

Resilience and Urban Aboriginal Women

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Abstract

This paper presents the results of a qualitative research study that explored resilience with four urban Aboriginal women. The research focused on the strengths of urban Aboriginal women, for research has silenced the voices of Aboriginal women by using Western concepts and constructs that have maintained colonialism through a negative portrayal of Aboriginal women. A two-part analysis was utilised in my research on resilience with urban Aboriginal women. First, the Western concept definition of resilience (the ability to overcome adversity by having more protective factors than risk factors) was critiqued. Second, the process of resilience from the cultural framework of the Medicine Wheel was explored, while applying post-colonial Indigenous epistemological and methodological approaches. The voices of four urban Aboriginal women were honoured using a discussion group with three participants, followed by two in-depth interviews, which were analysed using content analysis. A study of the data revealed that, through relationship with self, others and the Creator, a process of resilience emerges, and this process can effectively be captured by using the Medicine Wheel as a tool for analysis and understanding. From a Western perspective, risk and protective factors are linear forms used to explore resilience. From an Indigenous perspective, however, the exploration is a continual web of relationships, process and flow that encompasses life from childhood to adulthood and through to Elder status. The research explored the positive strengths of Aboriginal women and showed that the process of resilience is dependent on Indigenous ways of knowing.

Introduction

The Europeans took our land, our lives, and our children like the winter snow takes the grass. The loss is painful but the seed lives in spite of the snow. In the fall of the year, the grass dies and drops its seed to lie hidden under the snow. Perhaps the snow thinks the seed has vanished, but it lives on hidden, or blowing in the wind, or clinging to the plant's leg of progress. How does the acorn unfold into an oak? Deep inside itself it knows--and we are not different. We know deep inside ourselves the pattern of life (Hampton as quoted in Battiste, 2002, p. 28).

A woman of mixed Ojibwa (Nishnaabe) and Italian heritage, my personal life experiences as an urban Aboriginal woman led me to embark upon research with the intent of exploring resilience. When I explored the definition of resilience: "...ability to overcome adversity" (Oregon Resilience Project, p. 1, 2003), or the experience of having more protective factors than risk factors (Oregon Resilience Project, 2003). Those definitions were not reflective of my own circumstances. In fact, if I put my life experience into risk and protective factors, especially as a child, I would have more risk factors than protective ones. This dichotomy, and my own curiosity, led me to explore the process by which urban Aboriginal women develop resilience and to describe this process from a culturally appropriate perspective.

In order to move into a discussion of resilience it is important to recognize that Aboriginal people in Canada are not a homogeneous group, but rather heterogeneous with a breadth of cultural diversity and an array of languages. What we all have in common, however, is suffering from a similar fate brought about by government policies meant to assimilate us. This study focuses on urban Aboriginal women who, as Dion-Stout and Kipling (1998) state, "...constitute a vibrant and highly diverse segment of Canada's population, who share a common legacy of marginalisation and oppression" (p. 6).

The voices of urban Aboriginal women have often been absent in the resilience literature, and much of the research that has been undertaken has been problem-focused. Dion-Stout and Kipling (1998) state, "with surprisingly few exceptions, work dealing with Aboriginal women has tended to be highly problem-focused, and it has pathologized

these women's agency and realities" (p.7). What is needed is a further exploration of Aboriginal women who have demonstrated resilience while in an urban area. It is imperative that we understand the process by which urban Aboriginal women learn and develop resilience, as it is through this understanding that we can start the process of looking at our strengths. This process can then provide a vision, a focus and a direction for creating our futures and reclaiming our identities with pride and honor.

Critique of the Resilience Literature

The resilience literature was reviewed and critiqued, while factoring in the history of colonisation and its implications. The existing literature, as it unfortunately became evident, was unable to explain the process by which urban Aboriginal women became resilient.

