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Through Silence We Speak: Approaches to Counseling and Psychotherapy with Canadian First Nation Clients

Arthur W. Blue
Professor Emeritus, Brandon University, Blue@brandonu.ca

Wes G. Darou
Canadian International Development Agency

Carlos Ruano
St. Paul University, Ottawa, Canada

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Abstract

Canadian First Nations are composed of 53 different cultures. Their key forces involve a sense of community, respect for elders, and deep values and religious beliefs promoting growth. Counselling issues include assimilation, post-traumatic stress, addictions, cultural identification, health, and issues caused by societal rupture. Non-Native counsellors may be seen as unhelpful or even potentially harmful to community strengths. Counselling methods need to be based on deep respect, benefit to the community, spirituality, and values. Skills include listening in a way that gives meaning to both verbal and nonverbal messages, growth from one’s own hardships, and being helpful versus using technique.
Introduction

The purpose of this chapter is to give an overall view of current approaches to counselling with Canadian First Nations clients. In our view, these approaches must combine traditional sources of belief systems with current and well-tested models of counselling and psychotherapy in order to better serve this population. We will proceed in three segments: a brief description of Canadian First Nations populations from a socio-historical perspective, a discussion of specific therapeutic models, and experiential knowledge acquired during the course of work among First Nations, ending with the relevant conclusions.

Socio-historical background

It is estimated that there are some 633 First Nations communities in Canada with a total population of about 1.4 million, speaking 53 languages (Government of Canada, Aboriginal Affairs and Northern Development Canada [AANDC], 2014). They account for about three percent of the population of Canada, with similar statistics for the United States. It is often stated that First Nations migrated to North America about 10,000 years ago. In fact, their history in the Americas appears to be much longer than that: 15,500 years according to Hodges (2015), and possibly up to much longer.

The indigenous peoples of Canada generally refer to themselves collectively under the term First Nations or Native People. This group includes the Inuit, Dené, Métis, and 49 distinct Amerindian cultures such as the Dakota, Cree, or Haida (Government of Canada, AANDC, 2014). It is difficult to make generalizations about counselling such a diverse group of people. For example, the Algonquin language and the Mohawk language have literally as much in common as English and Mandarin, yet the two nations occupy adjoining territory. The two cultures are equally diverse: the Algonquin are traditional hunters living in small villages with patrilineal structures, while the Mohawk are farmers living in larger towns and are matriarchal.

Just choosing a name to describe the people can be a challenge. For example, the term aboriginal is not acceptable in Europe; indigenous is not acceptable in China or South Africa; and the term Indian, while acceptable in the USA, is not in Canada. To avoid further complications, we follow the nomenclature in use by Canadian First Nations themselves because we believe that it is an inherent right of peoples to choose their own name.

Because of the cultural differences across groups, most people refer to themselves by their tribal names today. Assimilationist processes have resulted in a loss of self-identification and collective awareness on the part of some Amerindian populations. For instance, of the estimated 60 Native languages that were spoken in Canada at first contact, seven have disappeared and another 50 are endangered (York, 1992). Nevertheless, during the last 20 years, some people have made an important effort to reverse the trend.

The Métis are a First Nations group that maintains a separate identity. They are the result of processes of creolisation between Amerindian populations and French traders dating from the late 16th century. They are located mostly in Manitoba, Canada. Their language, Michif, is different from other First Nations in that it is an amalgamation of French
and different First Nations languages. Their final status in constitutional terms is still being litigated before the courts. It will be many years before Métis can at last gain the recognition and parity of ancestral claims that other First Nations have under the Constitution Act of 1982 (The Canadian Press, 2014). The Métis struggle is a different and particularly challenging history of oppression that has coloured their demands for recognition of ancestral and land rights (Adams, 1995; Sealey* & Lussier*, 1975). White McClanahan (2001) stated:

Overly generalized labels, or ethnic glosses, are often used to identify and/or discuss ethnic, racial, and cultural groups. I realize the inaccuracies inherent in the use of these ethnic glosses and do not mean to denigrate any group with their use. In this paper, the terms American Indian, Native American, Native, and Indian will be used interchangeably. The terms European American, Euro-Americans, Whites and White Americans also are used synonymously. Whites and European Americans are descriptive terms appropriate in the mixed cultural environment of the south-eastern United States where the study was conducted. The terms ethnic and cultural will be used interchangeably to avoid the ethnic glosses inherent in use of the terms race and racial. (p. 5).

The current Canadian reserve system was the product of a long series of historical occurrences. Much of what is Canada today was ceded in a series of treaties beginning in the 17th century (Dickason*, 1992). The major effort in treaty development, however, began in the mid 19th century. The main purpose of these treaties was to attempt to extinguish aboriginal land title and open the land for colonization.

In many of the treaties, lands were held aside for First Nations communities. These became known as Indian reserves. Reserves have existed in Canada since the time of colonization. The majority of First Nations people still live on reserves. The balance has moved to urban settings mostly for employment or education. C. King* observed, “The reserves are the lands that the Indians reserved for their own use when they ceded their lands to the Crown” (personal communication, August, 1999). Life on reserves was a disaster from day one. As the Blackfoot Gallery Committee, Glenbow Museum (2001) wrote:

The old reserve houses were not like our tipis. They were square and air did not circulate well within them. There was no insulation, so the houses were very cold in the winter. Many of our people became sick from epidemics of whooping cough and tuberculosis. (p. 70).

Previous estimates on pre-European contact placed the population in the area known today as Canada between 500,000 and 2 million; these previous population estimates are now being challenged by more recent research which, aided by better geophysical and settlement analytical tools, is revising these pre-contact population estimates by orders of magnitude (Mann, 2011). There is increasing evidence of extensive human manipulation in pre-Columbian landscapes as well as large scale, previously unknown urbanization works

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1 Asterisks indicate a First Nations author. Our apologies to those we have missed.
Regardless of changing population estimates, the facts of post-European contact annihilation of entire groups throughout the Western Hemisphere have been documented for some time. In Canada, the Beothuk of Newfoundland was extinguished; numerous other nations across North America were also lost (Dickason*, 1992; Larsen, 2000, June).

In the 18th century, First Nations became the first recorded victims of what in effect may be considered biological warfare when they were given smallpox-infected blankets. The Government of Canada had de facto policy of starving prairie First Nations off their land. By far, the most systemic and sustained policy to deprive First Nations of their cultural and psychological attachments was the Indian Residential Schools. In its report, the Truth and Reconciliation Commission (TRC) of Canada (2015) writes about the on-going effects of colonialism, the "policies of cultural genocide and assimilation" and the huge rift this has caused between Aboriginal and non-Aboriginal people. Over six years, the TRC of Canada collected 6,740 statements from witnesses and recorded 1,355 hours of testimony. The report contains 94 recommendations presented in Ottawa in 2015 amidst events and ceremonies attended by thousands. The Commission was a requirement of the Indian Residential Schools Settlement Agreement reached in 2007, the largest class action settlement in Canadian history. One of the authors of this article (Ruano) was present at the TRC report presentation and the accompanying commemorative events. As the TRC of Canada (2015) states:

For over a century, the central goals of Canada's Aboriginal policy were to eliminate Aboriginal governments, ignore Aboriginal rights, terminate the Treaties and, through a process of assimilation, cause Aboriginal peoples to cease to exist as distinct legal, social, cultural, religious and racial entities in Canada. The establishment and operation of residential schools were a central element of this policy, which can best be described as “cultural genocide.” (p. 1).

With such a legacy of Apartheid-like polices it is not unreasonable to consider Canada’s treatment of First Nations as one of systemic violence and unrelenting oppression (Brave Heart* & DeBruyn, 1998; Chrisjohn*, McKay* & Smith*, in press; Gone*, 2013b; King*, 2012). According to Daschuk (2013), another lingering legacy of colonial practice is the policy of both provincial and federal governments refusing to support the establishment of aboriginally controlled and structured K-12 educational facilities throughout Canada. As the Chiefs of Ontario have stated:

In Canada, there is a two-tier education system: one for First Nations students, and the other for everyone else. While segregation and apartheid has been eliminated in the rest of the developed world, Canada is the only nation that retains this separate but unequal system that is based on two factors: race (First Nation) and residency (on reserve). (Assembly of First Nations, 2012, p. 7).
At the same time, aboriginals fought in both world wars in significantly larger proportion than any other group in Canada. Yet unlike their American counterparts, they were denied basic rights such as voting, benefits, or social security upon their return from service (Jenish, 2000).

The challenges faced by the 633 nations relate to issues of rural life, urbanization, health, education, gender issues, business development, infrastructure, good governance, poverty reduction, and preserving environmental resources. Historically, as today, the Government of Canada’s approach to First Nations has been one of paternalism and assimilation, reducing their autonomy and causing socio-economic hardship (Mercredi*, 1999).

Our position in this chapter is that the key personal issues First Nations face in Canada are the result of injustice. On a systemic level, resolving psychological issues in a sustainable and enduring way will require resolving the injustices.

There is much discussion about multi-generational trauma among First Nations. This goes both ways. The unbridled aggression First Nations faced at the hands of the land-grabbing colonizers could be traced back to the colonizers unresolved trauma from the period where they dealt with the great plagues of Europe. To state this in another way, the colonizers’ genocide may have been used to inflict their own trauma and loss in Europe onto the First Nations People as a form of displacement.

Models of Counselling

Many years ago, with a newly won master’s degree in hand, Arthur, better known as Art, Blue began an internship at a southern Idaho mental hospital where he was initiated into the art of patient contact and the practice of psychology. Many of the outpatients came to the hospital from the nearby reservation. A medicine man known to Art since childhood simply as Hosie provided traditional Native American helping services to the population. Half a century later, Art can still picture him when he visited the hospital a few weeks into the internship. He knocked politely on the door, then entered, and sat his bulky frame in a chair. Roughly cut, shoulder length grey hair framed his ruddy, aging, and chubby face. He did not speak nor even look at Art. He just sat, completely at one with the silence in the room.

