initial interactions with social workers during the investigation phase. It is during the investigation phase that social workers are expected to meet with the involved parent(s) to discuss, and evaluate the reported allegation of abuse. Participants describe the emotional impact of their initial interactions with social workers during these investigations:

“I was sad and crying most of the time. That's just about it” (Meagan).

“…I felt like I was being punished for something that I didn't do. Like I thought I seen myself as doing a pretty good job for a young single mother and I felt I was being told
otherwise” (Allison).

“I was involved with C.A.S and my children. The first time they took my children they said they'd jail me or walk out. The second time was somebody called in and told all of these things and [unclear] and my children were kidnapped or thrown in the car. I can hear them crying. When I got out the door I could see my kids, through the window of the car, and they're looking back at me. I didn't know that was C.A.S. I just thought someone was kidnapping my kids. They didn't leave me a number or nothing to find them. I know now the lady who called in that they were C.A.S…” (Anne).

“…I was very angry. When one of my ex-wives here, the one with the two youngest kids…she seemed to take care of them quite well even though she was drinking. She was taking care of the kids and she's over here in [another community] and I'm over here. And then C.A.S got involved and the kids got taken away and all of sudden I hear that my son broke his leg. These people are supposed to be watching him and they weren't watching. They weren't taking care of him” (Brad).

“I was really surprised and kind of frustrated because of the worker, and she's still being the worker right now, and you can't really get any answers from her. And it's still going on at this day and it's going on for four years now and my child is still in care and they're still not considering me as a parent. It's kind of frustrating even with the ladies out here because they try to get answers for me. The worker that's looking after my son right now they can't get the answers that they are looking for. So, I have been trying to go ahead with, I don't know, like basically they're telling me I need a lawyer. One thing I was really frustrated was with...how [the system is] not suppose to work. And I feel with that [agency...], it's suppose to be the same kind of format as the regular C.A.Ss’...but I feel that they are not following some of the guidelines. I had talked to the ...Director...about this situation and he hasn't gotten back to me either. Like I was really mad there about three or four weeks ago I tried to talk to [my worker]” (Michael).

“For me, it's good and bad cause I feel traumatized. In another way, it sort of shows me what I have to work on. I do feel really traumatized though because I find that's the hardest part for me right now. I dream about my kids a lot and it's hard to wake up and not see them there. When I lost my last child I felt like such a failure. What did I do wrong? It's taken me a long time but I tell myself everyday you're a good mother. You're a good mother. It was just a lack of support it wasn't her fault. For a longest time, I was like, “You're such a failure. Yeah, six children and you couldn't keep any of them. You're such a failure,” and that's what I use to say to myself but I don't do that anymore but it's still hard when I dream about them. Cause my dreams for me are so real that it actually feels like its happening. So that's the hardest part for me right now, is my dreams. And I got a lot of flash backs when I see babies crying. Automatically, they come on and I feel like crying so it's like [a constant reminder of everything]. So I feel traumatized but in another sense, it helps me to see what I need to work for me. It's been my counselling, my addictions counsellor and just sitting by myself and talking to the Creator…” (Keesha).

Most the participants described feeling traumatized during their interaction with social workers
during the investigation process. Keesha however, felt the process was both ‘good’ and ‘bad.’
The good being that with retrospect Keesha now understood the parenting skills that she needed
to improve upon. Conversely, Keesha feels traumatized with the loss of her six children and she
dreams at night of their return. When Meagan’s children were removed from her care; she was
‘sad’ and ‘crying.’ Allison thought that she was doing a good job in caring for her child, but her
workers did not agree. Anne shared two experiences that she had with the Child Welfare System.
In her first experience, she went to the Child Welfare office to inquire about her children who
had been recently apprehended, but her worker had given her a choice to either be sent to jail or
to walk out of the office. The second incident occurred when Anne was at home with her
children. She heard her children crying and Anne ran to see that they had been placed in the back
seat of a car, seemingly being kidnapped. She soon learned that the apparent kidnapper was a
social worker who did not leave any information for Anne as to how she could inquire about her
children. In the case of Brad, he was angry when he first heard about the apprehension of his
children; a result of the mother abusing alcohol. Brad knew that his ex-wife had a problem with
alcohol abuse, but he felt that overall she was doing a good job in caring for his children. Brad
was further angered with the news that his son had broken his leg while in the care of the
System. He felt that the system was not taking care of his son properly. Michael also recalled
feeling very surprised and frustrated with his child care worker. After four years of futile
attempts, the child care worker and the agency would not provide Michael access to any
information about his child. His frustration continues as he understands and believes that the
child care worker did not consider him as a suitable parent for his child.

The above participants have explored the meanings behind their initial interactions with
social workers. The following theme continues to explore these experiences within the social
work clinical setting.

**Work Against Me**

The second theme, *Work Against Me* is also located in the *Place of Disconnection*. This theme continues to explore the working relationship between the participants and social workers in the child welfare system. Due to the large amount of data acquired regarding this theme, study findings have been re-organized into *two* major categories: the *Personality* and also the *Practice* of *Social workers*. The sub-themes that inform these two categories are interpreted in various ways as participants engage within the child welfare context.

The Personality of social workers category has four sub-themes that present social workers as being too Strict, Judgemental, Cruel, and being Indifferent to Aspects of Healing Deep Wounds. These sub-themes attempt to describe how social workers behave toward participants. Social workers are perceived by participants to be *Strict* is first provided. Yvonne, Gabrielle, Anne, Marion and Michael voiced their opinions on this theme in the following responses.

“Exactly...but they don't like you. They just say things and they walk away or they say it's your lawyer and he calls you and it's like garbage, eh” (Yvonne)

“I had difficulty with the C.A.S system and their worker. When I asked about my child they didn't get back to me on things. I found more information about my child by talking to my child's caregiver than the worker. Some parents talk to the child's caregiver or the foster parent if they want information about their child. This line of communication is not the best approach for other workers” (Gabrielle).

“...As they take our children, before they took our children they just assumed whatever you are. They didn't give out flyers on what was happening. There was none. If they could just ask me how to care for my child and to get help. Help for what? What is wrong with me cause I'm Native? What is wrong with me? And I'm suppose to get help? Why? I don't understand. I'm losing the battle. I'm losing my children. They don't tell you where to get these things [resources]. Now, I went through treatment” (Anne).

“...Like they're suppose to come out and give you the courts papers a week ahead of time to let you know but with this system with [this agency] they just come out like the day
before the court and they expect you to be there. But that doesn't give you enough time to be there for the next day and then they tell the Judge, “Oh, the father is not interested.” If they told them that they came out to deliver the papers yesterday I would have came out. I don't know? I'm just kind of fed up with the whole thing. They weren't considering me…” (Michael).

“…And you know the problem is? I didn't know this until she was already in care the second time. It's like you told me...they don't make any of those things clear. Marion: Actually you know what? They don't lie, they use the best tactic and that's to tell you nothing. Cause a lie would be some information. Marion: The best thing they can do is to keep you in the dark and you can't see anything, you can't feel anything. What are you when you are in the dark? You're scared. You're scared and you don't even want to say anything just in case something's coming at you. Right? When you're in the dark, just think, if you're in a dark forest you don't want to make noise cause an animal might come by and chew your leg off. You know what I mean? So, that's the mental I get from them. It's the less I feel I know” (Marion).

From the perspectives of participants, Yvonne felt that social workers were too strict and did not like Aboriginal parents; that they would ‘walk away’ without clarifying information. She also described how her worker would blame Yvonne’s lawyer if any new decisions were added to her case. Gabrielle shared that she was not receiving any feedback from her worker about her children, but rather she was able to contact the caregiver of her children for this information. Anne felt that her worker maintained a negative image of her as a parent beginning the first moment her children were apprehended. She also did not receive any information regarding her children who were taken into care. Anne wanted her worker to inform her of the skills or resources she would require in order to improve herself as a parent, but this was to no avail. Anne from her perspective of things, questions the apparent long-standing worker viewpoint of being something wrong with her because she is a Native parent. Michael stated that he was not informed of his court date in advance so that he would then have adequate time to prepare and appear in court when required. Social workers would tell the judge that due to his absence in court, Michael could be perceived as uncaring toward his children. If more advance notice was given of his court session, Michael feels that his attendance problem would be solved.
Marion’s experience is one common to many other participants, who complain that they were informed about the crown ward process too late. She also states that workers were not clear regarding their expectations of parents. It is interesting that Marion believes that a lack of information is intentional so that Child Welfare workers can keep Aboriginal parents in the dark where they are most vulnerable, if not controllable – *what are you ‘in the dark’?*

In the *Judgemental* sub-theme, Corrine, Cynthia, Christa, Gabrielle and Yvonne observed how workers have a tendency to judge and stereotype Aboriginal parents.

“How have they been not helpful in the past? Like I say, they stigmatized me cause I was Aboriginal woman. They thought I was stupid and I didn't know my rights. That was a stupid mistake on their part. And that was from a worker. That was with a nonAboriginal worker, of course. And of course, they didn't have any Aboriginal cultural facts and this was all that stuff was in there with the regular C.A.S. They were not helpful at all” (Corrine).

“When I had a baby, I trained myself and I did well. The drinking and drugs that happened after my kids were apprehended gave me a bad name because of that and they stuck to that rather than focus on the good portion like my schooling and stuff” (Cynthia).

“…I remember the social worker at the hospital when I had my son, and I told her, Yes, I have two other children that were crown wards. Well, ok, I got to call C.A.S. She became stern. She was smiley and when she heard that, she became very stern, very judgemental, and Oh my god, ok? So I called my family doctor and I said, this lady, this social worker from C.A.S, and my family doctor I've had since I arrived in the city in 1986. So she knew me for twenty years, right? So, she came to the hospital. She was gonna come anyway to check on me and look at my baby. She spoke with the social worker and she said, I’ve known…. of course, just gave her a verbal reference. And if she needed a support letter or something I'm willing to give that but this woman, her children being apprehended and the child she has now they're two different things, you know? I was able to take my child home. I just remember feeling helpless laying in that bed when that social worker came in and when she got really...God? I have my child home now but CAS referred my file to [another agency] because they're a native [one] now” (Christa).

“My first worker was good. Everything was going well. I had a new worker and it was getting very difficult to work with her. I was doing a good job but she was judging me in her files. She made it out as though I'd be like her other clients. She was a white woman” (Gabrielle).

“Exactly, so how can they sit there and determine whether you're a good parent or a bad parent and say, “Oh if you go do a parenting you're good to go.” Like give it up, you
know? I just found out too, that I was a crown ward cause I just got my history from the adoption disclosure records. I wasn't adopted. I was just a crown ward. I just went through the system cause my mother died. Even C.A.S was trying to use that against me, how can I raise a child when I grew up in the system? Well how is my child that's growing in the system [suppose to] raise his own children then? Yet you want to keep my child in care? She could stop my kid being in care” (Yvonne).

Participants describe various ways of how they are judged or stereotyped by social workers. Corrine comments on how she was seemingly destined to become involved with the System because of her Native ancestry and the prevailing stereotype view held by many child care workers. As a Native woman, she believed that her worker had portrayed her as ‘stupid’ and ignorant of parenting responsibilities. Corrine, and many other participants, expressed that too often it is the child care workers themselves who are ignorant of Aboriginal culture. Cynthia shared that she had learned to parent her children on her own and believed she was doing well, however her children were placed into care against her objections. She felt that her past drug and alcohol abuse problems resulted in losing her children to the system. Social workers were unable or unwilling to recognize the recent academic accomplishments of Cynthia because of the stigma of her past problems. Christa was also judged, based on her past history. Christa had divulged to a social worker at the hospital that she had two previous children that were now wards of the crown. The immediate reaction was the worker became ‘very stern, very judgemental.’ The information that Christa had offered was seized by the social worker at the hospital as evidence of the inability of Christa to adequately care for her new-born baby. Christa quickly became very concerned about the reaction of the worker, so she phoned her family doctor to intervene and pre-empt any possible attempt by the worker to apprehend her baby. Her doctor arrived and was able to persuade the worker that Christa’s past former problems were now not valid. Christa was able to take her baby home. Gabrielle voiced her belief that she was a good parent, but her worker was negatively judging her in the case files based on stereotypes of other Aboriginal
clients. Finally, Yvonne spoke how she was judged to be a poor parent by her worker based on Yvonne having previously been a ward of the crown as a child, following the death of her mother; she had grown up in the system herself. Yvonne questions why her worker is holding her son in the system when her worker is able to return him to her? The above examples reveal a common complaint by most participants, who felt they were routinely, negatively judged and stereotyped by workers in the social work arena.

Some participants also felt that social workers were **Cruel** to them. Regina provides two examples of this perception below.

“They said nothing. What happened was I was sitting there with my child. I was breastfeeding my child and holding my child. They come in and they gave me a bottle. And then, as soon as I like, who are these people? And then they just came up to me and grabbed my kid. They way she was grabbing my kid it made me so upset and she was Ugh! like that and then she just waltzed out the door, and she put my child in the thing and was gone. That's what they did…What happened the whole time when I was in the hospital. They were in there teasing me like someone was going to come home with me. “Hey, why don't you take pictures of your child and everything, take pictures and be happy? You know you got your new little boy.” So they gave us a camera to take pictures. Only I know, those will be the last pictures I will ever have of him, and the last time I'll ever see him” (Regina).

“I think there should be more nicer workers. I mean, ones that are actually helping the families. The one I had was [Beth]. She was a very inconsiderate person. She only thought about herself and you can even ask my husband about this. She would literally laugh at you whatever you say and she'll sit there and giggle. She looks at you like, ooo, wait till you see what goes on, like you can actually see in her face, you can actually look in her eyes and know what she is thinking. It makes me want to strangle them but another half of me says like, don't do it, don't do it. You'll just ruin yourself. They're just trying to do that to get you to snap. And they know what to do to pull your strings. And I try to not let them do it” (Regina).

Regina felt belittled and angry that both of her workers from the hospital and the worker from the agency office had cruelly devalued her as a parent. At the hospital, her newborn son was seized from her while she was breastfeeding. The worker with cruel cynicism, suggested that Regina take pictures of her about to be seized son. Regina felt sad and grieved because from her
perspective she believed that this would be the last time that she would see her son. Regina also shared that during an interview, another worker was poking fun at her questions. These were humiliating experiences for both Regina and her husband as she describes strong feelings of helplessness and anger.

Participants also felt that most social workers were Indifferent to the Aspects of Healing Deep Wounds. Deep Wounds have multiple meanings for participants. Regina already spoke about her experience of a social worker who ‘grabbed’ her child from her while she was breast feeding in the hospital. Keesha spoke of longing for her children in her dreams. For most of these women, these very negative experiences continue to upset them. Two other participants, Wendy and Yvonne, provide additional perspectives on this theme.

“Worker was not good. Worker…was East Indian. It wasn't like that he was East Indian, he said that like, he kept saying that I had an anger problem. I said, you provoke us to get in a mood and you turn around and say that we have an anger problem. You tell us one thing and turn around, and it's like dangling the kids in front of us and saying, Nope! It was very hard…” (Wendy).

“They're legal kidnappers. They take your kids and they don't want to work with you. I've done everything. I've worked for 7 months. I've done absolutely...I've done 3 parenting groups and completed them. I've done rebuse, abuse workshops. I've done a lot of stuff. I've done treatment. Finished the aftercare and I've done everything and I still don't have my kids. That's retarded. They weren't willing to work with me at all. I had one worker that used my past against me and no matter how many times the judge told her to work with me she refused. They just refused. That's when I was with [this agency]. Then I got my case transferred to [another agency] and then still everything is up in the air. And my son is a crown ward now. That's what they did with my son. You're supposed to have your healing and everything done within a year…” (Yvonne).

Wendy, like other participants, described how her worker would provoke her to a point of anger and then use her defensive reaction against her. Yvonne perceived social workers as ‘legal kidnappers’ and that they refused to work with her despite repeated orders by a judge. She has completed various programs and workshops, but to no avail as her son remains a crown ward. The transferring of her file to another agency has complicated her situation. These are the
meanings of Indifferent to Aspects of Healing Deep Wounds that participants perceived of social workers.

The sub-themes of social workers being too Strict, Judgemental, Cruel, and being Indifferent to Aspects of Healing Deep Wounds have been explored as part of the Personality of Social workers category. These sub-themes looked at how several social workers conducted their work with participants in the Child Welfare Context. The next exploration focuses on Social Work practice.

Social workers were also perceived to be working against all participants through their practice. There are six sub-themes in the Practice of social workers category. They are: Overrate the Situation, Fault Finding, Use of Inaccurate Information, Expectations, Don’t Listen, and Controlling Methods. The meanings that participants attach to these sub-themes are individually explored. Allison, Ruby and Rainbow woman observe how social workers Overrate the Situation[s] of parents during their initial investigations.

“I don't know just the way they come in. The way they knock on your door. Like the first couple of times they came over like this one time they showed up pouring into our driveway with three cop cars saying that [Nicole] wasn't suppose to be there, even though she wasn't.

Rose: So, a dramatic scene?
Allison: Yeah, like making it so dramatic. And that guy running around our house and picking up carpet lint. Giving us, raising all hell because there was a hair on the floor or having a problem with the wood stove. Cause at the time we didn't really have hydro. Our hydro bill shot up when my sister and I moved here from [the city]” (Allison).

“Well the hospital experience wasn't, I don't think it was very helpful because, maybe having the records, I don't know how it can be helpful but I know it wasn't helpful the end result was but I really thought that I didn't have to be there two nights with her just to find out that it was an accident. The nurse said the same thing and I told her the same thing, you know, and she says, all it takes is just one person to make a report and then everybody is notified and I'm stuck there, and she's got a monitor on her leg.

Rose: What's the monitor for?
Ruby: Well just in case you take off with the baby. They can track you. I felt that wasn't very helpful, I think there could be something better on the spot because it costs money to us being at the hospital for no reason at all. You know, because I could have cared for her
at home. Cause, I told that to the nurse too, well what kind of treatment are you giving her then? Well we don't have any? Well, she shouldn't be here then, I could have given her that at home. It wasn't very helpful at all” (Ruby).

Allison described how her social worker over-rated the situation by dramatically conducting an investigation regarding her son; with three police cars ‘pouring in’ to her driveway. She felt embarrassed about this ordeal because the community that she resided was a small one and her neighbours had watched the drama that took place in her driveway. Ruby also felt that a situation with her baby daughter was over-rated by the Child Welfare System. During a weekend, Ruby’s infant daughter was treated by a nurse at the local hospital for small burn marks on her leg. Ruby is adamant that these marks were accidental burns from a baseboard heater. The medical condition of Ruby’s daughter was automatically reported to the child welfare agency. Ruby felt that it was not necessary for her daughter to stay in the hospital for the entire weekend because she could care for her infant at home. Ruby suffered humiliation as her daughter was required to wear a G.P.S. tracking monitor around her ankle in case Ruby was to run from the hospital with her baby.

Cynthia, Keesha and Christa describe how child care workers can be Fault Finding discussed in the following responses.

“…Because [he] had committed this crime, she [the worker] assumed that there was a lot of crime in the family because I wasn't on social assistance. And I felt that it was their way of arresting him and making me a part of it. It was their way of them getting into my life and finding things out. My lawyer said that they’re going on a fishing expedition with me. And it was hard to figure out because I never did know them. It was [this other agency] in the [city]” (Cynthia).

“They look at your mistakes when you work with them” (Keesha).

“…well I find with the long term worker that I have now, he's just a fill in. The other one that I've had for a couple of years…. He's so phenomenal. He's so helpful but he went on sabbatical. Actually he went to the adoption side for a year and he'll be back. But this one right now, the way that he speaks to me is very condescending. And he'll keep repeating a question but in different ways like he's trying to catch me in something. When
he says what he's heard me say back, it always sounds so negative, you know what I mean? It's like I'm being tested continually and I hate that. I hate that. What more could you do to me? And now you're trying to say I can't have any more hours and I might not be able to see my children every month. Why, because you personally don't like me” (Christa).

Cynthia, in reminiscent of other participant’s perspectives, cites the term ‘fishing expedition,’ used by her lawyer to describe how social workers gather information about parents in order to find fault. She also experienced guilt by association when she was questioned by a Child Welfare worker about her husband’s criminal activity. Keesha shared how social workers were only focussed on the mistakes of parents. Christa explained how her substitute worker had used a repetitive line of questioning that she resented. The worker was ‘very condescending’ and attempted to twist the verbal responses of Christa into something nefarious, in order to arrive at the intended outcome of finding fault.

The Use of Inaccurate Information was viewed as another method of working against parents. Both Faye and Gabrielle shared how information gathered by social workers can be inaccurate and selectively biased against Aboriginal parents.

“Right now, the communication and you would have to be really careful in what you say to them because they can easily twist it down in point form cause that's how they do their forms in point form. They are not saying the whole story in what happens. And in how they do their research and they just go and like talk to family members and stuff like that. And if two families are [feuding] they'll automatically say something about that person and say stuff like, Yeah, she did that like that's bad and they're not really thinking about the kids. It would be nice if they had more Aboriginal staff on there too” (Faye).

“[Paraphrased response as the audiotape stopped]. Shared an incident where she was supposed to visit her child and was waiting at the Mall to get picked up for her visit. The worker apparently phoned her house and her mother, who was intoxicated, answered the phone. She indicates that she missed that call and missed her visit with her child because the worker had thought she was drinking too. She indicated, “I was sober. When I phoned the worker she didn’t know of the visit. They cancelled the visit. I phoned the worker but they didn't know” (Gabrielle).

From the opinions of both Faye and Gabrielle, they discussed how information gathering by
social workers was often not accurate or helpful for the parents and their children. Faye remarked how the use of the point-form writing method that workers rely on can be inaccurate because workers seem to ‘twist things’ toward the negative. Compiling information based on feuding families is often biased and inaccurate because it is based on hearsay and rumours. Gabrielle also described her ordeal of how her social worker had wrongly assumed that she was intoxicated based on a telephone call that her mother had intercepted. Gabrielle had left her house to wait at the local mall in order to meet with her child on a scheduled visit. At this time, her worker had phoned her house and it was her inebriated mother who answered. Unknown to Gabrielle, the worker immediately cancelled the visit based on inaccurate information.

Parents had multiple meanings of the Expectations for parents involved with the Child Welfare System. Annie, Cynthia and Keesha speak of the perceived inconsistent expectations placed upon them by their workers.

“Workers should provide information for parents to know what is expected and why they are involved in the agency. I know the inner workings of the agency. In some instances, some workers think differently than the client at the prevention level, different of how to provide child care. Workers seem to have different rules for them as parents. There is inconsistency in communications to parent. One worker may say something different than the next worker or co-workers. The client as a result gets really confused” (Annie).

“Yeah, they did. We hit a drum everything I spoke. We passed the drum around. We smudged everyday and that's the process that helps me to kind of look at myself, Ok, I have six weeks here. I can't lose it and lose my children. I did it for my kids and myself. I wanted to make myself strong. But what I did was make myself strong cause welfare never complied to giving my children back so there I was, a strong addict, a strong alcoholic. I started all over again. So, they like kicked me. It seemed the more I did, the more they wanted. They pressured me, and the pressure broke, and I relapsed. It was like that in the past eight years” (Cynthia).

“That's what I find helpful, like be clear. Like what you were saying, be clear. Don't say well I want you to do this and then turn and walk away and say, guess what else you have to do? They did a lot of that to me too. I use to always...what do I have to do now? You know, be more clear” (Keesha).

From the understandings of these women, Annie has observed social workers requiring
numerous and inconsistent expectations of parents involved with the Child Welfare System, resulting in much confusion. The absence of clear communication between the worker and the parent is a common complaint. Cynthia shared how she struggled to complete six weeks of healing programs in her endeavour to have her children returned to her. When she realized that system was not going to recognize her efforts and return her children, she then relapsed back into her drug and alcohol addictions. Keesha expressed frustration with social workers who fail to communicate clear and concise expectations to her.

Another tactic the participants observed as being utilized by social workers, that ultimately works against the parents, is that workers Don't Listen. Keesha, Kihew and Cynthia speak about this observation.

“They need to listen more because I remember specifically telling them, “Do not touch my son's hair. Do not touch my son's hair!” So they need to listen better for one” (Keesha).

“I don't trust them. I have no trust in them, even [this agency] too. I have no trust in them at all. And if I ever get involved with them again, my answers will be no, yes, I don't know, maybe, that's it! No getting into details about anything cause they twist things around. I learned that with the third one, like I had [Benny] the [this agency] was involved again, and they told me that they were gonna transfer the file to [another agency] I'm going. No, no, no, don't I hear too many horror stories about them, no, no but they did anyway” (Kihew).

