Walking the Path Together Tools:
Danger Assessment Phase II

Developed in consultation with Dr. Jacquelyn Campbell.

ACWS
Alberta Council of
Women's Shelters

ACRONYMS & ABBREVIATIONS:

ACWS Alberta Council of Women's Shelters
AI Appreciative Inquiry
CCFJS Centre for Children and Families in the Justice System
DA Danger Assessment
DV Domestic Violence
EFW Eagle Feather Worker
PGC Project Guidance Circle
SROI Social Return on Investment
WTPT Walking the Path Together

CONTENTS

Overview of Walking the Path Together

Walking the Path Together (WTPT) is a collaborative learning project initially comprised of eight organizations passionately dedicated to meeting the needs of children living on-reserve who have been exposed to domestic violence. The following organizations contributed to the development of the project by sharing their rich expertise: five on-reserve shelters (Bigstone Cree Nation Emergency Women's Shelter in Wabasca, Eagle's Nest Family Shelter in Morley, Ermineskin Women's Shelter Society in Hobbema, Paspew House in Fort Chipewyan, and Sucker Creek Emergency Women's Shelter in Enilda), the Alberta Council of Women's Shelters, the Centre for Children and Families in the Justice System and Dr. Jacquelyn Campbell.

Using a holistic approach, Eagle Feather Workers (EFW) from the five participating on-reserve women's shelters provided one-on-one support to children who experienced domestic violence. The EFWs worked with the children's families, schools and community supports to create safer environments for the children and also to support healing within the families.

For greater detail about interventions developed by WTPT, please see the Walk Proud, Dance Proud: Footprints on a Healing Journey— A Discussion Guide to Walking the Path Together to Reclaim the Teachings for our First Nations Children (2014).

Walking the Path Together was made possible through funding from the Alberta Government Safe Communities Innovation Fund and the National Crime Prevention Centre with the Government of Canada.

The Danger Assessment

The Danger Assessment (DA) is a tool for predicting a woman's risk of being killed or almost killed by an intimate partner. The tool was developed by Dr. Jacquelyn Campbell (1986) with consultation and content validity support from abused women, shelter workers, law enforcement officials and other clinical experts on abuse. There are two parts to the tool: a Calendar and a 20-item Questionnaire.

The Calendar helps to assess severity and frequency of abuse during the past year. The woman is asked to mark the approximate days when physically abusive incidents occurred, and to rank the severity of the incident using a 1 to 5 scale (1=slap, pushing, no injuries and/or lasting pain through 5=use of weapon, wounds from weapon). The Calendar acts as a tool to raise the consciousness of women and reduce the denial and minimization of the abuse in their lives (Campbell, 1995; Ferraro et al., 1983). Identifying incidents of abuse with the calendar also aids the safety planning process. Often women are able to identify patterns when the abuse is

most likely to occur, and therefore make safety plans specific to their own situations. Results of research conducted by Dr. J. Campbell in the United States indicated that one third of women who participated in the study changed their response to the first question on the 20-item questionnaire— "Did the abuse increase in severity or frequency over the past year?"— to a positive response after completing the calendar portion of the tool. The 20 questions on the DA have yes or no responses to risk factors associated with intimate partner homicide and uses weighted scoring to determine a women's level of danger. Some of the risk factors include past death threats, partner's employment status and the partner's gun ownership.

Alberta Council of Women's Shelters and the Danger Assessment

Between 2007 and 2009, the Alberta Council of Women's Shelters (ACWS) worked on a collaborative research project with Dr. Jacquelyn Campbell and nine member organizations to examine the utilization of the Danger Assessment tool (DA) in Alberta shelters in order to:

• Assist abused women in assessing the level of dangerousness (lethality or near lethality) in their relationship (Campbell, 2012);
• Inform women's shelter practice in keeping women and children safe;
• Provide accurate evidenced-based research for use by community stakeholders in keeping women and children safe; and
• Pilot a train-the-trainer model using Canadian and Alberta data.

In the research project the DA was tested with a sample of 235 women from nine shelters across Alberta (two on-reserve) of which more than half of the women (120) were Aboriginal.

Front-line staff in the nine participating member organizations asked women to identify incidents of non-physical abuse (emotional, sexual, spiritual and financial abuse) and to document these incidents on their calendars. Women's responses indicated that these types of abuse were often as hurtful to them as the physical abuse. There were also responses from women whose abuse history did not include physical abuse, who stated that including these questions validated their experience— they understood that they didn't have to be physically abused for the abuse they suffered to be 'real'.