Art had been seeing people with the usual range of diagnoses: conduct disorder, depression, and alcohol abuse to name a few. Often, he found, a client would refer to relationships within his extended family as part or all of the problem. To Art, it seemed obvious and appropriate that this sort of difficulty lay in the domain of the Medicine Man. He would then suggest that these people gather a piece of cloth, some tobacco, and sage as a gift and in the evening visit Hosie. Then Hosie came to visit Art.

Art was pleasantly surprised to see him and thought, “Gee, this is the way professionals work – good referrals, then case conferences.” Though Art expected a case conference, he received a lesson instead. After thirty minutes of emptying, relaxing silence, Hosie spoke.
“I come to talk to you about all those people you bin sendin’ me.” He paused. Art was expectant, thinking of diagnoses and treatments. Then Hosie phrased the lesson as follows: “I can no longer handle all the people that yer sendin’ me. Perhaps you should start dealin’ with the problems that you are trained to work with, and I will work with the spiritual problems that the people have. I can’t do my work and your work too. Not enough time to do both.”

As Art and Hosie continued to talk, it became obvious that Art was interpreting all problems as spiritual. To become an effective member of a treatment team, he needed to accept responsibility for the psychological aspects of the problems that patients presented and aptly distinguish those from their spiritual dimension. His work with Medicine people has continued through the years since Hosie expanded his awareness and increased his knowledge and effectiveness. Gone* (2013a) gives empirical support to this approach of partnering with spiritual leaders.

There was a city woman, single, well off, and with a master’s degree in psychology, working in a Western Canadian reserve. She had a little trouble adapting to the Native environment. One day the Dakota elder, Eli Taylor*, took her aside and said, “Thank you dear, for all the hard work you have done for the Native people in our community over the last three years.” She thanked him profoundly; it’s rare to get a direct compliment like that from an elder. “You have really added a lot to our community,” Eli continued, “and we appreciate it very much.” She thanked him even more profusely. Eli continued: “Now, however, it is time for you to go home and help your own people.” The message was very clear and she understood the subtext. She got a new job.

An equally idiosyncratic response, but more encouraging, happened when a life skills counsellor discreetly asked elder, Zack Comtois, why the community was “putting up with all the weird stuff” he was doing. The elder answered, “Because when you walk home, you pet the dogs and play with the children.”

We have come to realize that much of the counselling that happens with First Nations people is cross-cultural, whether it be between two people of two different First Nations, or whether it be between a First Nations person and a non-Native one. In our counselling practice, we have found that such a cross-cultural component of counselling takes place in a variety of contexts and under different cultural exchange paradigms (Darou, Bernier, & Ruano, 2003).

### Theoretical Principles and Conceptual Issues

#### First Nations Models of Existence

Many First Nations people believe there are clear links between the various orders of creation. They believe God created the physical world (the sun, moon). The physical world created the plant world in its own time, and the plant world in its own time created the animal world. The animals then created humans. Thus, humans are the most dependent and have in their own right created nothing. One cannot wipe out the animal world and have humans still exist; humans are totally dependent on the other orders of creation (Johnston*, 1990).
As McCormick* (2000) pointed out, European-based cultures generally have a very hierarchical, individualist worldview. In Euro-western models of creation, there is a three-level hierarchy of God, humans, and nature. God dominates humans; humans master the animals; living beings exploit the land. In the 21st century, capitalism has become a mode of regulation, in addition to a mode of production. This refers to the presence, or lack thereof, of governmental structures charged with regulating relations of economic power and limiting the abuses of unbridled economic transgressions. Under this ideology, the entire world is assumed to be a proto-market where all its inhabitants and resources can be harnessed towards further accumulation of capital without changing the ruling relations or its inequality generating dynamics (Cammack, 2005; Storey, 2007). This mode of regulation is substantially different from that of First Nations, which has been characterized as one being based on equality, connectedness, and harmony between humans and nature. From the latter’s perspective, the human is the least important and serves others, thereby contributing to harmony in life. The following are some of the salient features and agentive elements in the iconic construction of First Nations identity.

The Medicine Wheel

The unity and balance of life are represented by the medicine wheel, a symbol that is found in many Amerindian cultures (Bopp, Bopp, Brown*, & Lane*, 1984). It reflects life as a whole and is helpful for maintaining a balance between various aspects of existence. The medicine wheel also situates humans in relation to the universe as well as providing a terrestrial-based model of celestial phenomena (Faris, 1994).

The medicine wheel can, for example, offer a structure for problem solving. The Eagle of the East represents the vision and intellect (identifying issues), the Mouse of the South represents relationships (what exists now for the group), the Bear of the West represents knowledge and feelings (reactions to the current situation), and the Buffalo of the North represents physical action (what can be done) (Chevrier*, 1998). Even today, medicine wheels made of rocks aligned and placed in circles can be found all over the West, particularly on promontories and other prayer sites. These sites were used traditionally and are still sometimes used today for a ceremony of self-discovery and rite of adulthood called the vision quest. An example of an ancient medicine wheel can be found at: [http://www.medicinewheel.com](http://www.medicinewheel.com). Poonwassie* and Charter* (2001) describe the importance of the medicine wheel in healing:

The medicine wheel philosophy includes all stages of human development from birth to death and rebirth. It connects all stages with each other, with all living beings and with all life in the universe, thus providing a place of centring for each person in the cosmos. An understanding of the medicine wheel is a starting point for helpers as well as those seeking healing. (p. 66).
Elders

Counsellors can help empower their clients and the community by relinquishing their roles as experts and allow community healing practices, the elders to supply structure, and the basis for learning. The advice given by elders is *agentive* in the sense that it situates the advice as an instance of transferring power and influence by the person and on the person. Thus the advice a counsellor receives may at times be very powerful and often not what is expected. Elders have various roles, among them, *guiding agents* through a journey of self-discovery and self-actualization. Therefore, out of respect, if you ask an elder for help, you are morally obliged to follow through with the advice.

This is not to say that psychologists must abrogate their role as professionals. The elders understand this situation and will generally try not to put the professional in a difficult situation. If the question is delicate, they may mitigate it by answering with an interpretable story, a riddle, or humour.

Although all old people must be respected, simply being old does not necessarily make one an elder. Non-Native counsellors can recognize who are in fact elders by carefully observing to whom people turn for wisdom or help in troubling situations. It must also be noted that the elders are human beings and may have differing or even conflicting views about ways to help.

*Generosity*

In most traditional First Nations societies, status was gained by giving, not by hoarding. It was not the person who collected the greatest amount of goods who was respected, but the person (or family or clan) who *gave away* the most. This is seen today in the *Sundance*
ceremony, illegal in Canada for most of the 20th century, where participants and their families give away large amounts of goods, even if they are of meagre means. It is the central act of the West Coast potlatch, another ceremony that was illegal for decades. The giveaway is an aspect of a generous society.

The importance of generosity seems surprisingly stable across contemporary First Nations. However, it can cause difficult value conflicts for people working in the wage system, particularly in urban environments.

Mistapeo and its Relations to the Algonkian Unconscious

Joseph Kurtness*, or Kakwa, granduncle of psychologist Jacques Kurtness*, explains the relationship of the Mistapeo, literally, mista-napawo: great man to the religion of the Innu (Cree, Naskapi, Montagnais) (Speck, 1935). Mistapeo is a small version of yourself that lives inside you; he symbolizes your potential. Mistapeo represents an ethical factor present in the Innu soul. As Mistapeo becomes more willing and more active in the interests of his material abode, the body of the individual, he requires that the individual be honest, practice no deception, and live a pure life. In particular he is pleased with generosity, kindness, and help to others. Besides these ethical precepts, there are others directed toward the satisfaction of animal remains: ethics toward animals.

Here we have the basis of noteworthy good behaviour of the uncivilized nomads, which has caused travelers to remark upon native honesty and generosity before they have been spoiled by emulating the traders, whose examples tend to make them irreligious (Speck, 1935, p. 25).

Marie-Lise Von Franz (1964), in a book edited and co-authored by Carl Jung (1964), discussed the Jungian interpretation of the Mistapeo. In Jung's basic view of life, the soul of man is simply an inner companion, whom he calls my friend, or Mistapeo. Mistapeo dwells in the heart and is immortal; in the moment of death, or shortly before, he leaves the individual and later may reincarnate himself. Those Innu who pay attention to their dreams and who try to find their meaning and test their truth can enter into a deeper connection with the Great Man. He favours such people and sends them more and better dreams. Thus, the major obligation of an individual Innu is to follow the instructions given by dreams and then to give permanent form to their contents in art or music. Lies and dishonesty drive the Mistapeo away from one's inner realm, whereas generosity and love of one's neighbours and of animals attract him and give him life.

J. Kurtness* (personal communication, May, 1989) explained that this is the Algonkian ego, in the sense that it is the real self. It is also the superego in the sense that it will punish you if you do not follow it.

George Daniels, a Saultaux-Anishinabe elder, gave an example of working from the unconscious (personal communication, June, 1978). As far as he and his fellow elders were concerned, it is no contradiction to practice and believe in both the Native religion and Christianity simultaneously. This can be extremely difficult for some non-Natives to reconcile. Levis-Strauss (1995) explains the problem as the difference between the non-Native's linear logic and the Native's logic of the senses. George Daniels said that the practice of having
two religions at one time is particularly strong for the Métis of the plains; it also exists for some James Bay Crees who may have a town religion and a bush religion.

The concept of a Mistapeo would be understood among most Algonkian peoples, sometimes under a different name. The larger issue of communication with the spirit would be seen across Canadian First Nations in general.

