

Thessalon First Nation's “Journey to Wellness”

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Abstract

Thessalon First Nation, like many other First Nations, has been affected by and continues to deal with the aftermath of the Residential School System. This article highlights the activities undertaken by Thessalon First Nation as they “Journey to Wellness.” The development of the “Journey to Wellness” proposal marks the beginning of Thessalon First Nation’s development of a social safety net to deal with the inter-generational effects of the Residential School System on the family and community. Beginning with the creation of a Project Team, Thessalon First Nation has made great strides in dealing with the issues resulting from the Residential School System. Thessalon First Nation now has a mental health worker, has produced a video dealing with resiliency of the community, and is working towards creating a community that has the capacity to deal with the traumas resulting from the residential school experience.

Introduction

Thessalon First Nation (TFN) is a small First Nation community located 10 kilometers east of the Town of Thessalon, Ontario, one hour east of Sault Ste. Marie, Ontario and 2.5 hours west of Sudbury, Ontario. This community has a total population of 525 band members. A total of 125 band members use Thessalon First Nation (TFN) health and social services which operate out of the Community Centre, Band Office, Medical Clinic, Band Garage and Volunteer Fire Department. Eighty-five of these band members live on reserve and the remaining 40 band members live in the surrounding area, mostly in the town of Thessalon.

Like many First Nations communities, Thessalon First Nation continues to deal with the impacts of the residential school system on its community members. According to the Aboriginal Healing Foundation (2003), communities have and continue to suffer social, economic and political disintegration (p.16). This resultant social, economic and political disintegration has also impacted the Aboriginal community's ability to maintain its distinct language, threatened its culture and way of life and robbed members of the opportunity to develop parenting skills, resulting in the inability to parent their own children. The impacts of the residential school experience have resulted in a loss of identity, self-esteem and self-worth that has been complicated by abuse, trauma, poverty, and neglect (AHF, 2003, p.16). This represents the way of life that many communities are struggling to overcome.

The physical, emotional and sexual abuse that was rampant in the residential schools is becoming well known as Aboriginal people begin to talk about their experiences (AHF, 2003, p. 16). Learning about the history of abuse, trauma, poverty, and neglect experienced by Aboriginal peoples is a first step in the healing process. According to the study by Assembly of First Nations (1994), the healing process occurs over time and includes four aspects: recognizing, remembering, resolving and reconnecting (AFN, 1994, p.123).

Healing begins the moment an individual recognizes that his life is no longer manageable and when he/she reaches the realization that he/she is much more worthwhile than previously believed. Sometimes a person will recognize that it is time to change when his/her activities go against deeply held values. This is when people make the decision to begin

rebuilding their lives. Often this involves taking responsibility for self and making that commitment to build a healthy life (AFN, 1994, 123-124).

As stated in the study by the Assembly of First Nations, "remembering helps to break the code of silence" (AFN, 1994, p. 125). Remembering involves acknowledging the residential school experience and letting others know about that experience. Sharing the experience allows a person to open up about past hurts and reach out to others. Beginning to regain trust, through the sharing of stories, is a necessary first step towards healing (AFN, 1994, p.125-127).

Further, healing involves moving beyond the remembering to resolving issues that surface during the healing process (AFN, 1994, p. 127). It is common for individuals to express grief and anger when they realize the impact that the residential school has had on their lives. It takes time for individuals to come to terms with these issues and move towards a deeper understanding of how this has truly affected their lives. Sometimes, this involves seeking guidance from one's community, outside sources, traditional counselors or Elders, or even from mainstream resources such as counselors, social workers or psychologists.

Thessalon First Nation (TFN) has undergone a series of public consultations to develop an economic strategy. In doing so, they have developed a vision statement that reads: Thessalon First Nation is "to become a vibrant, self-sustaining community wherein the social, economic and spiritual needs of all community members can be satisfied". This vision statement formed the basis upon which Thessalon First Nation (TFN) sought to address the root problems affecting the mental, physical, spiritual and emotional well-being of its community members.