“Nothing. I had a very terrible experience with the Child Welfare system. The worker I found her to be very rude, she already had everything figured out before she even asked me stuff. She was doubtful. She accused me of things that I didn't do. When I mentioned that is it because she was native because she said she had native blood in her? And I highly doubt that. Well now a days you can't tell but this woman looked not Aboriginal. Trust me, but she had planned at that time that she had some native blood in her. And I said, she was just trying to say that like I didn't go with her. She lied to me and I could tell. And I had no trust in her. I feared for my children's safety in their hands because I knew they had to be with me” (Cynthia).

Keesha spoke of an issue of cultural significance that was ignored and involved one of her sons. She had requested that that the long hair of her son not to be cut; the social worker ordered the
hair cut anyway. Kihew indicated that she does not ‘trust’ social workers in general. If she is involved with the System again then she will not divulge detailed information to her worker because they only ‘twist’ her information around. She also did not want her file to be transferred to another Child Welfare agency, but no-one listened and it was transferred against her wishes. Cynthia revealed how her social worker doubted her sincerity because of her Aboriginal ancestry. Cynthia also feels that this same worker had already decided the outcome of the meeting prior to Cynthia entering the room, and was not interested in what she as the parent had to say.

The final sub-theme in which social workers were perceived to be working against parents was through the use of *Controlling Methods*. Marion, Margaret and Allison discuss what it means to be controlled.

“These people only have a certain effect as far as what control they will have in my life if I don't allow them to control me and about the only way these people have control me is if I continue to be the addict that they've pegged me to be. When I break who that is? What are they gonna do when they no longer have that to depend on. Well I've been a sober, strong woman, educating myself and being fully capable of caring for these people. What hole are you gonna place me in because that's a circle going into a square. It doesn't fit. It doesn't work anymore. When you can't mould me and put me in that box, you better know how to deal with me then? Because you sure could tell me what I was or what I was doing wrong. So prepare for when I am no longer that person and I'll give you something to talk about, you know what I mean? So that's what I wonder as far as do I have any other thoughts. What are you gonna do when I give you...when I give myself what I need, and when I become someone that you don't know. Well you need to educate yourself on who I am, and how you're gonna get me back to my children, or get my children back to me because that will be your responsibility when that time comes. I truly believe that” (Marion).

“Like they…it's like they can control you if you had a visit with them in their office, with your kids in their building, you know? If you're late five minutes they can cancel your visit. That's what I didn't like. I get my anger out to them and they would bring this out in court and use it against you, and take your kids away from you for good. Like they can control your life instead of you” (Margaret).

“Yeah, like it seemed, like once there was a file opened on me, they keep on, even though there's nothing for them to really bother me for, they still keep poking in every now and
Marion resented feeling controlled by her worker because of her former addiction to alcohol. She says that she has reformed and is no longer an addict, but she is working on being ‘strong, sober woman’. She wonders what negative tactic her worker will use against her next in the absence of her former addiction. She doubts that her worker is going to help to return her children. Margaret described that the office environment of her worker is seemingly used as a position of strength against her, especially if Margaret’s children were present. When she was five minutes late for a visit with her children; subsequently her entire visit was cancelled. She became angry about the visit cancellation and consequently this response was revealed in court. Allison also described the effects of being monitored as a controlling method. She shared that her social worker would ‘pop’ in once in a while to check up on her just to keep her file open. These are three examples of how social workers were perceived to be using controlling methods that work against Aboriginal parents.

The Working Against Me theme has been examined in two categories: The Personality of Social workers; the Practice of Social workers. The Personality of Social workers category was discussed in the four sub-themes: Strict, Judgemental, Cruel, and social workers being Indifferent to Aspects of Healing Deep Wounds.

The Practice of social workers category explored six themes that were identified by the participants. These six themes included: Overrate the Situation; Fault Finding; Use of Inaccurate Information; Expectations; Don’t Listen; and Controlling Methods, in the Child Welfare System.

The Place of Disconnection direction has explored the two dominant themes of Traumatic Reactions and the Working Against Me, as perceived through the participants themselves in the Child Welfare context. The Place of Disconnection examined some events of the Child Welfare
System that contributed to the participants’ sense of disconnection. This was the most difficult task for participants, since they had to revisit some of the most negative feelings and attitudes they had encountered with the Child Welfare System. In moving away from this *Place of Disconnection*, participants were encouraged to think of ways of change to help themselves to cope with the Child Welfare System. The outcome of this self-reflection process is explored in the next direction - West.

**Place of Identification**

In the West quadrant, the *Place of Identification* reveals the emerging subjective responsibilities of participants in the Child Welfare context. Participants through their own self-reflection process identified some of their responsibilities as parents. The term ‘responsibilities’ was identified by Allison in this study and is used to depict aspects that participants need to consider in their parenting roles. The self-reflection process can be empowering and can encourage participants to personally search and reveal their responsibilities in the Child Welfare arena. This responsibility in undergoing change is important as participants must be truthful about their situation. I selectively use both Ginny and Cynthia’s reflections to highlight how change must first be initiated by the individual.

“Well, they have to know how to say 'no' right from the start. They have to not rely on getting help so much all the time. And they have to change the way they are thinking right now” (Ginny).

“I think we have to break the cycle of having our children taken from us and put into the white society. Learn to break the cycle of violence in homes. For example, my mother abandoned me and her mother was abusive. She was a dysfunctional person and it feels like I'm unconsciously following her steps. And I don't want that but yet I do it. I don't understand that. But I know I want to break that cycle of violence that goes along with that” (Cynthia).

Ginny feels parents must adamantly stop all negative behaviours and activities that will harm their children. They must learn how to change existing thinking processes and to not be so
dependent on others. Cynthia shared that violence in the home is often a cycle repeated within
the family that must stop. Learning how to break this parental cycle of violence requires self-
reflective truth with the absence of denial, and to take responsibility for your own actions.
Participants through the self-reflection process share what their responsibilities are in the Child
Welfare System.

**Parent Responsibilities**

The nine dominant responsibilities that the participants as parents have identified in this
study are: providing a Stable Environment for their families; Finding Answers about their
situations; being able to Stand Up for themselves; Seek Traditional and Professional Help; Read
Notes for Accuracy; Speak to Ex-spouse(s); Support other Women; Follow Programs; and to Co-
operate with Worker. Each of these nine themes which are grounded in the experiences of
participants has multiple meanings for the participants and they are described in the following
pages.

**One:** The first responsibility in creating a *Stable Environment* for their children is
described by Allison and Tina.

“I don't know just make sure everything is stable. Do your best to make everything stable.
For me at the time I didn't see my mother's problem as my fault. [Cell ringing]. Yeah,
you call my phone for everybody.
Rose: What things do Aboriginal women need to change?
Allison: Well, if you're gonna go out be responsible. Make sure you're home when the
sun comes up so when they're awake you'll be there when your kids get up. Make sure
they are happy. As long as they're happy there shouldn't be problems” (Allison).

“Well for me I have to stop drinking, get counselling, some kind of counselling, AA like
that. Stay home. I don't stay home. I'm always out there. That's it” (Tina).

Allison felt it was the responsibility of parents to create and maintain a stable environment for
their children. It was important to be available for your children every day and to ensure their
happiness. Tina admits that she requires alcohol addiction counselling and she also needs to stay home more often in order to provide a stable environment.

**Two:** It is the responsibility of participants to begin *Finding Answers* regarding their predicaments. Anne had already shared that parents have to ‘take a look...inside’ to find out who they are and how their present situation has evolved. Rainbow woman, Christa, Corrine and Cynthia describe what *Finding Answers* means to them.

“A couple of things, know the child welfare system: the mandate and the policies, develop and provide a brochure on the rights of parents; if we breach these rights what can we do to protect those rights, avoid doing negative behaviours” (Rainbow woman).

“Here’s the thing, I found out after my children and when I started working here, I would never have known if it wasn't for the long term care worker that told me, I said I have children in care and now I’m working here. I'm dealing with C.A.S., but it was the liaison, you know, there's another step that's not done, called status review. “What's that?” I said. Well, you can bring a motion, a parent has to do it, bring it in front of the courts to, you know, yes, this was who you were and what happened then. Five years from now you'd be somebody else, right? And you can ultimately have your children returned to you even though they are crown wards. And I know people that this has happened to cause they turned their lives around. I still have that opportunity but it's a hard fight.

Rose: Yeah, you have to get a lawyer?
Christa: Yeah, I'm not eligible for legal aid. I don't have enough money to put the retainer down. Ok, plus, I need a big house now. And I would love to have the Eligibility spectrum [Handbook]…” (Christa).

“Well actually, I phoned, when I came back to [a City] because I had an open file with [an agency], because it is personally in my right. They wanted to transfer it to a regular C.A.S., uh, uh, you’re gonna transfer it to [this agency] because they're mandated now. So I phoned them up and did a self referral to get some help and I really only wanted to be involved in the prevention side but they in turn gave me a protection worker” (Corrine).

“…I think we should create our own child welfare system but like all the drugs and all that, and all the problems that are going on reserves now I think that's the only place we can make our own child welfare system. I know that there's a lot of drugs, HIV and I wouldn't like to see little children taken out of something and putting them into something else. I never had a good experience with C.A.S. It's so much different out here there's so much more Aboriginal. Even in the court system it's so different. Out there it's all like there's no Aboriginal people” (Cynthia).

These four women identified several observations regarding the Child Welfare System. Rainbow
woman felt parents need to learn about the mandate, policies, and the rights of parents involved with the System. Christa shared her recent knowledge obtained from her worker regarding the status review process. Christa also would like to know more about the *Eligibility Spectrum Handbook* that social workers use in the Child Welfare System. Corrine shared how she was able to identify an agency where her file could be sent that could be of assistance, before she moved to a new community. Cynthia would prefer dealing with an Aboriginal Child Welfare System, rather than the seemingly less understanding C.A.S. Cynthia also refers to a double standard against Aboriginal parents, vis-à-vis Child Welfare and the courts.

**Three:** Participants also felt it was their responsibility to *Stand Up* for themselves in the Child Welfare context; that participants have to take some direct action in order for change to occur. Corrine, Christa, Yvonne and Mary voice what this means to them.

“Well, like I say, I'm pretty verbal. I mean like when [those C.A.Ss] were involved with me...when they were taking my kids on a voluntary basis whatever that was, and they refused to give the kids back, they enabled me to fight harder I guess. I found out things that would go in my favour and I told them about it. And I said, Ok if you're not gonna give them back to me then I have this to complain about, and I have that to complain about and you know? I want something done about this right away. And when they didn't do that then that's when I wrote a letter and that letter when out to all of these different places, including the [local] police because the home that I had chosen for my kids was my best friend's home and she's a nice lady but her children are kind of messed up...And they're like, Oh no, we can't do that it's only a voluntary agreement. I said, well then I guess we have to take it one step further. It made me stronger I think because like I say, I'm always anticipating what their next move is gonna be. I try to stay on top of everything. In order to do that you have to be, you have to have all your marbles with you. You can't be drinking, or using or anything like that. If you want to play this game you got to be sharp. You know, I'm sharper than they are. I think they know that. That's the way I look at it. It's made me stronger. I don't have any problems now but I've had them in the past and it's made me a better person” (Corrine).

“And I find that, well after the whole first like two year fighting with them cause I fought so hard for children to always have good drivers, female drivers. I didn't want any men in my children's lives. I fought so hard to not have them medicated but they are medicated. You know, I'm always, continually fighting and calling meetings and I was generally a pain in the ass” (Christa).
“I'm gonna keep putting things in writing until they answer my questions and then I'm gonna be filing a complaint against the child welfare agency and my lawyer that I had advised me that it was not in my best interest to put my child up for crown ward. So that is my next step and I just left a message last Friday and guess what? You don't want to give me answers? You don't want to give me directions? You don't want to get my kid home? You need to give me the reasons why? And I want it in writing” (Yvonne).

“Mary: Well I just hope something good comes out of this for the reserves and the women. I think they need more education on mandated agency and [C.A.S.], and where they're coming from. They just don't know.

Rose: So there's a lot of confusion?

Mary: Yeah. And at the [community] level too cause I think that's one of the areas, too, is to find out what role the [leaders] really have when it comes to prevention services or protection cause there's a lot of confusion there too. Like the clients will go to [leaders] and it's interfering. They're politicians. The clients have to know even the community members that they go complaining over there. It doesn't work right now. That's what is going on” (Mary).

From the perspective of these women, Corrine described how she decided to fight after C.A.S. refused to return her children. She wrote a letter of complaint that was received by the police, concerning the treatment she was receiving from C.A.S. Corrine feels more empowered following her letter writing campaign. Yvonne also feels empowered by writing letters to the Child Welfare agency in an attempt to have her questions answered. In addition, Yvonne seeks advice from her lawyer. Christa felt that ‘fighting’ for attention via meetings was effective when dealing with a Child Welfare agency. Christa was adamant that her children have appropriate drivers when transporting her children, and also not to have her children overly medicated. Mary also described how parents must become familiar with the Child Welfare mandate. She spoke of the leaders in her community and that they did not understand their role. Parents in her community will generally seek help from their leaders, but this can lead to confusion. Political leaders, she felt, only complicate the process.

Four: To Seek Traditional and Professional Help, was also viewed to be important in order for participants to achieve positive change. Gabrielle and Wendy’s response illustrates the
need for parents to seek these resources for themselves.

“You should go and get help for counselling, drugs, alcohol and for mental health issues. You have to find the programs for yourself” (Gabrielle).

“Yeah, stop drinking and the drugs. To get counselling” (Wendy).

Participants agreed that they should utilize supportive resources, if available, in their community. Gabrielle and Wendy both felt it was important to seek supportive addiction programs and counselling on their own.

**Five:** The responsibility of participants to Read Notes for Accuracy is significant. The participants believe that the information that social workers compile is often inaccurate and built on hearsay. Christa and Annie comment on this responsibility in the following responses.

“Workers? They have no experience, and are not parents. They also make up shit. They also like write, when they write the reports they have to word things in a certain way, so that the judge can look at it and go, “Oh, well, there's certainly a reason for concern here,” right? The first time I ever had to go and meet with a CAS worker I had brought a friend. Just unknowingly, thank God, I brought a friend. I had a witness. And when I got this little book of where they wrote of something of what had happened, it was wrong! She said this, woman does not want her children back cause she never even asked about them. And I said to my friend, is that true maybe I didn't ask about them. Well she said the first thing you said when you walked in there was, how do I get my child back? Where are they? So it's not like you're not saying...you know what I mean” (Christa)

“Workers jump to assumptions or gossip about a client too readily. They should go and check it out on their own” (Annie).

Christa felt that some social workers lack the ability to relate to parenting issues if they are not parents themselves. Workers, she felt, intentionally write reports to make Aboriginal parents look bad. These same reports can influence judges to think negatively of parents during court proceedings. Christa was also thankful that she had a witness to one of her visits to the Child Welfare office because her worker failed to include in the written report, Christa’s significant request of wanting her children returned to her care. Annie also felt workers often tend to create and then document the situations of participants without asking them. She suggests that workers
directly visit with the parents about any concern.

Six: Participants also felt it was their responsibility to try to *Speak to Ex-spouse(s)* about their children. Michael shares an experience.

“Exactly! Exactly! I tried [talking to her] and she gets angry for no apparent reason. She's got a mental problem I think? She needed to get some proper care. I know that the agency knows and is well aware that she has some mental problems cause they're the ones that documented everything: psychiatric assessments. Yeah, they documented everything and I have those court papers that they gave me…” (Michael).

From a unique perspective, Michael tried to speak with his ex-wife about their children, but she became angry and the conversation ends. It was Michael’s desire to take his children out of child welfare care and to care for them himself.

Seven: *Supporting other Women* was another important responsibility for participants. Faye, Ruby and Keesha provide perspectives of how they understand this theme.

“There's no support system for babysitting and stuff like that. Like say, if a person wanted to go out and have fun there's no support.
Rose: What about asking grandmothers?
Faye: Yeah, but some people don't want to do it. There's really no support for young women here. It's kind of hard. We're basically on our own” (Faye).

“I think guidance. I know women that come to me for help. They come to talk to me especially if they're in some kind of treatment or crisis.
Rose: They come for help and to guide them or to fellowship with them?
Ruby: Yes. Also to know about, cause I know a lot about child welfare. I know all about processes and administration stuff. A lot of women that are not familiar with the work, the legal stuff and a lot of them will ask me what they need to do, you know, I kind of point them in the right direction” (Ruby).

“And being with other women because I find, for me, being involved with the [agency] I had a chance to meet a lot of different mothers and hear their stories too. And know that I'm not the only one that's being treated like crap so, it was helpful” (Keesha).

Faye feels frustrated with her attempts to find a babysitter so she can go out and socialize with her girlfriends. Ruby has been a source of support for other women in her community. She has offered advice on the processes of the Child Welfare System and the legal system. Keesha has
learned from other women about their experiences with the Child Welfare System, revealing that she is not alone in being mistreated by social workers.

Eight: Participants felt it was their responsibility to *Follow Programs* in order to resume care for their children. Yvonne had described earlier how she had completed parenting and addiction programs, but her son remains a ward of the crown. June now shared her perspective regarding the value of parenting programs.

“They help me to go to parenting courses. Before it happened we were waiting for a parenting course for six months and they helped us get into it. They helped us to get into the [classes]. They wanted me to go to that one, too. They didn't take my kids but I had to do that. They wanted me to go to these parenting classes but my counsellor said that was too much parenting classes for me to go. I don't think I will go, too much! I see other women at these classes too” (June).

June had to attend a parenting class as a consequence of an incident with her son. She was permitted to continue caring for her son on the condition that she continued in a parenting program. Her worker suggested that she attend another program, but her counsellor did not want her to take too many programs, a state of confusion, resulting in June only occasionally taking classes. These examples show how parents are required to follow through with programs on the expectation that they will be reinstated as the primary caregivers of their children.

Nine: The dominant theme to *Co-operate with Worker* is the final responsibility. Mary states her observations about how parents should be working with their workers.

“Sometimes I see positive changes coming from the clients after they go through the experience, you know? I've seen positive changes and they never get involved again but there's just the other ones that just don't want to cooperate like the ones that have attitude problems. And that's what's really hard to work, to try and work with these clients to try to help them to understand that their attitude problems don't work. And it makes the process longer and extensions. That's why it keeps on going for some of them” (Mary).

Mary has observed parents who have displayed either positive or a negative working relationship with social workers. Mary has observed that parents who cooperate with their social workers
tend to speed up the process of getting their children back. Parents who do not cooperate with their workers only delay the process for themselves and their children.

The nine dominant Parent Responsibilities have been explored in the Place of Identification, westerly direction. Participants, as experts, had an opportunity to explore the Child Welfare context by examining existing practices and interaction with social workers. The process of self-reflection encouraged the participants to deconstruct existing practices and to re-envision new Aboriginal informed ways of doing social work in the Child Welfare context. The re-envisioned social work practices serves to not only strengthen the parenting roles of participants, but it also strengthens the wholistic identities of participants as Aboriginal people. The acknowledgement, ownership and practice of the nine dominant responsibilities discussed above are salient to the participants as Marion uniquely points out.

“I truly believe that the responsibility I take up is going to make up the difference of my own family, my own circle of friends, my own life, my next seven generations cause it's going to come from my own blood. It's about what I do” (Marion).

**Place of Reconnection**

In the final direction, the North quadrant is the *Place of Reconnection* where participants continue to re-envision the existing external conditions and practices of the Child Welfare System. It is at this place where participants are able to identify the preliminary responsibilities of social workers and First Nations communities. These emerging responsibilities have originated from the existing multi-dimensional experiences of participants. For example, these responsibilities are a reaction to how participants understand their experiences in the Traumatic Reactions, Work Against Me and Parent Responsibilities themes. These responsibilities act to support the parenting needs of participants.

Findings revealed a total of *Twenty* responsibilities in the Northern Direction. They
comprise of eighteen Social Work Responsibilities and two First Nations Responsibilities. I acknowledged the community responsibilities in this direction because they were a dominant theme for participants to discuss in this study. These responsibilities are chronologically numbered according to how they are introduced in this section. The Social Work Responsibilities are described first and then the First Nations Responsibilities.

**Social Work Responsibilities**

The Social Work Responsibilities are aimed to support the unique parenting needs of participants in the Child Welfare System. They are the responsibilities that social workers need to embrace when working with participants in the Child Welfare context. Due to the richness of the data, the eighteen social work responsibilities have been organized into three key categories, specifically: **Context**, **Practice**, and **Services**. Some of the responsibilities in each of these categories are the direct responses of participants. In addition, selected responses that were shared by participants in the former directions have been isolated and paraphrased to further substantiate the responsibility that is discussed. These responsibilities emphasize how existing child welfare practices should be changed as perceived by the participants. The responsibilities of social workers within the Context category is provided first followed by the Practice and the Services categories.

Multiple and meaningful responsibilities were identified for social workers when working with participants in the Context category. Participants explicitly expressed frustration with social workers who did not have a satisfactory degree of understanding of their present situations. The first responsibility participants identified for social workers is the *Understand my Reality* theme. Participants strongly emphasized the need for social workers to understand their socio-historical backgrounds and the present life environment for Aboriginal parents. Participants identified that
social workers had to understand the significance of Aboriginal culture and to be cognizant of the requisite healing process.

“The workers should be sensitive to our culture and what we face as native parents. They should have an understanding of the differences we face as a people. They should know our background, our history. They should be trained in addictions and to know the contexts of clients.... A lot of these parents are going through a personal healing process. This has to be done. They are dealing with a lot of social problems. Workers should be well educated in the background of Aboriginal peoples, addiction, drugs and the many types of abuses clients encounter” (Annie).

“So they need to listen better for one. I just think they need more compassion, more understanding about additions and more understanding about mental illness cause I really got the dump from them. Like I felt like having a mental illness was a crime. That's the way I felt. I didn't want them knowing anything about me. I did my best to avoid letting them see any medical papers about me. So they need to be more open minded about mental illness too” (Keesha).

These women, like other participants in the study, express different ways of understanding their realities. Annie shared that it was important for social workers to be aware of Aboriginal history, contemporary social problems, and the healing process. Annie also disclosed that many Aboriginal parents were in the process of healing from their personal abuses. Keesha responded that social workers need to listen to parents more closely, to have an open mind and discard the stigma that they may associate with mental illness and addictions. Corrine, in an earlier response, also expressed with frustration that many social workers lacked knowledge of Aboriginal culture.

The Practice category has a total of fifteen responsibilities. Participants describe a set of responsibilities for social workers that they would like to be implemented into the social work arena. The themes have been arranged in the following order: the first responsibility is the Work With Me theme. The remaining themes include the Investigation Approach, Apprehension of Children, Postpartum Phase, Listen, Share Information, Clarify Expectations, Accurate Information, Look At Strengths, Change In Behaviour, Biological Fathers, Maintain A Connection, Return Children, Provide Trad/Prof. Resources, and Stigmatizing Effects. Each of
these responsibilities is described in the following pages.

**One:** The *Work With Me* responsibility reflects how social workers should maintain a co-operative working relationship with participants. The previous responses of Yvonne, Christa and Mary articulated the importance of this responsibility. Yvonne explained that she and other participants often sensed that some social workers did not like them and did not want to work with them. Christa shared how her social worker would use a line of questioning that would attempt to trick her into divulging some degree of irresponsibility. It frustrated Christa that her social worker would not believe her, but suspected only negative behaviour. In notable contrast, Mary had observed that one social worker in her community was able to create a positive working relationship with parents involved with the Child Welfare System. Participants believe that a positive working relationship with parents, in the absence of mistrust, is essential for clear and effective communication.

**Two:** Social workers have the responsibility to implement an appropriate *Investigation Approach* with participants during the initial investigation of a maltreatment allegation. Allison described how a social worker had stormed into her driveway with the assistance of policemen using three separate police cars. She felt this was not necessary since a phone call notifying her of the visit would have been more appropriate and less dramatic for Allison’s children and the neighbours.

