How Do We Heal?

Creating a Community Wellness Plan that Addresses the Impacts of the Indian Residential School System
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WARNING: If this booklet causes any crisis or distress, call the Indian Residential Schools Crisis Line at 1-866-925-4419

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Introduction

The Indian Residential School system has created a legacy of individual trauma causing dysfunction in families that spreads throughout the community weakening an entire nation. This legacy has impacted not only the survivors of the Indian Residential School system but also their children and grandchildren. These intergenerational impacts of the Indian Residential School system have sometimes left feelings of helplessness and hopelessness making the idea of healing appear almost impossible. However, many survivors of the Indian Residential School system insisted that the pain and trauma they endured must end. They demanded their stories be heard so that their children, families and communities could heal. Their stories of survival highlight strengths and resiliencies that are rooted in their culture. Through their bravery and courage the wisdom of the Elders and Anishinabek culture have become cornerstones to the healing movement in First Nation communities. This healing movement is supported through the work of the Truth and Reconciliation Commission (TRC) who are documenting the stories and promoting acts of reconciliation that will allow First Nations people to move beyond the trauma and pain to one of resiliency and strength.

This booklet will explore what healing means, the foundations necessary to foster healing and the strategies that promote healing for individuals, families and communities to address the legacies of the Indian Residential School system.

Healing

Survivors of the Indian Residential School system may have experienced many different traumas throughout the course of their attendance at the school. Survivors described such traumas that began with the forced removal from their families, homes and communities to segregation, loss of cultural practices, loss of language, and psychological, emotional, verbal, physical and sexual abuse. When trauma results in continued and lasting impacts or symptoms this is considered to be Post-Traumatic Stress Disorder (PTSD). Survivors with post-traumatic stress disorder do not gradually feel better on their own; in fact their symptoms may become worse over time. The three main types of symptoms of PTSD include:

- re-experiencing the traumatic event (i.e., flashbacks, nightmares, intense distress, upsetting memories)
- avoiding or numbing from the reminder of the trauma (i.e., forgetting parts of the trauma, feeling detached, emotionally numb, suicidal thoughts)
- increased anxiety and emotional arousal (i.e., poor sleep, difficulty concentrating, always on alert, feeling jumpy).

Coupled with these symptoms survivors may exhibit:

- feelings of anger, irritability or rage
- guilt, shame or self-blame
- substance abuse
- feelings of mistrust and betrayal
Individuals who have PTSD should seek treatment to address the symptoms by finding a counselor informed in trauma recovery. The treatment is intended to assist in regaining a sense of control and power in life that was lost as a result of the trauma. These counselors may be a Resolution Health Support Worker (RHSP) with the Indian Residential School Support Program (IRSSP), a social worker or a psychologist. While the TRC remains active RHSP workers are available in most First Nation territories and can be accessed through the First Nation and Inuit Health Branch’s IRSS Program. These workers have cultural knowledge and training in working specifically with IRS survivors and their families. In many cases it is important to ensure that other counselors have knowledge and understanding of the Indian Residential School experience so they can provide culturally relevant and culturally safe care that considers the unique experiences and trauma responses of IRS survivors.

As part of the trauma treatment the counselor will help you to:

- cope with the anxious behaviors
- explore and change your thoughts about the trauma
- explore and manage your feelings about the trauma
- work through your feelings of guilt, self-blame and mistrust
- learn how to cope with and control intrusive memories
- address problems PTSD has caused in your life and relationships

In some cases individuals with PTSD may have secondary symptoms of depression or anxiety which may require medication. A primary health care practitioner such as a family doctor or nurse practitioner could provide this medication or, in some cases, a psychiatrist may be warranted to help individuals who are experiencing significant symptoms associated with the PTSD.