History of the Project

In 1998, TFN hired a mental health consultant to put together the "Journey to Wellness" project proposal to the Aboriginal Healing Foundation. This proposal was intended to build upon the TFN's mandate: "to guide our community into a holistically healthy future by working together through leadership, education and opportunity". Although programs existed in the community, there was still an element missing to address the Residential School experience and its negative impact on future generations that could "guide and direct the community into

more productive and meaningful activities". The consultant, with little involvement from the health and social service providers, completed two draft proposals: the first proposal outlined a comprehensive traditional and cultural healing component that would culminate in the development of a residential school video and the second proposal provided the human resources essential to recovery and skill development (Education and Awareness; Assessment and Follow-up; and, Aftercare and Referral). While two proposals were submitted, the only project to receive funding by the Aboriginal Healing Foundation was the video. This was problematic, as TFN was relying on the human resources from the first proposal to provide the social safety net and skill development needed to produce the video.

Approval for the "Journey to Wellness" project was received in November 2000. In January 2001, TFN Health Services entered into a service agreement with Northeast Mental Health Centre for Clinical and Program Consultation.¹ TFN allocated funds from the video project to hire these consultants to assist in carrying out aspects of this project and to provide a social safety net that would allow the community to carry out the activities related to this project.

The roles of the Consultants to TFN were:

- Program Consultation to TFN Health Director and Project team
- Clinical Program Consultation to TFN Mental Health Program
- Assist in identifying training needs and professional development for health staff
- Assist TFN health services in program and service planning as it related to mental health services.

One of the first activities undertaken by the consultants was to meet with the project team and review the proposal. The Project Team consisted of the Director of Health and Social Services, a Community Health Representative, a community Health Nurse, Band Manager, and a community Support Services Worker.

1 Northeast Mental Health Centre is a mental health facility located in Sudbury, Ontario. This mental health centre has a long history of providing supervisory and consultative services to First Nation communities in the Sudbury and Manitoulin area that dates back to 1975 when the first traveling mental health clinic was established in Wikwemikong in response to the suicides that had occurred in that community.

In reviewing the proposal, the consultants soon realized that the project team needed more education about the project. It became apparent that the lack of community involvement in writing this proposal had resulted in the community health and social services workers having little knowledge about their specific roles and responsibilities related to this project. The project team had to be re-educated about the proposal for them to be able to support it. In order to accomplish this and to re-create a sense of ownership over this project, the consultants involved the community workers in a discussion about their roles and responsibilities related to the project.

In June 2001, TFN resubmitted the second proposal to the AHF for a Program Coordinator under themes Community Therapeutic Healing and Developing and Enhancing Aboriginal Capacities. This proposal received formal approval in December 2001. It took, however, approximately one year to find a suitable candidate to fill the position of Program Coordinator.

In June 2003, TFN received multi-year funding (2 years) from AHF to hire a mental health worker and to continue the services of the Clinical and Program Consultant. TFN continues to receive clinical and program consultation from the former consultant through a private agreement.

Description of the Project

Journey to Wellness –

Themes: Restoring Balance & Honour and History

The comprehensive traditional and cultural healing component of this project was achieved through the guidance of traditional medicine people. The purpose of the traditional healing component is to restore balance with one's spiritual, intellectual, emotional and physical well-being and to maintain a healthy relationship with one's self, family, community, Nation, and natural environment. As such, this project would teach community members about the medicines, introduce them to talking circles, regalia making, traditional dances, drum making, and language with these activities culminating in a powwow. Ceremonial practices such as the sweat lodge and the four seasons ceremony would also be available to those who requested it. Family and community members who required

additional healing interventions would have access to traditional supports (traditional healers/helpers, cultural therapeutic methods, etc.) and Western social casework practice.

The second part of this proposal, the development of a video documenting first and second generation survivors' experiences at residential school, would highlight the history and family life changes of TFN before and after residential school. The final version of the video was presented to community members at a feast planned to commemorate this special occasion.