White Privilege

According to Sojonky (2010), "White privilege refers to a system of advantages, benefits and opportunities experienced by White persons in our society simply by virtue of the colour of their skin" (p. 26). It privileges the White person educationally, economically, as well as occupationally, in terms of health care, housing, child-rearing, and in their reactions with various social systems. You will be shown more respect and courtesy when you go to a store, when you buy gas, when you eat at a restaurant, or when you are stopped for speeding if you are White. White people, too, can experience disadvantage, but it is not because of their race; it is in spite of it. The consequences of systemic neglect – be it from a position of racialized privilege or through barriers to acquiring knowledge, be it of a traditional or non-traditional nature – can have devastating consequences, particularly for First Nations students.

White professionals working in a First Nations context need to be sensitive and diplomatic to the feelings of resentment by clients and colleagues toward their position of privilege. Idealistic, recent graduates are often in full denial of White privilege. The very concept goes against the values of equity that brought them to the profession. This phenomenon is a zero-sum game: if a White person gains privilege then it is at the expense of someone else. Thus, while White professionals may be in denial of it, First Nations persons rarely are!

Rules of Behaviour

The late Clare Brant* (1990), a Mohawk psychiatrist, described a set of rules of behaviour of First Nations. A well-meaning, but ethnocentric, non-Native can easily misinterpret as psychopathology these ethical principles of an honest and upright Native person. These are only general trends as there is much diversity between First Nations cultures. Oftentimes, differences in ethical outlook among First Nations can be larger than the difference between First Nations and Caucasians (Trimble* & Jumper-Thurman*, 2002). These rules are:

1. Non-interference: discourage coercion of any type;
2. Non-competitiveness: manage inter-group dynamics to suppress rivalry and possible embarrassment;
3. Emotional restraint: promote self-control and discourage strong or violent feelings, a rule common in many hunting societies. C. Brant* (personal communication, May, 1995) commented that, "We (First Nations) repeatedly learn how clumsy White people are in reading apparently clear messages."
4. Sharing: generosity discourages hoarding, again a valuable trait in a remote, egalitarian community;
5. Suppress ambition, related to the above;
6. Be flexible with respect to the concept of time, also found in many groups that are in close harmony with nature;
7. Teach by modelling: Europeans generally teach by rewarding learners for successive approximations (shaping), while First Nations use modelling almost exclusively;
8. Because children are seen as treasured beings, they are not punished. Other, more respectful, methods are used. In a traditional family, this same principle would be modelled from older children to younger children, too;
9. Do not express gratitude or approval: the intrinsic reward of doing the deed is considered sufficient;
10. Correction by teasing: gentle teasing is used to comment on behaviour without causing the person to feel aggressed or humiliated. According to Brant*, shaming and ridiculing are also used in more serious situations, and may have long-term effects on how people develop the above behaviours;
11. Projection of conflict: the above rules are promoted and reinforced by moving conflict to enemies or hypothetical or religious third parties;
12. Native protocol: Native society appears loose and unstructured to a casual observer, but in fact there is a bewildering array (to the outsider) of rules about almost everything.

Restoule* (1997) would add two rules:
13. Respect is particularly important in relations with people of wisdom such as elders. First Nations clients may have been taught to not look elders directly in the eyes, but to keep the eyes downcast. Direct eye contact may be perceived as confrontational or aggressive. Attneave* (1985) associates this with the story of “He who kills with his eyes” (p. 138). Similarly, between men and women, direct eye contact can be seen as a sexually aggressive gesture. It can lead to perceived sexual transference or counter-transference. Also, handshaking is generally sensitive and gentle as compared to the non-Native firm, energetic grasp.
14. The extended family has a central importance to traditional clients. It is the extended family that cared for them when they were young and taught them to survive. A counsellor can include the perspectives of the extended family by asking how the various family members would see the client’s problem, or by even inviting some of them to participate in some sessions. Attneave* (1985) tells of a psychiatric resident who complained, “Every time I want to talk about his mother, he starts in telling me about this aunt. I never encountered such resistance to therapy!” (p. 139). Note that an article by Halfe* (1993) is dedicated to her “grandfathers and grandmothers, the elders, . . . and all my relations” (p. 1).

The family is a combination of history, culture, and biological factors which Jacques Lacan (1966), a French psychoanalyst, called the family complex. This complex is understood to be the basis of the inherited psychological identification that is passed from parent to child. According to Lacan (1966):

Some other objective traits – the organizational modes of the familial authority, the laws of its transmission, the concepts of progeny and of parenthood which are
linked with it, the laws of inheritance and succession which combine with it and finally its intimate links with the laws of marriage—these are entangled with psychological relationships and thus obscure them. (p. 804).

Empirically, in the same sense, LaFromboise*, Hoyt, Oliver*, and Whitbeck* (2006) found that protective factors for pro-social outcomes in adolescents included a sense of community support and a warm and supportive mother. The primary risk factor was perceived discrimination.

**Healthy Functioning**

Healthy functioning can be represented by a wheel showing all four aspects: physical, emotional, spiritual, and intellectual in a complete balance. The physical and spiritual are on opposite poles of a circle (East – West) and is the domain of the traditional Native medicine person. The intellectual and emotional poles (North – South) are the domains of the counsellor. Healthy functioning involves balancing all the aspects and resolving the conflicting ones.

**Successfully Living in Both Worlds**

According to acculturation theory (Berry, 1976, 2005; Born, 1970), coming into contact with a majority culture will result in acculturative or assimilation stress. Individuals under these conditions must end up choosing between several mutually exclusive strategies in dealing with the majority culture. Rudmin (2003) has given a full critique of this theory.

The assumption that there is a link between stress and assimilation is not necessarily supported by research (Rudmin, 2003; Sam & Oppendal, 2002). Research has shown that some people live easily in both worlds. These bicultural people provide an important link to mainstream culture. According to Peavy (1995), “Bicultural personhood is hard to come by” (p. 6). Yet the research of Kurtness* (1991) shows that biculturalism is attainable for some and it can provide an important bridge between integration and differentiation.

The argument in Berry’s acculturation research that people are either traditional or assimilated is at odds with the trend towards worldwide cultural exchange. We see all around us examples of bicultural people. It is not an option for everyone. In First Nations, the elders or community leaders often tend to be bicultural people. On the other hand, people can chose to be traditional and have as little to do with the majority culture as they wish. At the other extreme, they can, in a free country, choose to be completely assimilated. The deaf community provides examples similar to these two coping strategies. For the deaf, the first strategy is referred to as being a *separatist*, living only in the deaf community and having as little as possible to do with hearing people. The second strategy is called *passing*. Clearly there are major pressures from the dominant society to lose the heritage. Thus, to be bicultural, it is often essential for some people to regain traditional learnings. As Native cultures value collective and individual learning, it is necessary to work at both community identity as well as individual identity. J. Hill, an educator from the Six Nations Mohawk, stated, “If you
teach an Indian who he is, he will decide for himself where he is going” (personal communication, October, 1969).

**Resilience**

Resilience, a positive adaptation despite adversity, is a key concept for positivist psychology. In a review, Fleming and Ledogar (2008) discussed the importance of how particular protective factors interact with risk factors to support relative resilience. Resilience resources can be found in the individual (e.g. tolerance for negative feelings), family (e.g. close relationships with a caring adult), and community (e.g. access to traditional spirituality and language). In part, resilience originates outside of the individual – in the family, the community, the society, the culture, and the environment. In some cases, it originates internally; a confrontation with adversity can lead, for some, to a new level of growth. Some consider the notion that resilience is something innate that needs only to be properly awakened.

**Humour**

A sense of humour is certainly a sign of healthy functioning. Non-Natives need to keep in mind that First Nations humour is referentially different from their own. We can speak with some knowledge about Algonkian, Iroquoian, Dené, and Siouxan humour. The other Nations may very well have a sense of humour that is different yet. Below is a joke from *You’re So Fat: Exploring Ojibwe Discourse*, by Roger Spielmann (1998). Often if you tell a joke like this one, the non-Natives will look puzzled or even be offended and the Native people will break up in laughter:

There is a nasty fur trader known for his temper and suspected of dishonesty. When he weighed people’s furs, he would always lay his hand on the scales, pointing out that his hand weighed exactly one pound. One day a young trapper comes in, and when the fur trader lays his hand on the scale, the trapper pulls out his own weights that he bought in town, and announces that he would prefer to use them. The fur trader flies into a terrible rage and pulls out his gun on the trapper. The trapper shoots him dead on the spot. Afterwards, they cut off the trader’s hand. They felt pretty bad about the incident. His hand weighed exactly one pound. (Spielmann, 1998, p. 107).

**Sexuality**

Writing about the sexuality of First Nations is risky because it is a classic stereotype and the butt of many jokes. J. Kurtness* (personal communication, July 30, 2014) framed the problem as, "The old anthropologists had a strange obsession with the sex life of Indigenous Peoples. And it always seemed to end out reflecting their own motives, values, and beliefs. They confused the means with the purpose, love with sex, and vice versa.” For the ultimate example, see Malinowski (1927).

For researchers in the field, the study of sexuality in North American indigenous people is seen as an abandoned territory (Havard & Laugrand, 2014). Yet, it is an anchor point
for identity, the body, and the person. As part of colonization, civil and religious authorities in Europe tried to repress sexual desire. It made sexuality an ideal ground for projection and speculation of early European visitors to North America.

