BECOMING AUTHENTIC ALLIES
WITH FIRST NATIONS PEOPLE

by

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ABSTRACT

This project examines ways for social workers to be effective when working with First Nations people in their respective villages, and specifically in the areas of child welfare and community development. My aim is to give insight to social workers willing to practice anti-oppressive social work, as authentic allies with Aboriginal people. This approach incorporates the theoretical perspectives of structural social work practice, as well as becoming aware of the importance of the Aboriginal World Views to First Nations people in their struggles for self-determination and self-government. This retrospective modified case study allowed the researcher to reflect on his personal experiences and then compare this experience with relevant literature pertaining to the field of structural social work. This qualitative project was also guided by a Cultural Studies approach, in the way of a performance autoethnography, which values subjective experiences such as poetry, lived experiences, and quotes from valued Elders and other important First Nation’s voices. This case study of Yekooche First Nation’s Community Transformation Plan, allowed me to assist the community in developing empowering generalist social work approaches designed so that the residents of Yekooche could take responsibility for child welfare and community development. This project is an example of how anti-oppressive structural social work, coupled with an appreciation for Aboriginal World Views, can be beneficial to First Nations people in their attempts to prevent children from being taken away from their villages, in relocating others, and bringing them home to awaiting families, community, and culture.
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Acknowledgements

I wish to express my appreciation to the ancestors of the Yekooche people, their Elders, their Chief and Council, and to Yekooche band members, for allowing me to share in their aspirations and struggles for self-determination and self-government, over the last two and a half years, as their Community Development Worker. I would also like to thank the Yekooche professional staff for all their hard work. Without this willingness to share the empowering information in their community driven Community Transformation Plan, this project would not have been possible. I salute the resistance efforts of all Aboriginal people in Canada, but particularly, the Carrier Nation.

My thanks and appreciation go to my project committee: Professors Si Transken (project supervisor), Dawn Hemingway, and Margo Greenwood. I will be forever grateful to you all for your support throughout this project. Si’s enthusiasm for Cultural Studies (especially Denzin) was much appreciated. Dawn’s commitment to social action and structural social work values was also encouraging to me. Margo’s passion and appreciation for Aboriginal World Views enlightened and guided me throughout this project and will continue to do so into the remainder of my activist life.

I would also like to thank my partner of 26 years, Tina, for always being there to support and encourage me throughout my university sojourn. Without her love and wisdom, this project would not be a reality. I would also like to thank my children: Rhiannon (her partner Chris), Tessa (her partner Laurel), Brandon, Danielle, Jessica, Ryan and grandchildren: Jordon, Jesslyn, Jayden, Eric and Mackenzie. A special thanks to my mother Flora and siblings: Lynn, Joyce, and especially Doug.
CHAPTER ONE

The Canadian Association of Social Workers (CASW) acknowledged Native peoples' inherent right to self-determination, autonomy, self-sufficiency, and the preservation of culture. At that time, they also recognized that social work education must become culturally relevant... social work education needs to be involved in three salient tasks. That is, social work theorizing needs to construct colonialism as problematic. Furthermore, the curriculum and pedagogical practices employed within social work education must center, along with other diverse perspectives, Native epistemologies and Native methodological understandings. Finally, the profession has a responsibility to disengage from the current colonial politic. It is thus the job of social work theorizing to develop strategies that rupture the dominant colonial politic and effectively support Native grassroots efforts for Native self-determined agency. I view the development and inclusion of feminist anti-colonial discourse within social work education as pivotal in the attaining of these ends (Waterfall, 2003, p.65).

Introduction

This project examines ways for social workers to work effectively with First Nations people (in their respective villages), specifically in the areas of child welfare and community development. Information that will assist social workers in becoming aware of Aboriginal World Views and how these views apply to working with Aboriginal people in their historic struggle for self-government, self-determination, community healing, and collective empowerment will be shared. I will also share my lived experiences from within the context of the village of Yekooche’s Community Transformation Plan (CTP), a plan of empowerment (see Appendix D). This community driven plan is designed to foster the health of community members facing the daunting task of liberation.
The literature reviewed for this project (from Aboriginal and non-Aboriginal writers and advocates) reveals the importance of social workers delivering child welfare services differently from methods used in the past. Social workers must come to terms with past and present genocidal policies that have been and are being used to colonize First Nations people (if they are to be effective working with First Nations communities). Thomas (2003) argues that if social workers do not understand the implications resulting from genocidal experiences such as residential schools and their multi-generational impact on Aboriginal communities, they run the risk of continuing to oppress and jeopardize their effectiveness as social workers. My research examines the role of non-Aboriginal social workers in these changing times of delivering services - roles where social workers are allies, not agents of the state. With this in mind, I believe a structural social work approach, coupled with the desire to have an anti-oppressive practice, is an appropriate and respectful approach to assisting First Nations in their resistance to, and eventual liberation from, oppressive social and political policies.

In the past few years, there has been a transferring of some authority to Aboriginal people by both federal and provincial governments in the areas of child welfare, political governance, and economic development. The current Liberal government in British Columbia has fast tracked this process, in the area of child welfare, by transferring authority to Aboriginal Child Welfare agencies. Unfortunately, this authority shift has also been accompanied by a 23% cut to the original funding for child welfare services and supports (Bellefuille, 2002; Prince George Citizen, July, 2004, p.16).
To assist this process in the northern region of the province, the Northern Aboriginal Authority for Families (NAAF) was formed in April, 2003. I was present at the two day NAAF organizing conference on behalf of the people of Yekooche, as their Band representative. It was an honor being there during on-going discussions that eventually led to the formation of this important Aboriginal specific authority.

The impetus for this systemic shift in British Columbia was initiated by First Nations organizations to reduce the high number of Aboriginal children in the care of the Ministry of Children and Family Development (MCFD) and to return these children safely to their families and communities. Other goals include: providing support services geared toward preventing the removal of children; facilitating the reunification of returning children; and developing and implementing prevention services and capacity building strategies. Other provinces implemented these initiatives years ago and have been successful (RCAP, 1996). One example is the Aboriginal child welfare organization, Awasis Agency of Northern Manitoba. Northern Manitoba had an extremely high number of Aboriginal children in care, while more children were being apprehended on a continuous basis. After the formation of Awasis and a few years of implementing their programs, this pattern of removal drastically changed. Awasis now has one of the lowest child removal rates for Aboriginal communities in Manitoba. The agency believes in supporting individuals, families, and communities in relationship and wellness building (Bellefeuille & Ricks, 2003).

The Royal Commission on Aboriginal People (RCAP) clearly speaks to ineffective removal of Aboriginal children from their homes and communities and the
need for these child welfare services to include Aboriginal ways of raising children along with Aboriginal peoples forming their own child welfare agencies (1996). Some recent approaches to child welfare include: Kinship Ties Model, Family Case Conferencing, Restorative Justice, Aboriginal Head Start, and community child welfare teams. These approaches will be discussed in the project's community case study. As I come to understand these new ways and my experiences with them, I realize that I must begin by first examining my own views and experiences: personally, professionally, and politically.

My Standpoint

Allies’ are distinguished by several characteristics: their sense of connection with other people, all other people; their grasp of the concept of collectivity and collective responsibility; their lack of an individualistic stance and ego, as opposed to a sense of self; their sense of process and change; their understanding of their own process of learning; their realistic sense of their own power - somewhere between all powerful and powerless; their grasp of ‘power-with as an alternative to ‘power-over’; their honest, openness and lack of shame about their own limitations; their knowledge and sense of history [herstory]; their acceptance of struggle; their understanding that good intentions don’t matter if there is no action against oppression; their knowledge of their own roots. These are the characteristics of allies; they are also the characteristics that mark people who are well advanced in their own liberation process (Bishop, 2002, p. 111).

Personal

I have been a social activist for twenty-five years on many fronts both locally, and globally. This lived experience has prepared me for the challenging work I do today, as an ally working with First Nations people in their struggles for self-determination and self-government. My activism is varied and far reaching including such activities and roles as: establishing the Stuart Nuclear Awareness Group (SNAG); participating as a
member of Amnesty International; providing foster care services for twenty years; counseling voluntarily for BC Rail’s Employee/Family Assistance Program for fifteen years; and participating in a trade union for twenty years. In addition to these current roles, my past roles and activities include: board member of Active Support Against Poverty, committee member for Project Parents North, board member of BC Rail, board member of the College of New Caledonia (student representative), president of the NDP Omenica Riding, provincial NDP candidate, phone-line counselor for the Prince George Crisis Center, Down Syndrome support group, member of the Council of Canadians, member of the David Suzuki Foundation, supporter of the Canadian Center For Policy Alternatives, and member of the Community Against the Sexual Exploitation of Youth (CASEY).

In 1992, my partner, Tina, and myself were given commemorative medals from the Governor General of Canada and made compatriots, in recognition of our community advocacy work. In 1993, we were awarded the Lt. Governor of BC award for outstanding foster parenting. We have fostered 75 children and we continue to foster. These personal activities and awards illustrate community activism in one’s personal life, a value held in high regard in the structural social work approach (Bishop, 2002; Carniol, 2000; Mullaly, 1997). Structural social work is a way of life (Ewashen, 2003, p.92).

One of the most significant events in my life, an event that continues to assist me in becoming a culturally sensitive human being, was my marriage to Tina - my soul mate of 26 years. Tina is a traditional Maori woman, from the Tuhoe Tribe of Aotearoa (New Zealand). She speaks and writes her native language. I had the honor of visiting her
homeland and spending time with the Tuhoe People, most notably her father, Ranapia Tamehana, a great leader, who shared knowledge with me concerning the importance of respecting cultural protocols and procedures while on sacred grounds. Unfortunately, my father-in-law recently passed away. Three thousand people from all walks of life attended his funeral. He truly learned the balance of walking in two worlds as did Chief Sitting Bull a Sioux leader who advises us to: “Take what is good from the White Man and let’s make a better life for our children” (Duran & Duran, 2000, p.98).

Tina and I have three children, who have been recognized as First Nations children. Through this recognition, I have witnessed racism and discrimination towards my family and know a little bit of what that pain feels like. Being a white male, I could never fully know the hurtful feelings attached to racism, but I am aware it exists and will work, as an ally, to rid it from the world (Bishop, 2002; Bolaria & Li, 1988; McIntosh, 1989; Mullaly, 2002).

Professional

I am a practicing structural social worker engaged in private practice, as a Community Development Worker, for Yekooche First Nation. Due to past negative experiences with MCFD over the last 60 years, the Band does not use the word social worker, as it brings up bad memories of lost children. However, I am the community contact in child welfare matters between MCFD and Carrier Sekani Family Services (CSFS). My direction is taken from the Community Transformation Plan, a document developed by the people of Yekooche to address ways and means of healing from past and present genocidal policies inflicted against them. Examples of these policies are
found in the imposition of residential schools and the Indian Act:

"To kill the Indian in the child," the department aimed at severing the artery of culture that ran between generations, the profound connection between parent and child that sustained family and community. In the end, at the point of final assimilation, "all the Indian there in the race should be dead" (RCAP, 1996, p. 365).

In recognition of these past policies and subsequent atrocities, the following is a quote from an apology made to First Nations people from our British Columbia Association of Social Workers (BCASW) newsletter, Perspectives:

As social workers, we must also acknowledge shame for, at times, standing silent while injustice have been inflicted on our First Nations brothers and sisters. For our arrogance and our pride, we seek forgiveness and look forward to our new relationship and partnership to begin and grow (p.6, 2003).

I am a member of the BCASW. I have also become a Registered Social Worker (RSW). Being an RSW requires strict adherence to a professional code of ethics. Ife (1997) argues that being a registered social worker is one way to give up some of the unequal power imbalances inherent in social work relationships with marginalized people. This is one of the reasons I became an RSW.

A second benefit of acquiring the RSW is the recognition that this professional credential garners from mainstream society. This recognition is beneficial for advocacy in general and specifically when advocating for a service user in the legal and child welfare systems, and for writing letters of support.

Political

There is no group of people in Canada more involved with politics than First Nations people. Their lives have been dictated by federal, provincial, and municipal
governments with little to no input on their part. Policies and laws stripped them of their lands, culture, and traditional way of life. Many writers refer to these acts as genocide (Duran, 1995; Graveline, 1998; Thomas, 2000; York, 1990).

Within some Aboriginal communities, there is friction and tension between the Hereditary Clan system and the modern Chief and Council, the latter imposed by the Department of Indian Affairs. The new system replaces traditional governance with an election process which has seen leaders elected by simply having the largest families. I am not arguing which is the best system, that is for First Nations people to decide. I am, however, identifying an existing political condition in Aboriginal communities and therefore highlighting the importance of social workers not choosing sides (Adams, 1999; Alfred, 1999; Durst, 1996; York, 1990). The Yekooche First Nation, a Carrier community, is also affected by government changes in community governance.

The village of Yekooche is also directly involved in treaty negotiations with the Queen’s representatives (that is, federal and provincial treaty negotiators) concerning the issues of self-determination and self-government. Treaty talks were halted three years ago until the community came up with a plan to address the concerns of violence, drug and alcohol abuse, child abuse, and other challenging issues impeding the community’s healing. The Community Transformation Plan (CTP) was developed by community members and their professional staff to address these concerns. After three years of implementing this healing and economic renewal plan, the band has successfully moved from number 41 to number one on the treaty negotiation list and is expected to sign an Agreement In Principle (AIP) this coming year. The front page story in the Prince
George Citizen attributed this success to the band's commitment to address issues through their community transformation plan, that includes, amongst other things, a community police office and a permanent full-time social worker in the village (see Appendix C).

Within this context, a social worker must be aware of the role politics plays daily in the lives of Aboriginal people. This kind of awareness may prevent uninformed decisions that may inadvertently jeopardize the Band's position on specific issues. In fact, seek advice from Chief and Council before initiating plans concerning the welfare of the community.

Knowledge, experience, and understanding form the foundation upon which the attributes of an authentic ally are developed. This requires engaging with individuals and communities on all levels - the personal, professional and political. The purpose of this project is to encourage social workers to become familiar with Aboriginal World Views and to practice structural social work with an anti-oppressive approach when working with First Nations people. It is not the responsibility of the oppressed to educate allies of their oppression (Narayan, 1988). I will examine ways of doing this by reviewing literature, sharing my experiences, and through a variety of literary venues.