I found the primary focus of resilience literature to be on children and their ability to overcome problems. Children build upon their resiliency by balancing risk and protective factors (Rockville, 1996). Rockville further states that there is no single source of resilience; instead there are many interacting risk and protective factors. Hetherington and Kelly (2002), suggest that resilience develops when the risk factors are lower than the protective factors. The common set of protective and vulnerability factors that, according to the literature, define resilience and risk, are based on the accumulative work of Cummings and Ireland (1999); Fergusson and Horwood (2003); Masten and Powell (2003); Rockville (1996); Rutter (1987); and Werner (1984). These factors are listed below.

Review of Risk and Resilience Factors

Resilience (protective) factors	Risk (vulnerability) factors
<p><i>Individual Differences</i></p> <p>Cognitive abilities (IQ scores, attentional skills, executive functioning skills)</p> <p>Self-perceptions of competence, worth, confidence (self-efficacy, self-esteem)</p> <p>Temperament and personality (adaptability, sociability)</p> <p>Self-regulation skills (impulse control, affect and arousal regulation)</p> <p>Positive outlook on life (hopefulness, belief that life has meaning, faith)</p>	<p><i>Individual Differences</i></p> <p>Biological risk, which includes difficult pregnancies that increase the probability of developmental problems.</p> <p>Learning difficulties</p> <p>Low self-esteem</p> <p>Irritability or a fussy temperament</p> <p>Impulsive</p> <p>Negative persistence</p>

Resilience (protective) factors	Risk (vulnerability) factors
<p data-bbox="134 345 447 407"><i>Community Resources and Opportunities</i></p> <p data-bbox="134 440 288 467">Good schools</p> <p data-bbox="134 505 479 597">Connections to pro-social organisations (such as clubs or religious groups)</p> <p data-bbox="134 634 479 786">Neighbourhood quality (public safety, collective supervision, libraries, recreation centres) Quality of social services and health care</p>	<p data-bbox="545 345 859 407"><i>Community Resources and Opportunities</i></p> <p data-bbox="545 440 859 467">Low academic achievement</p> <p data-bbox="545 505 735 532">School problems</p> <p data-bbox="545 570 788 597">Poor peer interactions</p>
<p data-bbox="134 844 288 872"><i>Relationships</i></p> <p data-bbox="134 909 517 1002">Parenting quality (including warmth, structure and monitoring, expectations)</p> <p data-bbox="134 1039 426 1131">Close relationships with competent adults (parents, relatives, mentors)</p> <p data-bbox="134 1169 495 1261">Connections to prosocial and rule-abiding peers (among older children)</p>	<p data-bbox="545 844 703 872"><i>Relationships</i></p> <p data-bbox="545 909 884 937">Multiple family disadvantages</p> <p data-bbox="545 974 756 1002">Impaired parenting</p> <p data-bbox="545 1039 873 1094">Neglectful and abusive home environment</p> <p data-bbox="545 1131 713 1159">Marital conflict</p> <p data-bbox="545 1196 889 1224">Family instability and violence</p> <p data-bbox="545 1261 910 1317">High exposure to adverse family life events</p>

There is an important weakness in the resilience literature: it focuses on Western definitions that do not account for a history of colonisation and the effects of outside systems. Western definitions also reflect a dichotomy in thinking and do not consider a worldview based on processes or relationships. According to Cross (1998), an Aboriginal author,

In the Western European linear worldview, we are taught to examine a trait or behaviour like resilience by splitting the factors into independent linear cause and effect relationships....in the linear view the person owns, or is, the problem. In the relational view, the problem is circumstantial and resides in the relationship between or among various factors. The person is not said to have a problem but rather to be out of harmony. Once harmony is restored the problem is gone. In the linear model we are taught to treat the person, and in the relational model we are taught to treat the balance (p. 155).

As discussed by Cross (1998), risk and protective factors are dichotomous and linear in perspective and don't relate to how resilience occurs from an Aboriginal perspective. Further, in reviewing the Western concept of resilience, many urban Aboriginal women show an increase in risk factors, and hence a decrease in resilience factors based on the history of colonisation, as well as social and political forces. After factoring in the history of colonisation of Aboriginal women, I have been left wondering how they have become resilient. I turned to Aboriginal knowledge that has been in existence for generations for an explanation.