It is of course impossible to make generalisations about the cultures from Alaska to Panama, but some light can come in by removing the lens of European judgements. Sexuality is deeply embedded in the mythology of Indigenous People. Prior to colonization, Aboriginal cultures across the Americas understood that there was a gender spectrum, and Aboriginal societies featured at least three and sometimes four genders: men, women, men-women, and women-men. Men-women and women-men often entered into relationships with same-sex partners, which is why “two-spirit” is the accepted term for Aboriginal gay, lesbian, bisexual, and transgendered people (Roscoe, 1998). For the Maya, gender roles and attributes were seen as complementary rather than opposite and centred around social spheres of action rather than biological sexual characteristics. At least three female Maya rulers are known to have taken on male gender titles as rulers thus acquiring the powers inherent in the masculine aspects of the polity, while male Royal heirs signalled their maternal lineage as a succession attribute (Hewitt, 1999).

Although early explorers and missionaries judged First Nations’ societies as permissive, the traditional societies seem to have dealt with sexuality as a straightforward, direct, and obvious human characteristic. Even today, we can see clear rules and prescriptions to sexuality around marriage, pregnancy, responsibility, and parenting, all of which can be understood in a context of survival of the people (Havard & Laugrand, 2014).

Relationship to the Dominant Culture

Counselling models

A wide range of counselling models exists. At one end of the spectrum we find typical Eurocentric approaches simply being imposed on First Nations. This model is unhelpful or even harmful to the individual and erodes cultural integrity from the community. The vocational theories that were developed from the perspective of White Anglo American subjects are applied intact (Darou, 2000; Kerr*, 2001). The clearest example is the use of intelligence testing in a non-valid and poorly understood environment (Chrisjohn* & Young*, 1997; Darou, 1992).

The next level of model would be a supposedly culture-neutral one (Kivel, 2011). This model implies that all clients be treated equally regardless of culture. However, it does not take into account problems such as value conflicts or acculturation.

One step further is professional counselling (or any other professional specialty, for that matter) presented by a skilled and sympathetic non-Native counsellor. Arthur and Collins’ (2010) Culture-Infused Counselling maintains that whatever the context, counsellors encounter clients who differ from them in worldview and cultural background. The differences may be ethnicity, gender, sexual orientation, ability, age, religion, or socioeconomic status. Cultural identity impacts how people view you, view themselves, and view the world around them. This approach tries to provide a foundation for building self-awareness, self-confidence, and professional competency. It addresses community, organizational, social,
and political systems that impact client wellness and social justice. Such models are a substantial improvement.

Methods based on cultural safety move beyond cultural sensitivity and cultural competence in that it analyses power imbalances in society (Reeves, 2013). It may be difficult for clinicians to fully grasp the magnitude of injury experienced by many First Nations communities over the past centuries. Individuals need to begin to deconstruct and examine their own life experiences, including social location, experiences of disadvantage or privilege, biases about healing, and assumptions within cross-cultural encounters. This involves a continual process of maintaining self-awareness, revising one’s understandings of contemporary stereotypes about First Nations people, and repositioning oneself as an ally to First Nations causes. This bridge between helper and client may also serve to repair interpersonal damage experienced by clients through discrimination in our wider society.

Considerable research shows that First Nations clients prefer First Nations counsellors where possible (Trimble*, Fleming, Beauvais*, & Jumper-Thurman*, 2008). This is particularly important in large urban areas where First Nations are a minority. There, non-Native counsellors can inadvertently cause more harm than good, because their place as a role model interferes with people building their own cultural identity (Pedersen, 1995). From a social-psychological point of view, even if the counselling helps an individual client, it adds little to the community and may inadvertently be deleterious.

In communities where Native people are the majority, however, a few non-Native counsellors can be effective and are often sought out by clients. Here they provide local children, say, with the opportunity to interact with a person of a different culture that they would not otherwise meet. Community members can have the opportunity to observe and practice skills on White people, an all-important task when any minority group person must deal with a potentially dangerous majority group (Blue, Rogers Blue, Couchie, Darou, & Kurtness, 2008).

Sojonky (2010) worked, we presume successfully, for 5 years in a small Saskatchewan reserve. He was invited in, he deeply understood White privilege (and even allowed the community to leverage it), he did his homework on colonialism, Native history, and local culture, he knew his place, he did not meddle in Native politics (and when he made such an error, he was able to recover), he was authentic, he graciously accepted the feelings of people who resented him, he did solid and professional work, he accepted guidance and direction from local staff, he had a sense of humour, ... and he seemed to "get" Dakota humour. He seemed to glory in situations where he was the only White person present.

Methods that combine traditional healing and professional psychotherapy are rare in psychological science. According to Gone* (2010), efforts to tailor conventional psychotherapy to traditional healing practices have had a limited impact.

Perhaps it is now time for psychologists to move in the other direction as well, namely, to start with specific forms of traditional healing and to seek to tailor these to the conventions, commitments, and concerns of workaday psychotherapists (Gone, 2010, p. 210).
Residential Schools

The relationship between First Nations and non-Native Canadians, particularly the government and the churches, has been extremely difficult. The residential school system is perhaps the clearest and most extensively documented example of the attempts at genocide.

Darou’s first experience in really feeling the emotional horror of residential schools happened when teaching life-skills at a penitentiary in Manitoba in 1974. One day, the inmates spent two hours talking about the mind-numbing violence and depersonalization of prison life. At the end, everybody took a deep breath and prepared to get on with life. Then one of the Native men said, “Sure, it’s awful here in the joint, but at least it’s not as bad as residential school. I’ve NEVER been beaten like I was at residential school.”

The original mission of the schools was to Christianize and educate. Millar’s (1996) Shingwauk’s Vision recounts the effort in the last century that the elders, such as Shingwauk, made to obtain schools so that their children could learn this powerful paper-writing skill that the colonizers were using. The mission later changed to rooting out this dangerous and powerful Native culture.

There was a more satisfying period in the 1970’s, where the students began to successfully sabotage the system and get their revenge. The James Bay Cree students, Billy Diamond and Teddy Moses, produced a Cree-language Christmas pageant at Sault Ste. Marie, Ontario, that was so touching it even ran on provincial television. They slipped in critical comments and bawdy stories in the Cree language not understood by the school staff. Both Diamond and Moses later became significant political leaders.

The last Canadian residential school, the Gordon First Nations School in Saskatchewan, closed in 1996. The director of this school was the notorious William Starr who sexually abused 230 students (Treble & O’Hara, 2013).

Although the educators’ efforts to assimilate First Nations students into the dominant culture were largely unsuccessful, they did separate children from their families and thereby deprived the communities of generations of shared indigenous knowledge. Such a void will be felt for generations to come. The highly acclaimed film, “The Necessities of Life” (French: “Ce qu’il faut pour vivre”; Inuktitut: ᐃᓄᒃᑑᑦᑎᒃ [inuːjjutik‘ saq]), documents this process of rupture and disintegration of identity with tremendous emotional understanding and great storytelling (Payeur, Chénier, & Pilon, 2008).

It might be imagined that the school staff were only trying to teach the children, but were perhaps misguided in their methods. It is difficult to explain widespread child sexual abuse, starvation, and perennial violence as misguided methods (Dickason*, 1992; Millar, 1996; Thomas, 2003).

The residential school system bears a striking resemblance with the concentration camp model. During the dictatorship of Franco in Spain (1939-1975), there were schools used to house orphan children and also children of suspected Republican opponents. Their treatment as semi-slave labourers closely shadows that of First Nations. The concentration camp model is intended to strip individuals of their identity, reduce their behaviour to automaton level, and force submission and obedience to a specific set of oppressive patterns or face extinction. Ruano’s (1996, 1997, 2001, 2005a, 2011a, 2011b) personal experience in the case of indigenous communities and their treatment during counterinsurgency campaigns also shows traits of the concentration camp model of schooling.
It should be noted that the Canadian experience of residential schools was quite different than that of the United States (Thomas, 2003).

Racism

Historical racism is based on lineage and common descent. It creates a notion that a particular nation is superior to others. Historical racism needs to be dealt differently than direct individual racism, prejudice, discrimination, hate, and harassment. Canada has a long history of racism against First Nations. If we believe that we have left racism behind with colonization, then consider the following: the intentional starvation of First Nations in the 19th century to remove them from the land (Daschuk, 2014), the 1940’s malnutrition “experiments” on residential school children (Mosby, 2013), Bill C-21, the Caledonia Crisis, Kenora’s Bended Elbow, Lethbridge’s “No drunk Natives” scandal, the 1990 displacement and abandonment of Neil Stonechild left by Saskatoon police to freeze to death, two other similar deaths in 2000 and other “sharp shards of bigotry you find when you run your fingers across the Canadian mosaic” (King*, 2012, p. 186).

Whitbeck*, Chen, Hoyt, & Adams (2004), in a rare empirical study of the question, found that discrimination had a direct and negative effect on alcohol abuse in a group of American Indians. Redressing the socio-psychological ravages of colonization with participation in traditional cultural practices seems a promising approach worthy of further research investigation (Gone*, 2013a).

In his Taylor Prize-winning book, Those Pesky Redskins, Thomas King* (2012) explains the impact of historical racism on First Nations today: “You see my problem. The history I offered to forget, the past I offered to burn, turns out to be our present. It may well be our future” (p. 192).

In terms of treating direct racism, we await the publication of Chrisjohn’s* (2015) definitive work on the subject.

Interconnectedness

McCormick’s* (2002) research indicates that the successful practice of counselling for First Nations people differs from Euro-American approaches. The aim of healing for First Nations is concerned with attaining and maintaining balance between the four dimensions of the person: intellectual, spiritual, emotional, and physical. In addition, First Nations healing focuses on interconnectedness rather than autonomy. First Nations clients can connect with the family, community, culture, nature, and spirituality for successful healing. This can be extended to connectedness with other First Nations. Such visits help us gain an understanding of where we are coming from, cultural influences, ways of life, and language (Kerr*, 2001). Quinn* (2007) considers healing is a critical component of any intervention seeking to help Aboriginal Peoples.