> *"It was shocking to realize that you are in a terrible situation and you don't even realize it."*
>
> *"It helped me to know how much danger I was in. It scared me."*
>
> *"It made me more aware of different kinds of abuse."*
>
> *"It was eye opening. I have spent a lot of time trying to minimize my experiences so I could be normal."*
>
> *"It was painful when I was thinking [about] all the abuse but it helps me as well to loosen my breathing."*
>
> - *Keeping Women Alive – Assessing the Danger participants*

The data from the study also showed abused women in Alberta perceived their abuse as more frequent and severe and their situation as more dangerous after completing the Calendar and the DA Questionnaire. They were also significantly more ready to take action, and more likely to get help from the shelter and the police. The results of the Aboriginal women were not significantly different from other women tested. Even though women found the experience of completing the calendar painful, the qualitative data analysis indicated only a few women in the study found completing the calendar impossible, and, the experience was overall was reported as being helpful.

> *"It made me more aware of different kinds of abuse."*
>
> *"It made me thankful that it brought back the memories.*
>
> *"I will keep my kids out of danger. I will put myself first instead of him."*
>
> - *Keeping Women Alive – Assessing the Danger Aboriginal participants*

The findings of the research project were documented in a report titled *Keeping Women Alive—Assessing the Danger*[1]. Of note, recommendation 13 in this report stated that "There are important differences between Aboriginal women and others that also need further exploration and clarification, and may require a different approach to assessment. Consultation with the staff of shelters that have large Aboriginal populations should be undertaken to further clarify some of these issues (e.g. should the DA be the tool of choice, given that many women in this group do not wish to complete all questions? How can assessment reflect the fact that abusers may be more diverse— including family members and others as well as intimate partners?)"

A final outcome of the research project was the development of a full day training curriculum and certification process specifically for shelter workers on the administration of the DA tool, particularly encouraging women's completion of the DA Calendar and implementing the weighted scoring.

Walking the Path Together and the Danger Assessment

Thanks to funding from the Safe Communities Innovation Fund, ACWS was able to partner with five on-reserve shelters participating in the Walking the Path Together Project and with Dr. Campbell to address the use of the Danger Assessment for First Nations women living on-reserve.
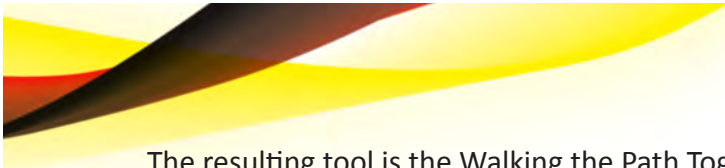
Based on data from First Nations women in *Keeping Women Alive— Assessing the Danger*, we knew that there was potential for the DA to be useful for abused Aboriginal women living on-reserve in assessing the level of dangerousness (lethality or near lethality) in their relationships. We wanted the DA to be even more culturally specific and acceptable for use with mothers of children on-reserve. We also wanted to ensure the Eagle Feather Workers felt they could use the DA as a helpful tool in their work safety planning with women.

At the beginning of WTPT, EFWs were trained to administer the DA tool to mothers and other caregivers of children in the project. Over the course of WTPT, the Project Guidance Circle (PGC)[2] and the EFWs gave feedback on how to make the DA culturally appropriate.

1   Keeping Women Alive—Assessing the Danger prepared for the Alberta Council of Women's Shelters by Dr. Kathleen Cairns and Irene Hoffart

2   PGC members included one representative from each of five participating on-reserve shelters; ACWS Executive Director, Director of Member Programs and Services and Project Manager; two representatives from Centre for Children and Families in the Justice System (CCFJS), Dr. Jacquelyn Campbell of John Hopkins University and an Appreciative Inquiry facilitator.

The resulting tool is the Walking the Path Together Danger Assessment. Recognizing that the Circle represents the unending cycle of life and contains standard teachings for all Indigenous cultures, Lillian Bigstone and Theresa Snow (two of the WTPT Eagle Feather Workers) proposed and designed the DA questions within a circle (June, 2011). This helped to embed risk assessment, specifically the DA, within the conceptual framework of the overall project and aid visual cultural relevance. There may be different variations of the Circle depending on the cultural background of a participant and of a service provider; however the four quadrants within a circle are common to many Indigenous peoples.   The Danger Assessment Circle comprises four parts:

1. **WTPT Danger Assessment Seasonal Calendars (See Appendix A)**
   The original DA Calendar was revised into two seasonal formats. Custom and traditional abuse was added to the list of abuse types that women are asked to mark on their calendars (e.g. women prevented from participating in traditional ceremonies).
2. **WTPT Danger Assessment Questionnaire (see Appendix B)**
   The DA questions were revised by Dr. Campbell with input from Eagle Feather Workers and Shelter Directors to reflect the unique situations of life on-reserve.
   - Question 5 was expanded from the original DA Questionnaire to read "Has he ever used a potentially lethal weapon against you or threatened you with a lethal weapon? If yes, what was the weapon?" The purpose of this amendment was to track the type of weapons that are used on-reserve.
   - Question number 11 on the original DA Questionnaire was modified to better reflect the problem of prescription substance abuse, e.g., T3's and Oxycontins were identified by the EFWs as commonly misused on-reserve. Dr. Campbell reflects that research on this issue is sparse especially in terms of this kind of drug dependence being associated with violent behavior (toward spouses, partners and children) among Indigenous populations. Because of this, the answer to the question about use is not scored. To further understand the influence of the use of these drugs it was determined that it was important to document this information in order to understand the issue more clearly.
   - A second question was added to Question 11: 11a. .. "If the abuser uses prescription drugs, does he become more abusive when the drugs are not available?" This question is not scored but the information obtained will contribute to the understanding of drug use and its impact on reserves.
3. **WTPT Danger Assessment Circle (see Appendix C)**
   The revised DA questions were embedded within a circle format to serve as a "grounding" tool for women to hold as they consider the DA questions being asked.
4. **WTPT Danger Assessment Caregiver Questionnaire (see Appendix D)**

Abuse does not only occur between intimate partners and may also create risk for other family members. The Walking the Path Together Caregiver DA Questionnaire was designed to be used with caregivers of the children in the project that are not in an intimate relationship with the identified abusive individual. The questions on the WTPT Caregiver DA Questionnaire ask the caregiver to reflect on the abuse that either she or the abused individual (usually the mother of the children) experienced. This form of the DA Questionnaire was developed to get a sense of the danger an abusive individual presents to the caregiver and the child/ren that she is caring for as well the danger to the abused person. In this variation of the DA Questionnaire there is a comment section for most of the questions. Comments are encouraged as this will provide important information that will contribute to the understanding of the abuse that occurs within extended families on-reserve and assists in keeping those involved safe.

The Circle

The circle is a sacred symbol for First Nations people, reflecting the circle of life and renewal. There are variations depending on the cultural background or tribe. Some nations reflect the circle through the four quadrants, others through the Medicine Wheel.   However, the similarities that are commonly found in the circle are the four quadrants within the wheel.
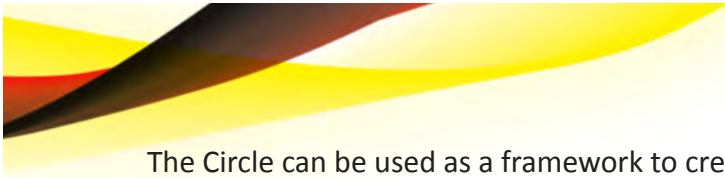
In First Nations cultures, the number four is considered very sacred, for instance:
• The four elements: Air, Water, Fire and Earth
• The four directions: North, South, East and West
• The four seasons: Summer, Fall, Winter and Spring
• The four colors of humanity: White, Red, Black and Yellow.
• The four types of animal species: (the four legged, the swimmers, the winged ones and the crawlers)
• The four stages of the human life cycle: Baby, Youth, Adult and Elder.
• The four parts in a human being: Physical, Mental, Emotional and Spiritual

There are four colors used to shade each quadrant of the circle: the most commonly used colors are White, Yellow, and Red. The fourth color can be green, blue or black depending on the culture. Sometimes the colors coincide with the four races. In other instances the colors match the four directions; for example, White represents the North, Red represents the South, Yellow represents the East and Green, Blue or Black represents the West. Again, this depends on the First Nations' teaching preferences.

Teachers will always emphasize, "the way they teach is the way they were taught". This is like the unspoken indicator that each First Nations has their unique way of teaching about the circle. Therefore, the colors can be adjusted based on local use.

The Circle can be used as a framework to create a Healing Plan for a community, a group or an individual. When used on an individual basis, the Circle represents a person's journey.   The Circle begins with "the Self" in the middle and the four quadrants representing the self's Emotional, Spiritual, Physical and Mental surround the centre.

"In teaching women about family violence and abuse by using the Circle, it is important that women fully understand the following three concepts:...

"We" in the following section refers to all of us: human beings.

One Aspect of Your Being affects the Other: We are holistic human beings and one part of our being affects the other parts. When using the holistic approach, EFWs can help women see how their physical, mental, emotional and spiritual parts of themselves need to be attended to and balanced in order to effectively deal with their issues. We are dealing with the "whole" self, as well as with parts of ourselves that comprise the whole.