Another way to view culture is through telling the story of a nation. Recording a way of life is one means of understanding history. Looking at the history of a community assists in defining current practices within that community. By developing a video with first and second generation survivors of residential schools, that both documented and honoured their experiences at residential school and tracked the history and family life changes of TFN before and after the introduction of the residential school system, TFN was able to highlight the survivor's spirit contained in the extended families within the community. The first and second generation survivors, through the video, were able to recognize the effects of residential school on their patterns of behavior and were able to make recommendations to begin the healing process within the community. These recommendations included a return to culture and traditions.

Before development of the video, a series of community workshops were held with community members in order to enhance the survivor leadership skills, develop cultural resources, and increase sensitivity awareness and positive parenting skills. The community members also needed to be educated about the purpose of the video including what they hoped to achieve by producing this video. The community also felt that the creation of a social safety net for participants in the video production was necessary since they would be dealing with some very sensitive issues.

Journey to Wellness – Themes: Community Therapeutic Healing & Developing and Enhancing Aboriginal Capacities

This project was intended to offer support to the survivors and their families throughout the healing process. It was meant to holistically balance, compliment and enhance the existing services in the community. The three components of this project were:

- **Education and Awareness** – consisting of workshops, seminars, needs assessments, traditional healing circles, traditional teaching circles, individual, family and group counseling, survivor programs, prevention programs, and grief counseling;
- **Assessment and Follow-up** – (for the people involved in the initial process) could include individual, family and group counseling, home visits, phone calls, and child and youth prevention programs, and;
- **Aftercare and Referral** – to specific programs and services (parenting programs, family violence programs, sexual and physical abuse counseling, drug and alcohol treatment programs), as well as referrals to specialized services (Thessalon First Nation, Journey to Wellness Proposal, 1999).

The intention of the project was to help residential school survivors and their families to understand and accept the historical legacy of the residential school and its intergenerational effects. Initially a program coordinator position was proposed in order to respond to the mental health, prevention and alternative activity needs identified in this project. This position eventually evolved into the mental health counselor position. The healing of survivors and their families is contingent upon having the necessary supports to assist them through the healing process.

Program Coordinator

A Program Coordinator was hired to carry out the activities described in the project. In addition, this coordinator was also responsible for maintaining regular meetings with the project team to ensure that all aspects of the project were being carried out. The coordinator was responsible for ensuring that participants were educated about the video production and that the project team was informed about the progress of the video production.

The coordinator was also responsible for:

- Ensuring survivor input into the development of the project;
- Coordinating community and elders focus groups;
- Coordinating ongoing healing workshops;
- Providing counseling services;
- Coordinating education skills building workshops;
- Coordinating team building workshops for the project team; and,
- Providing support to the participants during the production of the video.

Mental Health Counselor

Upon completion of the Journey to Wellness Video Project another proposal was submitted to change the role of the Program Coordinator to a counseling position. TFN received multi-year funding (2 years) from AHF to hire a mental health worker. AHF recognized that healing does not occur once a project is finished. Healing takes time. AHF understands that increasing the awareness and understanding of the historical impacts is a first step to healing. Given that understanding, having a mental health worker is necessary for TFN to continue to heal from the negative impacts of the residential school system on its community members.

The role of the mental health worker is to:

- Provide mental health counseling services;
- Coordinate traditional healing workshops and ceremonies;
- Coordinate educational skills building workshops for community members;
- Continue to educate about the history of residential school and the intergenerational impacts;
- Celebrate community growth;
- Develop a network of resources; and,
- Teach educational skills building workshops for the project team.

The availability of counseling services will assist survivors and their families to be empowered to make healthier life choices thereby increasing self-esteem, self-worth, dignity, and enhancing their identity as Native peoples. Another benefit of this project was to promote responsible behaviour within survivors and their families which would, in turn, lead to decreased family violence, sexual and physical abuse, substance abuse,

school dropouts, and criminal activity which would create a vibrant, self-sustaining community based upon good relationships.

Goals of the Project

TFN Health and Social Services designed the Journey to Wellness program to address the physical and sexual abuse that community members experienced in residential schools and the intergenerational effects on families of these residential school survivors.