The theme of interconnectedness is common among most First Nations cultures. It is important to consider the individual in the context of the community (LaFromboise* et al., 2006). Transcending the ego, bringing about harmony in the community, and completing processes with a community-based cleansing ceremony is a model for First Nations healing (McCormick*, 2002). Cultural values may be reinforced by such community ceremonies as
the sweat lodge, the vision quest, the shaking tent, and the Sundance (Mohatt & Eagle Elk, 2000). First Nations clients will tend to turn to community elders for important personal problems (Blue* & Rogers Blue* 2001).

**Multi-generational Influences**

Freud (1912) saw that society creates mechanisms to ensure social control of human instincts. He speculated that taboos had their genesis in guilt. For Freud, the past is not something that can be completely outgrown by either the individual or society but rather is something that remains a vital and often disruptive part of existence. The emphasis on the past being alive in the present is a central theme in psychoanalytic approaches to the individual and society. It is the authors’ subjective opinion that psychoanalytical approaches have a certain resonance for First Nations peoples perhaps because of the importance placed on symbolism, dreams and the unconscious. First Nations interpretation of the world certainly had resonance for Jung (Von Franz, 1964).

So what has this got to do with the relationship of First Nations people with the dominant culture? The origins of the deep and persistent depression seem to be associated with colonialization, the cultural genocide that accompanied it, the loss of the country and the major loss of lives that occurred during the epidemics of measles and small pox. This is passed on from generation to generation.

**Common Presenting Concerns in the Counselling Context**

**Stress**

Going South to get advanced education in a college or university is a particularly stressing event in the life of a northern First Nations youth. It can be very unpleasant to go and live in a big city full of non-Natives, with its bad smells, constant noise and disagreeable food. The attraction of a subway and fast-food does not last long. A non-Native counsellor may have difficulty appreciating how stressful it is for a First Nations client to live in a milieu where people have a completely different way of life.

Blue* and Blue* (1981) observed that Native students tend to deal with stress by reducing their activity level (deactivation). In similar circumstances, non-Native students tend to become hyperactive and talkative (activation). A majority of First Nations students, particularly those from traditional communities, tend to withdraw and deactivate in times of stress. Over periods of about three months, this can become chronic. The effect can be seen in a university cafeteria around exam time. The non-Native students are generally agitated and loud. The Native students are sitting silent and frozen in their places.

**Substance Abuse**

Despite the stereotypes, there is evidence that addiction rates among First Nations are about the same as those for the majority culture when controlled for socio-economic status and educational level (Beauvais*, Chavez, Oetting, Deffenbacher, & Cornell, 1996). Their
survey compared a large sample of White American, Hispanic, and American Indian adolescents. The White American adolescents exceeded both the Hispanic and American Indian youth in the amount of alcohol used. Native people do not metabolize alcohol differently than other groups. May (1994) states, “No basis at all for this myth is found in the scientific literature” (p. 124).

P. May (1994; personal communication, April 4, 2002) maintained that problems of substance abuse are caused by a particular drinking style among American First Nations, not the drinking itself. Unlike other cultural groups, the normative style among those who do drink is binge drinking. The heaviest of the heavy drinkers greatly elevate the public health consequences to the community through foetal alcohol syndrome (FAS), mortality, crime, familial disruption, and general health morbidity (Rehm et al., 2006, March). FAS prevention is an important area for community development because the disease is particularly damaging, but preventable through social interventions.

Thatcher (2004) argued that alcohol abuse patterns in First Nations are primarily learned; they do not originate in some distinctive, race-based, genetic profile. Unfortunately, some First Nations leaders themselves have also adopted this false belief, giving us a self-fulfilling truth about drunk Indians. In addition, some community members may support and encourage binge drinking. Economic isolation, paternalism, segregation, and dependency produce the health risks and social problems associated with acute alcohol abuse. The result is a misguided perpetual search for therapeutic solutions, awkwardly combining pseudo-science and spirituality. The complex has largely grown out of economic isolation, segregation, dependency, and a paternalistic government response, which conveniently allows Canada to ignore the necessary fundamental organizational changes that are required. What is needed to break the cycle is action promoting self-efficacy, resilience, and personal empowerment. To achieve this, a fundamental social reorganization must take place to include First Nations in the very economic system that displaced them.

Similarly, Hari (2015) believes addiction is not so much an issue of chemistry, but a result of a sterile environment and lack of social attachment. People recover from addictions when they have the confidence, knowledge, and community encouragement of sobriety to make the right decisions for themselves. Successful treatment is related to connectivity in a rich social environment. We return to the theme that the root cause was the gutting of First Nations’ structural base, and it will only be resolved by reconnecting and rebuilding that structure.

Spirituality is a key component to the AA approach, as is traditional mediwin spirituality in modern approaches. In a sample of 400 American Indian youth, Yu and Stiffman (2007) found that cultural pride and spirituality predicted fewer alcohol symptoms, and that religious affiliation moderated the effects of problematic peers and family members on alcohol symptoms. This could well be the source for Aboriginal clients of what may be referred to as spontaneous recovery (Tempier*, Dell, Papequash*, Duncan & Tempier*, 2011). Spirituality may or may not be helpful to individual clients; some degree of balance is probably required.

It is McCormick’s* (2000) view that successful alcohol treatment must be based on making connections to meaning, family, spirituality, identity, and a client’s culture. For example, the Round Lake Treatment Centre in British Columbia, Canada, uses the motto, “Culture is treatment.” Similarly, Stubben (1997), interviewing 500 graduates from treatment
centres, found four key ingredients to successful treatment: 1) the presence of Native staff, 2) contact with elders that allowed clients to reclaim their identities, 3) aftercare in the community that included traditional healing and ceremonies and 4) the existence of alternatives to an AA-only philosophy. Stubben (1997) found that AA or NA-only programs had a 93% relapse rate, while programs that mixed AA or NA and tribal ceremonies had a 53% relapse rate.

Nygaard (2012) found that clients in a substance abuse program rated culture as anywhere from detrimental to very beneficial. Unhelpful culture may inhibit the use of social supports in the community. Dell and Kilty (2012) argue that within the framework of victimology, strengthening cultural identity can disrupt society's associations of substance abuse and aboriginality. Long-term recovery is dependent upon society, both mainstream and First Nations, changing its socio-economic contract and its point of view on interaction.

**Suicide Prevention and Treatment**

Suicide rates among First Nations people are far higher than those for Canadians in general, about 37 per 100,000 people versus 13 per 100,000 in the general population. First Nations youth in Canada are eight times more likely to commit suicide than non-Native males of the same age (McCormick*, 2002). Some of the demographic co-variables for suicide include:

- Age (the rates are particularly high for people aged 15 to 24, a group who represents 20% of the First Nations population)
- Alcoholism (alcoholism and not drugs, is involved in over half the successful suicides)
- Education (people who have not completed high school or are unemployed have higher rates).

The demographic factors are extra-psychic and do not represent psychological problems. There is a tendency for counsellors to make the primary attribution error, attributing intrapsychic causes when the problems may have external sources out of the control of the client. In studying suicide risk, it has regularly been shown that hopelessness, and not suicidal ideation nor depression, is the greatest predictor of completion (Cull & Gill, 1999). Thus, the best overall approach should be to facilitate societal strength in First Nations, as to remove hopelessness, not to simply provide improved therapeutic solutions for suicidal clients.

According to Ross* (1996), there are a number of measures that would potentially decrease the risk of suicide completion among members of First Nations: better management of access to prescription drugs, controlling access to firearms, reducing the reluctance to make use of health care by promoting excellence in our own services, and improving access to basic necessities for good health such as clean water, housing, adequate sewage disposal, education, and opportunities for meaningful work.

The source of the suicidal intention among First Nation clients is generally not an intrapsychic or biological predisposition. Logically then, it makes sense to help directly with the psychosocial stressors (Walker*, 1999). So, are counsellors simply giving “Band-Aid solutions,” or, even worse, incorrectly placing the responsibility for the problem on the victims, when in fact the problem is the consequence of unresolved collective self-image conflicts brought about by colonialization? Ross* (1996) places the focus when she says, “We must
remember that those who attempt or commit suicide are attempting to seek a solution to a problem that is causing intense suffering, a pain that is perceived as intolerable” (p. 253).

However, as a counsellor, face-to-face with a client who is suicidal, you need to do something more concrete than writing a policy paper. A first step is to deal with suicidal feelings straight on. Counsellors too often shy away from the issue and change the subject. Clients invariably find that discussing the issue directly is a reasonable request. A 12-year-old client expressed the idea clearly: “I wanted to jump out the window, and the psychologist only wanted me to draw squiggles” (W. G. Darou, personal communication, June, 1982).

Three factors are important in the immediacy of suicide risk: loss, chemicals, and a trigger. We speak of loss in its broadest sense, that is, the person is truly in the process of mourning. It may be the loss of a loved one, a good friend, or an important aspect of their life. The chemical factor within the brain can be either external (alcohol) or internal (neurotransmitters). People can be high from psychoactive chemicals or may be affected by long-term depression. There also has to be an immediate trigger. This may be a fight with a boyfriend or girlfriend, or on the other hand, the completion of a lifelong goal.

The bottom line on the subject comes from Chrisjohn*, McKay* and Smith* (in press): “The proper treatment for the Indian Suicide Problem isn’t to send cheerleaders into our communities; it is the elimination of the system that is destroying our lives” (p. 10). He believes the solution is to re-write the contract between Canadian Native Peoples and the entity we call Canada.

Kurtness* and Hervé (2014) does not expect system-level change to be an easy task. Canada essentially wants First Nations to simply disappear. In a treaty negotiation document, Kurtness* replaced the words “The Government will …” with “The Government will pretend to …”. The fit was perfect, but the negotiators turned purple.