For example, if we are assaulted, we may get a black eye and feel physical pain. We may also experience accompanying emotions such as hurt, anger and fear. Our thoughts and self-talk might include statements such as "I am such a loser. I am helpless. Nobody cares about me." Generally when we suffer a trauma such as an assault, we internalize these negative thoughts and beliefs about ourselves so that our sense of self is compromised. Spiritually, our belief in a just world, our faith in the Creator, our connection to Mother Earth and our hope for the future may all be impacted. There are many examples that can be used and sometimes EFWs telling their own personal stories can help women better understand and she may also feel more at ease and recognize that she is not alone.

Focus on the Interconnectedness: How we see and experience the world today is based on the beliefs we have developed over the course of our life. Our experience in the present moment is interpreted through our belief system. Our beliefs are changed or reinforced every day as the result of our experience in the present moment.   Knowing this sets the stage for changing our beliefs, behavior and resulting experience.

An example of interconnectedness on a personal level is an abused woman who sees her husband walking up the driveway: he obviously looks intoxicated— her past experience tells her that he hits her when he's been drinking— and so she immediately starts thinking of what is going to happen, and her thoughts generate feelings of fear and anxiety; those feelings of fear and anxiety influence her behavior— she might take action by bracing herself for the abuse or by running to the bedroom, etc.

Once the same abused woman has begun to understand the patterns of abuse in her situation and links certain times (e.g. holidays, pay days) when her partner tends to get intoxicated, she can anticipate these times and have a safety strategy in place that she has developed with the support of her Eagle Feather Worker. For example, she has a plan where someone calls her ahead of time to warn her about her partner's drinking, and then she and her children know to leave the home prior to his arrival. Part of her plan may be to have someone with her in the home when her partner arrives home. A plan enables women to feel more in control of their situations. Women are more likely to feel less anxious and better able to act rather than react to situations.

Thoughts, feelings, emotions and actions all work in unison when you see or experience something.

...Helping women look at the four aspects of their being and work towards balance will result in their becoming more empowered. Women will be better able to recognize their strengths and resources and use these to nurture themselves and their children, resulting in stronger and more balanced individuals, families and communities."

<div align="right">

-Lillian Bigstone and Theresa Snow
Presentation at ACWS AGM, June 2011

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Implementing the WTPT Danger Assessment

Framing the Danger Assessment process within a circle allows Eagle Feather Workers to broaden their understanding of a woman's situation. The WTPT Danger Assessment Circle also provides women with a visual picture of the abuse they have experienced and, therefore, many women are better able to understand how the abuse has impacted their whole beings. This understanding aids in their decision making process.

The WTPT Seasonal Calendar

Prior to completing the WTPT Danger Assessment Questionnaire, women are strongly, gently and supportively encouraged to complete the Seasonal Calendar which includes three months for each of the four seasons. The Seasonal Calendar that is used as part of WTPT was revised from the standard calendars in the earlier ACWS DA Research Project.   The Seasonal Calendar was designed to be more reflective of First Nation cultures. There are two versions of the Calendar. One has the months of the year grouped into the seasons and portrayed in a circle. In the second version of the calendar, the months of the year are grouped as seasons but are on a traditional calendar format. Each season should be on a separate page as this allows the women

to work on one page/season at a time.[3] (By using one sheet for each season, the sheets can be put in chronological order).

Using the "Instruction for Use" for the calendar (reference Appendix E), women are invited to record on the calendar when the abuse happened, either by month or by season, starting with the current season and working backwards. If starting in summer (June, July, August), the next season to be filled in would be Spring (March, April, May), then Winter (December, January, February) and finally the previous Fall (September, October, November). Filling out the calendar is best done by the woman talking aloud (telling her story without going into detail) and then marking the instances of abuse on the Calendar.   For legal reasons, it is best if the calendar is filled out in the woman's own hand. If, for some reason, the woman chooses not to or is not able to complete the calendar in her own handwriting, the Eagle Feather Worker can document the abuse for her. It is important that the Eagle Feather Worker then sign and date the calendar and indicate that she was the individual who completed the calendar based on information from the woman.

Aboriginal symbols can be used for persons and events when documenting incidences of abuse on the calendar (see Instructions for Use, Appendix E). The calendar can also be used to record other events in the woman's life that have affected the abuse or are important happenings during the prior four seasons. Recording the abuse will help both the woman and the Eagle Feather Worker to visualize the abuse that occurred and to understand the linkages between events in the woman's life and the abuse that she experienced.

Women are supported to use the scale for **Physical Abuse** (P1-P5) to indicate the seriousness of the physical abuse.

Scale:
P1= slapping, pushing, no injuries and/or lasting pain
P2= punching, kicking, bruises, cuts and/or continuing pain
P3= "beating up", severe contusions, burns, broken bones
P4= threat to use a weapon, head injury, internal injury, permanent injury, miscarriage
P5= use of a weapon; wounds from a weapon

She is also asked to mark each date she experienced other forms of abuse as follows:

- **Cultural/Customs abuse (C)** – using culture or customs to control her, for example forcing her to clean or do something "because it's the role of First Nations or role of a woman";
- **Emotional abuse (E)** – name calling, put-downs, threats;

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3   Recommendation of Dr. Jacquelyn Campbell.