**Three:** Social workers have the responsibility to notify the parents in the *Apprehension of Children*. Anne’s response was repeated by many of the participants in this study. Anne described how her children were apprehended without an explanation from the social worker. Anne was alarmed that her children were seemingly being kidnapped by a stranger. Proper protocols must be followed.
Four: It is the responsibility of social workers to consider the *Postpartum Phase* affecting some mothers when apprehending children. Regina referred to an incident at a hospital that occurred shortly after she had given birth to a son. While she was breastfeeding her baby the social worker seized her son away from her. This same social worker had earlier taunted Regina about ‘who’ she would be taking home with her from the hospital at the end of the day, inferring it wouldn’t be her son. The emotional healthy state of the mother should be considered when children are removed from their custody (See Christa’s response in number ‘Ten’ of this section).

Five: Social workers must *Listen* to participants. Earlier responses from Keesha, Kihew and Faye speak of the meaning of this responsibility. Keesha described a previous incident in which her worker ignored her advice not have her son’s hair cut, an important issue for traditional Aboriginal people. Kihew also felt that she was not being listened to after her social worker had arbitrary transferred her file to another agency. Faye was five minutes late for a visit with her children resulting in her visitation rights being suspended. Faye stated that she was not allowed time to explain her late arrival. These are some of the examples of how social workers were not sufficiently listening to participants.

Six: Social workers also have a responsibility to *Share Information* with participants. Michael responds to this theme.

“My son was going back into care and right to this day I'm still paying child support for my child for being in care…I don't know? Like, I just get deducted off from the [office] here every time I get paid. I'm in arrears right now but I'm gonna try to get paid up on the arrears so I don't know if he's getting the money but I know I'm still paying child support for my child there. I'm paying $119.00 a month for him and I'm still paying it. And then they still tell me over the phone as a parent that I'm not, like he's come and lived with me for about a week, the mother at the time was fed up with him and didn't want nothing to do with him” (Michael).

Michael wanted to know if his child support payments were being received by his son in care.
Michael also described earlier how his social worker should have notified him of his court date well in advance, rather than receiving a one day notice. Due process, in an efficient manner, combined with the sharing of information would be helpful and a requirement for participants.

**Seven:** It is the responsibility of social workers to *Clarify Expectations*. As noted earlier in this paper, Keesha and Annie described how many of the participants often felt dejected when their workers walked away from them without clarifying expectations. Keesha also noted that last minute expectations were not helpful for parents. Annie emphasized how confusing it was for parents when different social workers require different expectations. Rainbow woman also spoke of parents in their initial involvement with the System, should be provided with an orientation. Furthermore, a brochure explaining their rights as parents should be developed and provided by the agency social workers.

**Eight:** It is the responsibility of social workers to make use of *Accurate Information*. Previous responses from Christa, Annie and Faye provide multiple meanings of how accurate information noted by social workers is essential. Christa shared how her worker had failed to document the inquiry made by Christa regarding resuming care for her children. She was relieved that her friend who was with her during an agency visit had witnessed her previous inquiry about her children. Annie suggested that workers should be professional and discount hearsay rumours and ask the parent to explain. Faye described how workers can also easily misread the information that they write out in point form notes. She feels the use of the point form writing can lead to subjective inaccuracies and misinterpretation, potentially detrimental to parents and their children. Faye was also concerned that social agency information gathered from various sources could be vindictive toward a parent, especially from Aboriginal families involved in a continuous feud with each other. Faye made one additional comment concerning
the accuracy of information recorded by social workers.

“Right now I am working really hard towards getting them back. Certain things I'm scared to say in front of them because they use words against you or they put it in a different form and say something else totally different” (Faye).

**Nine:** Social workers have the responsibility to *Look at Strengths* when working with parents in the Child Welfare System. Cynthia and Keesha previously shared how social workers often go on fault finding missions or “fishing expeditions” against Aboriginal parents. Cynthia for instance, was not connected to a crime that her husband had committed, yet she sensed guilt by association projected by her worker; she was unable to obtain custody of her children. Please note that Cynthia, who had lost her children to the system twelve years ago, has since been able to successfully complete a post-secondary education, earning a diploma in Medical Health Administration. She has regained a healthy lifestyle and her self-esteem has improved, however she feels that her worker has failed to acknowledge her accomplishments and to view her in a more positive manner. Keesha shared how some social workers seemed only interested in looking for the mistakes and weakness, but not the accomplishments or strengths of Aboriginal parents.

**Ten:** The *Change in Behaviour* theme encourages social workers to recognize that parents can change their previous behaviour. Marion, Yvonne and Christa spoke of the meaning of this responsibility. Marion described how she formerly lived with her violent husband, but decided to separate; she was able to regain a substantial amount of self-esteem and to begin a healthier lifestyle. Most participants throughout this study have indicated that their workers had portrayed them as static rather than dynamic human beings capable of positive change. For example Yvonne described how her worker had apparently viewed her as an incompetent caregiver because she was a former crown ward of the Child Welfare System. Yvonne, as a
young mother, struggled to parent her children but her worker was unable to view her as a stable mother. Christa spoke of being very happy with the birth of a son, but unfortunately she mentioned to the social worker, visiting her at the hospital, that she previously had two other children who were now crown wards. Instead of the worker being happy for Christa as a reformed mother, the worker became stern and threatened to report her to the local agency. The helplessness and dismay that Christa felt was soon diminished when her physician defensively informed the social worker that Christa was now a new person, and that she should not be treated unfairly based on past events. These are examples of how participants have the potential to change in behaviour.

**Eleven:** A responsibility for social workers is to recommend that children remain in the care of responsible *Biological Fathers.*

“I thought that they would consider me at once, you know, the child is taken away from the mother that they would consider the father would be next in line but in that case that wasn't the case at all” (Michael).

Michael felt that the social worker should have appropriately considered him, being the biological father, as a potential caregiver for his child.

**Twelve:** The responsibility of social workers to *Maintain a Connection* between parents and their children. Regina, Christa, Cynthia and Wendy speak of the meaning of this responsibility.

“And trying to work around the system that basically at least letting people to have visiting rights with their child, more often, more for healing. To be able to bond with their child because it is really hard on certain families that had their children [taken] away. I'm one of them. And I felt really...I even really boofed down a lot when my first born was taken. And they weren't doing anything to help me and they should” (Regina).

“The people that I see on my visit time are predominately white or black, right? Well, I knew the other Aboriginal woman. So, like what are you doing here? My god you have children, you know what I mean? I spoke with one other woman because I tried my best to focus on the children in there, I shared my food with this black woman and she was
talking about how she literally visits her child from 8 am - 6pm in the evening, whereas I had only had 2 hours, 11 to 1 pm. And she said, why is that? You only have 2 hours? You can have more. She gave me a number for the family law office or something, a number, and of course, I must first have legal aid which I'm not eligible for. So that kind of stalled but she was trying to be helpful in her own way” (Christa).

“I feel like I have to suck up to them in order to get a chance to even speak to my kids, let alone see them. I haven't seen them in eight years. So, I feel that I have to go along with what I say and not to be belligerent, or the way I have been in the past. It doesn't help it just made matters worse for me” (Cynthia).

“I hope you get workers that want to do it for the work and not for the money. Do it for their kids and the family. But when they say CAS, child welfare, like Child and Family Services, It should be child and family. Don't split the families up just because the dad's bad or the mom's bad. Try to keep the family together” (Wendy).

Children were apprehended from the above participants resulting in obvious, considerable distress. Regina felt disconnected with her child because her worker did not help her to schedule visits with her child. She also notes the importance for parents to heal and bond with their children. Christa was not aware, until another woman informed her that she could possibly extend her visiting hours with her children in care. She later realized that in order to have her visiting hours extended, she had to be receiving legal aid. But her financial circumstances did not permit her to be eligible to receive legal aid assistance. Cynthia has not been allowed to visit her children for eight years and she pines to see them. Wendy, and collectively most participants, felt it was most important for workers to help maintain a connection between parents and their children in the Child Welfare System.

**Thirteen:** The responsibility of social workers to *Return Children* to respective participants following completion of agency required parenting programs. A response from Marion and an earlier response from Yvonne are noted regarding this responsibility.

“So, parenting programs like...listen, you're looking at the parenting bingo champ over here. I've done so many parenting programs.” (Marion)

Marion laughed as she spoke about the numerous parenting programs that she had completed,
but to no avail as she still does not have care of her children. She was able to have weekend visits with her daughter. Yvonne also described that she had completed many programs and she was frustrated that her children were still not returned to her care.

**Fourteen:** The responsibility of social workers to *Provide Trad/Prof. Resources* for participants. Gabrielle, Wendy and Annie spoke of this responsibility earlier. Both Gabrielle and Wendy indicated that participants should have an active role in seeking out supports within their community. Annie was told by her social worker to enrol in an alcohol treatment program, but she was unable to obtain the necessary assistance to look for these resources in her community.

**Fifteen:** The final responsibility in the *Practice* of social workers category is *Stigmatizing Effects*. This responsibility centres on how social workers should be aware of how their practices can negatively impact participants as individuals. Participants revealed that they often felt stigmatized because of their Aboriginal ancestry; their personal negative past events; their occasional inability to cope with situations; and due to their Child Welfare involvement.

Christa, Corrine, Anne and Darlene had all described earlier the meaning of Stigmatizing Effects. Christa believed that as an Aboriginal woman, she was seemingly destined unfairly to be involved with the Child Welfare System. Corrine also described how the system had stigmatized her based on her Aboriginal ancestry. She had perceived that the worker had misunderstood her to be a ‘stupid’ individual, who was unaware of her parenting ‘rights.’ Christa also very much resented how Aboriginal women were often negatively viewed by the Child Welfare System. Anne’s response echoed that of Corrine, that her own involvement with the System was significantly based upon her Aboriginal ancestry. Darlene, a young parent, spoke of how the worker had stereotyped her situation to that of other Aboriginal women. She resented the perceived prejudice by her worker: “…She made it out as though I’d be like her other clients”
Cynthia describes being unable to cope after becoming involved with the child welfare system.

“Well, of course with alcohol. I never drank before my kids were apprehended. I developed, I drank a year straight after they were taken. I went numb when the thought of my kids came to me. I blocked it out. The result of that I started using drugs, heroine, coke, just to self-destruct myself because I thought I was the person that was the bad person. I blamed myself. So, they destroyed me. So much has happened I ended up in jail. I wasn't able to maintain myself. I lost” (Cynthia).

Cynthia described how her involvement with the Child Welfare System had almost destroyed her life. After losing her children to the system she attempted to cope with a self-image of being a ‘bad’ parent by abusing drugs and alcohol. This is only one example of how parents were unable to cope with the Child Welfare System.

Participants involved with the System seemed to experience control paranoia. Participants share multiple meanings of feeling paranoid and controlled by their Child Welfare worker in an arena of perceived threatened outcomes. Faye first describes how she often feels controlled by the System, followed with former responses from Margaret, Allison, Anne, Cynthia and Keesha as to a feeling of control by the system.

“Right now for me it's like I'm kind of scared to be myself like meaning, you know, around the [local] people will talk so I mainly stay home. It's kind of hard to be open like say if I go to a bar and not drink. You know they might say, “Oh, you know she was at a bar,” and they may just say stuff like that…and then it automatically carries and think that you're drinking” (Faye).

Faye expresses a fear of being seen in a bar relaxing with friends. She could not visit the bar without people in her community concluding that she was abusing alcohol therefore she decides to stay at home to avoid rumours. Margaret described that being in the social worker’s office made her feel powerless and insecure because being allowed to visit with her children would depend on her interaction with the worker. She felt she did not own her life anymore; that she
was under the control of her social worker. Allison was alarmed that she would lose custody of her son if they both did not move out of the house they shared with her mother, who suffered from a mental illness. Allison resented the worker ‘poking around’ around in her life. Anne had described that she felt threatened when she was met at the office door by her worker and told to either walk away or be jailed. Anne had approached her worker to enquire about the well being of her children in care. Cynthia remarked that she had returned to her addictions because her worker had placed too many demands on her. She realized she would not get her children back as she could not keep up with her programs. Keesha continues to experience emotional flashbacks about her apprehended children. When Keesha sees and hears other children crying nearby, she also begins to cry and yearns to be reunited with her children. These are a few of the many examples that participants shared of their personal humiliation and a sense of being controlled by the Child Welfare System. These are some of the ways that social work practice, pejorative to Aboriginal ancestry, appears to sustain stigmatizing effects for several participants.

The fifteen responsibilities of social workers in the Practice category have been described. The Practice category examined responsibilities that participants viewed as important and necessary for social workers to be cognizant of when working with this particular group of participants. The responsibilities for social workers were organized by first describing the Work With Me theme. The additional responsibilities addressed were the: Investigation Approach, Apprehension Of Children, Postpartum Phase, Listen, Share Information, Clarify Expectations, Accurate Information, Look At Strengths, Change In Behaviour, Biological Fathers, Maintain A Connection, Return Children, Provide Trad/Prof. Services, and the Stigmatizing Effects of these practices against participants. While the Practice responsibilities were important for participants; the Services that are to be provided in the Child Welfare System were also mentioned.
The *Services* category explores the broader responsibilities of the Child Welfare System for participants. The following Services responsibilities are linked directly to program development, administration, and policy changes. The four service responsibilities of the Child Welfare System are: to rethink their Programs, Find Suitable Housing, to hire more Aboriginal Staff, and to re-engineer the Crown-ward timeline. Each of the above is described in this section, beginning with the Programs responsibility.

**One:** In the services category, it is the responsibility of the Child Welfare System to provide meaningful *Programs* for participants in the Child Welfare System. A majority of participants shared their perspectives on parenting programs, but I selected Cynthia and Kihew’s perspectives, and the earlier responses of Keesha and Yvonne to describe this responsibility.

“I feel there should be more…parenting programs” (Cynthia).

“Mothers need to know how to be good parents by attending parenting programs and such. Parenting programs helped her to know what to do as a parent. Know that other mothers say they don't need parenting programs but they need this to help them be better parents” (Kihew).

Cynthia and Kihew believed there was a requirement for the Child Welfare System to offer more parenting programs for participants on a regular basis. Some participants however felt otherwise. For example, Yvonne and Keesha had earlier agreed that there were enough parenting programs available. Yvonne stated that the, “path definitely needs to be changed. I think they have enough parenting programs” in the Child Welfare System.

Regardless of the differences among participants over the number of parenting programs available, they were eager to share the type of programs that they thought would helpful to their parenting roles. The types of topics that participants identified to be included into the scope of parenting programs varied. Christa, Anne, Marion and Wendy shared multiple topics that they thought would be helpful for them.
“Being a homeless youth I became pregnant, I think part of that prenatal teachings or whatever should be involvement with C.A.S. or child protection welfare agencies and their rights, and all that stuff, what you need to know. That certainly would be important” (Christa).

“I was thinking my kids are getting older and I have to do something different but I must first heal myself so I can be a healthy and balanced person for when my children come home to me. I will have to be a strong person to handle whatever they have. Cause they won't be happy with you because they will have a lot of anger because of what you did. And that's what I learned from when my daughter came back with all her anger. I didn't know how to deal with the anger when she lashed out at me. And still, it just wakes you up and you have to understand like these children will come home to you eventually. And the next four are boys. Do you think I want to be yelled and you know? I want to be able to take what's gonna come and to be able to offer what I have learned and be an example. Nobody else is gonna show them our culture. This is a good way and I want to be that person” (Anne).

“They should have parenting programs that are more serious. They should have parenting programs that get to the heart of how parents need to deal with themselves...Is that really gonna help me when my daughter and the Creator sends my son back into my home and in my life? And the police are showing up at my door, and he's sixteen and smashing windows and I go off-side because my mother went off-side? No, I need to know how to deal with myself, and the panic, and the heartache, the guilt, the shame and the, you know, or for the people that will have children that will be coming back to them sooner rather than later as adults. How do I deal with them using my addictions against me and hurting me rather than lashing out like the child I still am because I'm growing? How do I become parent enough to take that from them and give them love back? These programs are not even trying to go anywhere near the heart of the problem which is myself. I don't need to know how to get a two-year old to sleep, 'lay down', no, I'm joking” (Marion).

“They should have more parenting programs like, start and have a beginners and into an intermediate, slip into a computer thing, you know? Something they can follow through with. Something that parents won't just do one programming and think, 'oh I'm cured,' because you're not gonna be a perfect parent only two weeks in. Have them do, like, you know, having parenting so they don't screw up and they don't end up in care” (Wendy).

“And everything was, take these parenting courses, to do this, this and this. And it was July. Everything was shut down for the summer. So, my children remained for three months. And that's where it started. And this was all of my ignorance and they knew that and they played on that. And when I tried to work with them then they would sort of pull me around by the nose telling me well you have to do this and you have to take that now. ‘Oh, you took this course, well, we don't approve that one so you have to take another one’. Well this was like, this went on and the time was going by and I didn't know, that there is this, until like right towards the end when I met somebody who said, well you have time limit here” (Christa).
Christa felt it was important for parents to know about their parenting rights and to have this information available through pre-natal programs. She also felt the Child Welfare System should be providing only approved programs for parents and to make these programs readily available for parents as required in the community. Both Anne and Marion suggested that more programs be developed to assist parents during the reunification process of their children in order to deal with real life situations. For example, emotions such as anger, anxiety, heartache, guilt and the shame felt by many Aboriginal parents has to be addressed. They both wanted to re-learn their responsibilities as parents and how to deal with the anticipated anger that their children may direct toward them. Wendy would like to see programs that progressively build upon each other, such as a beginner level followed by an intermediate level parenting program. She also suggests making these programs more interesting and convenient by adding contemporary computer-based content.

Participants also identified other types of programs that would be beneficial for their children.

“And my husband is very interested even though he's [nonAboriginal]. He really wants to learn about my culture and everything and help me to learn how to celebrate certain occasions, like the berry fest and everything. Helping me out with that and learning to help my son. So when my son grows up he can learn about his culture as well. He's call [Tony] which is [non-Aboriginal] and his native side. And so he can learn to adapt on both sides of the family. So the family doesn't get judgemental on either side on knowing who is and knowing his culture and everything” (Regina).

“And I do take one of them to another culture cause she is black. She has a black culture. She's mixed, black and native so I take her to black culture. She knows about black history. She made me laugh one day. She goes, ‘Mom, I like chocolate, right?’ I go, ‘Yes you do.’ Then she says, ‘But you know why I eat a lot of chocolate? Because I'm turning brown.’ Something like that I can't remember. The reason why I like eating chocolate is because I like it and is it why I'm turning brown” (Kihew).

“I know another example without being domestic violence. It's with my teenage daughter. She has alcohol...she just drinks on Fridays. Two times now she has been hospitalized within four hours of starting to drink and that scares me cause I'm always afraid of
alcohol poisoning...” (Ruby).

Regina, Kihew, combined with an earlier response by Anne, notes how it is important to either develop programs or identify existing community programs that would assist children to understand their mixed race identities. Anne also suggested that children who are of mixed African/Aboriginal race be provided with appropriate counselling programs in the Child Welfare System. Regina described how she and her husband were trying to learn about her Native culture and ceremonies because they wanted their son to have knowledge of his Native heritage. Ruby had indicated that she had to wait for the social worker to conduct a ‘safety check’ of her home; that parents should learn how to safety check their own home. Ruby also shared the importance of educating youth in the community regarding the danger of alcohol poisoning, which was of concern to several other participants in this study. Corrine for example, had described how her daughter was also starting to abuse alcohol.

Participants such as June, Ginny and Margaret identified a need for improved parenting program formats.

“They told me to go to parenting group; probably less group work. Not for a year but should be 6 months. Some programs are for a year. I've done two parenting programs so far. I don't know if I have to go to another. I get tokens to go to the programs.” (June).

“The worker-client relationship should have a better system. I think I have a better system but the other care givers and as well as the parents. They should add more programs. Women get together. Men get together. Couples get together. I know children get together but they have nothing for parents” (Ginny).

“More programs for Aboriginal women and men. Sometimes they forget about men. More sharing circles in my program like in this community. I would like things like that done. Cause we only have little things going on. They are so often there. Older woman can guide the younger women” (Margaret).

“No, I think that's what I would like to see more programs even in Kenora but I'm not sure what kind of programs they have cause I wouldn't know who to ask and how to go about it if they should try to get something started especially here. Even maybe, what you said, do something every two weeks or a month. But right here it's kind of hard to do
things when some of them are in their own cultural ways and some of them are Christians” (Margaret).

June has completed two parenting programs and suggests that the length of these programs should be six months long instead of one year. Ginny felt there should be more programming for single women, men and also couples. Margaret suggested that sharing circles could be used to facilitate gathering places for women where they would be able to discuss common issues and concerns. She would like to see more programs for men, and also the involvement of women elders as the instructors. Margaret would also like to see more programs available for parents in her community. She described how some people in her community do not associate with each other because of the ongoing clash between Traditional and the Christian teachings which could affect program attendance.

In summing up this responsibility, participants have expressed that parenting programs should be relevant, culturally sensitive and user friendly. They also felt it was essential that workers: “not push or set up clients to fail’ during parenting programs” (Cynthia).

**Two:** It is important for the Child Welfare System to encourage social workers to *Find Suitable Housing* for participants. The study revealed that participants very much want to provide a stable environment for their children. Most of the participants had permanent residences, but a few of the participants were in the process of trying to find a home for themselves and their children. Allison, Gabrielle and also an earlier response by Rainbow woman is used to describe this responsibility.

“Allison: What got me involved with C.A.S. was my [parent] has problems. And a lot of it was that my [parent], it wasn't a safe place for me and my son to be because of my [parent] and her problems.
Rose: So you have to find a place to live?
Allison: Yeah, I have to find a place to live and it wasn't there.”

“Parents should be allowed to move more than once. I had to move to [this City] to meet
the needs of myself and my child but C.A.S wanted to take my daughter if I did so. They saw this as being unstable” (Gabrielle).

Allison highlights how she was expected to find a new residence by her social worker, but there were no other residences available in her community. Gabrielle wanted to move to the city to find a stable residence for her children, but her social worker did not agree and threatened to apprehend her daughter for reasons unknown. Gabrielle felt confused and feels that she should be allowed to find a suitable residence for herself and daughter without threat or interference. Rainbow woman had shared earlier that parents who were trying to find a home for their children should not be looked upon as a protection issue. She believes that if parents are required to find specific housing by the Child Welfare System, then social workers should make every effort to help parents find this housing.

Three: It is the responsibility of the Child Welfare System to hire more Aboriginal staff to work with Aboriginal participants. Most of the participants concurred with Faye when she insisted that more Aboriginal people should be workers in the Child Welfare System. Ruby, Yvonne and Keesha voice their ideas on this responsibility.

“Maybe having more Aboriginal people employed so they are more visible and I think they're easier to get along with and they can share and speak simple language instead of using technical terms” (Ruby).

“No, because I think they're all dense too. Some of them because they're just social workers and they go through the motions. They're the same as [C.A.S.] as far as I'm concerned at this point, until I find out different, next week. You know what I mean? They're not treating me any different than [C.A.S.] did. Yeah, they're supporting. Yeah, they talk to me on the phone, yahoo! They're not helping. I want my kids back. I put it in black and white for you, answer me? They don't, [...] I walk in there. There's a [nonAboriginal] guy, there's...it's not Aboriginal. It's not all Aboriginals. They're not all Natives. So, I don't know what the heck they call themselves [a C.A.S.], if they're not? You know what I mean? And I also understand that they do have like, they all welcome the four colours and so that's another part I do understand but for an agency that is culturally sensitive to people that, you know, like they need a worker, an Aboriginal, you know, like the understanding and the sensitivity around your culture and stuff. You're not gonna get that from a [nonAboriginal], I'm sorry. You know what I mean” (Yvonne)?
“More Aboriginal stuff, it may help or it may not help because I've had pretty ignorant native workers too, like really ignorant. Like the Loblaws food vouchers ok? I went to get some of them and my worker looked and she said, ‘Oh, and don't go spend it on drugs.’ Yeah, I'm gonna go call up my drug dealer...you want any Loblaws certificates? You know, like, oh, come on? That's what I mean like...they should not be allowed to abuse their clients because I've had that happen but I can never prove it because there's never anybody ever around when they do it. So, no abuse at all. If they're there protecting kids from abuse then they shouldn't be able to abuse the parents, period” (Keesha).