Another secondary symptom that may interfere with addressing the PTSD is substance abuse. If a survivor is using substances (i.e., alcohol, illicit drugs, prescription drugs) to cope with, avoid or numb their thoughts and feelings associated with the trauma it may cause problems in other areas of life such as with family, work, friends or cause problems with the law. If substance abuse is causing significant problems it may be necessary to seek addictions treatment. A NNADAP (National Native Alcohol and Drug Abuse Program) worker or Addictions Counselor can assist in determining the level of severity of the substance abuse and make recommendations about the need for outpatient counseling, day treatment or residential treatment. Should residential treatment for substance abuse be required there are many NNADAP residential treatment centers located across the country that offer addictions treatment from a cultural perspective. These treatment centers often have First Nation counselors, offer cultural ceremonies and practices as an integral part of the treatment program, often have Elders onsite and, in some cases, also provide treatment from a trauma informed and concurrent disorder (i.e., a co-occurring mental health and addictions issue) focus. In many cases it is necessary to address the substance use and abuse so that the other symptoms of the PTSD can be effectively dealt with.

Perhaps a critical difference in addressing trauma as a result of IRS from other forms of trauma is the loss of cultural identity and practices and loss of language experienced by IRS survivors. Survivors often report that they often missed out on personal and community activities that gave them a sense of value and belonging. Providing survivors activities that promote connection and belonging can reduce the symptoms of self-blame and mistrust. Some activities may include welcoming ceremonies, naming ceremonies, birthday parties, celebrations that promote self-care or, family and community celebrations.
Assisting survivors to re-connect to their culture and language can promote positive cultural identity as well as pro-
mote a sense of belonging and connection. Cultural reconnection may include reconnection to land and water or (re) learning cultural teachings; cultural practices such as hunting, fishing, dancing, drumming, singing, crafts, games; and/or cultural ceremonies such as smudging, sweat lodge, fasting, cedar baths, or sharing/teaching/healing circles, to name a few. Cultural reconnection for First Nations people has been linked to improved self-esteem, increased sense of pride in culture and self-confidence and improved mental health with reduced negative coping strategies.

While the TRC remains active, through the IRSS Program survivors can access Cultural Support Workers (CSW) who are often traditionally trained in cultural practices and ceremonies. To many of us, these are often known as Elders, Healers or Medicine People. The teachings and their healing practices have been recognized as a critical component to assist survivors and their families to heal from the effects of the Indian Residential School system.

**Family and Community Healing**

The impacts of the Indian Residential School system have been long-term for survivors as well as being passed on across the generations due to lack of knowledge, awareness, ability and healing. The intergenerational impacts have been passed on to the children and grandchildren have also had negative consequences throughout the community. Families will display similar symptoms of PTSD identified earlier, as well as:

- perpetuating abuses (physical, sexual, emotional/psychological, mental, spiritual)
- dysfunctional families and interpersonal relationships
- poor parenting skills
- teen pregnancy
- chronic and widespread depression
- chronic and widespread anger and rage
- chronic physical illness
- chronic unresolved grief and loss
- fear of personal growth, transformation and healing
- unconscious internalization of residential school behaviors such as false politeness, not speaking out, passive compliance, excessive neatness, obedience without thought
- school based learning like fear of failure, avoiding anything that seems ‘too much like school’, psychologically based learning problems
- spiritual confusion and alienation
- internalized sense of inferiority or avoidance to non-First Nation people
- cultural identity issues including denial or refusal of cultural background, cultural identity confusion, fear of learning or practicing culture
- disconnection from the natural world as an important part of daily life and spiritual beliefs
• passiveness or having no voice
• high risk behaviors (i.e., sexual promiscuity)
• early death
• poor attachment to caregivers

Similarly, communities will display chronic and widespread symptoms of PTSD most particularly:

• passive authority
• passive dependency
• patterns of misuse of power to control others
• community social patterns that foster gossip and rumors but failure to support and stand with those who speak out or challenge the status quo
• breakdown of ‘social glue’ that binds families and communities together such as trust, common ground, shared purpose and direction, a strong community life of giving and sharing, lack of volunteerism, cooperative groups or neighborhoods working together for the benefit of all
• conflict and lack of unity between individuals and families including factions within the community
• Conflicts and confusion over religious and spiritual based practices
• Toxic communication: gossip, criticism, personal attacks, sarcasm, secrets, put downs, etc.
• Destruction of social support network
• Passive acceptance of powerlessness with community life and/or governance
• Loss of traditional governance processes that gave people a sense of influence in shaping the community
• Joblessness and poverty
• Family violence
• Family breakdown
• Homelessness
• High rates of imprisonment