In the literature, and elsewhere, Aboriginal knowledge has been dismissed in favour of Western knowledge or has not been given credit for being part of present theories. In order to honour Aboriginal knowledge, I was moved to explore a more holistic, relational and culturally appropriate perspective of resilience. Hart (2002) writes:

They did not recognise that our views of the world are based upon these relationships and the wholeness of the universe, and that when we help one another, it is from this perspective. They did not realise that the 'ecological' approach, which was first discussed in social work in the late 1970s, was really an infant

to Aboriginal ways or that these diagrams were developed and presented before the ecological approach was ever acknowledged in social work (p.34).

The Research: Urban Aboriginal Women talk about resilience

Aboriginal epistemology [knowledge] is found in theories, philosophies, histories, ceremonies, and stories as ways of knowing. Aboriginal pedagogy [teaching] is found in talking or sharing circles and dialogues, participant observations, experiential learning, modeling, meditation, prayer, ceremonies, or story telling as ways of knowing and learning (Lenore Stiffarm as quoted in Battiste, 2002, p. 18).

My research on resilience was explored in two ways: through the use of a discussion group and through one-to-one interviews. Urban Aboriginal women who lived on or off reserve,¹ and wanted to participate, were invited to a discussion group. The discussion with three women, S'Takaya, Spakwus and Ghanage, was a two hour, semi-structured group with the following purposes: to define resilience from an Aboriginal perspective, to explore the process of developing resilience and to design an appropriately broad question for use in the one-to-one interviews. As stated by Anderson and Jack (1991), "if our questions are general enough, women will be able to reflect upon their experience and choose for themselves which experiences and feelings are central to their sense of their past" (p. 17). Furthermore, the women in the discussion group felt that if the question was broad enough, it would allow for both positive and negative stories to emerge as a negative story may have great significance for its narrator.

The one-to-one interviews were structured as 90-minute, in-depth interviews with the goal of exploring resilience through significant moments in two women's (Spakwus and Kathleen) lives. Both participants were asked the same question: "What are the significant moments in your life that have helped you to get where you are today?"

A total of four women participated in the two activities. One

1 I included on or off reserve in order to be inclusive and not exclusive of women living in the urban area of Vancouver.

woman grew up in foster care and connected to her Aboriginal culture as an adult. One was a second-generation survivor of residential school. She remains closely tied to her culture and community. The other two women went to residential school, live in the Vancouver area and come from reserves that they visit frequently outside of Vancouver.

After reviewing the discussion group transcript² I was able to identify key points that became the ideas from which the one-to-one interview narratives were compared. From this, relational themes emerged in the form of:

1. relationship with the Creator;
2. relationship with others;
3. relationship with self.

It was this aspect of the research process that led me to explore the Medicine Wheel's holistic teachings. The Medicine Wheel is a continual process. As such, it moves away from a linear framework and becomes a culturally appropriate tool for analysis to explore the complex subject of resilience from an Aboriginal perspective.

Looking at Resilience using the Medicine Wheel

Life experiences are processes, which makes 'being' a different experience than that in which the world can be explained by discussion of content. Whereas the Western approach to the world is one in which everything is categorized and named, the Native American way of being in the world involves a relationship and moving in harmony with the seasons, the wind, and all of creation (Battiste, 2000, p. 92).

The existing literature on resilience reflects a worldview that is linear in perspective (Cross, 1998). Scholars can go beyond this linear way of thinking, making use of Aboriginal knowledge and wisdom that already exists in the Medicine Wheel and that focuses on the process of interconnectiveness and dependence between individual, family,

2 This has been referred to as inductive in qualitative research. The type of analysis is referred to as content analysis, which requires the reading and re-reading of narratives to identify key categories and themes. In other words it is known as emergent themes coding.

community, Nations, the natural world, and the Creator in the form of circles within circles. The more interconnected and aware of that flow, and the more experience one has on her journey, the more likely one is to be able to move toward her vision or goal. These perspectives honour the voices of my sisters and those who have gone before me. This wisdom has been disregarded in Western discourse and it is my intention to honour it here.