The expected results of these two proposals were basically the same:

- A greater understanding of the historical legacy of the residential school system by the survivors and their families;
- Increased skills in coping with the physical, social, emotional and spiritual impact of residential school experiences;
- A resulting reduction in the negative coping behaviours including substance abuse, family violence, suicide, depression, and aggression;
- Breaking of the intergenerational impacts of the residential school experience that are demonstrated by lowered self esteem, unemployment, school failure and drop out, teen pregnancy, and family breakup; and
- An increased self-acceptance, personal motivation, achievement, recognition, communication, interpersonal skills, and personal growth (Thessalon First Nation, Journey to Wellness Proposal, 1999).

The first proposal also included as an expected result a "Memorial plaque in honour of the survivors and those who passed on and a community feast". The completion of the video project was celebrated by a community feast at which the video was formally presented to the community.

The focus of this initiative was to assist the community health and social service providers to develop new skills and strengths in order to help the community succeed in the future. Initially, the educational skill building workshops included Suicide Intervention, Sexual Abuse Training and Grief and Loss. Other workshops were offered over the course of the project, all aimed at helping the community workers gain the required skills to work more effectively with the community members and to

increase the capacity of the community workers to contribute to the social safety net required in this project.

Another goal of the Journey to Wellness project was to provide assessments, counseling, and education and referral services to prevent the development of negative patterns of behaviours (such as substance abuse, physical abuse and sexual abuse) within community members. Counseling services were made available to community members. Initially, this was provided by the consultants to TFN. Later the Program Coordinator assumed this role with clinical supervision coming from the consultants.

Survivor leadership training provided the first and second generation survivors with the skills necessary to enable them to interact and share their stories, their strengths, their experiences, and aspirations with the community. In doing so, this would open a dialogue with community members and create a necessary first step that would address the harmful and hurtful behaviours that were being demonstrated in the community. Educational skills building workshops were also offered to this group to empower them to deal with the impacts resulting from their experience with the residential school system.

Development of a social safety net

In order to carry out the project, the project team felt that it was necessary, given the devastating impacts that the residential school system had on its community members, to develop a social safety net. This was an important step as the community anticipated unexpected negative responses such as re-traumatizing of participants through participation in the production of this video. This social safety net also included:

- Initially, direct clinical services were available from Northeast Mental Health centre consultants. This responsibility was later transferred to the Program Coordinator and then on to the Mental Health Worker;
- Development of a mental health services policy and procedure manual;
- Clinical and Program supervision and consultation;
- Development of a case management system;
- Training and workshops provided to the Safety Net (Project Team);

- Availability of support counselors during and after workshops; and
- Referral to the mental health worker or other internal/external resources.

Impacts of the Project on the Community

The impacts of this project are evident through the participation in community programs and through the changes in attitude of community members and project team members resulting in an overall positive sense of wellbeing and sense of community. This section highlights practical examples to demonstrate these positive changes. Overall, there is a noticeable increase in the participation rate of community members in the programs being offered.

In recognition that the community is at different stages in terms of learning about its culture, it was necessary to approach introduction of the culture very slowly and with sensitivity to the needs of the community. They had to be careful that those who wanted to learn would not be offended by the approach and turned off if they did not do something the "right" way. They also had to be considerate of those who practised another way of life/spirituality. One of the biggest lessons learned through this process was about the imposition of another way of life on a people and they had to be conscious of the fact that they too could be imposing on their own people by their approach. Therefore the approach needed to be sensitive to all these needs.

One way to introduce the culture that seemed relatively safe was through craft making (making drums, moccasins, and regalia). One of the first craft workshops undertaken was a drum making workshop. This workshop was well attended by all community members – children, youth, adults and elders. Here it became evident that introduction of cultural activities had to proceed slowly. The project team noticed the cautious approach that participants were taking. Many of the participants chose first to sit and observe what was happening and very gradually began to listen to the teachings. They could see the communication begin to develop between the community members and then observe them as they tried to help one another construct their drums.