As with individuals, families may require some treatment to address symptoms of PTSD that will allow them to regain a sense of control and power in their lives. However, addressing intergenerational trauma requires additional supports and resources. Since many survivors did not speak about their experiences at the Indian Residential Schools or were able to articulate the mental and emotional challenges they faced after leaving the school few were aware of its damaging and long-term impacts. Therefore, it is necessary to provide knowledge to the families and the community about the history of their people. This history must include the Indian Residential School experience but must also examine the colonial history of Indigenous people in Canada as well as the historical and current relationship with the government (or colonizers). Through this knowledge it allows families and communities to begin to understand
their reaction to non-First Nations people, their sense of mistrust, their vulnerability to being re-traumatized and their vulnerability to experiencing negative thoughts, emotions and behaviors toward self and others. This knowledge also allows people to feel a sense of connection with others in their family and community as they can begin to see similar attempts to cope and survive as opposed to viewing the behaviors or themselves as defective or unwell. Through the history telling families and communities can begin to reclaim a sense of cultural pride and understanding as they learn about the significant contributions their people have made in their territory and in Canada. They can also begin to ask the questions and learn more effective and healthier ways of coping and addressing their pain, grief and trauma.

In learning about Indigenous history, First Nation communities are beginning to regain control by writing about their own community history or story. In writing their story it draws upon the people to reconnect with the knowledge they learned from within their family and community and sparks a sense of family and community pride. The community story also connects everyone with the teachings that are particular to their nation including their connection with the land, water, animals and plants. These connections also support a return to spiritual connection; an important component to healing. In defining and writing the community story people begin to come together and share common ground that brings about a sense of working together that instills trust and hope.

Since a significant component to intergenerational trauma is unresolved grief and loss it is important to allow families and communities to engage in activities that can promote the resolution of grief. These activities often include cultural practices and/or cultural ceremonies that promote opportunities to release the pain and move beyond it. These activities also encourage individuals to explore, understand and work through their feelings and their thoughts. For some families and communities holding ceremonies and memorials to recognize and acknowledge the survivors of the Indian Residential Schools has had a powerful and healing effect for the entire community. Other types of cultural practices that support healthy grieving include ceremonies for feasting the ancestors, memorial feasts for family and community members who have passed on and teachings on spirit journeys, to name a few.

Another way that communities have begun to regain a sense of control and power in their lives has been through the revitalization of language and culture. These language revitalization practices have included relearning of language (i.e., in school and through language camps) and incorporating language into daily life activities (i.e., signage). Revitalization of culture can be found in the practice of cultural activities and ceremonies throughout the community; Indigenous knowledge and cultural teachings into governance, policy and programs and services; braiding of Indigenous knowledge with non-First Nation knowledge to address social, emotional and mental health issues and; redefining systems using Indigenous knowledge and wisdom.

Finally, as stated earlier cultural activities such as cultural practices, cultural ceremonies and reconnection to land, water, animals and plants are central to healing from intergenerational trauma. Unlike non-First Nation based treatment methods, cultural practices and ceremonies are built upon the premise of strength and resiliency. When healing methods begin from the point of believing in the resiliency of the Anishinabek people this promotes the belief that we have the power to become well, the power to take care of ourselves and the power to create lasting change. In essence, resiliency promotes power and control; the very pillars necessary to move beyond trauma and to heal.

Through many of these strategies First Nation communities are regaining a sense of control and power which empowers them to become self-governing as it relates to health, education, justice, child welfare, employment, housing and governance. This creates a sense of community development which is built upon the idea of capacity building that is linked to positive health and wellness for individuals, families and communities.

As the Elders have stated ‘we are born with the teachings and it is up to each of us to return to (or find) those teachings in order to return to and live a good life’.
Reference


Royal Commission on Aboriginal Peoples. The path to healing. Ottawa: Minister of Supply and Services, 1993.