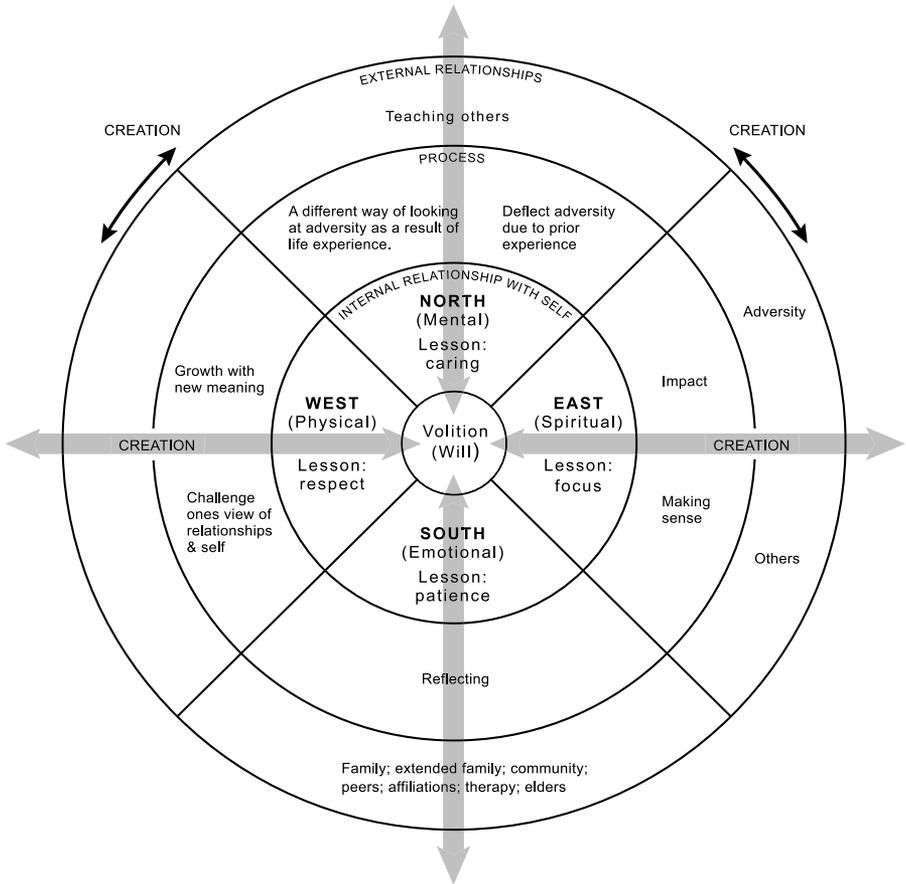
Medicine Wheel teachings have been around for generations. Battiste (2002), for example, emphasizes the importance of considering this knowledge. She writes that, “Eurocentric thought asserts that only Europeans can progress and that Indigenous peoples are frozen in time, guided by knowledge systems that reinforce the past and do not look towards the future” (p.4). My research on resilience looked to the future and to the creation of different images of ourselves that provide the rationale to look critically at the definition of resilience and provide an Aboriginal inquiry into the process of resilience. As Battiste (2000) adds, “...there are legitimate forms of generating knowledge in the Native community and that this knowledge is valid in its own right, standing alongside that of other cosmologies” (p. 99).

By using the Medicine Wheel to explore the process of resilience I was able to demonstrate the interconnection of the relational themes. The Medicine Wheel, as Hart (2002), explains,

...is an ancient symbol of the universe used to help people understand things or ideas which often cannot be seen physically. It reflects the cosmic order and the unity of all things in the universe. Indeed, it can be expressed in many ways, as there is no absolute version of the wheel (p. 39).

The model presented in the following diagram is an expansion of the medicine wheel, as outlined by J. Bopp et al (1984), that becomes a symbolic visual for the experience of resilience and allowed me to outline the themes that emerged from the women’s transcripts. The complexity of arrows demonstrates the overall relational themes’ interconnecting parts.