In Chapter Two, I present the words of Indigenous Scholars, Structural Social Workers, and Cultural Studies Scholars. Chapter Three presents the approach I used in this study, while Chapter Four introduces the Yekooche community and their Community Transformation Plan. The fifth chapter discusses implications for social work. The final chapter discusses the limitations of this project, my personal reflections, and conclusion.
CHAPTER TWO

To the oppressed, and to those who suffer with them and fight at their side
(Paulo Freire, 1999, p.3).

Literature Review

This chapter of the project report, examines two streams of literature supporting social workers’ abilities to work effectively as allies with Aboriginal people. The first stream focuses on Aboriginal writers giving voice to the struggles of Indigenous peoples in their efforts to obtain self-government, self-determination, and empowered communities. They articulate the need for a return to traditional ways of knowing thereby allowing voices once silenced, through colonization, to be heard. (Adams, 1999; Battiste, 2000; Graveline, 1998; Roppolo, 2003). The second stream discusses Structural Social Work and Cultural Studies, two bodies of literature that focus on liberation and encourage anti-oppressive practices (Bishop, 2002; Carniol, 2000; Denzin, 2003; Hall, 1998; Ife, 1997; Moran, 1998; Moreau, 1989; Mullaly, 2002; Mullaly, 1997). Also included in this stream are local voices of structural social workers sharing their experiences.

Aboriginal World Views

Aboriginal academics, writers, activists, Elders, and other important voices, have begun telling their stories of resistance against the holocaust of colonization (Adams, 1999; Battiste, 2000; Duran & Duran, 1995). Since the release of the RCAP (1993), Aboriginal organizations such as the Assembly of First Nations, Nechi, Four Worlds International, and the Indian Residential School Survivors Society, have lobbied
governments to fund Aboriginal organizations and agencies to assist their people in the areas of healing, education, health, and community empowerment. The just settlement of land claims and gaining self-government and self-determination would lead toward Aboriginal people achieving the healing they desire (Durst, 1996).

According to Little Bear (2000), an Aboriginal World View (philosophy) is anchored in constant motion where all things animate are imbued with spirit. The interrelationships amongst these beings, the land, and the spirit create and perpetuate the energy underlying an Aboriginal World View. He also says that the Earth cannot be separated from the actual being of Indians. Everything and everyone is related. Little Bear makes a strong argument for the importance of language; it is here that a person’s cultural map is formed and reflected in customs, values, norms, and societal expectations. More value is placed on the group compared to the individual; collective decision making is highly valued for the survival of the tribe. Qualities in a person including honesty, humor, independence, truthfulness, and strength, are needed to keep the tribes’ balance and harmony. First Nations values and customs are subjectively taught by such methods as storytelling, ceremonies, song and dance that create lived experiences. Education is viewed as a collective responsibility. Little Bear points out that he is writing from a Plains Indian view, but states there is enough similarities to apply to all First Nations. However, he also acknowledges that every tribe has specific issues that relate to its way of being and knowing in the world (p.125).

A Eurocentric World View, on the other hand, puts more value on objective ways of knowing and sees the world in a more linear and singular fashion (Battiste, 2000;
Henderson, 2000; Little Bear, 2000). Essentially this view epitomizes 'the survival of the fittest' whereby the strong/powerful dominate the weak/vulnerable and is rooted in capitalism. A Eurocentric World View may be evidenced in social class structures that exist where professionals such as social workers are seen as specialists. Eurocentric society is complex and relies on police forces, courts, and prisons to keep social order. Eurocentrism features the scientific method of knowing (based on objectivity) as the producer of truth. This world View is enforced throughout the structures of society and is often maintained by hegemony (Smith, 2000). “Look after number one.” A Eurocentric World View makes it difficult for people to appreciate alternative ways of thinking and behaving. Furthermore, mainstream society which dominates this worldview has benefited from the oppression and subjugation of other groups of people. Being members of mainstream society has opened many doors of opportunity, but this is not the case for First Nations people facing barriers of racism and discrimination. However, as awareness and an understanding of a Eurocentric World View are gained opportunities for societal change emerge. However, it remains the responsibility of people to make a conscious choice for change (Hingley, 2000; McIntosh, 1989). An Elder told me, “Us Indians are big business, we keep a lot of professionals working, for example: social workers, teachers, police, and lawyers” (Personal Communication, Anonymous, 2003).

**Anti-oppressive voices**

Mullaly (2002) maintains a social worker’s role is to assist oppressed people in their liberation and not assimilate them to their oppression. He writes that a social worker must decide if she/he is a consensus worker or a conflict worker. Mullaly asserts
that a consensus worker supports the “mainstream” ideology and will continue to “blame the victim” in support of the oppressive, patriarchal, capitalist ideology. The conflict worker looks to the structures of society as the main causes of poverty and oppression. They are aligned with the principles of social democracy, Marxism, feminism, and critical theory (Ife, 1997, Mullaly, 1997). Mullaly (2002) also states social workers must have an understanding of oppression, how it is maintained, and how it affects the oppressor and oppressed (Bishop, 2002; Freire, 1999).

Maurice Moreau (1989) is credited with starting the structural social work approach and suggests that it is the role of the structural/radical social worker to make the helping process more user friendly and to remove the social worker from the perception of being an “expert.” He also maintains that the radical social worker has a responsibility to resist and educate others concerning the inequalities existing in the structures of a patriarchal capitalist society, as well as the importance of building alliances with those marginalized by “mainstream” society. Moreau credits Leonard (1995) and Levine (1989) for shifting structural social work away from a systems theory approach, to a feminist critical approach, with ties to radical structuralism and Marxism. Moreau contends that oppression is a complex system of interwoven forces.

Collier (1993), another radical social work professor, provides invaluable knowledge for social workers practicing in rural communities, especially those in communities with a large First Nations population, or those in semi-remote Aboriginal villages. He is a strong supporter of the “generalist” approach to social work practice, because of the lack of supports and services in remote communities. Likewise, he
advocates for social workers to rely on such supports as: Elders, family members, clergy and other professionals (p.34). He maintains that a social workers’ role in the community is that of an outsider, expert in the ways of the foreign modern society, and one who brings contacts and can access needed information for the empowerment of the people he/she is working for (p. xii). Collier’s radical/structural approach for working with Aboriginal people is sorely needed. This approach supports the people’s struggle, and not the profit margins of a capitalist government (Fook, 1993; Ife, 1997; Pollack, 1998). While structural social work principles align with First Nations aspirations they are also congruent with the principles of Cultural Studies, particularly the belief that working as allies in the liberation of people made marginalized by a capitalist society may one day secure a just and civil society based on equality.

Cultural Studies is a multi-disciplinary approach that allows researchers to draw upon such disciplines as psychology, women’s studies, and sociology as they develop eclectic research approaches designed to support the liberation of oppressed groups struggling against the forces of capitalism, patriarchy, and hegemony (Denzin, 2003; Gramsci, 1971; Hall, 1988; hooks, 1990). This liberatory approach is rooted in critical theory and Marxism and incorporates multiple ways of knowing and expressing silenced voices through art, song, plays, poetry, dance, story telling, and other means of expression. This approach is also qualitative in nature and encourages researchers to tell their life stories (Denzin, 2000).

Cultural Studies and Structural Social Work scholars believe that the messages we try to send about social justice need to be delivered in formats and forums which are
accessible to those we serve. What “structural social workers” refer to as “activists”, Cultural Studies writers refer to as “organic intellectuals.” I will be using this libratory method throughout my project, sharing poetry and words of wisdom offered to me by Elders and other First Nations people.

To my knowledge, there has been little research and literature concerning the need for social workers to have an understanding of Aboriginal World Views in their practice. The BCASW and the CASW both support the struggles of Aboriginal people and encourage social workers to do the same. There have been many indigenous scholars calling for alliances and allies to support their causes (Alfred, 1999; Adams, 1999; Black Elk, 1932; Duran & Duran 1995; Henderson, 2000; Little Bear, 2000; Smith, 1999; Thomas, 2003).

During the sixties, Bridget Moran, a social worker for the Ministry of Children and Families practicing in Prince George and its surrounding communities wrote about her frustrations of delivering inadequate social services to First Nations people (Moran, 1988, 1992, 1994, 1998). She was sickened by the amount of racism, poverty, and oppression, facing Aboriginal people. In true structural social work fashion, she protested to the government of the day and was shortly discharged from her duties as a social worker. Moran went on and wrote books on her social work experiences and remained in Prince George until her death. A local homeless shelter is named after her and more recently, a statue of her sitting on a downtown park bench was erected.

In a 2002 conference held in Moran’s honor and memory, Si Transken, a
UNBC social work professor, wrote a paper concerning Moran’s life: Creativity, Writing, Healing, Connecting, Remembering... (2002). Transken takes segments from Moran’s writings and touches upon her activism and how they are comparable and in line with the philosophy of Cultural Studies (Denzin, 2002; Hall, 1998; Sardar & Loon, 1999). Moran’s activism and social work practice exemplifies a structural approach (Carniol, 2000; Fook, 1993; Ife, 1997; Mullaly, 1993, 2002; Moreau, 1989).

Bridget Ann Moran

Bridget wasn’t afraid to take a stand.
guided by an Irish heart
she cared for all, not just a few
at times this proved hard to do
structural social worker
mother of four
she spoke of injustices
and a lack of supports
to provide adequate care.

Premier W.A.C. Bennett
had her fired
a few weeks later
he heard her roar
on the legislature floor
soon kicked out of there
to no avail
for voices of reason
are mistaken for treason,
or at least... a little rebellion!

Bridget Ann Moran and
her Irish charm
never meant any harm
an inspiration
to those in the “trenches”
a light of hope
for the down trodden.
souls of activists before
could be seen in the twinkle
of her eyes
heard in the laughter
of her voice

I assure this:
when activists are around
the likes of Bridget Moran
can easily be found.

(Fraser, 2002)

Shelly Johnson, completed an MSW thesis entitled, Reclaiming Their Places:
Seven Women Chiefs of Northern B.C. (2000). In it, she touched upon similar issues of
poverty and oppression as did Moran and also includes how these chiefs used politics to
address the struggles of their people. Her thesis provided considerations for authentic
allies working with First Nations people including:

1. Be respectful;
2. Take time to consider your actions and their implications;
3. Proceed when you are invited;
4. Once inside, know how much of what has been taught and understood on the outside
does not necessarily mean the same from a First Nations perspective;
5. Know that you are a witness to sickness and fragmentation which are the direct
effects of an imposed structure and foreign ideology, the communities are struggling
as we all are, to come to terms with what was, what is, and what will be;
6. Educate yourself and decide whom you will serve;
7. Be honest about that, speak from your hear with compassion for others;
8. Make alliances based on respect, dignity, honesty, and compassion;
9. Demonstrate your willingness to be taught and share what you know;
10. When you know the injustice to be true, do not hesitate to become an ally (p.135).

These considerations can assist social workers and other professionals in gaining
an appreciation for Aboriginal World Views including what these views mean to
Aboriginal people and how they relate to the world. This knowledge is timely and
needed, as governments transfer child welfare delegation to First Nation’s organizations.
Important goals of this project are to assist social workers in coming to understand the importance of Aboriginal World Views and the practice of structural social work values as discussed in the previous section. Structural Social Work is based on altruistic principles of social justice, feminism, and anti-racism, collectively creating approaches for advocating and supporting citizens marginalized by mainstream patriarchal capitalist governments (Mullaly, 1993). Such an approach to social work is congruent with two cornerstones of social work ethics: humanitarianism and egalitarianism (BCASW, 1983). These ethics also mirror some of the values and goals of Aboriginal peoples. We as social workers must choose which side we are on: Indian agents or Indian allies.

The Social Work Profession

Riches & Ternowetsky

Born of the industrial revolution
our task to find sensible solutions
poverty & oppression the order
of the day, many did it slay.
Poor laws were unjust laws
many didn’t escape the claws of elitist’s paws.

The social work profession isn’t for
the faint hearted. Advocacy, support,
and protection, we provide.
code of Ethics close by our side.
egalitarianism & humanitarianism
cornerstones of our professionalism.

Damned if we do, damned if we don’t
not a comfortable spot to be;
but a place to begin.
protecting children & supporting families
isn’t a sin. A client focus leads the way
together they will stay.
supportive allies do not lie
community builders of harmony and hope.
guided by social justice principles,
striving for clients to become invincible.
discrimination and hate you will not find.

Our profession is in the loop
never again a..."sixties scoop."
treat all with dignity & respect.
have faith, we’re on the far continuum
of this new millennium.
there are those who cuss us, but we stand
proud for social justice!
let social work values be your armour
and ethics your sword.
fight adversity head on...
our profession is here to stay!

(Fraser, 2002)
CHAPTER THREE

However, in the case of the Native Canadians, there was an all-out attack on their way of life, and legal proscription of tribal rituals and beliefs to the point of cultural genocide (Bolaria & Li, 1988, p. 18).

Methodology

This project examines ways for social workers to be effective when working with First Nations people in their respective villages, and specifically in the areas of child welfare and community development. My aim is to give insight to social workers willing to practice anti-oppressive social work, as authentic allies with Aboriginal people. The literature and voices of First Nations people express clearly what assistance they desire to heal and become empowered from past and present genocidal social policies. An Elder told me she is tired of social workers coming into her community and “burning out” and stressing community members. “We do not like to see these things happen to people” (Personal Communication, Anonymous, 2003).

This project takes the form of a retrospective modified case study as outlined in the UNBC Social Work Program Handbook (Tang, 2000). A retrospective modified case study allows students to reflect on their personal experiences and to compare this experience with relevant social work literature. This case study approach is not connected to any one philosophical lens, thereby allowing a student the opportunity to conduct the project based on their perspectives and lived experiences (Hemingway, 2000). Using field notes and my lived experience as a Community Development Worker, I will describe my experiences as I fulfilled my job requirements over the past two years.
Part of my employment was to develop the social work pieces of the community driven transformation plan, which would align Yekooche with our Aboriginal partner agency: Carrier Sekani Family Services. This development work focusing on effective ways of delivering social work services and supports in Aboriginal communities led to the Yekooche community becoming a potential model for the Ministry of Children and Families Development (MCFD). These practices were also useful in the treaty process.