Ruby felt there should be more Aboriginal employees in the Child Welfare System because they are easier to work with. They can more effectively communicate with the parents and avoid social work abstract terminology. In sharp contrast, both Yvonne and Keesha observed a different perspective on this responsibility. Yvonne believes both non-Aboriginal and Aboriginal social workers were similar in their practice methods. For Yvonne, the Aboriginal workers go through the same routine as the non-Aboriginal workers, so they are not helpful. She also points out that an Aboriginal Child Welfare agency does not hire only Aboriginal social workers. Yvonne added that Aboriginal workers are more likely to understand the cultural sensitivity that is required in order to work with Aboriginal parents. Keesha perceives Aboriginal workers as being ‘ignorant’ of parents. She describes an incident regarding a food voucher that her Aboriginal worker had supplied, but had instructed her not to ‘spend it on drugs’, a comment that was most offensive to Keesha.

**Four:** It is the responsibility of the Child Welfare System to amend the existing **Crown Ward timeline** for participants.

“Well I think the system has to change. I think the length of time for them to get back on track is either one or two years. It used to be two. I know that healing, but that one year, say if they have three months and they have their kids in care and then they are ok, and they got their kids back and things were going ok, and then something happens. Family breakdown again, those three [previous] months would be added on to the next seven months so it's not a new year again. It's seven months and that's where it gets scary because you get into crown-wardship. I don't think the length of time for whatever kind of past experiences that they've had; they need help in order to heal from them because if
they are not gonna do that then it's gonna be hard for them to move forward if they are alcoholics and drug addicts. It makes it even harder for them to heal. You can't fast track healing” (Ruby).

Ruby felt the time required for participants to heal from their abuses and struggles is not taken into consideration by the Child Welfare System. She described how the existing Crown Ward timeline is used against the parents. For example, if children were in care on two different occasions; the first three months of the child’s stay in Child Welfare would be automatically added to their next involvement with the System. Parents have only one year to heal and to prevent their children from becoming Crown Wards. Yvonne, in an earlier response, had also expressed that the Crown Ward timeline was too short for many parents. Yvonne had failed to meet this timeline due to several reasons. For example, her worker apparently refused to work with her and the file transfer process took longer than was expected. Yvonne also had to attend parenting programs, treatment programs and additional aftercare programs. For Yvonne the outcome of her endeavours resulted in her children being lost to the Child Welfare System. In supporting the needs of participants, the Child Welfare System must revisit the existing Crown Ward timeline. The present policy serves to dismiss the parenting abilities of participants by permanently separating their children from them. The above are the meanings that participants revealed concerning the present Crown Ward timelines. Participants have completed the discussion of the Services that they believed were important for them in the Child Welfare System.

**First Nations Responsibilities**

The two First Nations responsibilities that participants desire from their communities are: Support Parents; and, for Aboriginal community leaders to begin the process of creating Our Child Welfare System. Responses from the participants are provided for each of these two
themes.

One: It is the responsibility of people in the community to Support Parents and their children. Ruby speaks of the reality of her community and then Faye addresses the need for resources for young mothers.

“That's where the preventive measures come in prevention, education and awareness. And communities play a role because a lot of them don't really agree with it. You know, there's a lot of bootleggers and there's a lot of substance abuse. And then you have the [leaders] saying they don't tolerate it and that to me is bullshit because they do. I see it every day right through my [window]. They say zero tolerance and that's bull. I use to face this way but I face this way and I see people go by. That's where it starts in the community. If you want to make change they have to make tough decisions. They have to charge people. You have your law and that's enough because people are dying, kids are being in care and their healing is unable to begin. You know things happen and it's like a global thing. I think women need to have the education and awareness and know how important they are in the world and how important they are as mothers and how important it is for children to grow up healthy” (Ruby).

Ruby’s perspective highlights the importance of prevention, education and awareness of substance abuse in her community. She believes that change has to involve community leaders who need to be tough and start following the Chief and Council zero tolerance by-law on drugs and alcohol. Tough decisions have to be made that would help to prevent children from being placed into care, in some cases dying. She insists that women need to education themselves regarding their roles as mothers and in promoting healthier lives for their children. Faye had previously commented that she felt alienated as a young mother because there were few community resources available to support her with the care of her children. She would like other women to help guide her and also to help baby sit her children.

Two: The final responsibility at the community level is to explore the creation of Our Child Welfare system. Maryanne, Christa, and Marion contribute their thoughts on this issue.

“We should create our own Child Welfare system. That would be the goal for all First Nations. Right now we are bound by legislation policies” (Maryanne).
“Within our teachings the community raises the children, right? If something is done against the child, doesn't the community decide on punishment for that individual?” (Christa)?

“In the Child Welfare system, again, I mean, wouldn't it be nice? I speak from the heart, I speak from reality and from what I know to be true and right now, we should just create our own system period. I don't even know where to begin with that. So, I would love to eventually see that happen. It won't be while I'm still alive but I will be watching. So, in all of these things I will say from my heart, in a very deep and honest place, anything is possible in this life time” (Marion).

Rainbow woman felt that a Child Welfare System for and by the Aboriginal people should be created and that this should be the goal of First Nations. In an attempt to describe what this system would encompass, Cynthia envisions it as being part of the community; the children would be protected and that any punishment would also be decided by the community. Marion would very much like to see the creation of an Aboriginal Child Welfare System, but doubts that this will happen in her lifetime. These are the examples participants have provided regarding Our Child Welfare System responsibility.

The Northern direction of the Child Welfare Circle has explored twenty responsibilities for social workers and the Aboriginal community. These responsibilities were organized into three main categories: Context, Practice, and Services. The Context category explored the Understand my Reality theme. The Practice category had the most responsibilities which included the following themes: Work With Me, Investigation Approach, Apprehension Of Children, Postpartum Phase, Listen, Share Information, Clarify Expectations, Accurate Information, Look at Strengths, Change in Behaviour, Biological Fathers, Maintain A Connection, Return Children, Provide Trad/Prof. Services, and the Stigmatizing Effects of social work practices upon participants.

The Services category included four responsibilities including Programs, Find Suitable Housing, increase Aboriginal Staff, and the Crown Ward timeline. Augmentation included First
Nations Responsibilities, which explored the themes of Support Parents, and the creation of a home grown Aboriginal Child Welfare System. All of the above findings are located in the Northern quadrant of the Reality Circle diagram.
CHAPTER FIVE: IMPLICATIONS FOR ABORIGINAL-BASED THEORY

Participants in this study have shared how their identities were positively influenced by their cultural backgrounds. This understanding of their connection to culture has implications for an Aboriginal-based theory in which the participants themselves have contributed to the construction of the Critical Ekweism framework as a guiding theory. The Critical Ekweism theory “recognizes the many strands that [are necessary to] make up [participants’] identities” (Crenshaw, 2002, p. 207). The strands are reinforced and reflected in the multilayered experience of the participants’ vis-à-vis Aboriginal culture and the Child Welfare System, which overlap as illustrated in the Anishinabe Identity Circle. This same circle views identity as a wholistic process. It is through the culture and Child Welfare contexts that the identities of participants are created and are influenced (Hogg, Terry et al 1995). In this section, a brief description and the application of my Anishinabe Identity Circle will be utilized to frame the experiences of participants as part of the analysis.

The Anishinabe Identity Circle

The Anishinabe Identity Circle combines the Healing of Identity and Child Welfare circles together. This arrangement provides a visual representation of how the context of culture of Anishinabe participants has implications for: 1) an Aboriginal-based theory; and 2) how the Child Welfare System has implications for the creation of Aboriginal-based policies and practices. The selective coding process that was used to create the Anishinabe Identity Circle reveals “new insights [and] understandings [of the phenomenon of identity] based directly on the words[, perceptions,,] and behaviours of participants [through this circle]” (Anastas & MacDonald, 1994, p. 414). The Anishinabe Identity Circle, as the organizing framework, displays how the experiences of Anishinabe participants are presently juxtaposed with the Child Welfare System. The creation and the labelling of the Anishinabe Identity Circle is appropriate
because participants throughout the study have shared how important it was to honour and maintain their Anishinabe informed identities. Aboriginal identity is illustrated in a reflective article by (Kokiapik, 1994) as she struggles to mediate her identity between her small Inukjuak community in the north and her new urban community in Montreal. Even though she leaves her community to study in Montreal, she is able to maintain her identity in her new setting with the help of her ancestors. This is how the Anishinabe Identity Circle works to understand how the identities of participants are situated and mediated in the *Culture* and *Child Welfare* contexts. The understandings that participants have of self-identity is displayed through the use of manitouminasuc.

Multi-coloured manitouminasuc are used to reflect the multi-dimensional realities and perspectives of participants. The symbolism of manitouminasuc plays a key role in understanding how the voices of participants came together in this study. Early in the data collection process, the ideas of study participants were unique and individualized, which ultimately was reflected by a manitouminas. As their views became similar to other respondents, these voices then became collective and woven together by a common thread – the Child Welfare experience. The common voices of participants are mapped out in the Anishinabe Identity Circle. An analysis as to how these voices have implications for an Aboriginal-based theory is provided in this chapter, while the implications for Aboriginal-based support and policies is analyzed in Chapter 6.

Adhering to the Critical Ekweism framework, my analysis on Aboriginal-based theory begins by understanding how participants identify themselves within their own culture. By working within the parameters of the Anishinabe Identity Circle, the construction of an Aboriginal-based theory is understood by how the identities of participants are intersected in
their culture and how their identities have evolved over time. My first analysis will be to examine the present Personal Identities of the participants, then a Culture context and their perceived Anishinabe Responsibilities.

Personal Identities

The personal identities of participants were diverse. Most of the female participants, when asked to describe how they saw themselves, indicated that foremost they were mothers, women and a child. The two males in the study viewed themselves as parents.

In the role of being a mother, Marion in her response shared the multidimensional aspects of herself. She combined her mother role with that of being an Aboriginal woman. Wendy remarked that she viewed herself as a coherent woman in her Aboriginal culture, but within the Child Welfare System her self-image was one of being a disorganized and upset mother. Marion’s supposition was that of being a child since she had ‘doubts’ about being a good parent. She had internalized her social worker’s assessment of her as being a ‘bad’ parent, but she is now in the process of re-learning her role as a woman and parent through her culture. Most of the female participants held a positive image of themselves through their culture. Both Brad and Michael, who were the only male participants in this study, understood their roles as parents. Brad as a parent would periodically visit his children who were not living with him.

The above were the initial personal identities of participants within their culture. It was important to first understand how participants saw themselves in their culture since they have different understandings of themselves in terms of the social influences of the Child Welfare System as an outside influence, which is analyzed in Chapter 6. Participants also describe broader influences on their identities in a culture context.
Culture Context

Three features consisting of Struggles, Healing, and Aboriginal Culture are analyzed within the Culture context of participants as articulated by the Aboriginal Identity Circle. I chose to analyze these three features because they prominently discern the existing realities of participants in this study. These three features best reflect the process of change that the participants are presently engaged. For example, participants speak first of the struggles that they were presently dealing with and then begin to recognize and understand these struggles through the healing process. The healing process then directed them to better understand themselves through their Aboriginal culture.

The three features that I examine work together to create social change by Chaazhaotopiiniimun KakiizhaAnishinabeoobiigiyun (reclaiming Anishinabe identities). These three features are analyzed separately; beginning with the participants’ Struggles, towards Healing self, and the importance of Aboriginal Culture.

Struggles

The past and present Struggles that participants experience in the Culture context affect the way in which participants try to understand themselves. As participants were inundated with social traumas of the past and the present, they felt overwhelmed. A possible analogy is that they were drifting in rough water, in a canoe without a paddle. The waves represent the social traumas that continue to push them in an undesired direction. Social traumas are created by external influences that participants must work through individually, contributing to the diminishment of participants’ perceived social identity. The study had encouraged participants to re-examine the context in which they found themselves and to discover new ways to positively strengthen their identities. By encouraging a self-reflective opportunity within this study, participants were
enabled to confront and explore the meanings of social traumas and the influence upon their personal identities. They were able to work through the trauma to gain an insight as to how they might positively transform their situations. The struggles of participants are served by the analogy of being caught up in a wave of social trauma.

Caught up in a Wave of Social Trauma

The social struggles that participants have experienced include: Loss of Identity, Childhood Trauma, Racism, Alcoholism, Grief, along with their Disconnection to their Culture. These struggles as oppressive categories are interdependent and they mutually affect the social identities of participants (Bowleg, 2008). These categories also “interact to shape the multiple dimensions of [Anishinabe] experiences” (Davis, 2008, p. 68). Each of these categories is analyzed from the experiences of participants beginning with Loss of Identity.

The two main external forces for participants resulting in the creation of unhealthy social identities were the Residential Schools and the Child Welfare System. Participants who attended Residential Schools as young children recalled an environment that was emotionally degrading and physically confining. Their traumatic childhood experiences continue to inform their present situations. Being children confined to the Residential Schools, they were not allowed to speak their Aboriginal language and to acknowledge their own culture; clearly a process of systemic assimilation. They were innocent and vulnerable little children who were unable to defend themselves against the criminal physical, emotional and sexual abuses that some had experienced at Residential School (Teichroeb, 1997). Participants recall vivid memories of being controlled by ‘white people,’ and this same control they have attributed to the Child Welfare System in the worker practice with their children. The Residential School experience contributed to the formation of fragmented social identities for the participants. Most were conditioned to suppress
their Anishinabe identities and to take up foreign Christian identities, which did not have much meaning for them. Anishinabe identities were either erased or frowned upon, and were replaced by forced, pseudo identities. This systemic practice of assimilation resulted in many participants feeling angry and bitter. Brad spoke of the practices that ‘white people’ used on Aboriginal children in Residential School and how they are similar to the practices of the present Child Welfare system. The dominant Churches of the time assisted in carrying out this policy. The policy outcomes of mainstream governments have left detrimental imprints upon the lives of the participants.

When they did return home, following the Residential School indoctrination, many of these children felt alienated from their traditional Native language and customs. These same children would often be ostracized from their families as they apparently did not fit the cultural norm because they were often perceived to act like white people. Brad remarked how the term ‘red apples’ is sometimes used to refer to Aboriginal individuals who are unable to speak their native languages as they are often “too [ ] assimilated into the white man’s culture” (Boutwells, Low, Williams, & Proffit, 1970, p. 11).

In the Child Welfare System, the participants as young children knew little of their Aboriginal identity because it was viewed not to be important. It was not until adolescence that participants became aware of their Aboriginal ancestry and identities. For example, Corrine had experienced an identity crisis at the age of thirteen and desperately wanted to meet her biological family. When she did meet them, she became depressed with her inability to bond with her biological family. She blamed this on her emotional immaturity and not as a consequence of institutionalized assimilation. Corrine’s experience has enabled her to distance herself from the people who love her, both her adoptive and biological families. Corinne feels inept in handling
the complexity of relating to them, and does not want to create friction between her two families. This insecurity of self identity is a direct consequence of the Residential School and the Child Welfare System experience.

The childhood trauma that participants had experienced continues to haunt their present lives. Most of the participants shared how they had to endure many painful situations, not only from the Residential School System. Several participants recalled being neglected by their parents, who would sometimes leave them unsupervised in order to go drinking in their community. Others shared how they had experienced multiple abuses at home. For example, Rainbow woman had disclosed to a worker that her father was sexually abusing her. Her father then in anger hit her because she had told a worker the truth. Consequently, it left Rainbow woman feeling afraid and she has remained silent about this abuse for years. Darlene also revealed that she was consistently sexually harassed by the father-in-law of her mother. Anne was also agitated concerning the apparent sexual abuse of her daughter in the Child Welfare System. She believed that the system was not supportive of her daughter. The daughter was apparently sexually assaulted while in Child Welfare care. According to Anne, the justice system had apparently not viewed her daughter as a victim, which resulted in her dismissal from care. Anne felt a sense of despair because she was not able to be with her daughter throughout this ordeal. Many of the participants could relate with empathy to Anne’s anguish. Some participants have acquired the courage to speak about their trauma and to seek professional help; others were not so willing and they continue to suffer.

Racism is described as a form of violence that is used against the participants because of their Aboriginal ancestry. Experiences of racism inform how participants premise the world in which they live. Participants have shared how racism by mainstream society, and sometimes
within their own family, has a tendency to dominate the lives of Aboriginal people.

Many participants had left Native Reserves in the north and migrated to towns and large cities. In 2006, Indian and Northern Affairs reported that 56% of Aboriginal people in Canada live in urban areas. This source also approximates that 68,380 Aboriginal people live in Winnipeg; 52,100 live in Edmonton; 40,310 in Vancouver; and 26,575 Aboriginal people live in Toronto (Indian and Northern Affairs Canada, 2006), where they were more likely to find a partner of different ancestry. Aboriginal participants realize the implications of these unions for their families and communities. For example, Anne described how her two youngest sons, who have Black/Aboriginal ancestry, were constantly mistreated by their siblings and relatives. Anne’s daughter who is Caucasian/Aboriginal and the eldest son being Aboriginal, were more accepted by family members and relatives because their skin complexion was considerably lighter than their siblings. Anne was struggling to maintain family equilibrium, hoping that her children can accept the identity of each other.

Christa spoke of how she had learned to reframe discriminatory and racist attitudes. As a young Aboriginal child living in her Native community, she realized that she was different from the predominantly white mainstream society outside of the reserve. In order to be less conspicuous, Christa decided to devalue her Aboriginal ancestry and actively embrace mainstream values and behaviours. Christa soon displayed a superiority attitude toward her Aboriginal peers. Her experience reveals a viewpoint of society as having an ingrained prejudicial view of inferiority toward Aboriginal people; a prejudice that is entrenched in mainstream society, which serves to continually suppress and devalue the activities of Aboriginal people. Christa also believed that racism is the catalyst for the violence against Aboriginal women, since she lost her sister and then her mother to acts of violence.
Participants continue to devalue themselves to the point of shame. For example, Darlene spoke of her parents as ‘drunks’ because this was how her social worker had depicted them. The apparent portrayal of Aboriginal parents as being collectively incompetent and a debased people continues, not surprisingly, to inflict abject despair for the participants. Many of these same parents feel unwelcome and unaccepted by the mainstream society because of a preconceived belief that Aboriginal people are inherently inferior compared to the ‘white race.’

The opportunity for participants to move beyond discrimination is often stifled by the effects of living in a racist society, where collectively they are often left to deal with their own self doubts. Michael voiced this sentiment when he revealed that as a young man living in a Southern Ontario town, he felt accepted by the local community. Upon moving to his Native community in the north, some white people in a nearby rural town, where Michael often visits, were horribly racist toward him, assuming he was a member of nearby reserves. Michael was shocked by this new negative treatment, but he felt defensive and proud to be part of the Aboriginal collective. Many of the participants can empathize with Michael’s experience.

The use, but not the abuse, of alcohol has been depicted by some participants as being part of the Aboriginal culture. Similar to many of the participants in this study, alcohol abuse had an enormous detrimental effect upon their lives. Darlene described the affects of alcohol abuse in her family environment. Darlene understood that alcohol abuse was not part of her Aboriginal culture as it was detrimental to maintaining a healthy Aboriginal identity. Alcohol only served to be destructive to the well-being of participants and their families. The majority of the participants in this study have suffered the consequence of alcohol abuse. Unfortunately, many of their children are also now beginning to struggle with alcohol.

Alcohol abuse is often associated with grief for many participants. Grief for the loss of
loved ones is all too common for the participants. Participants described grieving for family members and close friends. As the participants shared their experiences, some had tears; they looked downward to the floor as they attempted to control their emotions. Grieving from the loss of one family member and then another was inadequately dealt with because “[a]ll grief contains the sense that a piece of the self has been cut out…” (Klass, 1998, p. 12).

In addition to grief and social trauma, participants in this study identified how they had been disconnected from traditional Aboriginal culture through a variety of reasons. One of the main sources that contributed to their disconnection from Aboriginal culture was Christian influences from the dominant Canadian society. Some of the participants in this study perceived Christianity as their cultural base; that the beliefs and values of Christianity that they espoused assisted to project them as well-grounded individuals. Some participants were able to choose and abide by Christian beliefs that augmented the perception of themselves as being Aboriginal people. But participants with a Christian background did not object to connecting to a Creator that was accepting of all human beings. In being Aboriginal women and men; they were also familiar with some of the teachings in Aboriginal culture, and they were selective in choosing teachings that they could apply in order to enhance their lives. Many participants had a high regard for Aboriginal ceremonies, but they sometimes did not participant in them because they already had an alternative way of maintaining their spirituality to the Creator. For example, Maryanne socialized with Christians at church meetings, but she also socialized with other Aboriginal people from other reserves who would encourage her to remain closely connected to their Creator. She would listen to their stories and she would selectively apply only good teachings into her life. This was how participants with a Christian belief system came to understand and maintain their spiritual connection to the Creator. For some participants the
Creator, which was synonymous to God, represented their Aboriginal spirituality.

Aboriginal Culture for the participants, as a collective group, has not always been accessible to them. The existing social identities of participants have largely been constructed and reinforced by the values of the dominant Canadian society and therefore has left many participants wondering about who they were and their place in Aboriginal society. A majority of participants through this study felt estranged from Aboriginal culture for a variety of reasons. It was evident through this study that some participants were unable to practice their culture because of the Child Welfare System, their families, or due to their own preference.

The Child Welfare System, according to participants, did not encourage them to experience and practice their Aboriginal culture during their childhood. This lost opportunity to participate in cultural activities as young children has deprived many participants to learn how to dance and participate in pow wow ceremonies. They also acknowledged that they were embarrassed to dance in public because Traditional dancing was foreign to them. Christa, as a young child remembers how her own aunts had made fun of her while she was learning how to dance traditionally. This embarrassment dissuaded Christa to continue learning how to pow wow dance. For a few participants, their cultural loss and alienation was attributed to their biological parents who had disallowed them to participate in Aboriginal cultural activities. They were also discouraged by their parents from speaking their Aboriginal language at home.

Participants also felt that they did not have a sense of Aboriginal culture because they grew up in a Church setting. Kihew, for example, grew up as a member of the Roman Catholic Church, but she perceived herself as having no culture. As an adult, Kihew became familiar with her own traditional Aboriginal culture, but she does not practice it. She prefers to teach her children in the Catholic faith.
The *Struggles* that participants were presently experiencing included: Loss of Identity, Childhood Trauma, Racism, Alcoholism, Grief, and being disconnected from Aboriginal Culture. As members of a marginalized population, participants continue to feel a void, a sense of injury, emotional pain and a lack of purpose in their lives. The above oppressive social categories clearly affect the social identities of the participants. Traumas elucidate the real life real situations of participants, as illustrated through the analysis of the Struggles theme of the Cultural context. One of the ways of understanding, and working with the effects of trauma is through the *Healing* process.

**Healing**

After participants had revealed most of the social trauma that they were experiencing in their lives; the study process encouraged participants to revisit their present situations and to critically assess how they could positively enhance their quality of life. Critically examining their environment and in identifying new ways of transforming their lives is congruent to the Critical Ekweism framework of this study. Participants were given ample time to think about what they needed to do to create and maintain personal positive change. A key theme of *Healing* emerged from the data as participants moved toward transforming themselves. It was through the process of self-determination that they were able to confront some of the personal issues that were the result of past experiences. In doing so, they were able to reflect and find alternative ways of dealing with their situations, which is part of the healing process. This process aims to remove the things that are not helpful and it encourages participants to replace them with good things for a healthier self-identity.

Devaluing the spiritual, physical, emotional and psychological effects of trauma that mainstream policies and practices placed upon Aboriginal people requires considerable attention.
because potential violence may be an outcome. To understand how a group of people might violently attack another group of people, I integrate a case study on the effects of genocide that led up to the 1994 Rwanda Massacre in Africa. The case study highlights how dominant government policies can potentially contribute to a violent uprising. It is not my intent to provide an in-depth analysis of the political tensions regarding ethnic cleansing by Hutus people upon the Tutsis people (Cose, 2008) or the ‘difficult life conditions’ for the Aboriginal people of Canada compared to a group of people living in Africa, but it is important to briefly understand the major processes that ‘lead to collective or group violence’ (Staub, 2000, p. 369).

Staub (2000) identifies three contributing processes that may lead to collective violence by a group of subjugated people, similar to the Aboriginal people of Canada. The first process that is required to bring about collective violence is often the ‘difficult life conditions’ of Aboriginal people in a society. Second, an equally important process is ‘group conflict’ within a society. The third process is ‘self-interest’ in which the dominant society may use violence against subjugated people, or alternatively, the self-interests of marginalized groups to reclaim the land that they have lost. In alleviating individual or group violence, the healing process encourages people to address the psychological and social effects of their ‘difficult life conditions’ in a constructive way through a healing process. Healing can be understood as a state of working beyond present stressful circumstances, as individuals strive to achieve a sense of purposefulness, wholeness and balance.