A Relational View of the Medicine Wheel



Findings and Discussion

The following findings and discussion explore the use of the Medicine Wheel in explaining the women's journey. The women in the discussion group were asked: "What is resilience?" The following are their definitions.

Spakwus, who is a second-generation residential school survivor, offered the following statement:

The idea of trying to find inner balance, ...I'm constantly trying to, trying to find balance...within myself. Spiritually, mentally, emotionally, physically. ...So I guess for me when I was thinking of a resilient person hopefully that they're some place along the path...where they're trying to find that balance. ... I haven't used [the word] resilience a lot. I mean the word that kept coming up for me was perseverance.

She later used symbolism to describe the process of resilience:

I was bike riding...there was this hill that I was trying to push myself up and I was like using a visualization for it. Like I was seeing myself actually as an eagle, having wings and just being really light, instead of having legs, just flying up this hill.

For Ghanage, who is a residential school survivor, her idea of resilience was explained in the following example:

...what I picture when I think about resilience is a rose bush that has been clipped constantly...you know but that's what I see when I think about resilience...

S'Takaya, who grew up in foster care, offered her idea of what resilience is:

... there was certainly many times where death had breathed upon me and I lived...I thought about it later that you know God has some plan for me so, and I could never figure out like what was it in me that I didn't kill myself...I don't really understand it but I don't know if I would have characterized it as resilience.

In defining resilience, each of the women provided information about key factors in the process. Resilience becomes a process that includes symbolism, the ability to grow despite adversity and a universal energy that has been characterised as God or the Creator. These factors can be explained by the symbolism of each of the four directions (East, South, West, North) and the lessons that each direction offers within the Medicine wheel.

When Spakwus was discussing resilience as the ability to set goals by having a focus and a direction, she was referring to perseverance as the ability to attain that goal. When thinking about the Medicine Wheel as a tool for analysis, perseverance and goal setting are two of the steps needed in order for us to carry out or develop volition. As expressed by Bopp et al (1984), volition, or will, helps us to develop the four aspects of ourselves (spiritual, emotional, physical and mental) that are indicated on the Medicine Wheel. In essence, one would use her volition to actualise the four aspects of the Medicine Wheel, which appear to be symbolically specified in the women's experiences as they described their resilience. In defining resilience, according to the women in the group, a process occurs that includes one's volition and spirit. It is a continuous, interrelated journey to seek balance. That journey continues throughout life. When considering this aspect of resilience while referring to the resilience literature, the dichotomy of risk and protective factors say little about the process for adults, as much of the literature has focused on children. When there are more risk factors in childhood, does that mean one is not resilient? That did prove to be correct, based on the stories shared by the women who were interviewed.

In the resilience literature, protective factors have been broken into three categories: individual differences, community resources and opportunities and relationships (refer to chart on page 3). When there is an increase in these protective factors, a child is said to have the ability to be resilient. Rutter's (1987) article suggests that resilience is a process inherent in the child and it is strengthened as the child grows. It is apparent from Spakwus's explanation of resilience that an internal process is needed in order to set goals and persevere toward their attainment. When you add Ghanage and S'Takaya's explanations of resilience, however, there appears to be something missing in the resilience literature. As Ghanage stated, "...a rose bush that has been clipped constantly..." still wants to grow. Or S'Takaya when she said "...God has some plan for

me....” One then gets into a discussion of Spirituality or “God” from an Aboriginal perspective, which includes the statement “all my relations,” those past and present, father sky, grandmother moon, mother earth, and grandfather sun.

Relationship with the Creator

The women in the discussion group made reference to the Creator, symbolism and resilience as a balance. The following excerpt from Kathleen’s one-to-one interview transcript demonstrates this process. Kathleen’s relationship with the Creator came from her relationship with her grandmother,

...from before I went to the school my grandmother made me aware that there was a higher power. And it wasn’t just a something that we did on a Sunday or whatever day it was everyday, it was a fact of life. And you acknowledged the Creator everyday. And no matter what you did, if you were going to do, going to put in a garden or go berry picking... Wherever you went, maybe you went on a trip you prayed. And so, I think that was my very early training in spirituality. And I think that gave me strength.