- **Spiritual abuse (Sp)** – keeping her from using or going to her spiritual or cultural supports and/or rituals, or making fun of them;
- **Choking (CH)**
- **Sexual abuse (S)** - forcing her into sexual activities; and/or
- **Financial abuse (F)** – telling her how to spend the money, taking money from her, forcing her to turn over her paycheck, spending money on himself instead of on the family.

She can also mark other events on the calendar that triggered abusive incidents (pay days, drinking episodes in his life, etc.), and positive events such as family birthdays, holidays, celebrations, healing strategies or other noteworthy events that decreased the abuse or helped her deal with or heal from the trauma in her life.

WTPT DA Circle and Questionnaire

After completing the Calendar, each woman is given a copy of the WTPT Danger Assessment Circle to view while the EFW leads her through answering each question on the WTPT DA Questionnaire. As she answers the question, the woman can rotate the 20 questions on the WTPT Danger Assessment Circle in a way that reflects the impact of a particular type of abuse upon her physical, emotional, spiritual and mental well-being. This process encourages a woman to view how one aspect of her being affects the others.

For example, consider Question 9: "Has he ever forced you to have sex when you did not wish to do so?" Being sexually abused affects an individual physically (because of the act), affects an individual emotionally (because of the humiliation), affects one spiritually (because of her sense of self and her beliefs) and mentally (because of the shame or guilt a woman may feel). As a woman looks at each of these aspects, she is more likely to understand how the abuse has affected her in the various areas of her life.

As each question is asked, EFWs ask women to respond with a yes or a no. The EFW records the woman's responses for each question on the WTPT DA Questionnaire. If there is more than one partner (or ex-partner) who is currently abusive or has been abusive in the past year, the calendar should identify Partner A and Partner B and there should be two WTPT Danger Assessment Questionnaires completed for each. If the EFW is seeing the woman once a month, then the WTPT DA Questionnaire should be filled out every three months.

After the woman has answered all of the questions, the WTPT DA Questionnaire is scored.

- **More than 10 yeses** indicate the potential for **high danger** and it is urgent that she take measures to keep herself and the children safe, e.g., take her to the shelter. See the Creating Safety section on page 16 for information on safety planning.
- **10 or less is called variable danger as the score can change quickly if circumstances change.** The woman needs to trust her instincts when she is afraid and she needs to get help quickly. Meanwhile she can be supported to develop a safety plan (see below).

WTPT Danger Assessment Caregiver Questionnaire

Traditionally, the care of a child is the overall responsibility of an extended family with members of that extended family playing various roles. There are times when the child may be in the care of a member of her or his extended family as opposed to the parents. The WTPT Danger Assessment Caregiver Questionnaire is to be used in situations where the primary caregiver of the child or children is not the individual that was in an intimate relationship with the abusive person.

For example:
The Eagle Feather Worker is working with a grandmother whose daughter was abused. As the main caregiver for the WTPT child, the grandmother is asked to complete the calendar portion of the Danger Assessment.   She is asked to reflect on what she knows about her daughter's abuse. She is also asked to identify any abuse she may have experienced from the abusive individual.

Once the calendar has been completed, the EFW asks the Grandmother the 20 questions on the WTPT Caregiver DA questionnaire. She is asked to respond with yes, no, don't know or not applicable. There are also comment sections for many of the questions. In order to gather more information about the unique situations that individuals are in it is important to complete the comments sections wherever possible.

Creating Safety

Attention to women's safety takes precedence over all else. This may mean that completion of all or part of the WTPT Danger Assessment is delayed until the woman's safety is assured. For example, it may be appropriate if a woman is in immediate danger to administer the WTPT DA Questionnaire first, completing the Calendar at a later time. That being said, safety planning should be individualized to the woman's circumstances and to the patterns revealed through the Danger Assessment Calendar. For example, supporting the woman to identify the pattern of abuse happening around payday (either hers or his) and how the abuse could be anticipated and possibly avoided. Safety planning needs to also take into account the specific questions on the DA. For example, if her abuser owns a gun or guns, how can they be stored safely so that the gun(s) cannot be picked up easily when angry?

The WTPT team developed the **Walking the Path Together POP TARTS tool: P**rotection, **O**ptions, **P**lanning: **T**aking **A**ction **R**elated **t**o **S**afety. This tool was created as an alternative to standard safety plans found not to be useful for women living on-reserve. Factors such as crowded living conditions, high levels of risk and the young age of women results in complexities when safety planning with Aboriginal women living on-reserve.