This beginning to work together and to communicate with one another was carried over to the moccasin making workshop. This

workshop drew more of the Elders out. There appeared to be more sharing and talking going on in this workshop between community members. Elders began sharing their stories. Clearly, this demonstrated that the sharing was something that was needed in peoples' lives.

The Regalia making workshop continued to promote these positive relationships between community members. There was a lot of humour, laughter and sharing that occurred during this workshop. A highlight of this workshop occurred when a community member began to share how she had made her regalia. She described the process speaking in her Native language. This was a bonus since the language is close to being lost in this community and this woman was able to share her knowledge of the language with others. It was hoped, at the beginning of the project, to encourage more people to begin using their language. This demonstrated that there were still people with that knowledge who were able and willing to teach others.

The Regalia making workshop was concluded with a coming out ceremony at TFN's Annual Traditional Powwow. The majority of the people who completed their moccasins and regalia were honoured in this coming out ceremony. The Chief of the community acknowledged their hard work and success. The ceremony concluded with the sharing of strawberries. The spectators were amazed at the effort and time taken by the community members to make their regalia. This truly was an uplifting experience for the community members to be noticed and recognized for their efforts.

These activities are highlighted since it shows how the community is gradually getting involved in learning more about their traditions. These are very small but necessary steps that allow the community to move at its own pace. People begin with what they feel safe with and gradually they are open, based on their experience, to learning more.

In order to assist the community to break the intergenerational impacts of the residential school experience, the community took a preventative approach with its youth. The focus was on building self-esteem, introducing traditional and cultural activities and enhancing social skills. Activities planned for the youth included a three-day wilderness camp, a week-long self-image workshop, a teen wellness day, and participation in a Berry Fasting teaching.

During the wilderness camp, the youth learned about traditional medicines. They were also introduced to traditional teaching around responsibility and roles of young men and women.

The self-image workshop was successful in that six of the nine youth who signed up completed the week long training. Those who completed the training showed commitment to being there daily and to being part of a positive learning experience. They learned what self esteem is and what is needed to gain self-esteem. They learned to recognize the differences between positive and negative self-esteem and reflected on how they can acquire positive self-esteem.

The youth involved in this workshop also participated in a personal scavenger hunt. The objective of this activity was to encourage the youth to identify other people in their community who enjoyed activities and similar interests as the youth. The youth were given a list of questions and asked to go into the community to find people who were described in the list. The outcome of this activity was that the youth learned who the adults were that had interests similar to them. The youth were able to connect with people of similar interests and this also assisted the youth to build a support network of people that they can turn to for specific help.

The teen wellness day focused on the importance of self-care. This activity was well attended by the youth (82% participation rate). The youth were introduced to various alternative healing methods such as Reiki, Aromatherapy, and Card Reading. Involving the youth in these activities gave them an idea about the need for self care and it also provided them with an idea about what areas they needed to focus on right away in order to stay relatively healthy. The youth seemed to enjoy the aromatherapy session and commented that they would like to "learn more about the stuff that helps you calm down". They also commented that they enjoyed all the sessions and "hope to see you guys again".

The young women in the community were able to attend a Berry Fast teaching that was offered at the Friendship Centre in Sudbury. This was an opportunity for the young women to learn more about the teachings. These young women were impressed with the teachings and shared with the community the commitment and responsibility needed when undertaking the Berry Fast. While no one was ready to make that commitment, having learned about the teachings allowed the young

women to make informed choices and increased their knowledge about traditional ceremonies.

The impacts of this project were also evidenced in the activities planned for the men and women of this community. Retreats that blended Western and Traditional activities were planned for both men and women (separately). The women's retreat presented different approaches to self care such as Reiki, Traditional Healing, Reflexology and Card Reading. Interestingly, there was almost 100% participation rate amongst the mothers. Again, this shows that women are generally more accepting of being participants in activities, especially activities that involve self-care. Comments received from the women indicated that they enjoyed this retreat:

“It's nice to be able to have programs in our community.”

“I enjoyed the day and it was what I was hoping for.”

“I have learned something about dreams.”

“Hoping to learn something more about my future”

“I really enjoyed today.”