A modified case study approach allows me the opportunity to introduce the community of Yekooche, where I have had the honor of being Community Development Worker for two and a half years. This case study will provide an in depth look at how one Aboriginal community rose to the challenge of addressing difficult behaviors brought on by the ill effects of residential schools including its multi-generational impact on community members (Nechi, 2002; Thomas, 2003). For example, the community has made preparations to have children returned to the community and to support families in living both inside and outside of the village. Elders speak of the days when social workers came into their communities and removed children, who were never to be seen or heard from again; many of whom ended up homeless or dead. For these reasons, you will notice that the term social worker is not used in their creation of the Community Transformation Plan (CTP). This poem reflects some of these concerns.

To New Social Work Students

Well come to this con
tradicory profession of alleged
nice-white-ladies needing to be even nicer,
slashed bleeding hearts,
change & spy agents,
configurations of com / passionate administrators, silly surrealists, 
Writers of micro history / Herstory, 
& hate propagandists 
(oh yes we were there 
for the residential schools; 
the making of educated immigrants into maids; 
lesbians into shock-therapy victims, 
oh yes we were...) 
& like Dobermans for the Gestapo sniffing out the oppressed for the State we’re sent to control & redo the **thems**.

Welcome to this con 
gregated cluster of lost souls. 
we begin by saying **Justice & Rise Rise**; 
we begin as Amazon-Warriors fiercing, widening, strengthening but soon some of us are whimpering the word **obey**.

Welcome to our con 
fusing profession, some of us do critically analyze infiltrate, break rules, defy masters & monsters if only for moments between lean pay stubs ----notice that attempting to redo the status quo takes precise premeditated incremental **courage** - well come then to our profession but please remain alert to the pros and cons.

Si Transken, 2002 (After 20 Years of Hard Time Outlawness).

This project focuses on my role and responsibilities as outlined in the CTP which includes: 1. locating all Yekooche children in the “care” of MCFD; 2. starting a community-based team; 3. starting a community resource house; and 4. other related
work. This plan, coupled with the social work code of ethics (BCASW, 1984), acted as my guide while working as an “outsider” in the village of Yekooche.

Part of my framework for this project is a performance autoethnography approach, which allows me to tell my story as an authentic ally working with/for community members. The intent of autoethnography is to assist oppressed people in their struggle for liberation; hopefully, changing the hearts and minds of readers, thus making new allies (Denzin, 2003). A Maori mental health worker confirmed the need for allies and forming alliances with non-Maori people and organizations to advance the causes of their struggles against “mainstream” society. “What we do not want is a Maori “wannabe.” Our allies must be grounded in the knowledge of who they are as a person in this world first” (Personal Communication, Anonymous, July, 2004).

This project, qualitative in nature, will allow marginalized people to express themselves, as well as share their lived experiences. Some of these ways are: storytelling, poetry, song, dance, ceremonies, and plays (Denzin, 2003; Reinharz, 1992). Additionally, in the spirit of Cultural Studies, I am using poetry, quotes from elders, and quotes from authors to emphasize certain points.

My training in structural social work from UNBC, and researching literature from Aboriginal and non-Aboriginal writers supporting Aboriginal World Views, assisted me in performing my duties as an anti-oppressive social worker. Having an understanding of genocidal policies inflicted against First Nations people including the impact of these policies, creates a needed critical empathy for working in Aboriginal communities (Bopp, Bopp & Lane, 1998; Moore, 2003). An Aboriginal mental health
worker told me: "If the answers to our problems were as simple as some people say they are don’t you think we would have solved them by now?" (Personal Communication, Anonymous, 2003).

Ethical Considerations

Because I am not conducting personal interviews or identifying particular community members, the ethical considerations for this project are greatly decreased. I am merely presenting a critical reflection of the work performed in the discharge of my duties as directed by the CTP. Therefore ethics approval by the UNBC Ethics Board was not necessary. However, I did present a letter and consent form to the Yekooche village Chief and Council outlining my research objectives, as well as organizing a face to face meeting to give them an opportunity to ask questions. They later signed the consent form allowing me to name the community of Yekooche. I thought it important that, for anything positive that arises from this project, due credit is given to the leadership and people from Yekooche for having the vision and foresight to draft up their intentions and concerns for achieving the proactive changes they wanted to see in their community.

The Community Transformation Plan has been widely distributed to stakeholders and is being considered a model for other communities. A copy of the project will be given to Chief and Council for their records. They have been made aware that they can withdraw from this project without giving a reason at any time (see Appendix A).
CHAPTER FOUR

Bouncy The Rez Dog

Bouncy leads this motley crew
of furry rag-a-muffins
father of most of them
half shepherd and something big
you can tell by the size of his friendly head

Scars on their faces
indicate its tough on the rez
laying around relaxing, when they can
at any moment, something might happen
to cause them to howl and bark:
could be the scent of a grizzly;
or a freshly killed moose;
or an evil spirit drifting by.

they have no dog houses
or regular meals
you can bet
they’ll probably never see a vet
always happy and playing
with children going to school.

You won’t find poodles
in this vicinity
most have lost their virginity
its tough being a rez dog
especially a pup.

No fancy collars
or bowls with their name
they make the most
of a harsh life.

There’s nothing better
then chewing a moose hoof
on a winter’s day
or a bear paw
in Spring’s thaw.
Bouncy and the crew
take life as it comes
no fences or rules
it ain’t bad, here on the rez.

(Fraser, 2002)

Community Introduction

Yekooche is located 80 kilometers (via an active radio controlled logging road) from Fort St. James, BC, at the remote west end of Stuart Lake. The European name is Portage. This semi remote community has roughly 100 to 125 people living on reserve and another 75 band members living off reserve throughout the province. The village is located 260 kilometers from Prince George, the largest nearby urban center providing a variety of professional services. The ride into Prince George is very challenging in the winter months and during logging truck season. Many band members and professionals have been involved in mishaps with logging trucks, icy road conditions, and large animals. While writing this proposal, our community youth worker had an accident driving into the village. She drove into the rear of a loaded flatbed semi-truck, stopped on the road without any notification to approaching traffic. Fortunately, she was not injured badly. This would not have been the case had she been driving a car. A safe radio equipped 4x4 vehicle carrying a survival kit is a must for these roads.

For hundreds of years the Carrier People in this region have been hunters, trappers, gathers, fishers, with some farming and manual labor. The word Carrier in English means, “Ones who pack.” They packed everything on their backs or used dogs to assist them as they moved from camp to camp during hunting and fishing periods.
The area around Yekooche and Fort St. James was heavily involved with the Hudson Bay trading industry until the early twentieth century (Hall, 1992; Sam, 2001).

Unfortunately life began to change with the introduction of the residential school system which saw children taken away for long periods of time and sometimes never seen again. Traditional ways of life were altered and the language was not passed on. Hall (1992) gives accounts of the physical abuse that she and other children received from nuns and priests for speaking their own language. She gives accounts of children dying from punishment they received and of five children who froze to death when they ran away from the Lejac residential school in the winter during the thirties (pp.89-90). These negative experiences of residential school survivors, and the subsequent multi-generational effects, have and continue to impact Aboriginal communities throughout Canada (Adams, 1999; Fournier & Crey, 1997; Haig-Brown, 1988; Hall, 1992; Thomas, 2003).

Valentine’s Dead

He followed his grandfather like a puppy dog
village people smiled as they walked by.

Grandfather/respected Elder
stood 6ft, 7 inches, 235 lbs.
his 5 year old grandson
could do no wrong
being trained in Carrier traditions
to be a warrior, perhaps a chief.
Together they made wood
smoked fish & moose
tanned & stretched hides
all the while, telling ancient stories
honoring “all our relations.”

An approaching vehicle
broke the silence of nature
two RCMP officers and the Indian agent
“we’re here for the boy, he must go to school,
it’s the law.”
“it’s not my law, this young one will learn from us.”

He sat under an old Pine tree, watching in horror
grandfather stiffened with rage
the two yellow stripes stood back
and drew their revolvers.
the other white man said:
“we don’t want any trouble, old one.
the boy must come with us.
he deserves a good education.”

He took him by the arm and
led him to the black car
with as much care as a puppy removed
from his litter.
grandfather watched them drive away.

Valentine never returned
or saw his grandfather again.
residential school removed his “insides”
and “cultural map”
becoming a foreigner in his own land.

The East End of Vancouver
became his hunting grounds.
panhandling nickels & dimes
enough for a bottle of 35 Sherry
to share with urban brothers and sisters
survivors of the Canadian Holocaust.

Seedy ally-ways became homes
“Hey Bro, could you spare two dollars.”
deep see dumpster diving for food
“Hey Bro, got an extra smoke.”
food banks, handouts, and charity
urban trap lines
their innocence stolen
from those in black robes.

Valentine returned home today
in a Pine box.
found dead on a bench (from exposure)
in Pigeon Park, at the age of 55.
buried next to his grandfather
fifty tormenting years later.
after all, he deserved a good education.

(Fraser, 2004)

The Community Transformation Plan

In 2001, treaty talks were halted for Yekooche’s Chief and Council. They were stopped until Chief and Council and concerned Yekooche staff members could meet with treaty representatives from the provincial and federal governments, as well as representatives from various organizations, concerning the serious social and health problems plaguing the village of Yekooche. This community was experiencing domestic violence issues, sexual abuse, drug and alcohol misuse, teen pregnancy, high school drop-outs, and other forms of unhealthy behavior brought on by poverty, oppression, and the effects of the residential school syndrome.

As a direct result of that meeting, Yekooche band members and concerned professional people got together and drafted up the Community Transformation Plan (CTP). Greg Beattie, RSW, was instrumental in facilitating and recording the community’s desires for empowerment and positive change in the areas of healing. His
primary responsibility was to write job descriptions, including specific expectations, for the Community Development Worker and the Mental Health Worker. Beattie, who has extensive practice experience in Aboriginal communities, remained clinical supervisor for the mental health worker, alcohol and drug counselor, and social development worker until July, 2004. He also participated in proposal writing and shared his wisdom in collective decision making meetings. The CTP was developed by garnering the community's wisdom in incorporating traditional and modern approaches to healing and empowerment. The outcome of this strategy addressed the existing serious social and health issues and, in doing so, allowed Yekooche Chief and Council to return to the treaty table and address issues of economic development. With the success of the CTP, it was expanded to include education, restorative justice, economic development, and other proactive programs (see Appendix B). It took courage and vision from Chief and Council and village members to embark on such a proactive plan. To one day obtain self-determination and self-government at the treaty table, Chief and Council were willing to travel that path.

For the purpose of this project, I will focus on the responsibilities and duties of my position, as the Community Development Worker and how I fulfilled my obligations to the community and to our partners: Carrier Sekani Family Services (CSFS) and the Ministry of Children and Family Development (MCFD). Specifically these responsibilities included my role in child welfare matters and community development, in starting a Community Based Team (CBT), starting a community safe house; and other duties inherent in a generalist social work approach.
Child Welfare Matters and Community Development

When social work is carried to cultures foreign to its development all sorts of dislocations occur. The system used in industrial society do not work well in aboriginal cultures; and since social work carries a certain view of the world, by its nature it is disrespectful of other world views. Social workers who attempt to impose these views on aboriginal peoples frequently find that “nothing seems to work.” even if they are well acquainted with the remote culture and have eased tensions between themselves and their clients, social workers face failure. Social workers must actually refashion the way they do their job. They must reject old ways of ordering information and rethink their assumptions about how society works and how people within it relate. There is a place for a social worker committed to the people of the community, but the place must be built on new alignments, new understandings and an adaptation of the duties of the job to basic community organizing principles (Collier, 1993, pp. 44 - 45).

In order to be hired for this position, I sat before a panel consisting of Band Council members, community members, advisor to Chief and Council, and the clinical supervisor. Yekooche members asked most of the questions (and so they should); the interview lasted two hours. I was hired the next day. Currently, I have been with Yekooche First Nations for two and a half years. Three days are spent in the village and one day in Prince George. This arrangement has worked well for all parties.

In order to implement the CTP, it was decided that a fully trained professional social worker would be required. At that time, a home support worker was unsuccessfully attempting to fulfill the social work requirements of the CTP. Yekooche officials consulted with CSFS and MCFD in Prince George, who subsequently agreed to each pay a portion towards the wages, benefits, and travel of the hired development worker. With the onset of this support, the CTP was considered a pilot project by the community partners, as well as the provincial and federal treaty partners.
My first priority was to meet village members and to start building authentic relationships based on trust. This was followed by meeting the professional team which consisted of the mental health worker, school teachers, and school principal. Because of past history with MCFD and residential schools, village people are suspicious of "outsiders." I first introduced myself to a community member as their new social worker. He instantly froze and said "don't tell anyone else that, we don't like social workers here" (Personal Communication, Anonymous, 2002). I realized then that they were serious about not using the word social worker in their CTP.

It takes a long time to build trust in an Aboriginal community. An Elder told me, "We've been watching white people come in and out of our community for a hundred years and not much has changed" (Personal Communication, Anonymous, 2002). Connecting with Elders and other healthy community members is one of the best ways to start learning about the village. I was fortunate to meet three Elders who have assisted me in my journey while being in their village. Their wisdom and kindness will never be forgotten. Elders do not share their knowledge with just any "outsider." When this happens, you know you are starting to gain their trust and they consider you to be worthy of their teaching.

The onus is on the professional to establish these relationships in a respectful and meaningful way. It is customary to give small gifts to Elders who have assisted you by sharing their knowledge of their culture and customs. You are not obligated to do so, but I have given candies, food items, cigarettes, and "snuff" (smokeless tobacco).

Part of my first duties was to locate all Yekooche children in the care of MCFD
and to start arranging communication between them and their families. I presented myself to the supervisor of MCFD in Ft. St. James and explained my role as community contact for Yekooche First Nations in all child welfare matters. I then presented him with a signed letter from our Chief giving me permission to do so. This letter was also given to other MCFD supervisors throughout the province when needed. Building trust with community partners is also very important. The MCFD supervisor then introduced me to the social work staff responsible for servicing our community. We agreed to follow the protocol agreement in place for answering complaints in our village. This required me being present to represent families and be involved with plans of care.

Over the last two years, we (that is, the people of Yekooche and myself) have built trusting and beneficial relationships with the community and MCFD. MCFD staff have visited the community as invited guests for functions and to present at community wellness meetings. In this two year period, no children have been removed. In fact, we have had four children returned to their families (who had been in care for two to three years). Visits are currently being arranged for other children and family members. The successes we have experienced are a direct result of building trusting transactional relationships with MCFD, Carrier Sekani Family Services (CSFS), other community partners and, most importantly, the formation of a Community Based Team (CBT).