Kathleen reflected on her early relationship with her grandmother as her source of connection to the Creator. Her grandmother gave her teachings from the North to prepare her for the future.

Relationship with Other

The women in the discussion group were asked to recall what fostered resilience for them. Ghanage replied, “connecting to the world in some meaningful way.” This implies the importance of belonging and connection in fostering resilience, and it includes the journey into the South, where one reflects on her relationships with others. S’Takaya made reference to this in her narrative:

...I think when we look at our own communities I would say that’s probably really true of our communities.... That people who are connected to their communities and their families and something, probably do have more resilience than ones that don’t....

For Ghanage, holding onto traditional values taught by her grandparents was her source of resilience:

...going back to the residential school...residents of the residential school had nothing but negative energy, here you're just an Indian take this scrub brush and wash it off you. You're never gonna amount to anything. I heard this even in my home because my parents were residential schooled. And it's hard not, you know, you're programmed more or less with this negative language, but ...you know who in your life believed, believed in you as a person. . . . Not my parents, but my grandmother or my grandfather, or, they believed in, they're the ones that taught me the values, the traditional values.

The journey around the Medicine Wheel involves a combination of reflection and integration of internal and external relationships, and a movement from the East to the South. This process is precipitated by our volition. It allowed the women to move around the Medicine Wheel. It is important to expand on the linear concept of relationships, which includes parenting quality, close relationships with competent adults and rule abiding peers (Masten, Powel, 2003), to include spiritual and emotional aspects of human nature as reflected in the Medicine Wheel. The women in the group referred to relationships with the Creator and others as a process of making sense. This became evident in the one-to-one interviews with Spakwus and Kathleen.

Spakwus described the environment in which she grew up:

I guess, like growing up as a child I was the person who passed the joint, I was the person who was always around during the parties and stuff like that. But there's times that I remember like, an example would be like, drunk people talking to me and saying, you're so smart, like for your age you're so mature, you dududddu. One that stands out was, he was my dad's best friend...I found out that, no, he was really my biological uncle. And so he was speaking to me, I think at the time, as an uncle and not just as my dad's drunk friend...but he was saying how my head was on my shoulders, how I had my shit together . . . And my grandmother, like just all of them loved Spakwus. All of her friends all of her brothers and sisters....

Spakwus later stated that:

...yeah, I was given a lot of like crap and shit and shame and guilt, that was put on me, but I was given a lot of love and a lot of sincerity, sincere love.

In reflecting on her earlier life, Spakwus could have chosen to focus on the negative, but, by taking the elements of the East and the South of the Medicine Wheel, she chose to make sense of her past by focusing on the fact that she was loved. Spakwus's ability to move through the negative relationships (from the South to the North) that she did have was expressed in her following narrative:

In my family it's just not done. And in my family people don't go to therapy, people don't go look at their own issues,...right now, where I am in my reflection though and even in my journaling and stuff is...I have so much determination, strength, ambition in my goals...

It is not to say that Spakwus's life was without challenges, but her ability to move through the Medicine Wheel shows her ability to reflect on her own needs. As Bopp et al (1984) states, the West is a time of deep personal reflection, a time of going inward and removing barriers before moving into the North.

In order to capture the essence of how Kathleen developed in her later life, it is important to look at the following excerpt from the transcript:

I think I'd have to go back to the very beginning. I was brought up by my grandmother, she was very traditional and she had very strong values... she taught me the value of work, working hard. 'Cause she was very hard..., that nothing came, nothing, you never got anything for nothing. . . . if I misbehaved or did something she would tell me a story about what happened to a child who, that misbehaved...she would lower her voice. If she was ever, if I ever angered her in someway or did something she'd, her voice would drop and I'd know, I'd know right away that I did something that she didn't find very pleasing. But she never reprimanded me. She

was very loving. So those are the things that I learned ... it was, a very warm nurturing environment. And so, when I went to school it was a shock. It was a total, total shock, 'cause . . . she didn't speak down to me because I was a child. It was just always, I was equal. We were equal.