Healing is an important concept within Aboriginal spirituality. According to Basil Johnston (1976) the act of healing can be understood as a sense of “[s]elf [u]nderstanding and [f]ulfilment (p. 119). He discusses the importance of the traditional Ojibway vision quest, being a time of fasting, solitary existence and contemplation in the bush. This vision quest process can
be applied to the participants, as an agent of social change and part of the healing process. This could be a meaningful expression of what it means to be an Aboriginal person through a sacred space. He further adds, “No [m]an [b]egins to be [u]ntil [h]e [h]as [s]een [h]is [v]ision” (Johnston, 1976, p. 119). It was through this healing process that participants were able to look into their inner beings and to understand what they needed to do to change in their lives. The healing process is when the negative energies (thoughts and behaviours) are eradicated from the body. Healing is a requisite for all human beings to maintain minobimaadiziwin (a good life) (Nabigon & Mawhiney, 1996). To achieve minobimaadiziwin, participants regardless of their Christian or Aboriginal beliefs, have collectively strived to be spiritually connected to the Creator.

**Aboriginal Culture**

As illustrated earlier, most participants have become aware of their forced disconnection from Aboriginal culture by mainstream institutions or through their own families. To move toward the healing process, participants began re-envisioning their Aboriginal identities through the process of revisiting their past and present experiences and in the act of Chaazhaotoppiniiimun KakiizhaAnishinabeoobiigiyun (the process of reclaiming Anishinabe identities).

Participants in the study were at various stages of the healing process. Connecting themselves to Aboriginal culture appeared to be a logical process because their culture naturally embraced them. Some participants were just beginning to see the importance of Aboriginal culture, while others were already fully immersed in the culture. It is significant to this study that the participants have identified key responsibilities that needed to be considered during the healing process and the importance of Chaazhaotoppiniiimun KakiizhaAnishinabeoobiigiyun.
Participants saw the importance of taking back their culture as a way of strengthening their identities. These responsibilities have the potential to be utilized by other Aboriginal and non-Aboriginal people who are struggling to come to terms with their own cultural identities. The responsibilities play a critical role in how Aboriginal people, as agents of social change, are able to re-envision their own experiences through their Aboriginal culture.

The responsibilities that are revealed through the Culture context of the Aboriginal Healing Circle could potentially serve to inform mainstream social workers of notable considerations when working with Aboriginal parents. Social workers must be aware of these responsibilities and other Aboriginal researchers will hopefully build upon this ground-breaking knowledge. The following responsibilities are not exhaustive, but according to participants, they are important.

**Anishinabe Responsibilities**

The process of learning how to reclaim Aboriginal identity was achieved by determining where participants were socially located in the cultural context. The self-reflection process encouraged participants to explore the meanings of their existence within the colonial (assimilation) context. A common strand throughout the study, the colonial context in which these participants have been placed by society has made participants feel marginalized and insignificant as human beings. Self-reflection encouraged participants to analyze how past influences have affected them as Anishinabe women and men. In recognizing a disconnection from their culture, participants were able to re-envision themselves through a set of responsibilities that were necessary in order to transform self. It was through the voices of participants that these responsibilities have been framed and constructed. These responsibilities are essentially the ideal roles or positions that participants have identified for themselves in their
attempt to transform their present situations. In bringing these responsibilities to the forefront, other Aboriginal people may want to use this as a template to be applied for a similar purpose of analyzing past experiences in order to enhance healing and self-identity; and to propose solutions to correct past injustices.

A total of twelve responsibilities were identified by the participants. These responsibilities form the initial building blocks towards the personal healing process of participants. Participants in their journey to reclaim their identities must acknowledge and when possible, implement these responsibilities into their lives to their own personal degree of satisfaction. The first six responsibilities that participants have identified in this study center on the individual. These six are referred to as Internal (Anishinabe) Responsibilities, and they include: Relearn Aboriginal Culture, Respect Self, Strengthen Spirituality, Inform Self of Parenting Skills, Self as an Example, and Shun Negative (-) Behaviour. Furthermore, the remaining six responsibilities dwell outside of the individual and are therefore external (Anishinabe) responsibilities which include: Respect Next Generation, Immerse in Aboriginal Culture, Immerse Children in Aboriginal Culture, Learn Cultural Roles, Reach Out, and to Actively Attend to Responsibility. These responsibilities all contribute to the strengthening of social identities. As the meanings identified by participants to construct these responsibilities are complex; each of the responsibilities are briefly discussed.

**Relearn Aboriginal Culture**

*Relearn Aboriginal Culture* is the first of the twelve responsibilities. Participants are relearning Aboriginal culture for various reasons. Their end goal is to recognize the importance of their Aboriginal culture and to place Aboriginal culture as a priority in their lives. Most of the participants have been alienated from their culture in the past and have been indoctrinated by
colonization principles which have aided to suppress or reject their Aboriginal ancestry. Even though they have gained considerable degrees of survival skills, a large majority of the participants have ended up feeling quite lost in a social maze. As a result, participants had a desire to know more about their self-identity within Aboriginal culture. Self-reflection gave them the awareness of how empty their lives were without their culture. It is through Aboriginal culture that they hoped to improve their self-esteem. Some felt that re-connecting to Aboriginal culture would not only benefit them, but it would also benefit their families. This connection to Aboriginal culture would assist to unite and teach everyone their place and purpose within the family.

Through this study, some participants were already interacting with Aboriginal culture as a way of reconstructing and in asserting identities. They have learned how to re-envision themselves as proud Aboriginal mothers, women and parents. They were also exploring how to further engage themselves with Aboriginal dance. Their connection to Aboriginal culture was enriching their life and their involvement helped them to identify appropriate ways of overcoming day-to-day problems.

**Respect Self**

In becoming aware of their past behaviours, participants felt ashamed and distraught regarding how they had overlooked their responsibility to *Respect Self*. Participants were accomplishing the responsibility of respecting self through self care. Participants discussed how taking care of self has aided them to become more aware of the importance to build supportive relationships with others. Christa now respects herself because it was her son, whom she considers a gift from the Creator that has taught her to appreciate herself. Some participants had reclaimed their culture as a means to care for themselves. This is how participants learned to
respect themselves.

Without self care, participants were internalizing the racist attitudes that mainstream society was applying against them. This systemic process created negative self-impressions as they grew up alienated from their culture. Respecting self is the shedding off of all the negative connotations that they acquired over time. Some saw their culture as being evil and not worthy of pursuing. But now the participants were reconsidering the importance of their culture in an effort to re-learn how to respect self. Participants are reconstructing their identities with strong and healthy teachings from their culture. Respecting self will also benefit their children.

**Strengthen Spirituality**

The responsibility of *Strengthen[ing their] Spirituality* with the Creator has different meanings for participants. Some participants favoured Christianity. Ginny described her Christian-based culture and how it has helped her to reclaim the teachings that her deceased parents had instilled. It was her belief in the Creator that she feels has helped her to be closer to her family and to have a more meaningful life. Cynthia through spirituality has mustered the courage to remove herself from her unhealthy relationships.

In contrast, other participants such as Rainbow woman recognize the importance of traditional Aboriginal culture and how it helps her to remain emotionally stable. Participants have learned to use cultural teachings to inform their lives. This study revealed how the identities of participants can be informed by two different perspectives. Spirituality, with relation to the Creator, can either be fulfilled through Christianity and/or through Traditional Culture. The identities of Aboriginal people are diverse in nature and how they decide to bond spiritually with their Creator is their personal choice. Their means of reaching self-fulfillment should be respected as proscribed through Aboriginal teachings.
Inform Self of Parenting Skills

In understanding their present parenting situations, participants felt it is was their responsibility to *Inform Self of Parenting Skills*, and to explore why they initially lacked the necessary parenting skills to care for their children. It was important that parents become acquainted with the forces that constructed them so they could assess and make any necessary changes to better themselves. Three of the main reasons that contributed to the lack of parenting skills for participants were: their very young age when they gave birth to their children; the early and untimely death of their own mothers; and the Residential School System. The female participants now realize they were much too young and uneducated when they gave birth to their first child and they now have a better understanding of their parenting roles. For example, Christa feels she has matured into a responsible parent because her child now knows a better person. I found it notable that most participants concurred that Aboriginal women should try and avoid beginning a family until they were more mature and ready to take on the parenting role.

For most participants, their mothers had died at a young age; consequently, a natural source of parental guidance and support was critically lost. Even though some of the participants were raised by their grandmothers, some felt their grandmothers did not always exemplify adequate parenting skills.

The Residential School era also significantly contributed to a notable lack of parent models. For many participants, they and their parents were products of the Residential School System that were created by governments for Aboriginal children. As a result, this produced a continuity of systemic negative parenting, the effects of which are still present today. Christa felt that many people in mainstream society were not fully aware of the impact of government institutions such as the Residential Schools upon lives of Aboriginal people.
A majority of participants saw their lack of parenting skills as a result from being disconnected from their families, Aboriginal culture, and as a result of the negative outcomes from mainstream institutions. There is a bias by many mainstream people that Aboriginal people are incapable of being responsible parents. This has unfortunately evolved without an understanding of the cause and effect of state institutions and government policies that have contributed to such deplorable living conditions and maltreatment for much of the Aboriginal population of Canada.

**Self as an Example**

Participants identify the responsibility to use *Self as an Example* from different perspectives. First, it was important for participants to conduct or facilitate cultural practices regularly in their homes or with others in the community. This could teach others to use these same practices when necessary. For example, during a crisis situation when Rainbow woman was experiencing a life threatening event; her young grandson who had previously observed her smudge at her home, began to smudge his father’s clothes. The young boy wanted the Creator to watch over his father who was in the hospital. Rainbow woman, without realizing her teaching influence upon her grandson, was able to use herself as an example.

Two, there were participants struggling with alcohol who wanted to become the sober and happy families that they would often see playing in the park. Ruby, a struggling, single parent is now content with her family situation since she has ceased abusing alcohol. As participants became more aware of appropriate parenting roles, they in return wanted to display their healthy parenting behaviours for other people to follow.

**Shun Negative (-) Behaviour**

The responsibility to *Shun Negative (-) Behaviour* is self explanatory. It was important
for participants to differentiate between respectful and disrespectful behaviours and to strive for *minobimaadiziwin* (a good life). Some participants indicated that they were tired of abusing alcohol. Mary shared that she was able to stop the cycle of alcoholism by removing herself from an environment that encouraged alcohol abuse. Consequently, she decided to leave her spouse who had no intention of changing his lifestyle. Mary is now able to embrace her traditional Aboriginal culture, live an alcohol free life and do the things that she wants to do. She was no longer in denial of the things that were obstructive to her personal well-being; she was compelled to direct her own social change.

The above are the six *Internal (Anishinabe) Responsibilities* of participants. A discussion on the remaining six *External (Anishinabe) Responsibilities* is now provided.

**Respect Next Generation**

Participants understand the importance of resolving their present parenting situations and behaviours to benefit their future generations of children. Through the emulation of positive role modeling now, future children and parents will have stronger identities from which to cultivate healthier lives. To accomplish this, participants must re-learn their place in families and they must re-learn the importance of children as ‘spiritual’ gifts in Traditional culture (Roach, 2000). The removal of children from their families and communities, according to Christa, has been likened “to having the hearts of whole families and communities being ripped out by the oppressor.” Participants are restoring the importance of children in their families. Participants are striving to pick up the fragmented pieces of their lives and are working towards bonding with their children. One of the ways of bonding with their children is for participants to re-envision their place in Aboriginal culture.

**Immerse Self in Aboriginal Culture**
It is the responsibility of participants to immerse themselves with the knowledge that is embedded in Aboriginal culture. As indicated earlier, participants were either beginning to be involved with, or were already taking part, in Aboriginal cultural ceremonies. These ceremonies include the four colours feast, pow wows, the berry feast, the full moon ceremony, and sweat lodge ceremonies. Some participants also had the knowledge and experience of the shaking tent ceremony, the feasting of the feather ceremony, fasting and the fall harvest. The number of ceremonies that participants were exposed to often depended on location, whether elder facilitators were readily available, or if these ceremonies were available in an urban environment.

Participants were also becoming familiar with other practices they had learned from elders. Marion shared how she would often smudge daily, drink and bathe in cedar tea; use snake root for her addictions and use dandelion as a way to rebuild her liver. She was able to see herself as a balanced person through the teachings of her culture and through her Native language.

The preservation of the Ojibway language through this study was important as this language is “important” for Ojibway or Anishinabe people (McGregor-Pitawanakwat, 1989). However, most of the Ojibway participants did not speak their Anishinabe first language. This was a notable discovery as there is a need to revitalize the Ojibway language, as it serves in the strengthening of identity. The Residential Schools and the mainstream urban English speaking environment, in which participants were required to live in during their youth, had contributed to their devaluing the use of their Aboriginal language. Most participants now recognize the cultural significance of their Aboriginal language. This was an exciting time for many of the participants as they were eager to express who they were through their hereditary Aboriginal
Expose Children to Aboriginal Culture

The responsibility of participants to encourage their children and grandchildren to experience their Aboriginal culture is paramount for strong self-identity. Corrine felt obligated to introduce her children to their Aboriginal culture and ancestry because she did not want her children to experience a loss of Aboriginal identity. Participants wanted their children to experience their culture immediately. Exposing children to their culture would assist their children to learn about themselves, to be proud of their unique ancestry, to learn to be honest, respectful and responsible toward others. Children would learn how they are connected to the land and the Creator. Revitalizing the importance of Aboriginal culture in participant’s lives ensured the transmission of cultural knowledge to their children and grandchildren.

Learn Cultural Roles

It is the responsibility of participants to understand traditional cultural expectations as mothers, parents, men and women. When participants were first asked about the cultural expectations of women, one participant commented that women had a total of 150 expectations. But in describing these expectations; she could list only a few of them. Participants did disclose a few of their role expectations, but realized that this knowledge was lacking. For instance, women are considered to be water people because they have the capacity to bring forth new life. This new life that they bring is important because as parents they must “love [their] children for what they are; not for what they can do” (Johnston, 1976, p. 131). The expectations of parents are to respect, protect, and to raise their children responsibly (Roach, 2000). Women also possess the skill of listening to others and of being humble. They accept who they are and what they are able to do; they do not profess to be like others. Women have a sacred function and they are to be
highly respected in their communities.

Women also have traditional expectations that they must carry out at home. During their moon time, women must not step over the belongings of a son. Traditional values such as respecting others and the environment they must teach to their children. Cultural knowledge informs behaviour. For example, Christa was taught by her grandmother to avoid immoral activities and stay at home. Knowledge of plants as medicines was also passed on to Christa by her grandmother. These are a small sample of the cultural expectations for women. These expectations not only serve to guide the behaviours of women, but they also reinforce their identities.

The cultural expectations of men were not fully explored in this study. Male participants did offer a few expectations, but they were not as in-depth as those of the women. One female participant did mention that men had a total of 100 expectations, but she did not specify. There is a need to further explore the cultural expectations of men because they also need to know how they fit into their own culture. With the information I did find, men are generally looked upon as fire keepers, since they that must keep the fire going at sweat lodge ceremonies. When I asked the two men who participated in the study of their cultural expectations, they spoke of their personal qualities and of their relationship with others. They viewed themselves to be caring, but would rather concentrate on knowing self through the relationships they have formed with others in their community. They did not want to be the central focus; they wanted to be equally represented with the people that they were interacting with.

**Reach Out**

Reaching out for support from their families and communities was important. Participants have described on many occasions how they often felt displaced by mainstream institutions.
Most of the participants in this study felt that it was very important to interact with other people within their culture. They have met other Aboriginal people through the ceremonies that they attend, through their supportive circles, and recreational events such as hockey tournaments and bingos. Marion spoke of social interaction with the women she was living with in her home. Through her relationships with these women; she felt ‘sustained’ because her environment allowed her to cry, to be angry and to be happy. Participants were able to interact with other Aboriginal people from other reserves as they would listen to their stories. Any positive teachings that they would learn from these stories they would apply to their own lives. For example, Keesha, who is struggling with her addictions, was very happy that she had connected to her culture because she felt that it is her culture that ‘keeps her going.’

The reaching out to other people helps to cushion the impact of some of the struggles participants were experiencing in their lives. Reaching out to others is an important aspect of the healing process because this comforts and enables participants to feel accepted, to belong and to learn from others.

**Actively Attend to Responsibility**

The final responsibility of Actively Attending to (One’s) Responsibility encourages participants to consistently re-evaluate their responsibilities in the healing process. Through this analysis, participants were engaged in their own self healing and they were evaluating themselves in terms of past, present and future activities. This responsibility aims to create an awareness of personal weaknesses and strengths before identifying ways of creating positive change. The self-reflection process also assists to illuminate any unhealthy attitudes and behaviours that need to be addressed. Participants learning independently or collectively with others about the importance of their cultural responsibilities, aims to create self awareness of
their place in Aboriginal culture. Understanding their place in Aboriginal culture will strengthen their relationships within families and in their communities.

Throughout this analysis, participants were actively searching for their self-identity and where they fit into their culture and society. It was through the voices of participants that these twelve responsibilities have been envisioned. These responsibilities have diverse meanings for the participants, as I have acknowledged in this section, and are the direct result of the present struggles that participants are facing in their lives. Most importantly, these responsibilities are rooted in Aboriginal culture and are informed by the Critical Ekweism framework. Understanding these struggles and the emerging responsibilities of participants are important ingredients of a culturally relevant healing process that is critical to reclaiming Chaazhaotoppiiimun KakiizhaAnishinabeoobiigiyun. The identities of participants have been displaced by mainstream institutions and it is through the act of connecting to Aboriginal culture, that the identities of participants can be reclaimed and strengthened. The experiences of participants in the Child Welfare context are further analyzed in the next chapter.
CHAPTER SIX: IMPLICATIONS FOR ABORIGINAL-BASED POLICIES AND PRACTICES

The experiences of participants involved with the Child Welfare System clearly have not been positive, but antagonistic. Participants require the Child Welfare System to recognize Aboriginal-based policies and practices in their work with Aboriginal parents. Participants have shared how important it was for them to simultaneously strengthen their cultural identities as individuals and also their parenting identities. In acknowledging the responses of the participants in this study, the data revealed that it was important for social workers, policy makers and community leaders to be more aware of the challenges and frustrations of Aboriginal parents and to take the necessary action to alleviate the systemic inadequacies that they face.

Viewing the experiences of participants through the Anishinabe Identity Circle, this chapter will analyze the meanings that participants have contributed to their Child Welfare experiences (See page 7). Beginning with the Child Welfare context, which is depicted as a grey circle, this context analyzes the initial Identities of parents in relation to their cultural backgrounds that are reflected in the red circle. Next, the types of Involvement the participants experience with the Child Welfare System are examined. Participants then identify the Disadvantages of dominant social work practices. They suggest how a positive Relationship Change could be created vis-à-vis social workers, the child welfare system, and their communities. This Relationship Change, based upon their experiences, was to be achieved through a set of Responsibilities which are shown as blue, red and grey manitouminasuc of the Anishinabe Identity Circle. How the identities of participants are intersected with the Child Welfare System will be discussed, but first a brief introduction of how participants are greeted by the Child Welfare System is provided.

Participants were able to describe the dominant practices that existed in the present Child
Welfare System. The Child and Family Services Act (2000) of Ontario, legislates how mandated child welfare agencies must protect children from abuse. An extension of this policy is the Eligibility Spectrum Handbook (Ontario Association of Children's Aid Societies, 2006) specifies how the child welfare legislation is to be implemented in practice by social workers. The Eligibility Spectrum Handbook assists social workers to diagnose the type of abuse that a child may be experiencing and it also defines the type of services that parents and children must receive. In situating these parents in the context of the Child Welfare System, a brief introduction of standard social work procedure is provided before analyzing the system experiences of the participants.

When protective concerns of children are reported to an agency, social workers automatically shift their attention to the level of risk for the children. The parenting abilities of the mother and father are scrutinized. The situations of parents and their children are assessed and linked to the category that best describes their situation. For example, these categories include abuses such as: physical, sexual, emotional, abandonment and separation etc. (For a detailed listing of the eleven sections in this handbook, please refer to the 2006 Eligibility Spectrum). Depending on the severity of the situation, an investigation is warranted when child safety concern reaches the moderate level and above. Children in this situation are usually removed from their parents and the home environment if social workers feel that the parent(s) may intentionally harm, or may place their child or children in the risk of harm. Safety concerns for children at the minimal level can still be investigated, but at the discretion of the social work supervisor. This is a brief introduction of the standard operating procedure and how the situational status of parents, is considered by the Child Welfare System.
Parent Identities

In terms of the Critical Ecweism framework, it was important to understand how participants first viewed themselves. Participant had revealed multiple identities. They saw themselves as being mothers, women, parents and one participant indicated that she had lost herself in the process. These roles were almost identical to how participants had perceived themselves in the Culture context. For example, most of the female participants (n=22) were able to comfortably project themselves as mothers in their own culture. Understanding themselves as mothers through their own Aboriginal culture gave them a sense of pride and a healthy image.

By contrast, in the Child Welfare context, less than half of the participants continued to see themselves as mothers (n=9). A majority of participants had difficulty in understanding their maternal role because their children had been taken away from them. They had internalized the negative labels and stereotyping inflicted upon them by some of the social workers assigned to their case. Being labelled as ‘bad’ parents only heightened their sense of doubt as parents. But nine participants were able to retain their mother role because their social workers had either allowed them to continue caring for their children following the formal investigation or with supervised visits with their children in care. The physical connections that they had with their children helped to create a positive image of themselves as mothers. Participants who did not have contact with their children felt a much diminished image of themselves being a mother, resulting in much sadness for them.

In working through the consequences of losing of their children, some female participants were able to transform from being mothers to that of being women. As women, most of them were single and were in the process of establishing a physical connection with their children by supervised visits. The enforced time away from their children encouraged participants to learn
more about themselves as individuals and to heal through their culture. Most of the participants felt that the Child Welfare System experience had a profound negative effect upon their lives since their families were torn apart. Becoming more involved with their traditional Aboriginal culture enabled many participants to project a more positive self-identity. It was also necessary to strengthen their parenting abilities as this would prepare them to resume care of their children, should they be returned from the Child Welfare System.

The two male participants in this study continued to perceive themselves as being parents in the Child Welfare System. Both of these participants were not presently living with their children, but they did have frequent contact with them. One female participant, Tina, stated however that she had lost her identity as a parent and mother. Tina felt that her primary purpose in life was taken from her by the system; that the social worker did not provide a clear explanation of why her children were forcefully removed from her care. Tina continues to feel distraught as it has been twelve years since she last saw her children.

Participants have shared how they presently project themselves through Aboriginal culture. Their culture has helped to create a more positive parent self-image, while the Child Welfare System has served to reinforce a negative self-image. Most participants continued to experience a sense of melancholy for their absent children. But some were working to strengthen their parenting roles and abilities; only a few participants were unable to address this issue. By analyzing the day-to-day realities of participants through the Anishinabe Identity Circle, an in-depth understanding as to how the identities of participants have been negatively affected by the practices of the Child Welfare System is provided.

Child Welfare Context

The Involvement of participants in the Child Welfare System is predominately
determined by the system, unless it is the participant who seeks assistance. For the purposes of this study, only the first type of service identified by the participants such as *Neglect* is analyzed. The situations of participants have been re-framed with reference to the Eligibility Spectrum Handbook. My familiarity with this social worker handbook assisted me to match the experiences of participants to the type of system services that they would normally be receiving. Participants, vis-à-vis the Child Welfare System, at this point, examine two themes: 1) the type of services that participants are presently receiving and; 2) how the investigation process has affected participants. Each of these themes is analyzed separately.

The types of services that participants were initially receiving include neglect, physical abuse and sexual abuse. Most of the participants were reported to the Child Welfare System by anonymous members of their community. Participants were receiving services for *Neglect* based on their apparent abuse of alcohol. Participants have described how the use of alcohol was perceived to be the norm in their culture and households. But participants described emphatically how the abuse of alcohol has seriously strained their relationship with their spouses and children; this abuse often leading to violence in the home. The abuse of alcohol for many Aboriginal families has obscured their understanding that this addiction was not part of traditional Aboriginal culture. High proof alcohol was unfortunately, with devastating consequences, introduced to many Aboriginal people in Canada by Europeans during the Fur Trade era. The abuse of alcohol has resulted in an enormous negative legacy upon the lives of many Aboriginal people. Participants who had abused alcohol have described the separation from their children as a heart wrenching experience. It has left many of the participants with wounded spirits.