**Community Based Team**

"It takes a community to raise a child"

Our village is one of 11 Carrier and Sekani communities receiving culturally supportive child welfare services and supports from CSFS, that was incorporated as a
non-profit society in 1990. CSFS has a long history of delivering community-based, professional, and culturally appropriate services designed for Carrier and Sekani people. CSFS covers a 76,000 square mile radius which includes the towns of Smithers, Burns Lake, Vanderhoof, Fort St. James, Fraser Lake, and the city of Prince George. Also included in this area are a number of small First Nations communities. CSFS is the delegated Aboriginal agency responsible for files being transferred over from MCFD. A good working relationship has been established with them which has proven effective in reconnecting children with the village of Yekooche. We have found CSFS to be more open and receptive to engaging in new models of social work, such as the Maori Family Conferencing and Kinship Ties. These collective models value the input of family members in developing care plans for children in the custody of the state. As an example of the developing relationship with CSFS, our CBT attended a conference sponsored by CSFS in Prince George concerning developing healthy communities. The conference ended with an urban potlatch. The following is a poem I wrote for this historic occasion:

The Drums Did Roar

Elders said it was the largest urban potlatch
with a thousand people in attendance
February 26, 2004, Prince George Civic Center
representatives from all clans were present
welcoming children back currently in “care” of the state
returning soon to their villages.

Each clan led by Hereditary Chiefs and Elders
proudly danced into the civic center
wearing ancient traditional regalia
to cheering & clapping from allies and friends
drums beating in defiance of past injustices
offering promises of Spring and new beginnings
thawing the coldness of colonization.

Speeches of resistance & renewal, orated
each child given gifts from their clans
meeting relatives they knew not existed
in the back drop the business of the Potlatch
carried out and guests received gifts
as the custom since time began.

Let the old ones and old ways
guide us in these days of liberation
like the stars so far but yet
so near and dear to our hearts
for without them...
we would truly be lost.

Let the drums roar our warnings
another child will not be lost
or stolen again from our embrace
we stood fast against great odds
and remain on traditional grounds
reclaiming what is rightfully ours
and returning to teachings/visions of old

(Fraser, 2004).

Executive Director, Warner Adam, included the following quote in the latest
CSFS organizational handout: Strength in Family, Strength in Community, Strength in Nation:

“Our people are no different from other indigenous nations. Attempts of
colonization to break our people’s soul and spirit have never succeeded.
We continue to demonstrate that our responsibility rests in preserving our
culture, philosophy and beliefs. We have been able to put into practice our
values of healing people based on basic principles of humanity.” (2004, p.8)

CSFS provides a social worker who visits the community once a week when able
to do so. We work closely together in child welfare matters, particularly in the area of
providing support to villagers. In order to facilitate community input and direction of an empowering nature, each community has been encouraged to form their own community based teams.

The Yekooche team was formed in January of 2003. It is comprised of eight strong women from the village, the CSFS social worker, community development worker, and the mental health worker. Community members were reluctant to become involved with any program that looked like child welfare. This was due both to past historical experiences and the community’s strained relationship with MCFD. Being part of such a program could be misunderstood by community members as siding with MCFD. Further more, such a misunderstanding could have negative repercussions for those women stepping forward to assist in developing a process perceived to have the same intent as those of the past. As my worthiness grew within the community, the return of two children, and successfully dealing with MCFD investigations to the mutual satisfaction of all concerned, along with the high trust level already established by the CSFS social worker, eight Carrier women stepped forward and our CBT was born.

Once these eight women realized that by having a team in place the chances of children being removed from the village would be minimized and that they would be involved with decisions concerning children in the village as well as those residing in MCFD care, these women wanted to be part of the team. The CSFS social worker and I provided training concerning the protocols followed by MCFD and CSFS. We have also committed to on-going training on and off reserve in areas of health and healing. One member accompanies myself and the MCFD social worker when doing an investigation
or a visit in the village. Team members are also invited to meetings with MCFD in other communities concerning Yekooche children.

This high level of commitment recently resulted in two more children being returned to their grandmother after being in care for two years. In one extreme case involving a possible apprehension of a new born, we came up with a plan of support for the family and presented it to MCFD. Part of the plan offered visits to the family three times a day, seven days a week. This would not have been possible had it not been for these women coming forward to volunteer their time, despite the fact that each of these women work in the village and have family obligations. Another part of the plan called for other professional people to visit this family during their days in the village. This included our nurse, CSFS social worker, myself, mental health worker, Aboriginal Head Start co-coordinator, and community police officer. This was done in the spirit of cooperation and commitment to the CTP. After seven months, the order lapsed and MCFD chose not to extend it due to the community support available to this family.

Our team meets weekly to discuss issues involving the community. I explained that one day I would leave and they would have to do this work without me, that in fact, they are now almost capable of doing so. Having the opportunity to work with these women has been a great honor. I will always cherish their wisdom, humor, and compassion for their people.

Another example of their wisdom was demonstrated in December of 2003. Every year the village school shuts down for Christmas and has a community dinner. The CBT approached me and the CSFS social worker and suggested that we bring the children in
the care of MCFD to the party. After much coordination with social workers in Prince George, Vanderhoof, and Ft. St. James, twelve children were picked up by our van (along with escorts and the CSFS social worker) and brought to the Christmas party. Family members greeted the children with tears in their eyes as they explained to the children who they were. It was a touching moment to say the least.

Resulting from this one suggestion, regular visits have now begun and hopefully will result in these children being brought home to their families, village, and culture. Our Chief and Council have been very supportive of the CBT by providing the needed funding and accommodations when team members travel to various different communities. The band receives very little funding for these important meetings concerning family reunification. However, I negotiated additional funding for travel from the Aboriginal Manager of MCFD, who is supportive of the Yekooche CTP and especially the CBT.

Community Resource House Project

Although consistent efforts have been made by authorities to officially construct our identities for us, we can resist by continuing to do things in "the Indian Way."

(Graveline, 1998, p. 22)

After ensuring the CBT was operating effectively, it was time to address the need for a "safe place" as identified in the CTP. This is not to be confused with a safe home for women; many people still do so. In areas of domestic violence, we transport women to shelters in Vanderhoof or Prince George. We are fortunate to have good resources and
people available to us. This home is used for children in the care of MCFD who come to the village for family visits. Many MCFD social workers are reluctant to allow these children visits based on the community's past reputation or perhaps their own biases or workloads. However, the intent is to give children a place to stay while visiting and a support person to accompany them. This is another role of the CBT members. Had such a house been available for the Christmas party visit, the children and escorts could have utilized it.

The process of arguing a Community Resource House began by arranging meetings with the MCFD Aboriginal Manager, CSFS manager, Chief and Council, our clinical supervisor, and myself. We discussed the concept of the 'safe house' as identified in the CTP and how it would work. The goal of this house was to support children in returning to the village and out of the care of MCFD. Everyone was in agreement that the project had merit but did not know where the funding would come from. In a sign of good faith, Chief and Council offered a house to start the project.

This house is currently being renovated to accommodate the mental health worker, alcohol and drug worker, youth worker, and community development worker. Our offices will be in the basement where we will have a family meeting area for case conferences, mediation, and staff meetings. There will be a bedroom in the basement for support workers traveling into the village. Upstairs will have three bedrooms.

Shortly thereafter, the provincial government allocated two million dollars for projects that would strengthen communities and families eventually leading to fewer children in the care of MCFD. At the same time, the University of Northern British
Columbia was given the responsibility to award grants for proposals meeting this criteria. Our social work team met and developed a proposal to hire two outreach workers that would support Yekooche families and offer educational training and workshops designed to empower community members.

We were successful and awarded $75,000.00. We advertised the two positions, held interviews and hired two of our CBT members. Our community now has a paid support worker in the community seven days a week (24 hrs a day). Another similar call for proposals came out from the Victoria Foundation. We applied for an Outreach Youth Development Worker, were successful, and received $60,000.00. This position requires the worker to connect with youth in the village and out of the village; this includes group homes, foster homes, or youth “lost to the streets.” A portion of this funding goes to transportation, making it possible for youth to access cultural meetings with Elders. Hopefully this will build stronger bonds between youth and elders.

Yekooche has received a significant amount of money from proposals written by social work staff. This is another example of what trained and qualified social workers can bring to their employer - the village they serve. Part of the success of the CTP involves having a social worker who can effectively communicate and advocate on behalf of band members and who believes in the community’s struggle for self-determination. Once trust is established, village members will seek the assistance of the social worker in many areas not outlined in the job description. This is why social workers should adopt a generalist approach to their practice. It is necessary to have the capacity to deal with a broad range of issues and situations. Collier (1993) says this:
Rural social workers, to be effective, must know who they are working for. When the urban population organized itself during the Industrial Revolution, early social workers in settlement houses, clinics, relief lines and workers’ organizations regarded themselves as participants in the struggle. They identified with the poor and powerless mass of people. The social workers committed themselves to the people for whom they were working, and their support was derived partly from within the community itself (p. 45-46).

A Generalist Approach

It has been noted that in a range of situations a single helping person is often more valuable. Rural villagers find it strange and wasteful if a person has only one specialized skill, since their lives cannot be organized around one single activity in the normal course of events. Furthermore a large influx of outsiders upsets the social mechanisms of a small village. Relationships are changed between and among the villagers, and the internal balance of interrelationships comes under strain (Collier, 1993, p.36).

Once establishing trusting relationships with village members in areas of child welfare and community development, I was sought out to assist band members with other issues such as filling out government forms, writing support letters, developing resumes, supporting adults at court, filling out child custody papers, and numerous other tasks. When the provincial government cut back legal-aid services, many villagers found themselves going to court without a lawyer. Often times I was asked to accompany them, which I did. Legal advocacy became an effective way to develop trust with the people. Together with lawyers, probation officers, RCMP, and at times with judges, we would discuss the issues and reach positive solutions. In most cases, band members received hours of community service or attended treatment programs, instead of going to prison. In one particular incident, a man from the village was allowed house arrest for a six
month period, rather than leaving his family and community to go to the Prince George Regional Correction Center. This was the first house arrest held in a remote community.

Because of needed interventions with the legal system, and some petty crime in the village, we formed a Restorative Justice program that meets once a week. The justice program is co-coordinated by the assigned RCMP corporal. Community members and professional staff also sit on this committee. One of our community support workers was assigned the task of reminding and arranging rides for community members scheduled for court or visits with probation officers. When you live 85 kilometers from the nearest town and have to travel an active logging road and you do not own a vehicle, this becomes problematic. Through effective partnering with probation services, both probation officers (youth and adult) now visit the community once a month. This has resulted in less court time with fewer warrants being issued for failing to appear before the judge; and less warrants being issued for breaches of probation. Myself and the mental health worker are allowed to supervise community hours, something that could not be done in the past. We have seen numerous band members successfully complete their probation period. A job description should be used as a guide and social workers should be prepared to assist community members in ways that are meaningful to them as situations arise.

A community social worker practicing from a generalist perspective stands a greater chance of being successful in practice as an ally because they value the assistance of community helpers. As community needs presented themselves, I was quick to identify them and bring the problem to our bi-weekly Community Wellness meetings,
attended by community members and staff in order to discuss collective ways in finding effective community solutions. As an Elder reminded me “You professional people operate at internet speed and we...the rhythm of the land” (Personal Communication, Anonymous, 2004).

I could see his point, especially when professionals visited the community arriving in brand new vehicles, wearing suits, carrying brief cases, cell phones hanging on their side, some with lap top computers, a schedule and an agenda. Groups of visiting professionals may as well have been a spaceship and aliens landing in the community. It takes time to establish trusting relationships and the community will let you know when such an alignment has been made. After a year in the community, I felt headway was being made. This feeling was validated one summer day when a respected hunter/trapper asked me to go fishing. Until that moment, he had not said more than five words to me. We went fishing and he showed me places he had been coming to since he was a boy. He had tears in his eyes as we looked at the surrounding dying forest. ¹The Pine Beetle epidemic turned the once emerald trees into blotches of red. The area was so remote it could not be logged off. Unfortunately, we did not catch any fish that day and I was given the blame, much to the laughter of the Elders and children.

Community members do not have phones, but the professional workers do. As a result, I have been contacted by family members (at all hours) to pass on messages. Two

¹ The Mountain Pine Beetle epidemic has wrecked havoc in the local forests for ten years. Scientists believe the only way to kill the insects is for a cold winter of temperatures dropping below -30 degrees, for a month. Unfortunately, there hasn’t been a cold winter for a long time. This phenomena has impacted negatively in the logging industry and on Aboriginal Lands. (The Citizen, July, 2003, p.27).
such messages were of a family member who had passed away and I was being asked to let the family know. Doing a notification of death is difficult. I contacted other close family members and discussed the best approach to take, especially given that it was late at night. Together we delivered the sad news. During my three days a week in the village, I face multiple problems that require supportive interventions and advocacy. Often my days are 12 to 15 hours long.

These are examples of the many things that can arise in an isolated community and, if you have the trust of the people, they will come for assistance in collective problem solving. Asking the individual or the group what they think acknowledges that they know their people and community better than an outsider. Most times their wisdom has proven helpful in performing my duties with the people of Yekooche First Nations. It is better to have people working with you than against you. This work is made easier by having a structural social work and anti-oppressive approach while working as an ally in such a semi-remote community. Such an alignment with the village allows the social worker to assist where directed by community members.

In the next chapter, the experiences from this project and the knowledge gained from the literature review will be used to identify suggestions and implications for social work practice in Aboriginal communities.
Themes of liberation and self-determination in therapy help unmask social myths that condemn the victims of political and economic policies. They encourage openness and the spread of information concerning all the factors that have helped create the problem. They do not protect systems of oppression or deny injustice. They are deeply sensitive to people’s most fundamental fears and concerns: for example, the fear parent’s express when they are not able to provide an adequate home for their children; the fear of increasing debt payments or the fear of ongoing joblessness. They approach this information with an informed context which facilitates reflection and understanding (Waldegrave, 2003, p. 29).