“Hoping to see it here next year”

On the other hand, there was low attendance by the men for the men's retreat. Those who did participate were encouraged to share their perceptions of what happened with the other men in the community. Since this was such a new experience for the men, they were slow to participate and chose to observe what the activities were about first. Gradually, they began to take part in the activities. There was one young man who seemed to enjoy the planned activities. This was seen as positive since the experience shared by this young man can increase the potential for more young men to develop an interest in self-care.

In terms of mental health counseling services, when the worker was first introduced to the community, she had planned on a period of orientation prior to beginning counseling clients. From the first day, however, she was inundated with clients asking for service. Since the beginning of the program, the worker has noticed an increase in the number of male clients accessing services and attending community activities. Overall, the attendance at community programs remains the same with women being the ones more likely to attend.

This indicates that once the healing journey has started, it needs to keep going. Thessalon First Nation has developed an interest in learning more about their culture and traditions, is receptive to self-care, and would like to see similar activities continuing. Further, participating in these activities has really improved the relationships between all community members, resulting in a greater sense of community, cooperation, caring and sharing.

Not only has the Journey to Wellness Program benefited the community members, the project team has also felt the impacts. At the beginning of the project, community meetings were introduced to update the community members about the Journey to Wellness project and get their feedback into what was happening, specifically into the development of the video. The community meetings are continuing and community members are able to make recommendations about programming in the community. In addition, the recommendations made by community members are being included in TFN's healing plan and the community workers continue to use the recommendations for community planning purposes.

Skill enhancement training for the project team has contributed to the development of the team. Training in suicide intervention, sexual abuse, and grief and loss has contributed to the confidence of the team to be able to deal with the issues arising out of community member participation in the project. Community members are able to access resources in their own community rather than being referred out, although this service is still available when issues are beyond the capacities of the community workers.

While production of the video was a very stressful experience for the project team, it also proved to be a very uplifting experience. The project team learned to work cooperatively with one another. They also learned about involving the community in the decision making. They have developed good relationships with the community. The negativity that was present at the beginning of the project (not sure of their ability to carry out the project, not understanding the impacts of the project, not understanding their roles and responsibilities, and not knowing whether they could count on one another) has been replaced with a positive work environment based on mutual respect, cooperation, trust, and support. Team members are able

to share their ideas openly and with the understanding that they are being listened to and that their ideas are respected.

Being able to view the video upon completion was also an uplifting experience. The project team became very emotional when they first saw the video. Not only were they able to accomplish what they had set out to do, they were also able to view what the community members thought about their community. Even though the video recognizes the problems associated with the residential school experience, it also helps the community to realize that family and community are still central and that there is a need to continue to support one another. One participant commented about how the community was her home, “even though it is small, we are all a family”.

The video also made recommendations for building on the positive sense of community that already existed. This included reconnecting to family, traditions, and culture and making plans to ensure that those traditions continue. Comments made by video participants include:

“It is important for young people to learn about who they are”

“We need to get back our culture and traditions. We are in the beginning stages of getting this back”

Participants were asked to use one word to describe what they thought of their community. They responded with “family,” “friends,” and “beautiful.” After seeing the video, the members of the project team described how they felt “proud” that the community members see themselves in this way.

In recognition of all the positive changes evident in the community, the project team continues to develop the healing journey project. They are currently revising the proposal to continue the good work that has begun. This includes developing a new work plan, reviewing roles and responsibilities and identifying additional resources (human and financial) that will assist them in the project. Plans are also being made to access long-term, annualized funding to ensure that this program continues.

Conclusion

The Journey to Wellness project has helped TFN better understand the impacts of the Residential School System on its community members. The steps taken by TFN to carry out this project have contributed to the development of a positive community environment and assisted TFN to effectively address the negative impacts resulting from the residential school experience.

By sharing how TFN was able to address these negative impacts and highlighting the success of their project, it is hoped that other Native communities will be inspired to begin addressing these issues in their communities. This is only one example of how Native communities can begin addressing residential school issues. Finally, this document will be used by TFN to justify to potential funding agencies the need for ongoing funding to continue this healing journey.

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