It is during these difficult times that participants undoubtedly find themselves in the Child Welfare System spotlight. When social workers locate the children of inebriated parents,
they of course perceive the children to be in a situation of potential harm, and protective action is
often taken. Some participants were continuing to use alcohol as a means of coping with the personal trauma of losing their children to the Child Welfare System.

Participants were also receiving services for neglect due to apparently not feeding their children properly. For example, Christa’s children were constantly hungry at school and this was reported to a child care worker. Christa claimed that she was trying to encourage her children to become vegetarians, with no success as her children were not inclined to consume her prepared vegan meals. The social worker did however provide Christa with food vouchers that could be exchanged for additional groceries to feed her children.

Regarding services for Physical Abuse, many participants recalled being young children at Residential School and how they were physically disciplined. The participants past experience of receiving corporal punishment to instil discipline had unfortunately re-surfaced, and then copied in their own parenting behaviour. Some participants shared that they had in the past, physically hit their children when they would not co-operate. Participants now realize the inappropriate actions of their past behaviour. Ruby felt that her receiving services for physical abuse was not necessary and was unwarranted. When her child had an accident at home, Ruby felt her social worker presumed she was at fault for her child’s physical abuse. Being wrongfully accused of such abuse contributes to a sense of parental helplessness and bitter resentment toward the social worker and the Child Welfare System.

Services for Sexual Abuse were also received by some participants. Social workers reasonably did not want sex offenders who were the spouses or ex-spouses of participants, to reside or visit with their children. For example, Corrine was receiving services for sexual abuse because her social worker did not want Corrine and her children to have any contact with her
former spouse who had a history of assault and sexually abusing children. Corrine felt that she was being treated unfairly by her social worker because of a perception of guilt stemming from her association with this man. Corrine was instructed to stay away from this man or risk losing her children. Unknown to the participants, the services and the labelling by social workers perceives participants to be the perpetrators of this abuse. As a further consequence, this situation is permanently recorded in their files.

The meanings that participants append to their interactions with social workers during the investigation process were often described as traumatic. Most of the participants shared their experiences of the Child Welfare System with terms of emotions such as anger, feeling sad, bitter, threatened, and shocked. As noted earlier in this study, participants directed considerable anger toward the Child Welfare System for many reasons. A common complaint was that as parents, they were not clearly informed by social workers of the reason(s) for the apprehension of their children. One participant described the apprehension process as similar to having her children ‘kidnapped’ by a complete stranger, since no forwarding information was available for her to inquire about the safety and well-being of her children. Participants also complained that they were not informed about the progress of their children in care. Similarly, should their children be injured while in Child Welfare care; this information was not often communicated to the parent.

Persistent inquiries by participants requesting situation reports concerning their children in child care would often be discouraged by the social worker; apparently sometimes with threats of possible imprisonment. Most of the participants felt helpless because they had no authority or control regarding the care of their children. A few of the participants, however, did feel that they were in control of their situations. According to Keesha, being in control means that she was able
to recognize what she needed to work on as a parent. But most participants simply became frustrated, stressed and were unable to cognitively comprehend what was happening to themselves and their children. Ruby best described this process as having her life ‘turned upside down by social workers.’

Keesha experienced symptoms of post traumatic stress after losing all of her children to the Child Welfare System. She continues to experience flashbacks about her children. She described how she would get depressed and cry for her own children after hearing other babies cry. She also dreams at night of her children being with her at home, but then when she wakes up they are not there with her. The consequences of not having physical contact with their children, maintains the suffering for many of these participants.

Participant initial involvement with the Child Welfare System through social workers has negatively influenced the way that they see themselves. While the participants were yearning to care and to reconnect with their children; their involvement with social workers has perpetuated them to feel hopeless, voiceless, powerless and incensed with anger. Their initial involvement with social workers has been understood as a very negative process.

**Disadvantages**

Participants offered first-hand knowledge in working with social workers in the clinical setting. Participants in this study clearly shared that they wanted to be recognized as human beings in the Child Welfare System. They did not like being referred to as clients because the use of this term, from their perspective, sounds clinical and devoid of emotion. The term *case*, that would be used by social workers to describe their family situations was not appropriate as they felt ‘dehumanized’ (Wharf, 2000). Instead they wanted to be known by their names and to be seen as autonomous human beings who had individual needs, strengths, goals and aspirations.
The term ‘client’ portrays Aboriginal parents as being ‘dependent’, as originating from a ‘stigmatizing’ race (RCAP, 1996c, p. 40) and as being a ‘deviant’ individual (Kirk, 1972). It also positions parents in a hierarchical relationship with social workers (Swift, 1995) where only one has power and the other person does not. It is through those who do not have this power – the parents - that the dominant work practices of social workers are analyzed.

How social work practices were perceived to be a Disadvantage for participants is analyzed from the experiences of participants. The negative perception of this relationship between participants and their social workers has evolved from participants and as parents they often felt abused by social workers and the Child Welfare System. Participants as a collective group felt misunderstood and disrespected as caregivers. The tactics that social workers used against them served to weaken their spiritual, physical, emotional, and psychological well-being. The tactics that social workers used to marginalize the parenting identities of participants include: 1) accentuating on the Ancestry of the parent; 2) not having a reasonable understanding of Aboriginal culture; and, 3) the carrying out of existing social work practices by workers. How each of these tactics has contributed to the creation and maintenance of unhealthy identities in participants are described.

Participants first understood that the major problem with their relationship with social workers was based on their Aboriginal ancestry and what they felt was the inability of many social workers to look beyond participant circumstances. Most of the participants stated that they felt marginalized as parents because of their Aboriginal ancestry. They perceived that they were intentionally and inevitably pulled into the Child Welfare System because they were identified as being Aboriginal parents. The forced intervention that they were receiving from this System was often viewed to be necessary by social workers because they as ‘Native’ parents were in need of
help. They felt stigmatized and labelled because social workers would often generalize their circumstances to other Aboriginal parents who were receiving services.

Participants also felt they were often accused of things that were not their fault or the social workers did not have the facts. For example, Darlene was at a mall waiting to meet with her children in care on a scheduled visit, a visit that was unexpectedly cancelled. Darlene was mistakenly believed to be intoxicated, after her social worker had telephoned Darlene’s home and her intoxicated mother answered the phone. As a consequence of the social worker’s apparent stereotypical view of Darlene and Aboriginal people in general; her visits with her children were automatically cancelled. Participants also described how they were often doubted and not taken seriously when sharing their real life events with social workers. A few of the participants who were familiar with their parenting rights were viewed by their workers as ‘stupid.’

Social workers were seen by participants as unable to look beyond the past experiences of participants. Most of the participants had shared how their social workers were fixated on their past parenting problems; their social workers were unable to see them as changed parents. Instead of recognizing the accomplishments and strengths of participants over a period of time, social workers were quick to judge participants based on previous concerns. For example, participants perceived that their workers will always view them to be ‘bad’ parents because of having had children who were now Crown wards. Furthermore, it seemed that social workers presumed that the participants will never be good enough to parent their own children because they have grown up in the Child Welfare System. Participants also shared how they often knew when their social workers were lying to them. As a result of being stigmatized, participants felt social workers do not like them and that they do not want to work with them.
An understanding and acknowledgment of Aboriginal culture the participants felt, could improve their relationship with social workers. A majority of participants felt social workers in general were ignorant of the importance Aboriginal culture, practices and history. Participants had described how they often felt alienated from their culture and families because, as young children, they were forced to attend Residential Schools and be involved with the Child Welfare System. The self image that they held of themselves lacked meaning as an Aboriginal person. It was not until they had re-discovered their Aboriginal culture that they finally have a sense of meaning in their lives. Participants were learning about themselves through various types of cultural practices. Connecting to their culture was perceived as a healing process because it encouraged the participants to recover what was taken away, or lost to them in the past. It helped participants to accept themselves as Aboriginal people and to associate themselves with the Aboriginal population. They had a positive self concept of themselves when they were able to locate themselves individually and collectively in their Aboriginal culture.

Participants also felt social workers do not understand the impact of historic government policies against Aboriginal people and their children. The assimilative effect of the Federal Government initiatives such as the Indian Act, Residential schools and the Child welfare System upon the lives of Aboriginal people, was not viewed to be of concern for social workers. A participant illustrated that the Child Welfare System was like the ‘second coming of the whites’, as social workers were presently continuing to remove Aboriginal children from families and placing them in foster homes. Parents continue to be marginalized because they are powerless to intervene when their children were removed from them.

The present practices that inform the relationship between participants and social workers were not helpful in supporting the parenting identities of participants. I have analyzed how the
tactics of some social workers continue to subjugate participants because of their Aboriginal ancestry; to marginalize the realities of participants; and to illuminate how existing social work practices displace the parenting identities of participants. As a result of these tactics, participants do not like or trust social workers. Participants naturally fear for their children placed in the Child Welfare System because they as a parent are not there to protect them. The System has left many of the participants confused. This confusion, according to one participant, was intentionally created and practiced by social workers as a tactic to trip a parent into inadvertently acknowledging an impropriety that, even if taken out of context, would be used against the parent. The system has evolved to a state that Aboriginal parents will lose almost every battle over their children.

In witnessing and listening to the experiences of participants it became obvious that the tools social workers employ in the system were not working for the best interests of Aboriginal children or their parents. The social work tools, tactics and overall strategy of the contemporary Child Welfare bureaucracy need to be re-examined and reconfigured to meet the needs of Aboriginal participants. Meeting the needs of parents would further strengthen the parenting identities for participants as competent caregivers. Reconfiguring these tools would also work to transform the present social worker power display that participants were subjected. The present relationship between participants and social workers is not congruent with the type of professional relationship Aboriginal participants espouse. The concept of relationship, from the Aboriginal perspective, insists that individuals be respected and approached as equal contributors to the process. This is not happening in the Child Welfare System as participants continue to be oppressed by dominant social work practices. A new and respectful relationship between participants and social workers must be envisioned, developed and implemented for the System
to be fully functional in protecting Aboriginal children and supporting the parenting identities of participants. Supporting the identities of parents rather than dismissing them may serve to decrease the number of Aboriginal children in care, assuming this is a systemic goal. Strengthening the parenting abilities of Aboriginal parents is displayed in the Aboriginal Identity Circle.

The *Aboriginal Identity Circle* has been informed by the experiences of participants who were presently receiving services from the Child Welfare System. The circle illustrates how social workers can contribute to strengthening the parenting identities of Aboriginal parents. It is important for social workers to understand how their practices in the Child Welfare System create and influence the identities of participants. When participants are consistently mistreated and devalued as parents by the status quo; they are deliberately removed from their heritage because their culture is viewed to be inferior. Participants then tend to internalize this predominant negative stereotyping. This negative self-image that they have of themselves within their natural environment is then extended to how they see themselves as individuals.

The *Aboriginal Identity Circle* emphasizes the need for social workers and the Child Welfare System to begin accommodating the support and policy needs of participants. The circle emphasizes that both participants and social workers must respect each other. The circle highlights the complexity of participants’ lives and what social workers should consider when working with this group of participants. The following responsibilities for participants and social workers which are part of this circle have been identified by participants and are analyzed. The responsibilities of participants as parents are first analyzed, followed by the broader responsibilities of social workers, the Child Welfare System and the communities of participants.
Responsibilities of Parents

These parenting responsibilities, as preliminary findings have already been identified by the participants in the second part of Chapter 3 and they are located in the western direction of the ‘Reality Circle’ (See page 9). These responsibilities are further refined in the *Anishinabe Identity Circle* and are a result of the way participants understand their identities at the micro, meso and macro levels (See page 7). The *micro* level shows how the identities of participants are socially influenced by the Child Welfare System in a group setting. The *meso* level works to understand how the interactions between participants and social workers affect participants’ identities. The *macro* level examines the responsibilities of the Child Welfare System and the First Nations Communities of participants. How social change is to be achieved in supporting the parenting identities of participants is examined. Approaching and arranging the analysis in this manner complies with the principles of the Critical Ekweism framework as it is important to understand the perspectives of participants from a wholistic lens. The following responsibilities, as identified by participants, are discussed.

The parenting responsibilities must be understood in relation to the oppressive contexts that this group of participants have had to endure over time. These oppressive contexts are a result of government assimilative policies that were created by non-Aboriginal people and are continuing to be used in an attempt to regulate the behaviours and realities of Aboriginal people. The participants have described how the present Child Welfare System as an external force has had a negative effect on their lives. The Child Welfare System, like the former Residential Schools has contributed to a negative image of who they are. Participants described how they did not like being involved with the System because they were often felt confused and worthless. In working through their confusion and anger they were able to recognize how the Child Welfare
System was working to permanently displace their parenting identities. Participants were adamant that they did not want their parenting identities to be eroded by the Child Welfare System since they were either attempting to get their children back, or they were waiting for the return of children. The perspectives of participants in relation to their beliefs regarding their involvement with the Child Welfare System are first discussed. How the responsibilities of parents can contribute to project positive parenting images while working to create social change in the Child Welfare process will also be discussed.

The first belief that participants held about the Child Welfare System was that the entire system was working against them because their children were continuing to be removed from them; that the System was not apparently willing to return their children. In resisting the present practice of removing children, participants recognized that they needed to break the cycle of violence that was happening in their families since far too many children were being lost to the Child Welfare System. Participants became aware that they needed to abandon some of the behaviours that they had internalized and copied from either their mothers or grandmothers. Their mothers and grandmothers were often unable to parent because they too had been separated from their families and had grown up in an institution where their parenting skills were not cultivated.

Participants also had a strong belief that children should not be taken away from their families and to be placed elsewhere in a foreign environment. Participants were able to empathize with the children who were removed from families because they as young children were either placed in Residential Schools or in Child Welfare Institutions. Placing children in an institution where they are forced to conform and are often mistreated daily, only serves to perpetuate the fragmentation of their identities. Participants did not want Aboriginal children to
experience the same identity issues that now consciously and subconsciously affect them personally on a daily basis.

As the participants were in the process of strengthening their cultural identities, they were also struggling to strengthen their parenting responsibilities for their children. In working to address their cultural identities and parenting responsibilities, both of these processes then became the catalyst from which the participants would begin to resist negative social conditions. In attempting to reconstitute themselves to become well informed parents, they had to first be cognizant that change had to start with them. In extending these changes to the broader Child Welfare System, participants expressed how it was important for them to take up their parenting responsibilities. Participants must be able to strengthen their identities by mediating between the influences of the Child Welfare System and their parenting responsibilities. The parenting responsibilities are the ideal behavioural standards that participants must work towards while they navigate independently through the Child Welfare System. The nine parenting responsibilities that participants have identified include: working toward providing a Stable Environment for their families; to a process of Finding Answers; to Stand Up for Self; to seek Professional/Traditional Help; to Read Notes for Accuracy; to Speak to Ex-spouse(s)’ to Support Other Women; to Follow [through with] Parenting Programs; and, to Cooperate with [the Worker. Before analyzing how the behaviours of each of these parenting responsibilities influence the identities of participants; how this change is to be manifested is briefly analyzed.

Participants were largely aware that individually they had to take the first step to promote change. They identified the necessary changes that would benefit them and their children. They had to learn to control and improve their situations regarding their addictions and their own self healing. Participants had to learn how to say no to the individuals who were persuading them to
consume alcohol, sniff solvents and abuse drugs. Alcohol abuse, as pointed out previously, was identified by participants as being the most salient problem and had a major negative effect on their parenting roles. Their children were in many cases apprehended because of the parental abuse of alcohol. But a few participants, as a consequence of the Child Welfare System taking away their children for other reasons, began using alcohol as a coping mechanism since the loss of their children was traumatic. Participants described how alcohol was becoming a multi-generation problem for their families because their children were also beginning to abuse alcohol. Participants indicated that if personal change was to occur, they had to first commit and agree to change, and to find supportive people who would counsel them about alcohol, drug and mental health issues.

In revealing their parental responsibilities, participants expressed that it was their responsibility to develop and maintain a *Stable Environment* for their families. Establishing a stable life with their family was to be achieved in part, by staying home more often and becoming more involved with their children. It was important for participants to limit their social activities outside of their home. Ultimately, a parent should make sure that their children are happy, safe and not lacking essential health needs.

Most of the participants shared that they needed to go through a process of *Finding Answers* for their situations. They wanted to become more educated regarding the policies and the practices of the child welfare system. They suggested that social workers could make this information available for participants through orientation workshops. They were also interested in learning more about the Eligibility Spectrum Handbook. Furthermore, the majority of the participants were unfamiliar with the status review process. It is vital that social workers provide this information for participants since it offers another way for participants to attempt to reclaim
their children. Parents, in consultation with their social workers and lawyers, could move forward a motion in court to begin the status review process. The status review process is a rigorous process that examines the socio-economic and psychological accomplishments of the parent over a period of time. It measures whether a parent is ready and able to resume child care. If parents successfully complete the status review process, they could have their children returned. In meeting the status review procedures, participants pointed to one of the requisites which included showing the court that they had stable housing for their children. Finding a stable house was problematic for participants because there is consistently a lack of available housing in their communities. Few of the participants were able to proceed with a status review, since more than half of them were unemployed. For the few who were employed, they did not earn enough money to retain a lawyer. It is apparent that legal aid is difficult for many to obtain.

The responsibility to *Stand Up for Self* was visualized as fighting for their children. Standing up for themselves had different meanings for participants. First, participants had to be mentally prepared for their engagement with social workers and second, they had to effectively assert their demands. Participants felt that they had to be *strong* with social workers in the child welfare system. Participants in this study were becoming more aware and learning how to communicate their opinions and assertions with social workers. It was important that participants ask for, and receive, clear communication of the expectations of the System; the reason(s) their children have not been returned; specific issues, such as a request that a female driver be provided for female children and requests to meet with social workers at a mutual convenient time. Participants expressed how they recently were making decisions in order to support their parenting responsibilities. They were requesting that social workers transfer their files to the agencies that they now wanted to be involved. Some participants were taking the initiative to
phone agencies and to make self-referrals. A few participants were also in the process of gathering information to make a formal complaint regarding a Child Welfare agency because in their view it was not in the best interest of their child to be placed in Child Welfare care. One participant was enabled to write a letter of complaint to the media and the police. These are only a few of the examples of participants fighting for their children.

Participants, as mentioned in their culture, indicated that it was their responsibility to find any type of *Traditional or Professional Help* that would foster their parenting situations. Many of the participants have diverse backgrounds and are at different stages of their healing journeys. They felt the need to utilize community resources and to talk to supportive, trustworthy and resourceful people about their situations. Isolating themselves from others was not a healthy state, but by sharing their stories with others helped them to feel more progressive. This type of self help was viewed as a way of strengthening self and their families. Self help also meant that participants had to be persistent in finding employment in their communities, regardless how difficult it was to secure jobs. It was important that employment training skills be developed and provided for participants in their communities so that they could be active while waiting to be reunited with their children.

Participants had the responsibility to *Read Notes for Accuracy*. They were learning to document their activities with social workers out of necessity, since some social workers were perceived to not be submitting accurate case information to the courts. The use of the point-form writing approach that social workers were using was not ideal because this form of writing can omit crucial information that was important for the parents. Participants felt their words were purposely ‘twisted around’ to meet the agenda of the social worker. In making sure that their situations were documented accurately, participants wanted to be able to review the notes written
Participants spoke of their responsibility to make an effort to *Speak to [their] Ex-spouse(s)* with regard to their children in Child Welfare care. Mothers were the main caregivers in this study and most were single parents. They are more numerically visible in the Child Welfare System than the fathers. The father of the children often remains marginalized from the Child Welfare process, unless he is the one caring for the children. In this study, it was important to recognize the potential contributions of the fathers as caregivers. Fathers also may have the means and ability to provide a stable and caring home for their children. Mothers must be able to look beyond their past relationships with ex-spouses and to redirect their attention toward how the best interests of their children can be achieved with the co-operation and assistance of ex-spouses. Mutual co-operation between ex-spouses could diminish the number of children entering Child Welfare care.

The responsibility to *Support other Women* was significant for female participants. It was also recognized as being important to support the growing number of young Aboriginal women and their children who lack a support network. Providing an occasional baby-sitting service would help to alleviate some of the stress of young motherhood. Women who have good knowledge of the Child Welfare System could also provide information for younger mothers, mentor insights, stories and guidance about the System through ad hoc social gatherings. During these gatherings they would be able to contrast their experiences with other women who have been involved with the System.

*Follow[ing and completing parenting] Programs* was another responsibility that participants identified and had expressed concerns. Most of the participants were expected by social workers to enrol in parenting programs; the apparent agreement, being that their children
would be returned to them after they had completed the program. Thus participants in this study were most annoyed that social workers do not follow through with the presumed agreement, since their children are not returned after program completion. By the time participants have completed the numerous parenting programs that they were expected to finish; their children will often end up being crown wards. It was agreed by most of the participants that they should be not forced to complete so many programs because the present process often serves to divert parents away from their children. The present parenting program structure, based on the experiences of participants, seemed to have a deceptive mechanism built into it because the participants perceived that no matter what its intent the System had no intention of returning their children, but aimed to keep them in the System.

The effectiveness of parenting programs to address the needs of participants had different results for the participants. The basic, ‘how to do’ programs were viewed to be helpful, but most of the participants felt they were inundated with parenting programs. They were able to identify various ways of program improvement. They wanted programs to be more relevant to the core issues that they were experiencing. For example, participants wanted to learn more about how to deal with the shame and guilt that they were experiencing after their children were taken away from them. It was also important to learn how to deal with the potential anger of their children directed toward the parent. Participants indicated that they be clearly informed of the programs that they were required to take because some of the programs that they had completed were later declared invalid by social workers. As a consequence of this, participants had to retake new parenting programs in order to satisfy their social worker’s new demands. Participants felt compelled to complete their programs because they believed it was their only chance to reclaim their children.
Finally, participants have the responsibility to *Cooperate with [their] Worker* and lawyers on behalf of their children. Participants often felt that they were ‘pushed to the edge’ during their involvement with social workers, but it was important to try to reframe these negative feelings into positive ones. Instead of displaying anger and being uncooperative with workers; participants wanted to be more assertive and to seek mutual cooperation. It was a difficult task for participants to maintain a positive outlook since they often viewed their situation as being helpless and devoid of power. On many occasions, participants expressed that *no one was listening* to them. Having a support person with them during interviews could prove beneficial.

Participants felt degraded as parents by the negative process that they viewed as being at core of the Child Welfare System. It was not easy for participants to excuse how the System was seemingly eroding their chances to once again care for their children. Participants, however, were able to temporarily set aside their negative feelings and to try and understand how they could work toward the goal of receiving their children back into their care. As difficult as this was for them; they knew, like it or not, that they had to work with the social workers as a means to an end. Working co-operatively with workers is premised on showing respect toward the worker, but this must be reciprocated in order for this responsibility to be fulfilled.

These are the responsibilities that participants have identified for the Child Welfare System. The responsibilities highlight the perceptions of individual participants within a collective group and assist to reinforce and augment their parenting identities. These responsibilities point toward the participants being contributors to their own personal change. Participants have to do their part in an attempt to improve the working relationship with social workers. In recognizing how participants can contribute and support their parenting responsibilities in the Child Welfare process; it is clear that social workers also have a role in
supporting the parenting identities of participants.

**Responsibilities of Social Worker**

Participants have identified a total of *eighteen responsibilities* for social workers and the Child Welfare System, augmented with a responsibility for First Nations communities. These responsibilities serve as the start point to transform the existing unsatisfactory Child Welfare System conditions for Aboriginal parents, into a more culturally friendly arena that is essential to support the parenting identities of participants. The Critical Ekweism framework requires that participants must critically explore their new external environment - the Child Welfare System, and assess whether or not the conditions of this System are congruent to their needs. The participants perceived the System to be biased, prejudicial, and often intolerable. By their own determination, they were adamant that conditions of the Child Welfare System must be reviewed and corrected, in order to support their parenting identities and to benefit the children involved.

In this section, the tenets of the Critical Ekweism framework are utilized throughout this analysis to show how participants have contributed to their re-envisioning of the Child Welfare System. In recognizing the participants as the ‘knowers’ of conditions within the Child Welfare System, their expertise of why the tools of social workers must be grounded in Aboriginal teachings is discussed first. Second, the constructed consciousness of participants as a result of conditions that they experience in Child Welfare, the responsibilities of social workers, the Child Welfare System and First Nations communities, are discussed.