**Implications for Social Work Practice**

*"The safety of the child is paramount"*

The topic covered in this project has focused on merits of structural social work and a desire for non-aboriginal social workers to develop an anti-oppressive practice as the most appropriate approach to assist First Nations people in their struggles for self-determination and self-government. This de-colonizing approach while working with Indigenous people will assist social workers in their own reflections of internalized domination. This de-colonizing is so important when working with Aboriginals; to forget to focus on that is to run the risk of attempting to assimilate them (Mullaly, 2002, p. 142). With child welfare authority being transferred over to Aboriginal organizations in our province, there is a possibility that social workers will end up working for such an authority, as opposed to and as in the past, working for MCFD. There are two distinctly different mandates and approaches to working with families. One could say that there are two philosophies based on two different world views (as was discussed earlier in this report).
The literature was clear. There are places for non-Aboriginal social workers. Working with community partners, band representatives, families, and incorporating empowering models such as the Maori Family Conferencing and the Kinship Ties, there are better chances of reuniting children with their families. Such collective and empowering approaches go a long way to strengthening and supporting families before an apprehension takes place. I believe this way of practicing social work liberates MCFD social workers by allowing them to give up some of the power and control to other committed community stakeholders.

Based on my experience, social workers should make themselves aware of past and present poverty and oppression issues impacting Aboriginal people in their healing. There are many Aboriginal writers and activists currently telling their stories concerning the devastating effects of residential school atrocities. Make yourself aware of these challenges and the racism facing Aboriginal people in every structure of society or run the risk of continuing to "blame the victim." Be aware of your own biases and where they came from. Most importantly of all, I am not suggesting one could ever know the hurt and challenges of Aboriginal people by simply reading books, but it is one way of beginning to learn.

Clearly, Aboriginal people in Canada, like Indigenous people the world over, are involved in a human rights struggle to gain their liberation from the past 500 years of colonization; a process that stripped them of their lands and culture by forceful and inhumane means. Chrisjohn and Young (1993) argue that these policies constituted a genocide, according to Article 11 of the United Nations Genocide Convention. Canada
adopted this article on May 21, 1952. However, residential schools continued to operate another 30 years after despite the signing (Crichlow, 2003).

The following poem reflects the human tragedy suffered by residential schools:

Discourse of Love

Carefree Summer days by the lake
playing from sun up to sun down
baptized in smoldering pine smoke
from traditional smokehouses
red Salmon hanging for Winter’s food
Elders growl for getting under foot
as small children can
in evening calm with bellies full
they drift off to dreamland
faintly hearing soft drums and
chanting voices of their tribe

One Fall morning a cattle truck
rolled into the sleepy village
Indian agents and RCMP officers
rounded up scared children
and put them in back
of the unclean vehicle
I clung to grandmother’s apron
crying, trying to hide
like a frightened kitten
Indian agents tore us apart.

Looking between weathered boards
our eyes locked until grandmother
went out of sight
tears froze to my face
I heard someone say:
“they’re taking us to residential school.”
the smell of cow dung and trauma
caused me to faint
retreating into dreamland, smelling campfire smoke
hearing soft drums and grandmother’s soothing voice.

The merciless truck finally halted
before a dark and forbidding building
between worn gray boards, up high,
I saw a white cross, a symbol that would
terrorize me forever more,
a sign of pain... not peace.

Stern nuns and priests
shouted orders in a foreign language
we began to cry
boys and girls separated
Deloused, showered & stripped of traditional clothing
exchanged for European ones
precious hair cut short
soon put into large sleeping rooms
slowly slipping into the safety of my mind
campfire smoke drifts and grandmother lulls
me to sleep, soft drums beating gently.

I never saw grandmother again
the abuse received from the holy ones
left me spiritually dead
my pain dulled by drugs
becoming homeless and lost
sleeping in urine soaked ally-ways
lamenting my stolen childhood
crying myself to sleep
curled up in a cardboard box
slipping away to our fishing camp
cuddling up to grandmother
listening to her sweet voice
lulling me off to eternal sleep.

Never shall I leave her side again
morning will find my body
never my soul
for it’s playing with children
from our village
as we did...
before the cattle truck arrived
grandmother, sing another song
and rock me gently...

    oh so gently...
    into this good night...  (Fraser, 2003)
There is sufficient literature available for social workers to realign themselves for the tasks lying ahead working with Aboriginal people in their villages, urban settings, and those lost to the “streets.” The University of Northern British Columbia’s structural social work program focuses on the challenges facing a northern social work practice and offers insightful courses and reading materials to assist students to become effective allies with those they serve in the community (Delaney, Brownlee & Zapf, 1996).

Becoming a member of the BCASW, and eventually becoming an RSW, requires you to adhere to a specific code of ethics. This also facilitates a view whereby vulnerable clients to have some power in the working relationship; although there are some people who would not agree with this statement. They see belonging to such bodies as being elitist and a move that may hinder any liberation attempts of being an ally towards clients. I believe this process does benefit the clients. Our profession has been given another opportunity to practice altruistic social work with a particular group of people struggling for their liberation against local, federal, and global forces. We were there during the Industrial Revolution and now, we are here, at the sunrise of Aboriginal resistance and their struggles for self-determination and self-government. Social work can play an important role in Aboriginal aspirations in Canada.

In the Jungle

An Elder told me:
“We go to the jungle to debrief our pain and suffering, nobody else knows our oppression.”

Able Joseph

another middle aged man told me:
“residential schooling just about did me in, that’s why I’m an alcoholic most of my school mates are dead others dying slowly on the streets, you can see them at soup lines.”
suicide on the installment plan, others do it much quicker.

In the jungle we drink 35 Sherry the cheapest and most potent that’s how we do counseling its more effective then baring our soul wounds to ²Nado they’re still oppressors: why don’t you get a job? why don’t you quit drinking? go back to school! get over it, we’re all equal! don’t you love your children?
35 Sherry group counseling can, for a time anyways... dull pains & nightmares of genocide we’re survivors of a holocaust.

A man told me he can only take the pain & suffering of his people for so long, rather then committing murder or suicide, he goes to the jungle.
we’re loving & caring people it’s our Carrier nature I asked my father one day what he thought of “white people” and their oppressive ways. he thought for a long time we waited patiently for his answer: “they breathe too, my son.”

(Fraser, 2003)

²Nado is a Carrier slang word meaning white people.
CHAPTER SIX

The first part of this book addresses issues of theory as they relate to clinical and community practice. It is critical that the reader have a clear understanding of the issues that have led to the pain felt by many native individuals and communities today. Most of those injuries, we believe, are the result of the genocidal colonization process (Duran & Duran, 1995, p.2).

Limitations, Reflections, and Conclusion

Limitations

This project was looked at through the lens of the writer and concentrated on one community, therefore it could be considered by some people as a limited, one-sided rendition of one social worker's experience. Also the fact that I am a privileged white male with a social work degree may cause some people to conclude that a bias exists. To give the project more credibility, I could have designed the research to have included personal interviews with band members and other pertinent informers from other villages doing like minded projects. Perhaps in the future I can return to this research and add necessary questions in order to hear those voices of community members.

However, the project is in alignment with the work of Denzin (2003) for conducting a performance autoethnography which allows participants' voices to be heard as they share their lived experience; in this case, as an ally, working closely with First Nations people in their struggle for liberation. I believe this work is supported by a strong literature review of both Aboriginal and non-Aboriginal scholars, activists, survivors, and significant others. It is not my intent to be considered an expert in this matter. I am not.
But I believe this project could be useful to social workers and other professionals considering working in remote or semi-remote Aboriginal communities.

Reflections

The past two and a half years working for the village of Yekooche have been an honor. The loving people of this village have taught me more about life than what I attempted to teach them. The people of this village have great compassion for all people and meet life with a sense of humor. The fact they assisted in the development of the CTP is a testament of their desire to start the healing in their community from years of poverty and oppression caused by genocidal policies. They want children returned home. They do not want them taken and left in “white” foster homes never to be seen again. Rightfully so. What family anywhere in the world would want that to happen to them?

To achieve these goals, we have started anti-oppressive structural social work projects designed to bring children home and support families in the community ensuring other children are not taken away. Families have put aside differences in order to work together to address negative social issues by keeping their children and community safe (see Appendix E).

Conclusion

In this project report I have explored and explained my own research/praxis standpoint and described the personal, professional, political lessons learned from my time in this profession and this specific village of Yekooche from April 2002 - April 2004. I have offered a literature review of Ally and First Nations scholars which may guide us as social workers when working as authentic allies with Aboriginal people as
they continue their struggle for liberation and self-determination.

As the government continues to transfer child welfare authority over to First Nations organizations, there is a need for non-Aboriginal social workers to familiarize themselves concerning the struggles and aspirations of Aboriginal people. The work should begin within themselves to overcome negative myths perpetrated against Aboriginal people throughout all structures of society; thus, allowing one to be open to new possibilities and ways of delivering non-oppressive social work services.

Aboriginal people have always had their own world views, as do many other groups of people in the world, and that is appropriate. What is not acceptable is when one dominant world view tries to crush another’s world view, as has been the case for First Nations people, and which has caused multi-afflicted injuries and attempted death of spirit, culture, and self-determination. This genocidal experience is the underlying root cause of all the social ills facing Aboriginal people today in Canada (Adams, 1999; Duran & Duran, 1995; Graveline, 1998; Maracle, 1996; Thomas, 2003; York, 1990).

The Yekooche CTP and the knowledge shared from this project indicates that anti-oppressive social work can be successful and empowering for everyone involved while working in an Aboriginal community. Structural social work values ensure important roles for our profession in the upcoming years in child welfare and community development. The UNBC northern social work program can be instrumental in continuing to train social workers from the north to stay in the north. I would like to see initiatives developed to secure more Aboriginal social workers, students, and professors, by offering free tuition and emotional cultural support while attending university.
The infamous legacy of residential schools needs to be taught to mainstream society in order to stop the rampant racism existing against Aboriginal people. First Nation's courses should be taught in all disciplines at universities, colleges, and high schools, as a way to deter further racism and violence against the First Peoples of Canada. A condition so serious that Amnesty International has started an international campaign to bring an awareness to the high amount of murdered and missing First Nations women in Canada, as well as three Aboriginal men found frozen to death while in police custody (News Release, 2004). Racist remarks are hurtful when coming from members of the dominant group, but coming from a social worker, RCMP officer, probation officer, nurse, educator, or a doctor, its even more offensive. Professionals have an ethical responsibility to refrain from such hurtful and damaging practices (Adams, 1999; Graveline, 1998).

Mandatory membership in the BCASW and registration of social workers are measures that could strengthen adherence to the principles and values of our code of ethics and hold social workers more accountable for their practice. This would also serve to decrease power imbalances between social workers and band members, thus paving the way for transactional alignments designed to assist in Aboriginal people's liberation. Our profession can accomplish this by becoming authentic allies while working with First Nations people. I would like to conclude with this poem:

Social Work

we find it absolutely frightening to think
of how normal the abnormal has become
for those of us who live and work
out here on the final frontiers of humanity

where poverty and hunger
homelessness and hopelessness

racism sexism and homophobia
rape murder and suicide

heroin cocaine and marijuana
alcohol and Lysol

HIV HepC and mental illness
psych wards and prison walls

are all in a day’s work
and... we find it absolutely frightening

to hear of cutbacks and rollbacks
work to rule and work fare

unemployment and training wages
tuition hikes and stumpage rates

referendums and restructuring
larger class sizes and mobile nurses

no more special interest groups
while patriarchy and hierarchy rule the day... still

but still carry on because we have hope
and we believe in the possibility of change

we have experienced and witnessed triumph
and we know that justice is possible

and we believe in the strength and resilience of the
human spirit
and we know, yes we know, that we **can** make a difference

(Baylis, 2002, p.22)
References


Appendix A

Master Of Social Work Project Information Sheet And Consent Form

The purpose of this information sheet and consent form is to inform you about the project I am preparing for my Master of Social Work Degree at the University of Northern British Columbia and to ask your permission to have the village of Yekooche participate in this project by allowing me to study the community transformation plan.

Researcher: Charles (Chuck) Fraser, Master of Social Work student 4326 Galinis Avenue Prince George, B.C. V2M 5Z2 (250) 564-5001 E-mail: aroha@shaw.ca

Supervisor: Si Transken, Social Work Professor University of Northern British Columbia (250) 960-5555

Project Title: Considerations in Becoming an Authentic Ally Working with First Nations People and Their Communities.

Part 1: Information Concerning this Project

Purpose: The purpose of this project is to share information that will assist social workers in their daily practice to become more aware of the Aboriginal World View and how it applies in the areas of working with First Nations people in their historic struggle for self-determination, self government, community healing and collective empowerment. I will share my lived experiences in this empowerment process, as well, as look at the village of Yekooche’s Community Transformation Plan, which was formulated by information brought forward by community members, in order to become healthy and empowered for the daunting tasks of liberation that lies ahead.
Anonymity and Confidentiality: The project will focus on the process of the Community Transformation Plan and not on individual band members. No interviews will be conducted with individual band members and the project notes and final report will not identify any village member. In this way, the anonymity and confidentiality of village members is maintained. However, the community will be identified by name.

Voluntary Participation: Participation in this project is completely voluntary and you may withdraw at anytime, should the need arise.

Risks and Benefits: I do not foresee any risks by being involved in this project, for I will be analyzing the Community Transformation Plan, and will not be conducting any individual interviews or studies. I would like to name the village of Yekooche. In terms of benefits, this project will pay tribute to the progressive work conducted by the people of Yekooche by developing and implementing this plan, as well, to the Chief & Council who wholeheartily supported this initiative. This project may assist other communities in developing similar plans in order to meet the challenges of Aboriginal organizations taking control of child welfare. This project will benefit social workers, as well, as other professionals, to have an understanding of what it is Aboriginal people are asking for in the areas of empowerment and community healing from the last five decades of poverty and oppression.

Getting a copy of the project results: By contacting the researcher, a one page summary of the report will be made available to anyone who is interested. Furthermore, a summary will be delivered to Chief & Council in person or by mail. As well, a completed project report will be available at the UNBC library and one will be given to the Yekooche Chief & Council for their records.