The goal is to help a woman think about her successful protection strategies and when she needs to use them.

POP TARTS has 3 steps:

Step 1: Identify her signs of protection mode.
Protection mode is what individuals think, feel and do when the potential for a violent incident is building and they have to protect themselves until the threat blows over. There may be common themes across women, but each woman has her own unique signs. Eagle Feather Workers ask women to think and talk about what "protection mode" looks and feels like in their lives. WTPT developed a chart: Signs You Are Moving Into Protection Mode which lists how women can recognize when they are in "protection mode". This first step in the WTPT POP TARTS tool, that helps women prepare themselves and their children and encourages them to recognize dangerous situations. It looks at "signs" in the abuser's behavior, "signs" that they may see in their children and encourages women to trust their own feelings, body sensations, and intuitions.

Step 2: List her Options.
EFWs strive to ensure that women know all of their options, including the services of the specific shelter. Examples of questions that may be useful in this step include: *Who can you call for help if you need to get away fast? How will you get away? Who can give you a ride? Where can you stay if you need to leave for a while? What worked in the past?*
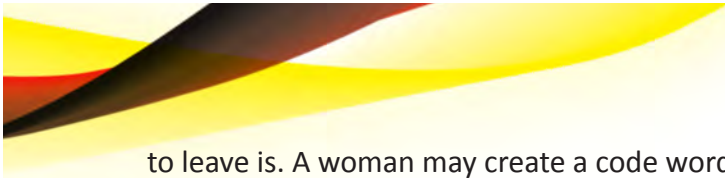
Step 3: Make a realistic plan to get out fast.
A plan involves the details of steps a woman will take when she recognizes that she is in danger. A plan is a strategy for alerting a woman's helpers that she needs to get out of a situation, and for arranging a place she can stay, like a shelter. A plan may also describe when a good time

Above all else, the victim is the best source of information. Her input is invaluable because several of the important risk factors may be known only to her. Her prediction of risk significantly enhances the usefulness of any instrument. The importance of her perceptions should never be underestimated—if she is positive that he is enormously dangerous, this perception should be believed no matter what other risk factors are present or not present. Campbell ,J. Risk and Lethality Assessment in the Field of Intimate Partner Violence. A synopsis of the presentation *Assessment of Dangerousness in the Field of Intimate Partner Violence: What Practitioners Need to Know.* Retrieved from *(http://www.praxisinternational.org/files/ praxis/files/Safety%20Eval%20Ch%202%20 Risk%20Lethality%20Assess.pdf).*

to leave is. A woman may create a code word or phrase to signal that she is in trouble without alerting the person she is afraid of.

In summary, the steps to complete the Walking The Path Together Danger Assessment include:

1. Complete the WTPT Danger Assessment Seasonal Calendar— using one of the two Seasonal Calendars and incorporating Aboriginal symbols if appropriate.
2. Provide a woman with the WTPT Danger Assessment Circle.
3. Ask a woman the 20 questions on the WTPT Danger Assessment Questionnaire. Or if appropriate, ask the Caregiver the 20 questions on the WTPT Danger Assessment Caregiver Questionnaire.
4. Score the Questionnaire and provide information about the score to the woman.
5. Support the woman to create a safety plan.

Conclusion:

During Phase II of the project, the WTPT versions of the DA were further tested to make sure that the tool is relevant, easy to use and acceptable to the PGC, Eagle Feather Workers and project participants as well as its applicability off reserve. Five off-reserve shelters[4] volunteered to participate with the on-reserve shelters by asking women in their shelters to complete the revised DA and the associated tools.

Information from this study identified the critical importance of training on the use of the WTPT DA with a particular focus on the cultural component including Aboriginal history and impact of individual and collective traumatisation. Please see Appendix F The Impact of Colonialism and Assimilation Practices on Indigenous Peoples written by Kathleen Gorman.

The study also proved that the WTPT DA is valuable for use with all women in shelters – both Aboriginal women and women with other backgrounds. Administering the DA in the Circle format increased women's comfort, using it as a grounding tool as they answered the questions. Shelter staff described the Circle DA as "more gentle and less intimidating".
Finally, in terms of safety planning, the POP-Tarts tool was particularly useful with women who are living with their partners or are having regular contact.

The Walking the Path Together Danger Assessment will continue to evolve based on further testing. It is important to make sure that the tool is relevant, easy to use and is acceptable to First Nations women.

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4   Rowan House Society, St. Paul & District Crisis Association, Wings of Providence Society, YWCA of Calgary & The Brenda Strafford Foundation for the Prevention of Domestic Violence.