**Multicultural Counselling Process**

**First Nations Models of Helping versus Euro-American Models**

In a study by Trimble* et al. (2008), taped counselling sessions were played to residential school students. The tapes included both Native and non-Native counsellors and three methods: directive, non-directive, and a Native culture-based method. The results showed that the Native counsellor was preferred and non-directive counselling was rated as least effective. The conclusions made from this study are useful; all else being equal, Native counsellors who use some sort of concrete approach are perceived to be the best counsellors by Native clients. The authors concluded that this is why Native people take a dim view of the usual counselling situation.

Some clients treat counsellors with the respect that they normally reserve for elders (i.e. silence, no eye contact). This can be disconcerting to a person using a typical Eurocentric counselling model. Non-directive approaches may be ineffective because, “many Indian clients, especially more culturally traditional ones, are likely to be reticent and taciturn during the early stages of counselling, if not throughout the entire course of treatment” (Trimble* et al., 2008, p. 193). The fluidity of the conversation depends on the ability of the counsellor to listen to the silence.
Counsellors need to develop competencies in hearing nonverbal communication, particularly in dealing with silence. The counsellor’s job is really to hear the meaning beyond the words and in the absence of the words. We typically understand silence when it indicates emphasis. We often misunderstand meaning when we toy with concepts inside our heads and reconstruct them to better express an experience or emotion. All things within the counselling session have meaning and demand equal attention.

Trimble* and Jumper-Thurman* (2002) have pointed out that counsellors of First Nations people may misunderstand their client's behaviour because of unconscious intercultural conflict. They note, “Many clients for example may not recognize the need for professional assistance when community-based helping networks are perceived as far more beneficial” (p. 196).

Over-compensating for this, counsellors may become so enchanted by the client’s unique way of looking at the world that they fail to deal with the actual problem at hand. They need a deep understanding of their own values first before they can become aware of their biases. Then, in turn, they can begin to understand the client’s values (Blue* et al., 2008). Counsellors need to focus on expressed values, rather than preconceived images or notions.

There is some empirical support for this. Arthur and Januszkowski (2001) found that the strongest predictors of higher levels of multicultural competency were attending professional development seminars, experience working with multicultural clients, multicultural course work, and case consultation.

Counsellors must be adaptive and flexible in their personal orientation and the use of conventional counselling techniques. Commitment to understanding the cultural context and unique cultural characteristics of clients is essential. This often requires counsellors to extend their efforts beyond what is typical in a conventional office (Trimble et al., 2008, p. 196).

Because of the great variety of First Nations cultures, this statement applies as much to Native counsellors as non-Native counsellors working with diverse First Nations clients. To develop a counselling approach that is appropriate to the range of traditional and non-traditional cultures, the counsellor must be flexible, increase self-knowledge, be oneself, avoid theoretical counselling dogma and, of course, listen, listen, listen.

Approaches that are based on the strengths of the individual and the positive aspect of the community (Chamberlin, 1998) will probably be more helpful for First Nations. Kerr* (2001) believes that this is more effective than trying to heal the deficits and weaknesses of the client or community, often leading to blaming and victimization. According to McShane and Hastings (2004), developmental scientists working with First Nations children have concentrated on children’s problems and family difficulties. To obtain a more balanced and accurate picture, researchers need to consider healthy children and families in their development models. This can be achieved by building meaningful relationships between academics, researchers, and community members before proceeding with research.

With children, particularly children in a traditional setting, a culture-based approach is asking them to tell their favourite trickster story (i.e. Nanabush, Raven, Coyote, etc.).
listen closely, even if you have heard the story many times. Analyzing the themes, subjects, attributes, methods of the subject, and the outcomes can then give you some insight into the problems, but also the strengths of the individual. The value of the technique is to avoid the personification of the problems. It allows you to work collaboratively to develop new ways to attack problems and build solutions. Our job is to be the one who hears the silence; through the silence, the client is constructing meaning.

Empathy is not a sufficient condition in the case of counselling with First Nations (Sue & Sue, 1999). In working with First Nations clients, particularly in an urban setting, the non-Native counsellor must undertake the particularly difficult task of establishing a helping relationship, while at the same time, attempt to compensate for any harm they may inadvertently do to the client’s identity. This requires a liaison with cultural resources such as elders, community ceremonies, and Aboriginal Friendship Centres.

Counsellors need to address the protective effects of traditional spirituality and activities in First Nations cultures (Blue* & Rogers Blue*, 2001). The role of counsellors as compared to spiritual leaders can be well explained by the medicine wheel. The East-West axis is the axis from intellectual to emotional; it is the domain of the counsellor. The North-South axis is from spiritual to physical, and that is the domain of the elder. The counsellor is thus responsible for dealing with a balance of intellectual and emotional issues such as cognitive approaches to vocational counselling and other practical work. The elder deals with the relation to the spiritual world and to physical illnesses. It is not our intention here to the limit the role of the elder; we are only offering some general guidelines to understanding the function as opposed to prescribing roles or duties.

Values

Although First Nations cultures are diverse, Brant* (1990) points out that most share certain values. These include non-interference, sharing, respect for elders, harmony with the land, and social responsibility. There are special rules about going into a Native person’s home. Typically, this involves simply walking in without knocking and sitting down. Your role is to wait patiently until the occupants are finished what they are doing and are ready to meet with you. They may bring you tea and they will say that they are glad to see you. When they stop talking, it is your time to talk about what you came for. You are essentially applying the same rules that would apply when people were in tents. (We would not advise a White person to simply walk in and sit down unless they are deeply embedded in the community.) In some groups that are matrilineal such as the Lakota and the Mohawk, the house is the woman’s domain. A man would not normally invite you inside. This is not intended as a hard rule, but as an indication of what to consider regarding proper behaviour in a particular situation. First Nations communities adhere to unspoken rules, and the first rule is that none of the rules are stated explicitly.

There is much diversity between First Nations cultures, such that the difference in values between some is larger than the difference between First Nations and Caucasians (Trimble* & Jumper-Thurman*, 2002). According to Trimble* et al. (2008), “Indian clients undoubtedly will express values that are inconsistent with, if not disparate from, those of a non-Indian counsellor” (p. 188), or we would add, a First Nations counsellor from a different culture.
The research of Trimble* and Jumper-Thurman* (2002) found that Native people who had a positive self-perception tended to endorse kindness, honesty, self-control, social skills, social responsibility, and reciprocity. They point out that the importance then is to recognize one's own values, stay open to differing values, be able to recognize value conflicts, and be able to help clients deal with such conflicts. A White cook at a tourist camp on Lake Mistassini, Quebec, Canada, pointed out that it was not important that the Crees were Catholic, Protestant, Evangelical, or traditional. The important characteristic was that they were simply very religious.

The Anishinabek Educational Institute in North Bay, Ontario, Canada, is based on seven teachings of the elders as explained in *The Mishomis Book: The Voice of the Ojibway* by Eddie Benton-Banai* (1988). These values are: love, respect, wisdom, bravery, honesty, humility, and truth. They provide a value-based position for both our clients' lives and our own professional behaviour.

**Traditional Healing Practices**

Spirituality is an important component of counselling; virtually all successful services include a spiritual aspect. Some forms of therapy, such as psychosynthesis (Assagioli, 1983), claim that spirituality is a crucial step in a successful growth experience. Quoting one of Peavy's (1995) informants, “We have a special relationship with the land, with ancestors, with our community and with nature. To achieve harmony is sometimes more important than anything else” (p. 3).

Wyrostok and Paulson (2000) believe that traditional Native healing practices are an important aspect of the First Nations Peoples' conception of health and well-being. In fact, 80% of their clients reported having participated in some degree in a wide variety of Native healing practices. They maintain that the most important foundation upon which to build respect for another worldview is to increase our awareness of other cultural interpretations of reality. Learning to recognize and to accept our own biases for what they truly are is critical in order to refrain from imposing them upon our clients.

The influence of elders is probably common to all First Nations. The importance of this can be seen in the biography of Billy Diamond, the former Grand Chief of the Crees of Quebec. Although he was a successful student who wanted to complete his education, elders pulled him back to his home community because they believed that he was essential to protecting the land from exploitation by Hydro Quebec (MacGregor, 1989).

However, Trimble* and Jumper-Thurman* (2002) pointed out that recognizing value differences should not be the only concern; the strength and degree of endorsement of values must also be noted.

Some therapists have made the assumption that all Native people are comfortable with traditional avenues of healing. ... However, some Native clients have chosen not to follow these ways and may, in fact, reject them outright. Some are more comfortable with various Christian beliefs, Anglo institutions or European ways (Butson, 1993, p. 5).
Story Telling

Ethnographically based constructs can constitute valuable tools in the acquisition of complex concepts, such as culture and power, in the context of traumatised societies. Storytelling and narrative are useful ways of exploring the dynamics of power and culture (Ruano, 2005b).

Storytelling is a traditional way of transmitting healing messages. Elders essentially own certain stories and they use them to gently move people to new learning. It is a way of working with which First Nations people are very comfortable and are generally open to in the counselling setting. It also has the important role of establishing the value of the elders in transmitting key cultural information. Please note that it is important to gain permission to use an elder's stories, and it is important to follow the story as closely as possible. For an example of the use of stories based generally on the medicine wheel, see Storm* (1985).

The elder, Joe Eagle Elk, told a story at an international meeting of medicine men and psychoanalysts. Eagle Elk gave permission to use this story. In the old days, people would go down to the water to wash their clothes. An adult would go first to make sure there was nothing that could harm the people. The people would go as a group. While the adults did the washing, the children would play along the shore. When they left, an elder would stay behind to wipe out the tracks and to call all the children's names. One might ask why you would call the names when you know that all the children have left. The elder called the spirit of the child. Nowadays, Eagle Elk reported, no one calls the spirits and the tracks remain, going in all directions. The spirits are lost.