Further Discussion: If you have any concerns or questions about this project, please contact the researcher or his supervisor at the provided numbers. If you have other concerns, please contact the Office of Research and Graduate Studies at UNBC (250) 960-5820.
Part 2: Informed Consent

I understand that this project involves me to analyze and write a report concerning the design and implementation of mainly the social work piece of the Community Transformation Plan ... YES NO

I have read and received a copy of the attached info sheet..............YES NO

I understand the risks and benefits in participation of this project .YES NO

I’ve had the opportunity to ask questions and discuss this project ..YES NO

I understand that I am free to refuse to participate. No reason is Necessary if I decide not to participate in this project..................YES NO

I have had confidentiality and anonymity explained to me and I Understand that no individual band members will be interviewed Or identified in this project, but the community can be named......YES NO

This project was explained to me by: Charles (Chuck) Fraser

I agree to participate in this project as outlined above.

________________________________________  (Date)  (Witness)

(participant signature)

I believe that the Chief of Yekooche understands what is required in this project and he voluntarily agrees to allow me to analyze the Community Transformation Plan

________________________________________ (Date)

(Researcher)
Yekooche natives working to bring home foster kids

by FRANK PEEBLES
Citizen staff

The Yekooche First Nation near Fort St. James is bringing its kids home, a few at a time.

The Yekooche Reserve has dysfunctional families that demand the removal of children from their parents, like any other community. Their reserve, however, has been particularly hard-hit. Their social worker, Chuck Fraser, estimates there are 15 to 20 Yekooche children in provincial government care from an overall population of less than 400. Fraser is spearheading a unique approach that aims to turn that around and it seems to be working.

"Children in care of the Ministry (of Children and Family Development) are there for a reason, but you want them to be with their family as much as possible," said Fraser. "The ministry did not used to recognize extended family connections. The problem is, a lot of times the parents may be sick or for whatever reason they can't be there for visits with their children, so they stay in foster care without contact, almost always in another community, and they lose their connection to family and their natural culture.

"What we are doing is a little different, and it is because the ministry has been willing to try this and we have taken the initiative to make it work. Through a process called Family Conferencing we will arrange visits with the child-in-care, and then bring a van load of people from Yekooche to the meeting: an uncle, some aunties, grandparents. We will include the chief sometimes or community elders. We bring all these people together for a group approach, and offer that child a community-based team."

Another program Fraser is using is called the Kinship Ties Model, developed by the Maoris of New Zealand. This allows extended family to take on the foster care of children, rather than foster parents outside the child's community.

Since taking this expanded approach, four children have been successfully returned to the Yekooche community and more are in the process. Not only does it repatriate the child to his or her comfort zone, but it empowers the whole village to raise its next generation.

"They are rocking," said Allen Cummings, regional manager of aboriginal services for the Ministry of Children and Family Development. "That community has seen a remarkable turnaround in only a few years. Chuck and his community wellness team ... is amazing," Cummings said. "Without a doubt, in the whole northern half of the province, Yekooche is one of the biggest success stories you'll ever find."

Cummings points to several factors as the reason why. Fraser and his team, his own ministry personnel, Carrier Sekani Family Services, individual Yekooche members, and others are all actively involved in the welfare of these children-in-care.

"I know they held a reunification party in December. They brought back a number of kids for Christmas," Cummings said. "It was really emotional. For some of these kids it was their first return. Some were eight or 10 years old and had never really seen their community before, they met grandparents for the first time, there were a lot of tears. It is the kind of thing that the Yekooche community has worked hard for, and some people have made real sacrifices to make a difference there, and it is working."

Yekooche's progress is rooted in the improvements to its social infrastructure. On the reserve they now have a dedicated RCMP officer, their own school, a mental health counselor, an addictions counselor, a youth worker, an aboriginal headstart program, a social worker (Fraser), and two new forestry companies (one logging, one silviculture) providing better employment. A probation officer now visits the remote reserve allowing those in the justice system more reasonable access to meet the terms of their court orders.

All of this combines to save the provincial taxpayer money and resources. Fraser says it costs an estimated $50,000 a year for every child in care, so the success with the four youngsters returned so far translates into about $200,000.

"This happens because we have a progressive chief and council, and because there is a willingness to open a rapport with the ministry," said Fraser. "You don't bring children back willy-nilly — the safety of the child has to come first — but we have a good reputation building. We are opening up those family's communication."
Appendix C

Yekooche Treaty Moves Step Closer

by FRANK PEEBLES
Citizen staff

The Yekooche First Nation is going to sign an agreement-in-principle with the province and it will be before the new year, the Prince George Treaty Advisory Committee was told Friday.

The news was conveyed by Byron Goerz, a Fort St. James village councillor and the PGTAC representative at the Yekooche negotiations.

Such progress at the treaty table is not a promise, but Goerz is confident in the band’s position with provincial negotiators to arrive at the pivotal AlP juncture in a matter of only months, not the years it is taking with most B.C. First Nations.

“Yekooche almost reached the AlP stage under the NDP, but nothing got signed. Everything started from scratch,” Goerz explained. The B.C. government decided to concentrate negotiations on a select group of First Nations that were closest to settlement readiness. The Lheidli T’enneh were one of those, and are now one of four First Nations to reach the AlP stage — the last hurdle before a full treaty. Goerz says Yekooche was short-listed but was far from AlP status at the time.

“There is an amount of posturing in any negotiation, but both sides have shown real willingness to move the issues forward,” Goerz said. “The province provided some key resources identified by the Yekooche: an RCMP officer dedicated to the community, a social worker, a mental health worker. The community saw these gestures and rallied behind them. They have really bought into a new approach to their own well-being. This is a community that had a lot of social issues, a lot of financial issues, almost a zero economy and they have made tremendous gains.”

Yekooche’s fortunes now rest in the province’s cash-and-land offer, which is being formulated now and is the next step in the process. Goerz says both sides have a lot of dialogue to get through yet, but surprises will be minimal and mutual willingness is high.
Appendix D

YEKOOCHE FIRST NATION
COMMUNITY TRANSFORMATION PLAN
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EXECUTIVE SUMMARY

In the spring of 2001, the Chief and Council and staff of Yekooche First Nation met with treaty representatives for British Columbia and Canada and senior officials representing various government agencies to address the serious problems of addictions and child abuse in the community. The resulting partnership has lead to Chief and Council undertaking an ambitious and courageous plan to make significant changes in community life. The Community Transformation Plan has been created to address these serious social problems and to begin a process of community healing.

The Community Transformation Plan is an extensive, trans-professional approach to community healing based on the assumption that both community involvement and professional intervention are essential to community healing. The principal components of the Community Transformation Plan include:

1. Establishment of a community-based Wellness Committee;
2. Coordination of all healing and wellness activities through the Wellness Committee;
3. Establishment of a Professional Intervention Team;
4. Development of a process to maximize community involvement.

The Wellness Committee is a community-based, multi-disciplinary group responsible for implementing the Community Transformation Plan. The Wellness Committee is comprised of members of the community, professionals and support staff. The goals of the Wellness Committee include:

1. Empowerment of the community through active involvement and responsibility for community wellness;
2. Elimination or significant reduction of divisive conflict in the community through the implementation of a cooperative decision-making model;
3. Building community capacity through education, training and community involvement;
4. Contribution to and implementation of the Community Transformation Plan.

The Professional Intervention Team will be comprised of: an RCMP officer who will coordinate the Justice Committee, the Mental Health Counsellors who will guide the Wellness Committee and develop the Trauma Recovery Program, the Community Development Worker who will coordinate the Community Based Team, the Education Administrator who is responsible for the Education Society and the Community Health Nurse who will coordinate health-related programs.

Community support staff and volunteers will include: community members, Elders, Carrier Language Teacher, Early Childhood Education Support Workers, administrative support staff, special program facilitators, addictions support workers, Carrier Sekani Family Services representatives and representatives from Chief & Council and staff.
1.0 Introduction

1.1 Rationale

Yekooche First Nation is located in north central British Columbia, 85 km north west of Fort St. James. The on-reserve population varies between 100 – 120 people. Crowding and lack of housing has resulted in the regular movement of people between the community and town. In 1995, Yekooche became an independent First Nation for the first time since 1958. Previously it was forced into an amalgamation with other Carrier First Nations. The recent independence has challenged the community to achieve internal stability, socially, politically and administratively.

Yekooche First Nation has experienced significant political, economic and social upheaval in the past few years. For a variety of reasons there has been limited success in facilitating progress in Yekooche First Nation. Between 1995 and 1997, political and administrative decisions resulted in the accumulation of horrendous debt, incompetent management, and lack of accountability, documentation and reporting, the lack of support for health, education and social programs. This has resulted in a devastating blow to community self esteem, a serious increase in divisiveness between and within families and an increase in social problems.

Community members and professionals recognize that domestic violence is a norm in the community. Violent behaviour occurs or has occurred in nearly every family and home in the community. It is also recognized that there is some degree of alcohol and/or drug addiction in nearly every home. There is excessive use of over-the-counter medication (gravol and Tylenol), prescription drugs, uppers, marijuana/hashish, cocaine, and heroin. Some youth have experimented with gas sniffing. Many children chew and/or smoke tobacco. The rate of teen pregnancy and early school leavers is high. Child abuse in all forms is a major concern. Most children have witnessed a great deal of violence in their lives.

In the spring of 2001, the Chief & Council and staff of Yekooche First Nation met with treaty representatives for B.C. and Canada and senior officials representing various government agencies to address the serious social and health problems in the community. As a direct result of the discussions, YFN has created a Community Transformation Plan (CTP) to address these serious social problems and to bring about community healing.

2.0 Community Transformation Plan (CTP)

The Community Transformation Plan is an extensive, trans-professional approach to community healing. It is based upon the assumption that the community itself must drive the change process. It is also assumed, however, that professional skill, facilitation and guidance is necessary in assisting the community to rediscover its fundamental capacity for nurturing health and well being.

The Community Transformation Plan is a unique combination of community determination and commitment coupled with professional skill and expertise. The
Community Transformation Plan seeks to combine the best of conventional professional helping with traditional/cultural/grassroots approaches as part of a broader treaty-related process to re-establish community viability. Through the use of new technology and with the eventual resolution of treaty issues it is hoped that economic prosperity will contribute significantly to this transformation process.

The principal components of the Community Transformation Plan include:

1. Establishment of a community-based Wellness Committee.

2. Coordination of all healing and wellness activities through the Wellness Committee.

3. Establishment of a Professional Intervention Team comprised of two Mental Health Counsellors, an RCMP officer, a Community Development Worker (Social Worker) and existing health and social services professionals.

4. Development of a process to maximize community involvement.

2.1 Community Wellness Committee

The Wellness Committee is a community-based, multi-disciplinary, trans-professional community group. Established in April 2001, it is responsible for guiding the CTP initiative. The Wellness Committee is accountable to the community through the Chief & Council and to the funding agencies through the Steering Committee. The Wellness Committee is presently being facilitated by a Mental Health Counsellor. However, plans to train and empower a community member to co-facilitate have been developed and are will implemented in April, 2002.

The primary purpose of the Wellness Committee is to identify community need/capacity and to improve community well-being through the acquisition of resources and the coordination of programs and projects.

The goals of the Wellness Committee are:

1. Empowerment of the community through active involvement and responsibility for community wellness

2. Elimination or significant reduction of divisive conflict in the community by through the implementation of a cooperative decision-making model

3. Building community capacity through education, training and community involvement

4. Contribution to and implementation of the Community Transformation Plan
The Wellness Committee will address the needs identified by the Community Based Team, the Justice Committee, the Education Society, Chief and Council and the community members. The Wellness Committee will also coordinate the initiatives of community wellness programs and projects.

The Wellness Committee meets weekly. It is comprised of members of the community and other professionals/support staff in the community including:

- Chief and Council Representative
- Carrier Language Teacher
- An Elder
- Community member(s)
- Early Childhood Education Support Worker
- Principal of Jean Marie Joseph School
- Special Programs Facilitator
- Two Mental Health Counsellor
- Community Development Worker (Social Worker)
- RCMP Officer
- Three members from Carrier Sekani Family Services

There are plans to ensure representation from every geographic area in the community. The committee membership may be expanded depending on who is hired for the community positions within the mental health and social work departments.

The Wellness Committee will coordinate community wellness initiatives by

- Brainstorming ways to encourage and increase community involvement
- Establishing ad hoc committees for specific projects
- Facilitating the development of activities and programs as the ideas are brought to the committee.
- Development of a large calendar of training events, workshops and initiatives to eliminate conflicts and ensure appropriate scheduling of activities.
  - to ensure that important events are not scheduled on days when most community members are out of the community – i.e. payday, child allowance days and social assistance payment days)
  - to ensure that training/workshop opportunities are scheduled to maximize opportunities for community members to participate in all events
• Development of a continuously updated display board to advertise training events/workshops and treatment program dates in Yekooche, Fort St James, Prince George, and other First Nation communities in Northern B.C. This board will also provide general information applicable to mental health and personal wellness from traditional approaches and western approaches.

• Placement of suggestion boxes in various locations to encourage community input. Time will be taken at each meeting to address issues raised.

• Development of a wellness newsletter
  
  - to inform all community members of available programs, events and celebrations
  
  - share successes that have occurred in the community
  
  - seek volunteers for programs and initiatives

Agenda items for the Wellness Committee will be brought to the Administrative Assistant by the Monday preceding the regularly scheduled Tuesday meetings. The co-chairs of the committee will prioritize the agenda items in consultation with other members whenever possible. Items will be prioritized based on Chief and Council initiatives, important time deadlines and relation to the community wellness initiatives.

The focus of the Wellness Committee is to provide positive suggestions for growth and healing for the whole community. Members will be encouraged to build on the strengths in the community and focus on positive programming (how can we improve things) rather than dwelling on the negative and focusing on the past. Although many community members may need to vent about terrible things that have occurred in the past or that are still occurring, they will be encouraged privately to seek counselling or attend talking circles to help process and heal from these events.

2.2 Wellness Programs

Wellness activities will include both regular programs and specific time-limited healing projects. The Mental Health Counsellors will coordinate the Addictions Program and the Trauma Recovery Program. Other projects will be the responsibility of Community Health staff or the Wellness Committee.

2.2.1 Community Health

There has been limited success with the coordination and delivery of health services in Yekooche. The contributing factors, both external and internal, are complex. As the community becomes empowered through the Community
Transformation process and individuals have an opportunity to deal with personal issues, a collaborative, cooperative direction for the Community Representative and Community Health Nurse will evolve.

2.2.1.1 Community Health Nurse (CHN)

The Community Health Nurse for Yekooche is employed by Carrier Sekani Family Services. The recruitment and retention of the appropriate qualified professional for this position is increasingly more difficult. The chronic nursing shortage in the country is a major factor.