In working with Aboriginal participants in the Child Welfare System, social workers must critically assess whether or not the tools that they are using are fostering the parenting needs of participants. They can do this by effectively communicating and being pro-active with the participants. The tools that social workers employ must help to create and develop balanced
identities in participants as articulated through the Critical Ekweism framework. The value base intrinsic to these tools must be informed by Aboriginal philosophy which is grounded in Grandfather teachings that are esteemed by Aboriginal people (Benton-Banai, 1979). Grandfather teachings are used to dictate how individuals must interact with individuals in their own internal contexts; with other individuals in external contexts. These teachings emphasize the values that individuals must espouse when structuring relationships with individuals. In the Child Welfare System, both participants and social workers must strive to establish a positive working relationship based on good ‘Anishinabe’ practices. Good Anishinabe practices are informed by the seven Grandfather teachings that include the values of wisdom, love, respect, bravery, honesty, humility and truth (Benton-Banai, 1979, pp. 60 - 65). The value of wisdom teaches participants to be cognizant of new knowledge and to integrate the positive aspects of this new knowledge into their lives. Love teaches participants to be considerate of others so they can have peace in their lives. Bravery teaches participants to identify and to articulate their needs so they can be heard. Honesty teaches participants to speak about their experiences from the heart. The value of humility teaches participants to understand that they are part of Creation, while the value of truth is known or achieved through the integration of all of these values. These teachings are the base from which healthy identities are created. How the Child Welfare System has impacted the consciousness of participants is provided.

Participants through their exploration of their collective consciousness have described how existing dominant practices of social workers have negatively contributed to their parenting identities. Existing social work practices have contributed to perpetuate the sense of powerlessness, devaluation and marginalization for participants. Participants had subjectively internalized the negative influences of existing social work practices as they were left to
independently identify the stigmatizing effects of these practices. Their assessment of social work practices and the Child Welfare System in general have not been constructive in meeting their needs. Rather, they felt the Child Welfare System was working against them; it was inhumane and heartless. The System has only achieved to create a negative consciousness for this group of participants. This negative consciousness as shared by the participants was cultivated from the observations and experiences of participants.

Being Aboriginal women with children, from the perspective of participants, was synonymous with almost automatic attention from the Child Welfare System. Participants on many occasions felt that they did not require assistance from the Child Welfare System, but they still received assistance just the same. This is one example in how the Child Welfare System was perpetuating to stigmatize the parenting abilities of participants. Participants provided numerous examples of how they were stigmatized by social workers. For example, some social workers seemed to have stereotypical negative images of participants. Participants shared how their social workers would often perceive them of not knowing their rights when, in fact, they did. For other participants who wanted to know more about their parenting rights, no such information was provided because they felt social workers perceived this information to be unimportant. The social worker seemed unable to differentiate between participants because they would be viewed collectively, often generalizing the circumstances of one participant to that of another. Participants described how social workers tended to consistently concentrate on the past mistakes of parents, rather than their accomplishments. If a participant had children who were crown wards; some social workers seem to view this as being particularly negative.Ironically, participants who had grown up in the Child Welfare System were considered to be ill prepared, if not incapable to care for their children.
Participants expressed how the behaviours of social workers through their practices, had contributed to their personal low self-esteem. The anguish that participants had felt after their children were forcefully removed from them remained emotionally traumatic. Without the necessary support to assist participants to cope and adapt to the loss of their children to the system, some participants abused alcohol, making the situation worse. Participants have described how social workers were unable to display empathy and how important it was for participants to heal from past and present abuses. Being called a ‘bad’ parent and being left ‘in the dark,’ with no empathy but plenty of disdain from the social workers, was intolerable for the participants. A common thread throughout this study reveals a very adversarial relationship between participants and social workers due to an inherent mistrust by both parties.

These are some of the examples of existing Child Welfare practices that were internalized by participants. Not surprisingly, many of the participants felt anger, shame, humiliation and were left doubtful about their parenting responsibilities. How existing social work practices tend to work against Aboriginal participants has been made clear through the collective consciousness of participants who shared their realities about the Child Welfare System.

Participants were also adamant that social workers ‘did not like them’ or ‘did not want to work with them’. The Critical Ekweism framework was helpful in understanding the needs of participants. In working through their individual child welfare experiences in a collective setting, participants were able to respond how existing social work practices can be re-envisioned and transformed through social change in order to meet their parenting needs. When the parenting needs of participants are strengthened, consequently so are their parenting identities.

Social workers should recognize that the identities of participants are extensions of their daily environment. The way in which participants are treated in the Child Welfare System also
informs how their parenting identities are constructed and maintained. In understanding the concept of identity from an Aboriginal perspective, social workers must understand that all human beings are part of Creation. Being part of Creation not only asserts that participants are physical, emotional and intellectual beings, but that they are also spiritual beings. The value of humility teaches participants that they are “a sacred part of [C]reation” while the value of respect instructs participants to honour everything that is part of Creation (Benton-Banai, 1979, p. 64).

Ideally, respect should be reciprocal. Participants have collectively described how their experiences in the Child Welfare System have impacted their whole being. The following analysis highlights how the child welfare experiences mutually and collectively affect the spiritual, physical, emotional, intellectual aspects of participants. In fostering positive parenting identities, social workers must be accepting of all people that they are working with regardless of their race. Social workers must want to reciprocate a positive relationship by being supportive to the unique needs of Aboriginal parents and their children. Participants describe how social workers can begin to enhance their identities as parents in the Child Welfare System through a set of responsibilities.

The responsibilities that participants have identified are the requisites to creating a co-operative working relationship with social workers. Though not exhaustive, these social work responsibilities are of utility in creating positive change for participants in the Child Welfare setting. Social workers must be open to, and recognize the usefulness of Aboriginal informed practices as part of their practice repertoire and value base.

There were a total of eighteen improved practices and they have been envisioned as responsibilities that would assist to strengthen the identities of parents. Although some of the following responsibilities are similar to the responsibilities of participants, it is a requirement to
articulate the following social work responsibilities because they mirror the needs of participants. Participants first described that social workers have a responsibility to Understand My Reality, to understand that participants can Change in [their] Behaviour, to Work With Me, use new Investigation Approach; to give notice in the Apprehension of Children, to consider the Postpartum Phase, to Listen, to Share Information, to Clarify Expectations, to create Accurate Information regarding parents’ realities, to consider the Biological Father as a potential caregiver, to Maintain a Connection between parents and their children, to Provide Traditional and Professional Resources, to develop Programs, to Find Suitable Housing and to obtain more Training in the area of addictions. Each of these responsibilities is briefly analyzed.

One, social workers, from the perspectives of participants, must first Understand My Reality. Understanding the lives of participants and in how their lives have been subjugated by mainstream practices and polices is critically important for social workers. Participants and their ancestors who belong to the Aboriginal population have been struggling with the effects of attempted forced assimilation as a result of policies that have been created by mainstream governments. For example, participants in the study spoke of how the anti-Aboriginal, Residential School System had adversely affected students in terms of eventually parenting their children. Participants spoke about their own mothers and grandmothers who had attended this same School System, who also had difficulty parenting their children. This was a salient feature for participants since the Residential School System has been thankfully abolished: participants and their children continue to a large degree, to unsuccessfully be assimilated by another institution - the Child Welfare System.

It was also important that social workers be aware of the required healing process that participants were presently engaged. Most participants expressed how they wanted to reconnect
with the teachings of Aboriginal culture because it was important to strengthen their individual identities. Social workers can play a positive role in this healing process. They can support the identities of parents by working diligently with them.

Two, promoting the identities of participants is to accept that parents can *Change in [their] Behaviour*. Participants were perceived to be *static* beings by social workers while they were trying to create positive changes in their lives. Even though some of the participants were perceived by social workers to be incompetent mothers because they had children who were crown wards; they were determined to complete many parenting programs because they wanted their children back into their care. Since growing up in the Child Welfare System, participants were perceived by social workers not to be ideal parents for their children. Participants were appalled when their social workers had told them this and it seemed that social workers were intent on keeping their children in the System. Participants indicated that they were trying to work with social workers, but apparently it was the social worker who would not be willing to work with them. Instead of focussing on the present realities of participants; social workers were looking at parents through a *past and opaque* lens. This lens is the result of the risk assessment tool that social workers use to “assess the likelihood of future harm to the child” (Ministry of Community and Social Services, 1998). The risk assessment tool when used by social workers can recreate Aboriginal caregivers into *institutional clients* by extracting and reorganizing their lived experiences as past factors – which are used to determine the competency of parents in the future (Swift & Callahan, 2009). For an in-depth analysis of the viability of the risk assessment tool, please see Swift & Callahan, 2009. Social workers do not validate the re-creation of these parents which leads to a distorted and often inaccurate view of participants’ lives.

Social workers must look at the strengths of participants. If participants are not directly
involved with the criminal offences perpetrated by their spouse, they should not be perceived to be guilty by association. In many cases, children should not be removed from the mother as a consequence of the criminal conviction of the husband. The recent accomplishments of participants should also be considered by social workers. For example, Marion described how she was able to regain a substantial amount of self-esteem after she had left her husband who was violently abusive to her. Social workers must recognize that many participants are in the process of change and have a natural desire to care for their children.

Three, social workers have the responsibility to Work With [Participants]. As participants were willing to work with social workers; social workers must reciprocate a cooperative attitude to assist participants and their children.

Four, conducting an improved Investigation Approach or method that was sensibly based on dignity and respect was important. It seemed to be an unnecessary, over-dramatic and excessive display of power by social workers when they were escorted by several policemen in three different vehicles, for the seemingly routine investigation of one participant. A phone call informing the parent of the intended visit would have been sufficient.

Five, in the Apprehension of Children, it was important that social workers provide contact information for participants to enquire about their children. Neglecting to properly inform parents that their children were apprehended by a social worker only leaves participants in great stress. It also leads participants to speculate whether their children had ‘been kidnapped by a complete stranger’.

Six, removing children during the Postpartum Phase was extremely upsetting for participants. Participants described how they felt helpless and angry when their children were forcefully removed from them. Most of the participants shared how they were continuing to
grieve for their apprehended children.

**Seven**, the need for social workers to attentively *Listen* to participants was paramount in this study. Listening to participants was necessary for social workers to understand the type of support that participants and their children would require in the Child Welfare System. On many occasions participants have described how social workers had failed to listen to them. For example, after a couple mothers in the study had each informed their social worker that their children’s long hair was not to be cut as the mothers wanted her children to be proud of their traditional hair style. Their requests were ignored and the children’s hair was cut short. Participants also shared that their agency files were arbitrarily transferred by their social worker to another child welfare agency without their knowledge or consent. Social workers also were too impatient to listen to participant explanations if they were late for visits with their children. Participants often felt distraught because as a consequence of their being late; scheduled visits with their children would automatically be cancelled.

In clinical settings with social workers, participants often felt they were being subjected through a negative lens. Participants described how they were not believed and were mistrusted by social workers when participants attempted to convey to them their life events. Oral responses by participants were sometimes viewed out of context, or were misconstrued in meaning by social workers. Participants would be subjected to ‘tricky’ questioning by social workers because they felt it was their aim to ‘trip’ and lead participants to confess to perceived improprieties. Participants felt some social workers intentionally distorted their oral comments to serve a desired negative outcome against Aboriginal parents. Participants felt that during interviews the social workers often seemed to be more interested in possible parent mistakes and had the intent to carry out ‘fault-finding’ missions. Social workers must be cognizant of the degree of
participant language fluency so that words and phrases are not misunderstood and also taken out of context. It is important that social workers learn to ask clear questions and then listen closely to participants regarding their situation reports and maintain a clear dialogue.

**Eight,** it was also important that social workers *Share [vital] Information* with participants. Many of the participants disclosed that were not informed of why they were involved with the Child Welfare System. Not surprisingly, many of the participants felt when their children were removed from them; there was apparently insufficient information released by social workers to the participants about their children. It seemed everything about the Child Welfare process was a ‘secret’ and that parents were not privy to this information. Participants were not familiar with the contents of the Eligibility Spectrum Handbook that social workers use to categorize the situations of participants. There was a concern raised about child support payments by one father in the study; he wondered if his child was actually receiving these payments since he had not received any verification. He asked numerous social workers and other administrative personnel about his concern, but he did not receive an answer. It is also important for social workers to inform participants about their scheduled court dates well in advance. Michael described how he was unable to travel to town to attend court regarding his children because a social worker had failed to notify him within a reasonable time period. He agreed with other participants who shared his frustration and anger concerning social workers, who would portray them as uncaring parents if they were unable to attend court. Social workers must support participants by providing any necessary information, in an organized and timely manner that could benefit the participant’s endeavour to resume care for their children.

The participants identified an essential lack of clear communication, organization and program goals for Aboriginal parents involved with the Child Welfare System. In order to
improve communication, and therefore knowledge and understanding between the participants and social workers, it was viewed to be important that social workers provide an introductory program of orientation to the Child Welfare System. Many of the participants in this study were not familiar with the processes of the System, but they were willing to learn. Participants also had indicated that they wanted to learn more about their rights as parents in the Child Welfare System. These rights, as indicated by participants, could be made available in a brochure. One participant also stated that in addition to affirming the rights of parents; information should be made available regarding how parents can exercise their rights and not be denied due process.

Nine, concerns itself with the expectations of parents. It was also important for social workers to Clarify [the] Expectations that they have of participants. Participants recalled how social workers would often ‘walk away’ from them without clarifying what it was they were expected to complete. It was clear from participants that social workers need to take the time necessary to explain pending expectations for participants. It would be good practice if social workers would respectfully ask participants if they had clearly understood what was expected of them at the conclusion of the meeting. Participants shared how they felt agitated when social workers would unexpectedly add new requirements after participants had just completed a program and they believed they had met the required outcomes. Participants felt social workers were breaching the conditions of their agreement. It also became obvious that participants were feeling extremely confused when they had to try to accommodate the expectations of numerous social workers. Participants were not sure which expectations took precedence.

Ten, in terms of Accurate Information, it was important for participants that their realities and situations be accurately reflected in the notes scribed by the social worker during parent/worker interviews. There were instances of social workers neglecting to record the
intentions of Aboriginal parents wanting to resume care for their children. Omitting the requests of parents to resume custody of their children confirms the stereotype of Aboriginal parents as devalued humans and unworthy parents, who do not want or care about their children.

As indicated earlier, it is crucial that social workers listen closely to the requests of parents and to be certain that their requests to reclaim their children be documented. Instead of consistently documenting in expeditious point-form notes; it is the duty of workers to document clearly the requests and issues raised by the participants during meetings. Social workers also must not legitimize hearsay rumours when creating documents regarding Aboriginal parents.

Eleven, when removing children from their mother, it was also important that social workers consider Biological Fathers as potential caregiver for his children. One of the male participants in this study, Michael shared that he was very much missing his family, and he wanted his children to be part of his life. He was eager to resume caring for his children because he was now financially, emotionally and physically able. It did not make sense to him that his children remained ‘stuck’ in the Child Welfare System. Social workers should advocate that children who are removed from their mothers be placed into the care of fathers who demonstrate that they are stable and responsible caregivers.

Twelve, in Maintaining a Connection, participants described how important it was for social workers to support their natural biologic emotional and physical connection to their children. Participants have articulated how important it was for them as parents, to maintain a bond with their children. Participants had described how their identities were positively reinforced when they were able to interact with their children. Participants, who had lost their children to the Child Welfare System at birth, have begun to perceive the time that they are allowed to spend with their children as a healing process. Spending time with their children
encourages participants to project healthy parenting identities. Allowing participants to spend more time with their children could be achieved by extending the visiting hours for participants and their children, a common request by several participants.

One participant, Christa, discovered that other non-Aboriginal parents had been allowed to visit with their children for eight hours every day with the support of Legal aid. Participants should not be required to apply for Legal aid to extend visits with their children when social workers can advocate for participants to have similar extended visits. Applying for Legal aid seemed to be redundant for participants because more than half of them were either unemployed or they were not making enough money to retain a family lawyer. Participants did not want to work with social workers who were only interested in receiving a salary, but it would be ideal that participants be supported by social workers who were genuinely interested in keeping their families together. It was viewed as important that social workers support participant interaction with their children in the Child Welfare System.

Thirteen, participants have discussed how they were often expected by social workers to find parental support programs on their own. Participants described feeling apprehensive in attempting to locate appropriate resources for themselves because they did not know where to begin to look. In alleviating this situation, social workers could support participants by producing and updating a list of all available resources in the community. These resources would include both appropriate Traditional and Professional Resources that participants can inquire about on their own. Identifying traditional resources, whereby participants may want to speak to an elder about their situations, would possibly guide participants to explore cultural teachings.

Fourteen, in terms of Programs, participants have reiterated how important their children are to them. It was viewed as essential that social workers support participants who had
completed all required programs, to have their children returned to their care. Participants stated that they have been preoccupied in carrying out numerous programs in order to have their children returned to them. They have completed treatment programs and other self-help workshops, which have assisted them to deal with past childhood trauma and mental illnesses. They also have completed individual counselling sessions with professionals, alcohol anonymous programs, parenting programs, aftercare programs, but they still do not have their children. Marion has created an image of her being a ‘champ’ of parenting programs because like other participants in the study, she has attended so many of them. It has left many of the participants to feel frustrated and angry that their children are being withheld from them. As part of this practice, participants described their interpretation of parenting programs.

Participants were inundated with parenting programs; they felt they had no alternative but to submit to the parenting program regime. It was through the completion of parenting programs that they were led to believe that their children would be returned to them. A few of the participants felt parenting programs were necessary to assist participants in how to adequately care for their children while a majority of participants had disapproved of these parenting programs because they were not geared to their needs. In designing parenting programs that would meet the needs of participants, social workers must create programs that are responsive to participants and their children. Participants also suggested that the format of these programs be considered in accordance to their needs.

Creating parenting programs that were receptive to the needs of participants means social workers have to teach them about their parenting rights, to deal with life ‘core issues’ that they were experiencing as a result of having their children removed, to make programs more stimulating, and to point out the legitimate parenting programs available to participants.
Participants felt it was essential to be educated about their parenting rights. With the exception of one participant, the participants had no knowledge of their parenting rights and were astonished that these rights existed. They would now like to explore their rights as parents through parenting programs. They stressed how important it was for other Aboriginal parents to be aware of their rights as early as possible. Young women who are pregnant should be informed about their rights through their pre-natal programs. The earlier parents learn about their rights and act on them may help alleviate so many of the Aboriginal children from entering the Child Welfare System.

Participants suggested various types of content that was necessary in addressing their life ‘core’ issues. Programs must be available to address the reunification process between participants and their children. In preparing themselves to be parents, they wanted to confront the effects of the Residual School and the Child Welfare System that had re-visited them after their children were removed from their care. They wanted to learn how to deal with their anxiety, heartache, guilt and shame. Anger management was also important because their children may direct their anger toward the parents; accusing them as being solely responsible for their placement in the Child Welfare System. Participants were eager to explore the emotional and psychological processes of the reunification process.

In generating programs that were more interesting and beneficial for parents, they suggested that programs be computer-based. Technology, combined with the resources of the internet, would create a supportive, user friendly environment for participants to learn about parenting issues and responsibilities. Programs should be designed to focus and account for different student levels. The beginner program would centre on the basic, fundamental information of how to be an effective parent. The intermediate level would introduce participants
to more complex processes of parenting. For example, the emotional and psychological processes of parenthood would be informed at this level. Computer programs can be created to include Aboriginal cultural content such as language translation - syllabics being one form; audio, visual media, graphics, case studies; these could all improve the effectiveness of program delivery. Supporting parents to locate ‘legitimate’ programs in their communities can be provided through a brochure or an on-line website, identifying valid programs and the times and location in their area. The content of these programs must be culturally sensitive and meet the needs of Aboriginal parents and children.

Participants were quite aware of their children’s needs even though some of them were not living with their children. They felt their children should be encouraged to explore their mixed race identities through counselling sessions that they were not receiving while in Child Welfare care. Participants also shared that it was necessary to dissuade their children from using racial comments against each other. It was also suggested that programs to educate their children about the danger of alcohol abuse and poisoning were required. Participants emphasized that the cultural identities of their children, regardless of their age, be fostered through appropriate programming. It was also essential that parents be part of the programming, to learn about their culture and interact together with their children through ceremonies. This would reinforce the cultural identities of their children and it could help bond the family together. Aboriginal elders could be included as facilitators in these programs.

Participants continued to identify how social workers could develop more supportive parenting programs to meet the needs of Aboriginal parents. It was suggested that the duration of parenting programs be limited to a six-month period instead of the one-year limit that was in effect. Specific programs were required that would address the needs of both single mothers and
fathers, and couples. Participants pointed to the lack of parenting programs for men in their communities. In supporting the needs of women it was important that ‘sharing circles’ be available. Women of all ages could come together to speak and to learn from each other. Creating a community space for women to hold sharing circles can help to strengthen their parenting responsibilities and their identities. It was also of interest to learn that in some cases community programs would often be cut short as a result of a heated conflict between beliefs of Christianity vis-à-vis Traditional Aboriginal culture. It was suggested that both Christian and Traditional beliefs be used to support the aspirations of parents. The best programs, according to participants, had to be ‘culturally sensitive’ and ‘user friendly.’ The amount and quality of parenting programs that participants are expected to complete should be revisited by social workers. Participants have felt they should not be ‘pushed’ to complete numerous parenting programs because it only sets them up to fail.

Fifteen, to Find Suitable Housing, social workers should support the housing needs of participants since they enforce the residential expectations of participants. Participants have described how they often felt trapped; that their children would be apprehended: if they did not have ‘stable’ housing. Participants were annoyed that their present living arrangements with their families were sometimes perceived by social workers to be inappropriate and unstable. Participants had made it clear through this study that it was very difficult to locate permanent housing in their communities. It should be a priority for social workers to advocate for participants to seek out low-income residences. Workers could assist participants to fill out housing applications and consequently to help keep the family together. The housing situations of participants would be improved and it would not be a prevention concern.

Sixteen, with regards to Training, it was also understood by participants that social
workers need to understand how addictions and mental illnesses affect the lives of participants. Many of the participants generally felt social workers need some training involving addictions (alcohol, drugs and solvents). Understanding the pharmacokinetics of alcohol, drugs and solvents and how they physiologically affect participants will assist social workers to better understand the realities of participants. How social workers can support participants to start addressing these addictions through various types of resources could then be initiated with participants. Some participants request that social workers become more educated regarding mental illnesses. Participants who were attempting to cope with a mental illness were not willing to openly discuss their medical condition with social workers because they sensed being looked down upon. Being treated for a mental illness, according to participants, was used as weapon to annihilate their chances of having their children returned. Participants desired to work with social workers who were well informed about mental illness, who were ‘open-minded’ and who were willing to work with them.

Participants have identified numerous responsibilities that social workers can use to support their identities as parents. In addition to the responsibilities of social workers, the services that are part of the Child Welfare System were also viewed to have an important role in supporting this group of parents. Participants wanted the Government policy-makers of the Child Welfare System to understand how the Crown Ward Timeline required a major overhaul. They also saw a requirement to hire more Aboriginal Staff, specifically, social workers to support their parenting needs.

One, participants have described how the present Crown Ward process, which is law in Ontario, was designed not to benefit anyone. Participants described how they believed that the Crown ward process was used by the system to permanently keep them away from their children.
When their children are apprehended by social workers and are placed in Child Welfare care, the Crown ward process begins. From the perspective of participants, they perceived the Crown ward process to be a one-year limit where they had to work through their parenting concerns before their child is designated as a permanent ward of the state. Under Ontario Child Welfare Law, the Crown ward time limit is determined by the age of the child. If a child is under six years of age; there is a one year window of opportunity before they can be declared Crown wards. If the child is six years old and older; there is a two-year time limit as shared by D. van Overdijk (personal communication, February, 10, 2010). The Crown ward timeline has failed many participants because they are unable to meet the rigid time frame. Participants have described how they are preoccupied with attempting to heal from past and present trauma. We know, through their stories, that the participants have been traumatized since early childhood. On a daily basis they have endured racism from mainstream communities. They continue to grieve for deceased family members and for the loss of their children, and they are struggling with their addictions. Some participants were also mired in a slow moving process of changing social workers and having their files transferred to another agency through the courts. The parenting, and after care programs that participants were required to complete as requested by social workers were numerous and in some cases, participants had to restart new programs. In considering all of the tasks the participants were presently engaged, the Crown ward timeline of one year, according to participants, was much too limited in time as it did not allow participants to heal from their abuses and struggles. This timeline was continuing to drive a wedge between children and their parents. In accommodating the needs of participants, the Crown ward timeline must be revisited and extended by policy-makers of the Child Welfare System.