Healing Circles

An important tool in lifting pain and guilt is the healing circle. Its value can also be seen in less dramatic times, when a facilitator wishes to ensure respect, openness, and good listening. The healing circle is a round robin with several important rules of operation. A sacred stone or a feather is passed around the circle from right to left. An elder usually starts the process and explains what is going to happen. A counsellor could fill this role as a time to set some parameters on what to deal with. This sets the tone for the people that will speak. The holder of the stone can speak and no one must interrupt. Speakers can take as much time as they wish, silently hold the stone, or just say nothing and pass on the stone. No one is to make comments or judgments on other speakers' statements, although statements of understanding can be given and further information can be requested. This process allows the freedom to speak and be respected, to have your thoughts, and your point of view heard. The process continues, and it goes around and around until the issue is resolved.

The helping circle in prisons is an intervention that allows inmates to get a chance to actually talk about their experience. Neilson (2003) proposed using Canadian innovations for American prisons. In White society, there are great limitations on sharing information due to adherence to rules of confidentiality. In Native society, there is often contact and sharing with the entire family who are included in the work that is done within a healing circle.
Ceremonies

There are a variety of ways of understanding the effects of the intercultural contact that has affected aboriginal societies. Over the 300 years of contact, there have been many changes in both First Nations and the European peoples in North America. Halfe* (1993) believes that colonialization has programmed First Nations for self-destruction. Programmed inferiority implies that “someone else has written the script” (p. 7).

Many of the traditional ceremonies and practices can rewrite the script. They have come to be recognized as beneficial in the treatment of a wide variety of personal and interpersonal issues (McCabe, 2007). Elders in various social service agencies realize the healing of the spiritual self through gifts of the sweat lodge, vision quest, name-giving, Sundance, medicine wheel, drumming, singing, dancing, pipe ceremony, storytelling, and sweet grass purification.

**Sweet grass or cedar ceremony**

Events often begin with a ceremony using sweet grass, cedar, or sage, depending on one’s culture. This ceremony acts as a point of meditation and concentration before beginning a serious endeavour. A sweet grass holder moves around the circle clockwise with smoking sweet grass. The circle members wash their faces with the smoke to purify their thoughts and ask for the help of the ancestors. Note that this ceremony should not be conducted if one is not comfortable with the role. Among the authors, Blue* does it regularly, whereas Darou is only comfortable doing it in private. Ruano only does it when expressly invited by an elder or group to partake. People will also use sweet grass as a way of purifying a new house, welcoming a baby, or even blessing banal parts of one’s life.

A few years ago, the community of Sioux Valley, Manitoba, wanted to make sweet grass more available to the people, so they decided to sell it (at cost of course) from the Sioux Valley Craft Shop. The problem here is that the braids of sweet grass are very attractive in their own right. The elders were afraid that tourists would just come and pick some up without understanding the spiritual significance. The elders held a council to discuss the issue, and they came up with a very enlightened solution. They agreed to let it be sold, but it would always be stored out of sight behind the cash register. It would be given only to people who specifically asked for it, whether they were White or Native. The elders assumed that if the people knew to ask, then they had legitimate need, and it was the elders’ duty to make it available.

**Vision quest**

The *vision quest* is a traditional ceremony where a person leaves the community for four days and nights, or longer, without food, to meditate and seek out a guiding vision. After the quest, elders will help the person understand the vision. Modern expressions of this ceremony may include unstructured meditation in a quiet place without interruption, or even symbolically in psychotherapy.

**Sweat lodge**

This is a ceremony to enhance the power to dream and to give a sense of belongingness to a community. There is a substantial level of preparation and a great deal of structure to both
the construction of the lodge and the ceremonies. The sweat lodge ceremony is symbolic of purification, rebirth, and regaining old ways. The lodge itself is a small structure where hot rocks are placed and sprinkled with water to increase the sweating aspect of the experience. There needs to be a leader and a gatekeeper. The gatekeeper sits outside and assists by bringing the rocks and opening the entrance at the proper times. Traditionally, the leader conducts the ceremony by song and prayers while the entrance is closed, and indicates the time when it is to be opened and when individuals may make their own private prayers.

Drumming

Expressive therapies are relevant to aboriginal cultures, which are characterized by an experiential learning. Music, as well as art, dance, and a sense of interconnectedness are relevant to counselling with First Nations (Graham, 2013). Drumming, particularly, is an expressive way of conveying the search for vision. Most people associate drumming as an expression or musical medium of the Plains people, but drumming occurs in many Native cultures such as the Iroquoian and Inuit. The Iroquoians have a song festival in the spring using a water drum that is tuned by the amount of water inside. The West Coast people also have a song ceremony using a drum made from a hollowed out cedar log.

Sundance

The Sundance is one of the most spiritual of all the rites and ceremonies. It was also illegal, according to Canadian law from 1885, until the amendments of the Indian Act in 1957 (National Library of Canada, 2000). Because of its sacredness, it is not generally discussed in published works. If you ever have the good fortune to be invited to a Sundance, jump at the opportunity. However, you should make sure you have a guide that will explain the rules and the level of participation you may take; make an extra effort to remain respectful. The Sundance is traditionally done in the spring equinox as a ceremony of thanksgiving. Typically one pledges to present a Sundance for good fortune.

Vocational Counselling

First Nations seem to find vocational counselling valuable despite the fact that some of the basic theoretical foundations do not seem to be particularly valid in First Nations communities (Chevrier*, 1998). Clients may not have the luxury of choosing their own occupation; the collectivism found in communities may not encourage the principle of pay for work, and ambition may be suppressed to reduce conflict in the community (Brant*, 1990). As a result, it is important for counsellors to take into account several practical aspects of this particular role.

Northern communities tend to be undermanned, i.e. there are not sufficient people to fill the available work. There may be more work than the people can actually do to meet the day-to-day survival needs of the community. (Other communities are in exactly the opposite situation, being time rich and information poor.) As a result in undermanned communities, there is a tendency for a person to fill more than one role. These roles may or may not be paid positions. They might include a standard part-time job, trapping and hunting for food, bush construction, and caring for an elder. A counsellor must be respectful and careful not to treat clients who have no paid job as if they are unemployed. In addition, the counsellor
may be confused when faced with resistance on the part of a client, who in the counsellor’s mind, should be out looking for work. In fact, the client may be too busy, particularly in the seemingly slack winter months.

As a part of healthy psychological functioning, many First Nations clients, particularly youth, prefer vocational aspirations that allow them to contribute to the welfare of their community (Wintrob, 1969). Strong youth tend to have a solid connection with their family and tend to seek work that returns something to the community. If a client holds this value, it is unrealistic of the counsellor to suggest the person take a job in sales, banking, or flower design, regardless of what an interest inventory score may indicate. The counsellor needs to be sensitive to the possibility that the client may need to take a profession that allows contact with kin or gives value back to the community.

Another important consideration has been known for half a century (Hallowell, 1955). For some traditional First Nations clients, social position is not gained from high professional status. Instead, it is based mainly on personal power, holistic competency, and inner spiritual power. As a result, a client may receive the necessary education to practice a profession, but be unable to put it to use (Trimble* et al., 2008). Personal and spiritual development may be prerequisites before a client can move ahead with a vocational problem. This has been confirmed empirically by Neumann*, McCormick*, Amundson, & McLean, (2000).

In a study by Overmars (2011), with young Aboriginal women, a career was conceptualized as a journey. Education and community came out as foundations of this journey and were seen to supply support and guidance for career development.

**Counselling with Native Women**

According to Ross* (1996), counsellors of Native women have some special needs and challenges. She states, “Aboriginal women constitute a disadvantaged minority in the general population, relative to non-Aboriginal women and even Aboriginal men” (p. 249). Women tend to seek formal services less often than others and may put their needs off until they feel assured that others in their extended family have been served. Women also have lower earnings and higher unemployment. For these reasons, supporting and promoting Native women’s crafts can be an important community intervention in itself.

Malone (2000) points out that women were particularly affected by colonization, residential schools, and an oppressive child welfare system. She recommends learning about the great strengths of these women before embarking on a counselling practice with them. She suggests that counsellors take multicultural training and anti-racism training, that they review their reinforcements for this line of work, and that they consider doing their own therapy with a person from outside their culture. Her counselling methods are based on empowerment and have a focus on social causes. According to Shepard, O’Neill, and Guenette (2006), counselling needs to be viewed in a holistic framework that considers multiple levels of oppression, poverty, colonization, and life as a minority in a dominant culture.

Traditional healing and holistic approaches appear to be particularly valuable (Ross*, 1996). According to Malone (2000), in many First Nations societies, women are the owners of this information. For the Iroquoian people, herbal medicine was the domain of women and
particularly the clan mothers. According to the research of Viau (2000), they used 152 different medicinal herbs. Even today, some of the best herbalists available are Iroquoian women.

Much of Malone’s (2000) feminist therapy involves “walking the talk.” She says clients can be encouraged to be educated and conscientious consumers. For example, they should be encouraged to negotiate the orientation, methods, and values of their counselling and to otherwise take an active part in it.

For men helping women, the most important concern in establishing the relationship is acceptance. Virtually every situation can be seen as the (male) counsellor rejecting them and not believing them. They expect to be treated as if at some level their problems are their own fault. They need to be constantly receiving unconditional respect and understanding. This has to be done in a careful way. You may not be able to do this in the Euro-American way, because it may be perceived as sexual. Verbal following, direct eye contact, and pure silence are probably not appropriate; you need to respond constantly with respect and positive acceptance.