Relationships with others, which are found in the journey in the South, can be both positive and negative, as the narratives demonstrate. What allows a person to move through this is her relationship with the Creator and others and involves the process of self-reflection, connecting and belonging in some meaningful way. What allows a person, however, to complete the journey around the Medicine Wheel into the West is the completion of the journey in the East and the South. The West is where one's views of relationships are challenged, where deep personal reflection and growth occur with new meaning.

Relationship with Self and Self-reflection as Processes in Resilience

The women reflected on relationships or connections to other people as an aspect of fostering resilience. What allows a person who is feeling disconnected to pursue a connection again? It was from this question that self-determination emerged as the theme of relationship with self and self-reflection. As Bopp et al (1984) writes, "self-determination: your ability to use your volition (will) to actualise your physical, mental, emotional and spiritual potentialities" (p. 17). As S'Takaya stated:

...one of the things that's happened is that I've been faced with shame, guilt, sadness, contempt, like all these things that I carried around all my life and I've had to walk through these, which was excruciatingly painful. But it was all the stuff I drank or used to not face it. I've had to face the pain, I've had to walk through it and feel the shame.

The other women also discussed ideas of choice, self-reflection, reaching out, and going through their darkness, despite the pain. As the women told their stories, what emerged was their ability to self-reflect, improve their circumstances and remove barriers that may have kept them from achieving their goals. For example, Kathleen said:

When I first started back at University it was to prove to those

little demons in my head that cause I was told I think every First Nations child in residential school was told that you would never succeed, wouldn't amount to anything. You were dumb, you were stupid and there just wasn't any getting around it. You know you weren't going to amount to anything and that just really struck a chord within me and I thought when I went back to university, I thought I'm gonna show you. I'm gonna show them that they're wrong. So it was, after about a month when I was in university that I realized I was having so much fun that I thought hey, I'm not doing this for them. You know, I'm doing this for me.

Kathleen's narrative showed how she was able to overcome obstacles through self-talk and determination. She later stated that by singing and writing and reciting poetry, she was able to reclaim the voice that had been taken away when she was at residential school. She stated,

“you sing 'cause you sing and it just opens you. And at first it was very very difficult. I used to sing in the choir when I was in the residential school, [it] wasn't by choice....

Resilience, as shown in the women's narratives, is not the disregard of painful events, but the ability to process adversities through relationships with the Creator, others and self. Perseverance has allowed the women to move through adversity and towards a sense of who they are as Aboriginal women.

As with any end, there is also a new beginning. The journey around the Medicine Wheel is never complete. As the lessons in each of the directions are learned, the gifts of that direction move with the journeyer to the next direction, where new lessons and gifts emerge, and so on around the wheel again.

Conclusion

The resilience literature would be enriched by the inclusion and acknowledgement of Aboriginal ways of knowing. The process of resilience can be seen as a lifelong process, rather than a process that occurs only in childhood, based on an assessment of risk and protective factors. It is my hope that the results from this research will confirm and honour Indigenous knowledge and contribute to the existing literature around

resilience by providing Indigenous ideas and ways of knowing. The use of the Medicine Wheel challenged a dichotomous concept of resilience and expanded it to show the process involved in developing resilience. What has come out of this research is confirmation that Aboriginal people do have sources of knowledge and ways of knowing that have been around for generations. Battiste (2000) adds:

We realise that colonisation has had an influence on much of the current state of knowledge. In order to have a true integration of thought, we must make room for non-linear thinking, which will yield a true hybrid postcolonial way of expressing subjectivity” (p. 88).

Resilience can be looked at as a life-long process supported by relationships. Nabigon and Mawhiney (1996) expand on this idea by stating:

...there are four levels of knowledge that help us understand the natural laws of balance. The first level understands self; without this knowledge there can be no balance. The second level is understanding others through our understanding of self. The third level is understanding and appreciating the Creator. The fourth level provides us with a deep understanding of balance. When we can integrate all four levels of knowledge we are in balance not only within ourselves but also with those around us and with our environment (p.35).