The following story of one of the participants in WTPT affirms this hope:

Trinity was only two years old when her mother was killed by her father. She was in the house when it happened. This tragedy impacted the entire community and young Trinity was traumatized by the brutal and abrupt loss of her mother.

Family violence was the reality she knew. As an adult, Trinity herself became involved in an extremely abusive relationship, and was immersed in the terrible cycle of violence when she joined the Walking the Path Together (WTPT) project. In joining WTPT, Trinity began the difficult work of re-routing her life journey to live free from abuse.

Part of her agreement to be involved in WTPT included completing the Danger Assessment (DA) with her Eagle Feather Worker. In particular after completing the DA, those around her noticed that Trinity was transformed. There was something in the process of the calendar and the questions that made real the level of danger she was in. She cut off all ties with her former partner and chose to charge him, finding the strength to seek justice.

Trinity is a proud single mom well-aware of the challenges she will continue to face, as well as the long-term healing she needs: she knows she will forever be affected by the domestic violence she has witnessed, by the loss of her mother that it caused, and by the domestic violence that she herself has experienced— but now she has hope for a better future.

Trinity and her family are very thankful for WTPT and her sisters have outwardly acknowledged how much better Trinity is doing since joining the project. Walking the Path Together leaders and staff are inspired by Trinity's journey and the depth of her courage to make a new life for herself.

APPENDIX A
Walking the Path Together Seasonal Calendar: by season, calendar-style

Walking the Path Together Danger Assessment Seasonal Calendar

SPRING

Outcome Tracker #: _____
Client Name: _____
Date: _____
Completed By: _____

APRIL

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

MARCH

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

MAY

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

JUNE

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

JULY

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

AUGUST

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Walking the Path Together Danger Assessment Seasonal Calendar

SUMMER

Outcome Tracker #: _____

Client Name: _____

Date: _____

Completed By: _____

Walking the Path Together

ACWS
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SEPTEMBER

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

OCTOBER

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

NOVEMBER

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Walking the Path Together Danger Assessment Seasonal Calendar

FALL

Outcome Tracker #: _____

Client Name: _____

Date: _____

Completed By: _____

Walking the Path Together

ACWS
Alberta Council of
Women's Shelters

DECEMBER

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

JANUARY

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

FEBRUARY

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Walking the Path Together Danger Assessment Seasonal Calendar

WINTER

Outcome Tracker #: _____

Client Name: _____

Date: _____

Completed By: _____

Walking the Path Together

ACWS
Alberta Council of
Women's Shelters

Walking the Path Together Seasonal Calendar: all seasons, circular format

Walking the Path Together Danger Assessment Seasonal Calendar

WINTER

SPRING

FALL

SUMMER

Outcome Tracker #: _____
Client Name: _____
Date: _____
Completed By: _____

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APPENDIX B:
Walking the Path Together Danger Assessment Questionnaire

Walking the Path Together Danger Assessment Questionnaire
Jacquelyn C. Campbell, Ph.D., R.N.
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Several risk factors have been associated with increased risk of homicides (murders) of women and men in violent relationships. We cannot predict what will happen in your case, but we would like you to be aware of the danger of homicide in situations of abuse and for you to see how many of the risk factors apply to your situation.

Before completing the Questionnaire below, complete the Seasonal Calendar per the attached Instructions.

Mark **Yes** or **No** for each of the following. ("He" refers to your husband, partner, ex-husband, ex-partner, or whoever is currently or was physically hurting you – could be a she.)

_____ 1. Has the physical violence increased in severity or frequency over the past year?
_____ 2. Does he own a gun?
_____ 3. Have you left him after living together during the past year?
           3a. (If have never lived with him, check here____)
_____ 4. Is he unemployed?
_____ 5. Has he ever used a potentially lethal weapon against you or threatened you with a lethal weapon?
           5a. (If yes, what was the weapon?_____)
_____ 6. Does he threaten to kill you?
_____ 7. Has he avoided being arrested for domestic violence?
_____ 8. Do you have a child that is not his?
_____ 9. Has he ever forced you to have sex when you did not wish to do so?
_____ 10. Does he ever try to choke you?
_____ 11. Does he use illegal drugs? By drugs, I mean "uppers" or amphetamines, "meth", speed, angel dust, cocaine, "crack", street drugs or mixtures. If no but there are problems with other drugs – e.g. T3's or Oxytocin note what_____
_____ 11a. If the abuser uses prescription drugs, does he become more abusive when the drugs are not available?
_____ 12. Is he an alcoholic or problem drinker?
_____ 13. Does he control most or all of your daily activities? For instance: does he tell you who you can be friends with, when you can see your family, how much money you can use, or when you can take the car? (If he tries, but you do not let him, check here: ____)
_____ 14. Is he violently and constantly jealous of you? (For instance, does he say "If I can't have you, no one can.")
_____ 15. Have you ever been beaten by him while you were pregnant? (If you have never been pregnant by him, check here: ____)
_____ 16. Has he ever threatened or tried to commit suicide?
_____ 17. Does he threaten to harm your children?
_____ 18. Are you afraid that that he could kill you?
_____ 19. Does he follow or spy on you, leave threatening notes or messages, destroy your property, or call you when you don't want him to?
_____ 20. Have you ever threatened or tried to commit suicide?