**Synthesis**

We forget that the secrets of the culture are unknown to the culture. Lacan (1966) said that the greatest discovery that an analyst makes comes when he is listening to the patient’s experience. This certainly is a rare occurrence. To effectively listen to First Nations clients, counsellors must do much more than just use active listening or identify patterns of influence. For if our clients speak through silence, we must learn through listening.

**Concluding Remarks**

As can be seen by the number of asterisks in this chapter, the major forces in counselling and psychotherapy with First Nations are First Nations professionals themselves. This fact has changed the power relationships and the focus of research. Research is now being built on partnership and answers the research questions put forward by the First Nations involved (Boucher, 2002). Conducting psychological research with First Nations is still a delicate issue, especially if the researcher is non-Native. There is a long history of abuse and harmful research putting stress on communities (Aultman, 2013; Darou, Kurtness*, & Hum, 2000). The following recommendations can reduce the chances of conducting disrespectful research:

- Obtain informed consent and follow the directives of a local advisory group. Do not conduct supply-driven research. Design all research steps with the consent and approval of the community concerned. They will be much more willing to listen to your ideas if have a clear, relevant purpose;
- Be patient and flexible. There may be things happening behind the scenes that you are unaware of;
- When you make gaffs, try to recuperate gracefully. The people are surprisingly forgiving;
Learn the culture, geography, and language of your community. Read the same
documents that local First Nations professionals are expected to read;
It is important that researchers put something back into the community. Research often
has a high social cost to the community;
Consider the use of non-experimental paradigms;
Be extremely cautious if you use any kind of testing;
Determine the effect of your research on your subjects;
Share your results with the community;
Do not insert yourself as a therapist in any First Nations politics.

Research in British Columbia, Canada (e.g. McCormick*, 2002), has shown that an effective
healing program for First Nations would invoke empowerment, cleansing, balance, discipline, and belonging. Instruments could be developed to measure how non-Native professionals develop a working alliance with First Nations. More narratives of First Nations healing stories should be recorded to further develop the concepts involved in First Nations healing. Traditional healing practices could be assessed from an emic perspective for their extent, meaning, and impact. Longitudinal studies need to be developed to document the effectiveness of virtually all the aspects of counselling with First Nations clients, by and from the point of view of First Nations people themselves. For instance, the impact of the vision quest, the medicine wheel, and other rites could be examined empirically (McCormick*, 2002).

All models need to address risk and protective factors unique to specific cultures, such as the mediating effects of traditional spirituality. Euro-American counselling approaches seldom deal with spirituality. There needs to be a re-examination of the transcendental ways of understanding the world and of communicating this. In counselling work with any First Nations clients, vulnerability – both historical and individual – acquire dimensions rarely seen in other Canadian populations. This is not to say that First Nations clients should be approached through a fatalist or narrow experiential manner. It only refers to the extra care and heightened ethical compass we must deploy in maintaining healthy and productive interactions with First Nations clients.

In the end, all of our biographies are shaped by history but are not held hostage to it. First Nations look to their future aspirations just like non-Natives do. It is part of our responsibility to participate in a narrative of human improvement that supports the achievement of better mental health for all. This is an essential quality-of-life resource that is indeed worth sharing. This entire piece is but an invitation for all of us to partake in the beautifully difficult task of reconciling the Spirit Voice with our common future.

References


Kurtness, J., & Hervé, C. (2014). *Tshinanu, nous autres et moi qui appartien aux trois Amériques* [Tshinanu, us and me who belong to the three Americas]. Quebec, Quebec, Canada: Presses de l'Université Laval.


Produced by The Berkeley Electronic Press, 2011


[http://scholarworks.gvsu.edu/orpc/vol10/iss3/6](http://scholarworks.gvsu.edu/orpc/vol10/iss3/6)


Viau, R. (2000). *Femmes de personne: Sexes, genres et pouvoirs en Iroquoisie ancienne* [I'm nobody's woman: Sex, gender and power in ancient Iroquois society]. Montreal, Quebec, Canada: Boréal.


Further Materials

- Watch this interview with Buffy Sainte-Marie. It is a highly instructive experience to listen to Buffy’s 50 years of experience with many of the issues we cover here (Goodman, González, & Sainte-Marie, 2015).
  http://www.democracynow.org/2015/5/22/legendary_native_american_singer_songwriter_buffy

- Here is a video of the entire three-day Cree Nation of Quebec General Assembly. Watch a few excerpts. Each day begins with a speech or prayer by an elder. Sessions in Western Canada would begin with exclusively with a prayer and sweet grass ceremony. Most of meeting is in the Cree language. Use this as an opportunity to closely follow the non-verbals. Who keeps their hats and coats on all day (note that it took place in early August)! What happened when there were silences? What are the non-Cree doing? The session was chaired by Grand Chief Matthew Coon Come, a lawyer by training. He is the elected leader of 18,000 Cree, managing a territory of 330,000 square kilometers and a budget of 300 million dollars. Note how no one defers to him! Also notice the almost complete lack of White privilege at these meetings.
  http://livestream.com/accounts/8792434/CNGAnnualGeneralAssembly

- Mohawk Girls is an Aboriginal Peoples Television Network production. Now this is comedy and fiction. But, mon dieu, the Haudenosaunee are definitely not Cree!
  http://aptn.ca/mohawkgirls/

- Idle No More is a grass-roots protest movement, started in 2013 and rooted in Indigenous Sovereignty to protect water, air, land and all creation for future generations. For reasons that are hard to fathom, it has been the target of a great deal mean-spirited push back from the nut fringe. This in an opportunity however for the non-Native to fill a useful role. Implicit in the responses on the link is our belief that it is unhelpful to enable paranoia.
  http://community.eldis.org/wesdarou/.59bb7cc6/.5b711c9e

Questions for Discussion

1. What is your experience in life with Native people? If you are a First Nations counsellor, what is your experience with other indigenous people, with White people?

2. Many non-Native counsellors complain that First Nations groups don’t talk. What are some roots of this? How do you make them talk (note: this is a trick question)? (We thank a Native inmate at Stony Mountain Penitentiary for this exercise).

3. What do you do when clients don’t talk? How do you know when an individual is afraid when they don’t say it? Can you find the silence within you and be willing to listen to the silence of others, even if that means staying in stillness for most of your interaction with a First Nations client?
4. How and where do the collective impacts of the experiences endured by First Nations during the Residential School era fit into our understanding of individual therapy versus collective injury?

5. How can we as therapists incorporate the healing powers of a Truth and Reconciliation (http://www.trc.ca/websites/trcinstitution/index.php?p=10) exercise into our understanding of approaches to counselling with First Nations clients?

6. What do you know of First Nations music? How does it reflect aspects of the culture? Can you give examples of music from the three main groups: traditional, transitional, Euro-western? Identify the type of music from
   - Buffy Sainte-Marie (http://buffysainte-marie.com/)
   - Kashtin (https://www.youtube.com/watch?v=FaCYp5NFrJw)
   - Robbie Robertson (http://robbie-robertson.com/)
   - Susan Aglukark (https://www.youtube.com/watch?v=FaCYp5NFrJw)
   - Alanis Obosansawin (https://www.youtube.com/watch?v=Lst4meSmVck)
   - A Tribe Called Red (http://atribecalledred.com/)
   - Tanya Tagaq (http://atribecalledred.com/).

   Make a listing by type and artist and explain who they are and why they are that way. Also, view A Tribe Called Red’s remix of Buffy Sainte-Marie’s Working for the Government: https://www.youtube.com/watch?v=Q-4nfqksGn8

7. What are the impacts of the treaty process and the establishment of the Aboriginal Affairs and Northern Development Canada or the American Bureau of Indian Affairs on contemporary First Nations people?

8. What early traditional songs, prayers, pictographs, and archaeological sites have you encountered? What did they mean; why were they done; how is it different than today?

9. If you were responsible for re-writing the laws concerning the relationship between First Nations and the colonial governments, what themes would you include?

About the Authors

Arthur W. Blue. After serving in the U.S. Armed Forces, Arthur studied at the College of Idaho, where he obtained a B.A. in Psychology, followed by a M.S. in Child Psychology at Utah State University, followed by a Ph.D. in the same field from Iowa State University. A teaching position at the University of Western Ontario first brought him to Canada and this was followed by a position at the University of Saskatchewan and two decades at Manitoba’s Brandon University. He was the first president of the Native Psychologists in Canada and chairman of the Board of Editors for the Journal of Canadian Native Studies. Dr. Blue, now a professor emeritus, forged and established the Department of Native Studies at BU, the first of its kind in Canada.
Wes G. Darou. Wes holds a doctorate in counselling education from McGill University and a master’s in environmental engineering from the University of Waterloo. He worked for 35 years in education, counselling and integrated risk management. His other interests include African education, First Nations and local history. Recent articles concern First Nations contributions to international development and the history the Nakkertok Cross-Country Ski Club. He is president of the local historical society, Cantley 1889. His retirement speech from the Canadian Department of Foreign Affairs has 10,000 hits and can be found in Eldis Communities at http://community.eldis.org/wesdarou/.59bb7cc6/.5aa0ae13

Carlos Ruano. For over 12 years, Carlos Roberto Ruano has worked at the intersection of learning systems, international development and mental health. Following a career as Lead Education Specialist and Knowledge Manager with the Canadian Department of Foreign Affairs, the United Nations and the World Bank, Carlos is back in Canada. He is Principal Research Associate at one of Canada’s leading think tanks and at St. Paul University's Leadership and Adult Intervention Program in Ottawa. He has been strategic advisor to youth, gender and education programs in Africa, Latin America and South East Asia. Carlos earned his Doctorate in Sociology and Equity Studies from the University of Toronto (OISE/UT). He has 15 peer-reviewed publications and over 30 others in English, French and Spanish. His websites are: https://wwwstpauluniversity.academia.edu/CarlosRobertoRuano
https://www.linkedin.com/in/mayaowl