As each of the women spoke, their stories reflected an ability to transcend their personal circumstances due to their relationship with the Creator, others and self and move towards a balance in life that is an ongoing process.

Through further research on resilience, we can benefit and learn from Aboriginal people and their ways of knowing. As the passage at the beginning of this paper states, “we know deep inside ourselves the pattern of life” (Hampton as quoted in Battiste, 2002, p.28) and it is apparent that the women who took part in this research did as well.

Future Work

The body of Aboriginal knowledge about healing is already
Nishnaabe Kinoomaadwin Naadmaadwin

immense and is ceaselessly growing. The process of healing can be given expression through a rich array of forms that are already well rooted in Aboriginal cultures: language, ceremonies and rituals, visual art, dance, architecture, clothing, meal-making etc (Healing words article, NA, 2002, p.5).

As a result of misinformation and inaccurate portrayals of Aboriginal people, particularly women, I embarked upon this research with the intent of honouring Aboriginal knowledge and building upon strengths and abilities. As demonstrated in the women's narratives, "...negative stereotypes prevail.... yet First Nations efforts at renew[al] and healing are often under-appreciated or under-reported" (Fleras & Elliott, 1996, p. 192). It is essential that the strengths and abilities of Aboriginal women be recognised and acknowledged, since currently all forms of popular media, not only perpetuate stereotypes, misinformation and negativity, they also under-report and under-value Aboriginal women's achievements and resilience. As Fleras and Elliot (1996) expand:

...much of it reflecting a popular view of [A]boriginal peoples as "problem people" who "have problems" or "create problems" that cost or provoke. Some of this media exposure is sympathetic, but much reflects degrees of indifference or ignorance. Most coverage is inadequate to provide anything but a fleeting glimpse into changing realities. The circulation of this misinformation is unfortunate (p.191).

Further, Fleras and Elliot (1996) write, "negative images make it difficult to recognize the positive contributions of [A]boriginal women to community life and social change. Historical and social factors work against adequate recognition" (p. 201). As the women in this research have demonstrated, their journeys have been both positive and negative and have included a cultural commitment that has allowed them to persevere and move forward in their life goals. Through the use of spiritual practices, teachings from Elders, stories, and singing, the women have maintained a connection with their culture. Through this, they have been able to internalise many of the teachings that acted as a buffer to outside systems of adversity, including negative images. In looking at the ability to move forward, it is essential to keep in mind: "resilience is not the cheerful disregard of one's difficult and traumatic life experiences; neither is it the naïve discounting of life's pains. It is, rather, the ability to bear up in spite

of these ordeals” (Saleebey, 2002. p. 11).

As the women who participated in the research demonstrated, self-determination has not been an easy journey, as the policies of assimilation have impacted them and made this journey a difficult one. It has also impacted socially, the level of cultural commitment, traditions, values, and customs that Aboriginal people as a whole practise. When this impact is understood, as a result of knowledge of the history and timelines, then cultural commitment among Aboriginal women will increase. This needs to come about in order for Aboriginal women to reclaim and be self-determined. Through the use of talking circles, sharing feelings, being in touch with feelings, talking with a trusted friend or counsellor, journaling, and healthy relationships (Cross, 1998, Green, 2003, Sal’i’shan, 1999, Squamish Nation, 2003), Aboriginal women’s emotional health will improve and their journey will move them forward with greater recognition and balance.

Further, the continued revival of ceremonies and languages is needed for the transmission of culture to future generations. “Negotiations, policy development, teaching and practice could assist in enhancing self-determination for Aboriginal people but all races must be a part of this process” (Green, 2003, p. 19). As all races are a part of this process, it is important that Aboriginal people work towards their own desired future with the assistance of others. Aboriginal knowledge is a legitimate form of knowledge, as demonstrated in this research; it merely takes a different form than the more broadly understood Western perspective.

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