2.2.1.2 Community Heath Representative (CHR)

The CHR acts as a liaison between the community and the health care system. The CHR is responsible for providing support, health counselling and health information to the community members of Yekooche First Nation. In partnership with the Community Health Nurse, the CHR manages and coordinates the operation of the Yekooche Health Station.

Summary of CHR Responsibilities

- Act as a liaison between the health care system and community members as required.
- Make Elder visits to every Elder living in Yekooche village.
- Visit community members discharged from hospital.
- Visit prenatal and post natal women and newborns.
- Visit community members with chronic conditions to monitor health status and arrange appropriate medical attention.
- Coordinate appointments for the Doctor’s monthly community visits.
- In partnership with the Community Health Nurse, coordinate well-baby and immunization clinics.
- In partnership with the Community Health Nurse, coordinate clinics for expectant women.
- In partnership with the Community Health Nurse, coordinate vaccination clinics.
- Arrange speech and hearing testing as directed by the Community Health Nurse and/or the Ministry of Families and Children.
- Participate as a member of the Community Based Team (family support community-based group).
- Make school visits once a week to meet with teachers about health related concerns of the children.
- Arrange for patient travel to medical/hospital appointments as required.
- Escort community members to medical appointments if specific circumstances require the support of the CHR.
- Provide appropriate first aid services as required and refer to appropriate medical attention.
• Coordinate and participate in workshops or educational sessions presented by the Community Health Nurse.
• Provide health information and handouts to community members related to birth control, personal hygiene etc.
• Work closely with the Family Care Worker to provide appropriate support to families and children.
• Coordinates the services of the visiting Dental Therapist as required.
• Provide support for individuals and families in crisis.
• Provide support for individuals and families with the grieving process.
• Notify the Environmental Health Officer of any environmental issues or concerns.

2.2.2 Addictions Program (Community Wellness Workers)

The Addictions Program is a critical component of the Community Transformation Plan. In the spring of 2001 the Wellness Committee developed an addictions strategy as a response to the high levels of chronic drug and alcohol abuse and addiction in the community. The community had previously attempted to use a NNADAP model to address this problem. However, this model did not prove successful. It was then decided to create a new model based on the community's unique needs, new research in the substance abuse field and a perception that a fully comprehensive approach was not only necessary but also essential. Past professional and para-professional interventions may also have failed because the community had not assumed ownership of the problem. This new model assumes that with community ownership of the process and professional and para-professional support rather than direct intervention the community has much greater chance of success.

2.2.2.1 Purpose of the Addictions Program

The purpose of the Addiction Program is to assist YFN members to create a positive vision for the future and to address issues related to drug and alcohol abuse and addiction.

Goals

1. To establish an outreach and support strategy for those members actively involved in substance abuse.
2. To facilitate and assist in the preparation for the treatment process for those individuals who seek help.
3. To engage in prevention initiatives which will provide education with respect to the dangers of substance use and abuse.
4. To participate in the community wellness initiatives of the Wellness Committee through the provision of education, training and counselling related to health, well-being and living a healthy lifestyle.

5. To provide follow-up support for those individuals returning from a treatment centre or for those involved in a community-based or outpatient program.

6. To assist the Mental Health Counsellor in developing community-based healing plans for those community members preferring this option.

**Objectives**

1. The creation of two Community Wellness Worker positions. These positions form the nucleus of the Addictions Program;

2. Selection of candidates for these positions based on their active commitment to a healthy, balanced lifestyle and on their potential to act as positive role-models for community members;

3. Under the direct supervision of the YFN Mental Health Counsellors, the Community Wellness Workers will provide the following support activities:

   - traditional/cultural/spiritual activities
   - recreation activities
   - sports activities
   - family visits (i.e. go for coffee, help in work projects, home visits)
   - attendance or assistance in establishing support groups
   - affirmation during treatment/healing
   - supportive counselling following attendance at residential or community-based programs
   - facilitation of talking/sharing circles
   - aftercare support and support for aftercare plan (i.e. attendance at meetings, preparations for welcome home, assistance with practical problems such as housing, income, transportation, medical visits, etc)
   - preparation for counselling and liaison with professional staff
   - accompany individuals traveling to or returning home from residential programs
   - attendance at special ceremonies
   - assistance with workshops and other training events related to addictions.
3.0 Trauma Recovery

3.1 Mental Health Counsellors

The primary role of the Mental Health Counsellor is to provide professional counselling services to the members of the Yekooche First Nation. The Mental Health Counsellor will be responsible for providing confidential and effective counselling to band members, staff and others associated with the Nation to assist in addressing mental health problems related to loss of culture, historical abuse, economic disadvantage and systemic injustice. Utilizing a range of conventional "western" approaches and traditional/cultural approaches the Mental Health Counsellor will work to enhance the well-being of the complete individual: physical, intellectual, emotional, spiritual, social and cultural.

The Mental Health Counsellor will also provide emergency or crisis services to individuals or groups experiencing emotional/psychological trauma or severe distress. The Mental Health Counsellor will work to build the capacity of community members by training appropriate people in crisis intervention techniques critical incident stress debriefing and grief support work. Where the Mental Health Counsellor is unable to provide training, he/she will assume a facilitative role in the organization and delivery of these training services.

The development of mental health services is in an early development stage requiring considerable innovation and creativity. The Mental Health Counsellor will work flexibly as a member of the Professional Intervention Team to develop the mental health component of the Community Transformation Plan. The Mental Health Counsellor will work to ensure the long-term viability of the mental health program and the Community Transformation Plan.

The Mental Health Counsellor will utilize a team approach in working with other staff members and develop a collaborative model of communication and conflict resolution based on sound ethical principles and critical clinical judgment.

The supportive nature of the Mental Health Counsellor position will involve varied and individualized activities dependent on the needs of the particular individual/group and/or community. The Mental Health Counsellor will provide:

- advocacy
- group counselling
- networking with community resources
- information dissemination to clients and the general community
- support for community-building activities and development of various educational sessions/presentations, workshops and training.
- consultation to staff, managers, Chief and Council and volunteers to increase the effectiveness and efficacy of community-based programs and services.
3.1.1 Duties and Activities of the Mental Health Counsellor

Activity 1 - Personal Counselling

Frequency: Daily - 4 days per week
% of Time: 40%
Order of Importance: Second Priority
Duties:
- market services to community members
- establish a referral system
- maintain and enhance the clinical record system
- ensure safe, discrete and private counselling facilities
- provide an accessible and responsive intake process
- provide an initial assessment of all clients referred
- provide an initial treatment plan for all clients referred
- update treatment plans of all long-term clients @ minimum 6 mo. interval
- review client files regularly with clinical supervisor
- use transparent clinical recording process. All file information should be accessible (read only) to clients. No file information is to be accessed without permission of clinical supervisor
- provide an opportunity for client evaluation
- close files that are inactive for 3+ months and provide closing summaries
- provide referral to outside agencies where conflict occurs, danger to the Mental Health Counsellor or client may occur or at the request of the client

Activity 2 - Community Work

Frequency: Daily/Weekly
% of Time: 40%
Order of Importance: Third Priority
Duties:
- Program development activities based on expressed community need
- Preparation of proposals for funding
- Community needs assessment
- Community capacity assessment
- Development of services utilizing advanced communications technology
- Involvement in community-building activities
- Co-facilitation of Wellness Committee (High Priority)
Activity 3 - Crisis Response

Frequency: Monthly
% of Time: less than 5%
Order of Importance: First Priority
Duties:
- provision of 24 hour crisis response while resident in the community - on an as-available basis while out of community
- assessment of need for crisis response in conjunction with other community service providers and clinical supervisor (triage)
- notification of appropriate staff and community members
- development of individual and community safety plans
- provision of critical incident stress (CISD) debriefing following traumatic incidents
- provision of crisis and CISD training to community members
- provision of grief counselling response to individuals/ groups experiencing sudden loss.

Activity 4 - Supervision/Mentoring

Frequency: Weekly/monthly
% of Time: 5%
Order of Importance: Fourth Priority
Duties:
- supervision of community support workers in the Addiction Program
- supervision of volunteers, other staff involved in service delivery.
- acting in a mentoring role to community members, staff and volunteers involved in provided mental health-related services
- co-facilitation of groups/circles wherever possible

Activity 5 - Training/Consultation

Frequency: Weekly/monthly
% of Time: 10%
Order of Importance: Fifth Priority
Duties:
- provide education & training specific to community needs and wishes
- assist Wellness Committee in the development of training programs for wellness activities
• assist community members in training to use advance communications technology for mental health purposes
• provide consultation to staff, managers, Chief & Council regarding complex situations related to mental health issues.
• provide workshops/presentations on selected topics
• regular consultation with clinical supervisor in person and using secure technology
• establishment of innovative communication systems for consultation with supervisor or others with expertise in mental health work.

Two mental health counsellors have been recruited to work as key members of the Professional Intervention Team. The counsellors will provide short-term, crisis-related services to address problems related to trauma, violence and abuse. The counsellors will also be involved in a range of community development activities and the supervision of paraprofessional support team members working on related wellness programs and projects. While both counsellors will provide services as generalists, each will take responsibility for one of two primary focus areas:
• Addictions Program and family violence
• Women's and children's services.

Both counsellors will develop and provide services to the Trauma Recovery Program.

3.1.2 Clinical Supervision

The Clinical Supervisor for Yekooche First Nation supervises the Mental Health Counsellors and the Community Development Worker. The clinical supervisor position is a contracted support position and ensures the maintenance of clinical standards of practice provides accountability and acts as a mentor, support person and consultant for program staff and Yekooche First Nation administration and staff.

The Clinical Supervisor position is funded jointly by First Nations and Inuit Health and Yekooche First Nation. This is a FNIH Level I Therapist position. Yekooche First Nation has contracted with Greg Beattie MSW, RSW to provide this service for the duration of the project.

The FNIH contract stipulates that: “The frequency and length of face-to-face supervision sessions will depend upon the qualifications and experience of the MHT (Mental Health Counsellor). However, such supervision will occur at a minimum of two (2) times per month for at least two hours. In addition, a file review will occur on a monthly basis and the supervisor, prior to intervention, will approve all assessments and treatment plans. The supervisor will ensure that the
MHT has a personal wellness plan and will support the plan. The supervisor will provide consultations in-person and by communication links. The supervisor will approve training/education plans and will support applications to YFN for exceptional funding for these initiatives.

3.2 Trauma Recovery Programs

Specific trauma recovery programs will be developed to address the traumatic effects of the residential school system, family violence and sexual abuse.

4.0 Community Based Team

The Community-based Team is responsible for the safety and well-being of the community's children. Facilitated by the Community Development Worker (Social Worker), this team will provide valuable input and assist in the critical decisions related to child welfare. The team will be comprised of the Community Development Worker, the Family Care Worker and the CSFS Social Worker as well as any other professional intervention team members who may contribute in a positive manner to child welfare decision-making. The Community Development Worker will recruit a number of community members who will be trained in child welfare decision-making, confidentiality and discretion. The Community Development Worker will chair the Community-Based Team and will ensure that it develops a mandate consistent with the needs of the community, statutory requirements and the mandate of the Community Transformation Plan.

4.1 Community Development Worker

In the spring of 2001, the Chief & Council and staff of Yekooche First Nation met with treaty representatives for B.C. and Canada and senior officials representing various Government Agencies to address the serious problems of addictions and child abuse in the community. The resulting tripartite partnership has led to a commitment by the front line agencies to provide the resources necessary to support the Chief & Council in their effort to transform community life.

In an effort to relieve the suffering and promote the overall well-being of the community, the Chief & Council have undertaken an ambitious and courageous plan to address the serious social problems and bring about community healing. This plan to transform the community into a safe, secure and healthy environment is essential for the social and economic growth of the community and the eventual conclusion of a treaty with B.C. and Canada.

The Ministry of Child and Family Development (MCFD), Carrier Sekani Family Services (CSFS) and Yekooche First Nation have agreed to jointly fund a community social work position with no delegated authority. The Community Development Worker will be responsible for the development of child welfare resources on reserve and will work to ensure that all parties to the agreement respect
the fundamental right of Yekooche First Nation to direct the provision of child welfare services on reserve.

Historically, the relationship between Yekooche First Nation and MCFD has been poor. The elders describe numerous instances in the past when children were removed from their homes and placed in foster homes far from home with few or no connection to their families or their community. Some of these children were moved from foster home to foster home many times, never achieving a sense of stability or security and often ending up on the streets or, in more extreme cases dying prematurely. The elders suggest that the removals and in some cases the inability of MCFD to care for their children has led to tremendous mistrust between Yekooche First Nation and MCFD. This makes the current delivery of services to Yekooche First Nation very challenging.

In addition, the struggle of the people with addiction and family breakdown has led to mistrust on the part of MCFD line workers and supervisors. Yekooche First Nation has a very poor reputation amongst these workers. A reputation that is constantly re-enforced by their own perceptions and beliefs based on past experiences and those of other professionals and agencies in the region. This has led to an inability to see positive qualities in the community, partially blinding officials to family and community strength and capacity. Individuals who do not understand or believe in the community can no longer make critical decisions about the welfare of the children from a distance.

4.1.1 Community Social Work Model

The Community Social Work (CSW) model is a professional social work approach that incorporates both the child protection role and a community work role to improve the efficacy of the statutory social work role and to provide a level of protection of children that extends far beyond their immediate circumstances. The model operates on the following assumptions:

- Clients do not exist in a vacuum but in a pattern of relationships, which influence their ability to solve or cope with problems.

- The social work role involves the development of relationships with children and their families where mutual accountability and responsible behavior are the defining elements of the relationship.

- A social worker must be thoroughly familiar with the strengths and weaknesses of a community to make effective decisions. Critical decisions about the welfare of children cannot be made in isolation from the community.
• Current office-based, case management oriented workers are largely unaware of the detailed influences and interactions between clients and the community.

• Prevention is better than cure. It is much more effective to prevent deterioration rather than wait for a crisis when the client has little or no potential to cope and motivation for substantial change is lost.

Fundamentally, the Community Development Worker role involves the protection of children and improvement of interpersonal relationships between clients, their families and communities. It offers an opportunity to build partnerships between community, MCFD, CSFS and other community agencies. It is an innovative and comprehensive approach that provides a service in an appropriate and respectful way and builds on strength rather than preoccupying itself with weakness and incapacity. The Community Social Work model offers MCFD an opportunity to build trust and confidence in the community and to be seen as a helping agency rather than “baby snatchers”. It also presents an opportunity to CSFS and Yekooche First Nation to further develop and strengthen their partnership in providing child welfare services to the community.