Two, it was also important to several participants that more Aboriginal Staff; qualified
social workers with an Aboriginal ancestry, be hired by Child Welfare agencies. The majority of employees in the Child Welfare System are White, middle-class workers (Swift, 1995). Even though participants felt Aboriginal workers were following the same Child Welfare standards as their non-Aboriginal colleagues, some participants believed that Aboriginal workers were easier to work with; were able to relate to Aboriginal culture; and they did not use technical terms against them. Other participants perceived Aboriginal workers to have the same bureaucratic mindset as non-Aboriginal social workers. But Aboriginal workers would take the time to phone the participants at home, although they did not appear to be helping participants to get their children back.

The above are the two service responsibilities of the Child Welfare System identified by the participants. The participants also described how First Nations communities can further support them by establishing their own Aboriginal informed Child Welfare System.

Participants first described how many First Nations communities were struggling with the tragic consequences of severe alcohol abuse, drug abuse, solvent inhalation, HIV and numerous other social and medical problems. Participants felt it was the responsibility of Chief and Council to take charge of and the responsibility for the crisis in their First Nations communities. Addiction to alcohol for instance, was acknowledged by participants to be seriously interfering with the parenting abilities of many young adults; resulting in so many Aboriginal children being placed into the Child Welfare System. A zero-tolerance approach by Chief and Council against the transporting of alcohol into the community is in effect in only some First Nations communities. By declaring the community ‘dry’, and if this bylaw is rigorously enforced, could result in a decrease of alcohol abuse in the community and hopefully reduce the number of children involved with the Child Welfare System.
Enforcing tough consequences on parents may assist to prevent children from entering and sometimes dying in the Child Welfare System. Reserve Band members must become educated about the toxicity of addictions. Prevention measures that reinforce the parenting responsibilities of Band members must be developed and conveyed. It was critically important for women as mothers to learn about their responsibilities because they played a direct role in ‘promoting healthier lives for their children.’ Community programs devised to support parents, both mothers and fathers, were a priority for participants because in some communities these programs did not exist. Participants described how ‘alienated’ they felt as mothers because there were no supporting resources that could help them in caring for their children. In requesting support from Chief and Council, the pleas of participants were often ignored. Some participants felt that Aboriginal leaders tended to be confused about their role in addressing ‘prevention and protection services’ for children. But a few participants however, viewed Chief and Council as mere politicians who had no business ‘interfering’ with Child Welfare issues. A large majority of the participants clearly wanted Chief and Council to take an active role in their disputes with the Child Welfare System.

In extending these responsibilities to Chief and Council, participants discussed how it should be the goal of First Nations leaders to begin thinking about creating their own Aboriginal ‘informed’ Child Welfare System. Participants throughout this study have been adamant that the existing social work practices that make up the present Child Welfare System have been orchestrated to keep them apart from their children. Instead of being supported by social workers; existing Child Welfare practices and policies were used against them. The creation of an Aboriginal informed Child Welfare System, for Aboriginal parents and their children, was envisioned for the future. But the philosophical base from which to construct this unique
Aboriginal Child Welfare System must be explored and then ratified by First Nations leaders and respective communities. According to the participants, it was clear that this new system would have to be governed by the community as a whole. That protecting children from harm, and ‘punishing’ those individuals who harm children, should be handled by the community.

Presently, provincial delegated Aboriginal Child Welfare agencies do exist and they are located in many First Nations communities across Ontario. It is significant that these agencies are required to follow the Child and Family Services Act of Ontario (2000), and to use the Eligibility Spectrum Handbook. To reiterate, the Eligibility Spectrum Handbook (2006) assists social workers to diagnose the type of abuse that a child may be experiencing and it defines the type of services that parents and children must receive. In contrast, an Aboriginal informed Child Welfare establishment would be unique as it would incorporate Aboriginal informed philosophy and values, and also recognize a distinct Aboriginal culture. This was the vision that participants had of an Aboriginal informed Child Welfare System for future parents and their children.

Participants have projected how social workers, the Child Welfare System and First Nations communities must support their parenting identities. Supporting the identities of parents can be realized through the preceding responsibilities that participants have acknowledged. The responsibilities have pointed out how existing practices in the system and in First Nations communities can be transformed to encourage participants to be aware of their responsibilities as parents. The responsibilities have provided an alternative conduit from which to encourage participants to take up ideal parenting standards from their culture. Participants who were involved with the system have delineated how their responsibilities as parents must be informed by their culture. They also emphasized how existing dominant social work practices were not recognizing or conducive their needs as Aboriginal parents.
The responsibilities for parents, social workers, for the Child Welfare System and First Nations communities have been described as an integrated effort to show how they can promote the identities as parents. These responsibilities have been analyzed from micro, meso and macro perspective as the influences of society upon the identities of participants are diverse and multifaceted.

Participants, being presently involved in the Child Welfare System, have described how their lives have changed. These responsibilities are necessary in supporting the identities of parents and to alter the existing conditions that participants are experiencing through present policies. It was important to encourage participants to analyze their situations and to address how the influences of mainstream society were a form of identity genocide. This analysis of how the Child Welfare System can support the identities of participants was informed by participants themselves. They have extensive experience with this System and how it could be transformed to meet their needs and the needs of Aboriginal parents in the next “seven generations” (White Bird, 1998, p. 45).
My point of view as an Anishinabekwe researcher, regarding the salient features of this study and the limitations are provided; combined with the inclusion of possible research topics. In understanding the contexts of Aboriginal history, tradition, and assimilation for Aboriginal parents, especially women, it was imperative to begin the study from the environment that they were socially located – the Ontario Child Welfare System. Through my own practice as a social worker, I had witnessed Aboriginal parents to be numerically over-represented in the Child Welfare System. Their concerns and aspirations for their children were not necessarily understood, valued or acknowledged by the System. There was not an evaluative mechanism in place to encourage Aboriginal parents to offer their perspectives regarding the seemingly foreign practices and policies of the Ontario Child Welfare System.

The concept of identity was paramount to this study, as it was important to start from the present realities of the participants who were in the process of healing from past and present abuses and reconnecting with their culture. The study participants, being Aboriginal parents, were encouraged to identify and to share their Child Welfare System experiences and to develop proposals to improve the parent/worker relationship.

This study was created to provide a space where Aboriginal parents could begin to share their perspectives and to assess the existing conditions of the Child Welfare System. The participants were asked how this system could contribute to the support of their identities as caregivers and parents. Participants in this study have identified how their identities as parents can be understood through an Aboriginal-based theory and through Aboriginal-based support and policies. The Aboriginal-based theory which had emerged from this study is one that I
identify as the Critical Ekweism framework. This framework was culturally appropriate to guide this study since it was grounded to the ideologies of Aboriginal people. In advancing the needs of Aboriginal people collectively, the Critical Ekweism framework posits that the needs of Aboriginal parents must be inclusive and recognized by the Child Welfare System.

The Critical Ekweism framework was used to accentuate the worldviews of Aboriginal people and how social change must be expedited in a collective effort to be inclusive of all Aboriginal people. This framework is informed by the traditional Medicine Wheel format, and assumes that the vast majority of Aboriginal people are wholistic in nature, are constantly changing, are aware of their traditional culture, and have both subjective and objective realities. The structuring of Aboriginal identities is similar because the concept of identity is an extension of participant understanding of nature and traditional Aboriginal culture.

The mandate of the Child Welfare System is understandably to act upon the ‘best interests of the child’, but the alienation and depreciation of Aboriginal parents by social workers will not produce an outcome beneficial to the children, the System, or Canadian Society overall. These same Aboriginal parents have been racially marginalized throughout their lives and are entitled to fair treatment and respect.

The legitimate concerns of participants are often marginalized by social workers as a result of a systemic focus entirely directed upon the predominant status quo ideology of being a ‘good’ parent.’ Aboriginal parents and their socio-economic realities appear to be not a good fit when viewed through this lens. It provides a distorted view of many Aboriginal parents as being inferior, ineffective caregivers who are incapable of caring for their children. This mainstream stereotype of Aboriginal parents has been ironically the product of mainstream policies - the historic oppression and the attempted assimilation of the Aboriginal people by the State.
In terms of social change, Aboriginal people as a collective group have been subjugated to a policy of assimilation under the Indian Act. The Government of Canada for decades, has forced many Aboriginal children to be taken from their parents and become inmates of Church-based, Residential Schools. In these Schools, many children would experience horrible types of criminal abuses, corporal punishment and be constantly indoctrinated with Euro-Christian values and behaviours. It was through Christian teachings that the identities of Aboriginal children would be for the most part extinguished, and children made to feel shame for their perceived inferior Traditional Aboriginal culture. I can empathize with the latter part of this because I was there.

It was not a stipulation, but a co-incidence, that all of the participants who were of middle age and older in this study had Residential School experience. But all participants had struggled with providing care for their children because they had grown up, for the most part, away from their traditional culture and their parents. Foster homes and Residential Schools were not conducive to learning appropriate parenting skills. The participants were also struggling to re-create their identities through their traditional Aboriginal culture.

Participants also identified the importance of Aboriginal languages. During the study, it was revealed that most of the young participants could not speak their first language. How Aboriginal languages can be encouraged and retained through the Child Welfare process needs to be addressed; Aboriginal languages are important in the process of strengthening identities.

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7 As a young child, I was placed in a Residential School for several years. I was given a number, being the school rule, which had to be displayed on my clothing at all times; the staff knew me by my number, I was not addressed by my name. The school staff consistently displayed no affection or encouragement toward inmates, and very little concern regarding my well being. But in contrast to many of my peers, I am fortunately a Residential School survivor.
One way of understanding and strengthening the identities of Aboriginal parents are through an Aboriginal-based support network and new Ontario government Child Welfare policies. This study has revealed how the parenting responsibilities are displaced by mainstream policies over time (Miller et al., 1980). Despite this, the participants are in the process of rebuilding and healing their identities. The type of needs that social workers must be familiar with when working with Aboriginal parents in the Child Welfare System has been uncovered in this study and these findings will assist to enhance the knowledge of the profession (Ontario College for Certified Social Workers, 1992). While provincial policy exists to protect Aboriginal children from various abuses, it is also important to become aware of the needs, “different statuses, roles, capabilities and aspirations” (Costin, 1985, p. 197) of Aboriginal women and men as parents. In this study, Aboriginal parents have assessed the present conditions of the Child Welfare System and they have identified a set of responsibilities that must be considered in order to strengthen their identities at the micro, meso and macro levels.

The responsibilities that participants have identified reveals how they could enhance their own identities as parents and it also points to how the Child Welfare System and First Nations communities can support their identities. What does this mean for the Social Work Profession and for First Nations Communities? Ideally, the responsibilities that participants have identified aim to create awareness for all concerned; that the existing conditions of the Child Welfare System have not effectively served Aboriginal parents. Second, in acknowledging the ‘misfit’ between the Child Welfare parenting ideology vis-à-vis Aboriginal parents could further be clarified through dialogue with all parties concerned. Third, the Child Welfare System must be prudent in how their practices and policies must not sustain the same assimilation strategy that has denigrated Aboriginal people as a result of the Residential School System. The Social Work
Profession must be willing and able to be part of the healing process.

The limitations of this study are multi-fold. The perspectives and opinions of social workers and the First Nations leaders were not explored and documented because it was beyond the scope of this study. This study was solely designed to encourage Aboriginal parents to begin sharing their experiences, whether positive or negative, about the Ontario Child Welfare System. It is clear to me that the perspectives of Aboriginal parents regarding this System is of contemporary significance, especially in terms of their Aboriginal self-identity; a focus that has been over-looked in the field of social work. Due to a group of Aboriginal parents, this study provides an alternative perspective to the existing conditions of the Child Welfare System. Other parents involved in the Child Welfare System may have had similar experiences; the historical situations of Aboriginal people are different and unique. The findings of this study reflect the realities of a group of Aboriginal women and men at a certain point in their lives.

Since there is no mechanism in place for participants to address their concerns about the Child Welfare System, it is fortunate that the participants of this study have contributed voluminous data that now requires further research. The Crown ward process for instance, must be investigated in-depth by social workers and Child Welfare policy-makers. Furthermore, the Customary Care section of Child and Family Services Act (2000) has special considerations should the child be removed from the parents, this act falls short. This act does not identify how the system can support the needs of parents, when the system has the dual responsibility of meeting the needs of both children and parents.

Participants have also identified the importance of Aboriginal languages. During the study, it was revealed that most of the young parents could not speak their first language. How Aboriginal languages can be encouraged and retained through the child welfare process needs to
be addressed. Aboriginal languages are important in the process of strengthening identities.

Based on my first-hand knowledge of First Nations communities, more research is required of how Aboriginal Community leaders can support parents; perhaps by creating an independent committee that could intervene, support and advocate for Aboriginal parents involved with the Child Welfare System. Participants recognized the need for an Aboriginal informed Child Welfare System that would be congruent to the needs and aspirations of Aboriginal people and their families. Further research is required regarding this proposal.

This study has revealed how the Child Welfare System tends to purposely fragment the parenting identities of Aboriginal women and men during a time when these parents are in the process of rebuilding and healing their identities. In addition, the lens that social worker use to understand Aboriginal women and men also contributes to the marginalization of Aboriginal parents. It was interesting that Marion believes that a lack of information and the marginalization is intentional; so that Child Welfare Workers can keep Aboriginal parents in the dark where they are most vulnerable, if not controllable – Who are you “in the dark?”

In closing, I honour the contributions of the study participants with a selective response from Marion regarding the study process:

“The most important thing...for Native women [is] we need each other especially through these things that in this sense of asking for help, is shameful when you come from a place of need. When you come from poverty, asking means begging, or having to lower your head. I had to [personally] learn through a lot of hard work that these circles are here to heal and would like to say ‘Miigwetch’ for this...circle. I've been looking very forward to meeting you because I need information so that I can continue this battle because we are just not educated enough on these loopholes that just seem to always be there, and you're jumping through these hoops and no matter how high you jump it's not enough because [workers] are not giving you the education you need to be able to fight a fair fight. I am thankful that this circle is being done...anytime I meet other women that can identify with me because it makes it easier to talk. I don't feel judged and don't feel like I'm carrying something. I don't have to be ashamed of what...my mistakes...have me carrying around which is a lot of shame and guilt. It'll be...life time...work but it makes it easier when I'm here with other women. It's like your cries don't go unheard...so, Miigwetch” (Marion).
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Appendix “A”: Recruitment Flyer

Research Opportunity

Must be 18+

Are you an Aboriginal woman?

Are you involved in a child welfare agency?

Are you interested in sharing your experiences about how the child welfare system has affected you as a parent, a client, and a woman?

To participate in the first round of discussions please contact Rose, or leave a message before February 28, 2005

at (416) 946-0523

Miigwetch!!

Small Honourarium Offered
Appendix “B”: Consent Form

[Location] - Aboriginal Women Interviews

Research Project Title: Power and Identity: Native women clients discuss the child welfare system.

Researcher: Rose E. Cameron, PhD Candidate, under the supervision of Dr. Sheila Neysmith, PhD Supervisor, the Faculty of Social Work, University of Toronto, Ontario.

I, __________________________, understand, and it has been explained by Rose E. Cameron, a PhD Candidate at the Faculty of Social Work, the University of Toronto, that she is conducting a study of the experiences of Aboriginal women clients in child welfare.

I understand that I will be participating in either a ‘sharing’ circle or in an individual interview. The ‘sharing’ circle will have a group of four to six Aboriginal women that will last around one and a half to two hours. The individual interview will last around one to an hour and a half. I understand that both the ‘sharing’ circle and the individual interviewing processes will be audiotaped and later transcribed. The significance of the medicine tie has been explained to me and I understand that it is my decision to either receive it or not. A $20.00 honorarium will be given to me to cover any transportation, or babysitting expenses related to this circle discussion. I will still be paid the honorarium if I decide not to answer any questions that I don’t want to. I am aware that the audiotapes and the transcripts will only be used by Rose E. Cameron and her supervisor, Dr. Sheila Neysmith. No other person will have access to them except if any information is disclosed about child abuse and neglect. I understand that Rose E. Cameron is required by law to inform proper authorities. The audiotapes and transcripts will not have my name or any other identifying information on them. A fictitious name will be used instead. All data will be kept on a secure computer which will be password protected. Access to the computer will be secured by use of specific passwords known only to Rose E. Cameron and Dr. Sheila Neysmith. The completed ‘sharing’ circle and individual interview data, schedules, transcriptions, audiotapes and other research data will be stored in a secure, locked cabinet at the researcher’s residence. No information will be released or printed that would disclose my personal identity unless as explained earlier for any child abuse and neglect disclosures. I understand Rose E. Cameron may re-visit me to clarify any information that I have provided if I want to. If not, that is okay too. All such research data will be destroyed five years after completion of study. I understand that the results of this study will be used to inform the social
work profession and community, education scholars, social service providers and policy-makers about the issues confronting Aboriginal women clients in the child welfare agency. The information will be presented at conferences, and published in journals. I understand a list of local counselling resources that I may want to access for myself will be provided.

Any questions I have asked about the study have been answered to my satisfaction. I have been assured that no information will be released or printed that would disclose my personal identity and that my responses will be completely confidential. I am aware that the information shared during the sharing group discussions is confidential and is not to be repeated to those outside of the group. However, I understand that there is a limit to the researcher’s ability to ensure the confidentiality of information shared during these sessions. I have been informed that I might become distressed in sharing my experiences with the group or to the researcher. If I should become distressed, the researcher will halt the session to console with me, and we will re-continue with the session when I am ready to do so. Any risks or benefits that might arise out of my participation have also been explained to my satisfaction. In particular, I am aware that my decision to participate or not will not affect the services that I receive from my local child welfare agency. I understand that my participation is completely voluntary and that my decision either to participate or not to participate will be kept completely confidential. I further understand that I can withdraw from the study at any time without explanation. I hereby consent to participate in this study.

Date: ___________________
Participant: _________________________ Researcher: ___________________________

I will contact Rose E. Cameron, PhD Candidate, if I have any questions about this study at (xxx) xxx-xxxx.
Appendix “C”: Research Procedures Information Form

Dear Niichii Anishinabe-kweg (fellow Aboriginal women and interested spouses and partners):

My name is Rose E. Cameron. I am an Ojibwe woman and a PhD Candidate at the Faculty of Social Work, University of Toronto, Ontario. As you are aware, I am conducting a study of the experiences that Aboriginal women have with the child welfare system.

The purpose of the study is to find out more about the meanings of power and identity by listening carefully to your experiences as an Aboriginal woman/man who is presently receiving services from a child welfare agency. For example, power can be viewed as, 1) how one group of people may have control over another group of people (power-over-other(s)); 2) how we as individuals are able to use the skills that we have to help ourselves (power within oneself); and 3) how can we work with other groups of people cooperatively as equals (power with others). For identity, this might include examining, 1) how we individually see ourselves?; and 2) how we might individually reply if someone asked us, “who are you?” The information that I will be receiving from you will be used to explore and to understand some of the issues that Aboriginal women are experiencing in child welfare. This information will be used to examine how these experiences may be different for other Aboriginal women/men who are involved in the child welfare system. A twenty-dollar honourarium, and a medicine tie will be provided for you. The medicine tie symbolizes the acknowledgement of my respect and appreciation to you in sharing your knowledge with me. You may decide to take both the honourarium and the medicine tie, or just the honourarium. It is your choice.

The circle methodology and if needed, individual interviews have been integrated into this study to make the study process and the social setting more sensible to Aboriginal ways of knowing and doing. I need your assistance in understanding a topic that I would like to know more about. In recognizing your first-hand knowledge about the child welfare system, I consider you to be an expert, someone who is very familiar with what is happening in a child welfare agency. I would like to talk to you about the child welfare system. I am conducting a ‘sharing’ circle, or if needed an individual interview in which I will be asking you some questions and I would your feedback. Your thoughts, ideas and opinions about the study at hand is appreciated. In the event that a distressed situation should arise during the sharing circle discussions or the interview process, the researcher will halt the discussions to provide ample time to console individually the distressed participant. The discussion or the interviewing process will continue when the participant is ready to proceed.
For both the ‘sharing’ circle or the individual interview, a series of questions have been planned. You may respond in both the Ojibwe and English languages. The first set of questions in the Interview Guide will ask you about yourself, and the second set of questions will be about your involvement with the child welfare agency. For the ‘sharing’ circle, we will be passing around a ‘talking’ rock to everyone in the circle. When you receive the rock in your hand – you will have the opportunity to speak about, or answer the question that is asked of you. I will periodically ask you additional questions while you are speaking from time to time. Once you have finished speaking, you may pass the rock to the next person on your left. When we have finished going around the circle once, we may proceed to pass the rock to everyone for a second or third round if you wish to speak to the issue further. If you wish not to answer a question, please say, “pass” and give the rock to the next person. In group discussions like this one, should you choose not to answer a question and “pass,” that is okay even if others are answering that question. We will take turns speaking and this process will be audiotaped. If for any reason you are unable to attend the ‘sharing’ circle, you may request to continue participating in this study through an individual interview if you want to.

I would also like to remind everyone that the information shared during these sessions is confidential, and is not to be repeated to those outside of the group. However, there is a limit to my ability to ensure confidentiality of information shared during these sessions.

Let me first begin by giving you the medicine tie. The honorarium will be provided to you when we are finished with the ‘sharing’ circle or the individual interview. Please feel free to help yourself to the refreshments.
Appendix “D”: Interview Guide

SECTION I: IDENTITY (Probes “•••”)

1. Can you tell me about yourself?
   - Where are you from?
   - Aboriginal Affiliation?
   - Schooling/Education?
   - Language
   - Roles
   - Age?
   - Hobbies?
   - Family? (Siblings and own family)
   - Other?

2. If I shared the many identities that I have of myself (for example, I am a mother, student, sister, aunt) with you, how would you share who you are to me?
   - Parent/Mother?
   - Woman?
   - Other identity/ies?
   b) Which one is more important to you?

3. Do you socialize or get together with other Aboriginal women/men? Why is this not/important to you?

4. Can you describe the person(s) who, you think, has played a significant role in helping you to become who you are? b) How did this person(s) help you to become who you are today?

5. In growing up over the years as an Aboriginal woman/man, can you describe how Aboriginal culture has played a role in your life?
   - Is Aboriginal culture important to you?
   - Who encouraged you to become familiar with your culture?
   - What types of cultural activities are you involved in?
   - Frequency of these activities?
   - How has Aboriginal culture played a role for you as a _____?
     1. Parent?
     2. As a woman/man?
     3. In your interactions with other Aboriginal women/men?

Thank you for sharing your knowledge. The next set of questions asks about your involvement with the child welfare agency. If you don’t feel comfortable in answering any of the questions, please say, “pass” to any of the questions.
SECTION II: YOUR INVOLVEMENT WITH THE CHILD WELFARE AGENCY

6. What circumstance brought you to become involved with CAS? For example, in experiencing the removal of your children from your care to CAS, what does that mean to you?
   - Could you identify the category that best describes your situation? (Neglect, Physical, Emotional Abuse, Sexual, Don’t know?)
   a) How has your involvement with CAS changed you?
   b) How have you been able to maintain ‘who you are’ or your sense of identity while being involved with CAS?
      - How have you been able to deal with this situation?
   c) From our earlier discussions on how we individually see ourselves, which identity is most important to you when dealing with the child welfare agency (Include responses from Question 2)?

7. What do you find helpful in the child welfare agency? Could you provide Examples?
   - With the worker?
   - With other non/Aboriginal women?
   - Non/Aboriginal Cultural Practices?
   - Other?

8. What do you find not helpful in the child welfare agency? Could you provide Examples?
   - With the worker?
   - With other non/Aboriginal women?
   - Non/Aboriginal Cultural Practices?
   - Other?

9. In looking at your own experience in CAS, what do you think would make it easier for us, or other Aboriginal women who may become involved with this agency? What things in CAS do you think need to be changed?
   - Worker-client relationship?
   - Programs?
   - Social policy change?
   - Within Self?
   - Other?

10. Do you have any last thoughts, questions or comments before we end our time together?
    KiiChii-Miigwetch (Big Thank you) for taking the time to share your experiences with me.

    END OF ‘SHARING’ CIRCLE