4.1.2 Role of the Community Development Worker

The recruitment of a full-time Community Development Worker is essential to the success of the Community Transformation Plan. The Community Development Worker will work to ensure the safety and well-being of children and will assist with the preservation of the family unit.

Working as a member of the community-based professional team and with the guidance of the Wellness Committee, the Community Development Worker will work to develop partnerships with various concerned parties, particularly CSFS and MCFD. Emphasis will be given to the development of the child welfare component of the Community Transformation Plan and permanent planning for community social work services in Yekooche First Nation.

The Community Development Worker will work under the direct supervision of the Clinical Supervisor provided by Yekooche First Nation. The supervisor is a senior social worker with professional social work training, community social work training and experience, extensive knowledge and belief in the Carrier people and a high level of commitment to the project.

The Community Development Worker will be a highly committed and self-directed professional social worker. The community has identified the need for a personable, friendly person with a positive, optimistic personality and a high degree of flexibility. This person must have a good understanding of life in first nation communities and must have an in-depth understanding of poverty issues. In addition the Community Development Worker will have considerable skill and
ability to work in the areas of addiction and abuse and will be a psychologically healthy person.

Community Development Worker will be involved in various capacity-building initiatives as part of their front line duties.

- The training and supervision of individuals involved in the Community-Based Team.
- The facilitation of training related to child protection for all professionals, para-professionals and volunteers working in the community.
- The training of all community members in the role and function of the Community Development Worker position, CSFS and MCFD mandates.
- The on-going development of effective protocols for professional services to the community.
- The managing of staff and volunteers in areas of identified competency.
- The provision of consultation to staff and informal caregivers to improve assessments and interventions.
- The establishment of linkages with external professional resources through the use of advanced communication technology.

The Community Development Worker will be a supportive resource for existing front line staff and will act as a role model for the development of healthy professional behavior and effective occupational boundaries. The Community Development Worker will assist staff & volunteers to deal with the complexities of child and family interactions and will assist staff to function as fully involved team members.

4.1.3 Responsibilities of the Community Development Worker

The primary responsibility of the Community Development Worker will be the protection of children in Yekooche. The Community Development Worker will also work to maintain the integrity of the family unit (as recognized in a first nation community). The position will involve working as a child protection worker using a community social work model. The Community Development Worker will be closely involved in the development of additional resources for children and families. In particular the Community Development Worker will work towards the immediate development of a “Place of Safety” resource for Yekooche First Nation.
Under the direction of the Clinical Supervisor and with the guidance and support of CSFS and the Yekooche First Nation Wellness Committee the Community Development Worker undertake the following job duties and tasks involving a mix and balance of case management duties and community work:

A. Case Management

1. Assists in the investigation of complaints of child abuse/neglect.
2. Formulates and implements service plan.
3. Ongoing management of cases.
4. Prepare clients for court.

B. Parenting - Guardianship

1. Provide services to children in care.
2. Prepare child for independence.

C. Community Work

1. Identify strength and capacity of community.
2. Involve clients in formulation of intervention plans.
4. Development of volunteer/informal support network.
5. Development of alternative intervention strategies i.e. group work, task-centered methods, support groups, etc.
6. Organization and strengthening of the Community-Based Team.
7. Extensive and close contacts with his/her statutory agencies and community groups.
8. Extensive involvement in community including committee work, consultation to Chief & Council and staff, community events, community projects, etc.
9. Development of preventative strategies in close cooperation with CSFS.
10. Assistance to CSFS in the development of their resources in Yekooche First Nation

4.1.4 Agency Linkages

CSFS currently provides a half time Child and Family Services Worker with level 12 delegated authority to Yekooche First Nation. The duties and responsibilities of this position will be examined to determine areas of overlap with the Community Development Worker position. Negotiations may then be necessary between MCFD and CSFS to determine the relationship between the Development Worker position and CSFS social work services.

MCFD will continue to assume statutory responsibility for child welfare services. However, they have committed to work closely with CSFS and Yekooche First
Nation through the Community Development Worker to ensure that the current protocol agreement is strengthened and expanded to ensure that children in need of protection and their families are interviewed in a respectful and culturally appropriate manner and where a child is found to be in need of protection that child will not be removed from the community unless all options have been explored.

The Community Development Worker position was proposed initially as a Level 15 position to ensure that critical decisions regarding child protection were made by a professional with intimate knowledge of the community and in whom the community could trust to make clinically sound and culturally appropriate decisions.

While this is still the preferred option since it offers the greatest possibility of success, it is possible to carry on the project with a non-delegated Community Development Worker under the following conditions:

- Development of a protocol between Yekooche First Nation and MCFD that ensures that the Community Development Worker plays a major role in all child protection decisions.
- Supervision of the Community Development Worker by the Yekooche First Nation Clinical Supervisor.
- Orientation of relevant MCFD staff to the Yekooche First Nation Community Transformation Plan.
- Joint training of MCFD and Yekooche First Nation staff in the Community Social Work Model.
- The creation of a job description by Yekooche First Nation in consultation with MCFD and CSFS.

4.2 Family Care Worker

4.3 Child and Family Services Worker (CSFS)

4.4 Community Representatives

5.0 Child Welfare Programs
   5.1 Family Support
   5.2 Child Protection
   5.3 Child Care Resources

6.0 Community Justice Committee

The Community Justice Committee will be responsible for working towards the development of a safe and secure environment for all community members. Facilitated by the RCMP officer, this committee seeks to reduce criminal activity, encourage
community ownership and responsibility and contribute to community healing through restorative justice initiatives.

6.1 RCMP Officer

The RCMP member has a responsibility to:

- Provide services for, or to assist in, the provision of policing services to the community.
- Work with the community to establish and maintain an effective Community Advisory Group (Community Justice Committee).
- Work together with the Community Justice Committee or provide status reports detailing the policing service and other community justice initiatives on a monthly basis to Yekooche First Nation.
- Work together with the Province, Canada and Yekooche First Nation to identify appropriate training opportunities. Appropriate training opportunities may include family violence, substance abuse, suicide prevention, etc. Training will be consistent with policing needs and are consistent with the policing priorities of the community.
- Work with the community and other agencies to prevent or resolve problems that affect the community safety and promote crime prevention.

6.2 Community-Representatives

6.3 Community Justice Committee Programs

Potential programs to be initiated by the Community Justice Committee Programs may include youth crime prevention, restorative justice and probation support.

7.0 Education Society

The Yekooche First Nation Education Society will be established as an independent body having control over education and providing advisory services to the Jean Marie Joseph School. The Education Society will be responsible for:

- The operation of the adult education center and the development and delivery of all adult education and training programs in Yekooche First Nation.
- The administration of all education for members of the Yekooche First Nation.
- The operation of the Early Education Centre and Head Start Program.
- The implementation of basic B.C. Ministry of Education Core Curriculum at an acceptable level equal to or better than the provincial standard to ensure that students can transfer to other schools and post-secondary institutions.
- The promotion of Carrier language and culture curricula for all age groups in the communities

- Encouraging Yekooche members to acquire the professional qualifications and skills to fill all local employment positions

- The promotion of learning environments in which students of all ages will be encouraged to advance their self-development: intellectual, spiritual, physical and emotional.

- Strengthening the understanding and cooperation between the Yekooche First Nation Education Society and other educational institutions

- Strengthening the understanding between the Yekooche First Nation Education Society and all levels of government.

7.1 Jean Marie Joseph School

7.1.1 Primary, Intermediate and Senior Programs

7.1.2 School Breakfast and Lunch Program

7.1.3 Adult Education Program

7.2 Early Childhood Education Centre

The Head Start Program is located in the Early Childhood Education Centre in Jean Marie School. The facility is licensed as two family day cares. Yekooche, however, is not funded to provide Day Care Services. All ECE programs in Yekooche are based on the principles of Head Start.

7.2.1 Head Start Program

The Yekooche Head Start Program, for children from birth to six years of age, was established in October 2000 to promote early childhood development. The program provides a safe, healthy, nurturing environment with a variety of learning experiences to foster intellectual, social, emotional and cultural growth.

At least six children enrolled in the daily program exhibit speech development problems. Three children exhibit challenging behaviors (hitting, scratching). One parent reports that her child has Fetal Alcohol Syndrome or Fetal Alcohol Effects. One infant with a serious heart defect has experienced extended hospitalization, is at risk developmentally and will require regular medical follow-up.

There is an urgent need for professional psycho-educational assessments. These assessments are necessary to identify appropriate early intervention measures and the development of individualized education plans and specific behavioural
management techniques. We are seeking the resources to have these professional assessments completed.

7.2.1.1 Head Start Coordinator

The Head Start Coordinator has specialized training in the design and development of programs for children with special needs. The Head Start Coordinator plays a key role in meeting the needs of infants, toddlers and preschoolers and the empowerment of community members to take responsibility for the development and implementation of the program.

7.2.1.2 Early Childhood Education Support Workers

Four community members are employed the Head Start program as ECE Support Workers. Individuals are encouraged to continue their education and take a lead role in different facets of the Head Start program including

- the Head Start newsletter
- the infant mother goose program
- monthly family gatherings
- the Carrier/Cultural program

The ECE Support Workers are being trained to complete basic developmental assessments of the children and to provide stimulation to the children that will help them to reach their maximum developmental potential in preparation for Kindergarten.

7.2.1.3 Number Of Children In Head Start

Due to an increased need for early childhood education services, especially for children aged 0-3, the Head Start program has recently expanded to allow more children to attend. Quality care is now provided for up to 14 children at a given time.

7.2.1.4 Plans For A Head Start Outreach Program

Except for a single home visit when a child enrolls in the program, the Head Start program is presently center-based. Due to the high incidence of special needs children (birth – 6 years of age), an outreach program is being developed for the new fiscal year. The outreach program will focus on training parents in effective stimulation techniques for all areas of child development. They will be empowered to take the lead in implementing the activity goals for their children. The principles of the outreach program are based on the belief that parents are experts on their own children. Teaching a parent to provide the stimulation needed when a child is delayed will have the longest lasting effects.
The outreach program will be open to all families of children between the ages of 0-6 years. Priority will be given, however, to children who exhibit delays in development, children with mental health needs and children who do not attend the school based program. The outreach program will accommodate five to eight children at a time.

7.2.1.5 Parenting Programs

Parenting programs are conducted weekly at the school. Two programs have been offered to date.

7.2.1.5.1 "How to Talk so Kids will Listen" (offered by CSFS Worker) include the following sessions:

A. Dealing With Children's Feelings

- Understand how children react when their feelings are denied
- Understand the importance of acknowledging children’s feelings
- Learn specific skills for accepting feelings
- Practice using these skills in home, day care, school and hospital settings

B. Engaging Cooperation

- Examine methods typically used to get children to behave
- Understand why these methods are self-defeating and lower self-esteem
- Learn six methods for engaging cooperation that invite children to assume responsibility and at the same time leave them with positive feelings about themselves and the adults in their lives
- Practice using these skills in home, day care and hospital settings

C. Alternatives to Punishment

- Understand the effects of punishment as a means of discipline
- Explore alternatives to punishment
- Learn specific skills, including problem solving, that enable parents to express strong disapproval and at the same time encourage responsible behaviour.
- Practice using these skills in home, day care and hospital settings
D. Encouraging Autonomy

- Understand the importance of helping children to become separate, self-governing people who can one day function on their own.
- Understand the relationship between spanking and a child’s diminished sense of self.
- Learn specific skills that encourage self-reliance behaviour.
- Practice using these skills in home, day care and hospital settings.

E. New Ways to Praise

- Examine the relationship between praise and self-esteem.
- Understand the difference between helpful and unhelpful praise.
- Learn specific skills that enable children to praise themselves.
- Practice using these skills in home, day care and hospital settings.

7.2.2.5.2 “You Make the Difference Parent-Child Communication Program” (Hannen) (offered by FNESC Consultant)

- Helps parents recognize that they have the power and ability to foster their child’s communication skills.
- Gives parents specific ways to connect and communicate with their child that will help them learn during everyday activities.
- Helps parents become more confident by giving them information and support.
- Provides a forum for early identification and referral of children who show signs of language delay.

7.2.25.3 A Mother Goose Infant Development Program

We are developing an eight week mother goose program for infants, toddlers and their parents. This program will help prevent communication delays in young children (0-3 years). Teaching parents songs and nursery rhymes encourages positive social interaction between parents and young children. It should also help to build relationships with the Head Start staff and the parents of infants who do not attend the Head Start Program.

7.2.1.6 Developmental Assessments and Stimulation

The Head Start staff will be assessing all the children using the Alpern Boll Developmental Profile and the Portage checklists to develop a pre-baseline of their skill levels. Individualized programs will be developed outlining goals for stimulation and staff and parents will be encouraged to help teach the children new skills. Children will then be reassessed every six months to determine if...
the programs have been effective. These are routine established assessments for the Head Start staff to use. They are to be distinguished from professional psycho-educational assessments that some of the children will require.

8.0 Need For A Community Safety Committee

There is a significant relationship between human health and well being and the influence of the physical, social and societal environment. It is recognized that the physical environment on reserves in Canada places children and adults at increased risk for respiratory problems, neuro-behavioural development problems, immune system deficiencies, infections, skin problems, reproductive health problems, congenital anomalies and injuries. Environmental factors that represent a potential risk to the health of a community include unsafe housing, poor indoor air quality (dampness, moulds and tobacco smoke), sewage disposal, hazardous waste disposal, lack of fire protection and emergency response plans, unsafe vehicle use, the availability of weapons, unsafe storage of medications/drugs and alcohol, lack of safe play areas, environmental contamination, lack of knowledge related to injury prevention etc.

Recognizing the influence of physical environment on the well being of the community it is clear that a multidisciplinary Community Safety Committee should be established to support the Community Transformation Plan. This is necessary to ensure a true holistic approach to health and social conditions in the community. The committee will be comprised of a representative from Chief and Council, village and school custodial staff, the CHN, CHR, Environmental Health Officer (FNIIH) and RCMP Officer. The committee would be responsible for the identification of specific risk factors in Yekooche, the development of the appropriate surveillance systems, problem solving and the development of specific prevention and community education programs.