_____ Total "Yes" Answers

Thank you. Please talk to your Eagle Feather, advocate, nurse
or counselor about what the Danger Assessment means in terms of your situation.

APPENDIX C:
Walking the Path Together Danger Assessment Circle

Walking the Path Together Tools:
Danger Assessment Circle

Developed in consultation with:
Jacquelyn C. Campbell, PhD, RN, FAAN

SPIRITUAL

EMOTIONAL

PHYSICAL

MENTAL

Several risk factors have been associated with increased risk of homicide (murders) of women and men in violent relationships.

We cannot predict what will happen in your case, but we would like you to be aware of the danger of homicide in situations of abuse and for you to see how many of the risk factors apply to your situation.

1. Has the physical violence increased in severity or frequency over the past year?

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APPENDIX D:
Walking the Path Together Danger Assessment Caregiver Questionnaire

Walking the Path Together Danger Assessment Caregiver Questionnaire
Jacquelyn C. Campbell, Ph.D., R.N.
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Several risk factors have been associated with increased risk of homicides (murders) of women and men in current or past violent or abusive relationships. We cannot predict what will happen in your case, but we would like you to be aware of the danger of homicide or near homicide in situations of abuse and for you to see how many of the risk factors apply to your situation.

Name of abused person _____
Name of abuser _____
Their relationship _____
Caregiver relationship with abuser _____
Caregiver relationship with abused person _____
Date _____

Before completing the Questionnaire below, complete the Seasonal Calendar per the attached Instructions.

Mark **Yes** or **No** (or **DK** – Don't Know or **N/A** – Not Applicable) for each of the following.

_____ 1. Has the physical violence increased in severity or frequency over the past year?
Notes/Comments _____

_____ 2. Does the abuser own a gun? Notes/Comments _____

_____ 3. Has the abused person left the abuser after living together during the past year?
3a. (If abused person has never lived with abuser, check here_____)
Notes/Comments _____

_____ 4. Is the abuser unemployed?
Notes/Comments _____

_____ 5. Has the abuser ever used a weapon against you or the abused person or threatened you or the abused person with a lethal weapon? (If yes, what was the weapon?_____)
Notes/Comments _____

_____ 6. Does the abuser threaten to kill you, and/or the abused person (or others)?
If someone else, who: _____
Notes/comments _____

_____ 7. Has the abuser avoided being arrested for domestic or family violence?
Notes/Comments _____

_____ 8. Does the person who was (or is being) abused have a child that is not the abuser's child (not his/her biological child) - if they were in an intimate relationship?
Notes/Comments _____
Has the abuser ever forced you (or anyone) to have sex when you (or they) did not wish to?
If someone else was forced into sex, who?_____

_____ 9. Does the abuser ever try to choke you (or has s/he tried to choke others)?
If someone else, who? _____
Notes/Comments _____

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Walking the Path Together Danger Assessment Caregiver Questionnaire

Jacquelyn C. Campbell, Ph.D., R.N.
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_____ 10. Does the abuser use illegal drugs? By drugs, I mean "uppers" or amphetamines, "meth", speed, angel dust, cocaine, "crack", street drugs or mixtures. If there are problems with other drugs – e.g. T3's or Oxytocin note here _____

_____ 11. If the abuser uses prescription drugs, does he become more abusive when the drugs are not available? Notes/Comments _____

_____ 11a. Is the abuser an alcoholic or problem drinker? Notes/Comments_____

_____ 12. Does the abuser control most or all of your or the abused person's daily activities? For instance, does the abuser tell you or the abused person who you/they can be friends with,

_____ 13. when you/they can see your family, how much money you/they can use, or when you/they can take the car?
Notes/Comments _____

_____ 14. Is the abuser violently and constantly jealous of you or the abused person? (For instance, does he say "If I can't have you, no one can." Notes/Comments _____

_____ 15. Has the abuser ever beaten the abused person (or you) when they were pregnant? (If neither you nor the abused person have never been pregnant by him, check here: _____)
Notes/Comments _____

_____ 16. Has the abuser ever threatened or tried to commit suicide?
Notes/Comments _____

_____ 17. Does the abuser threaten to harm your children or those children in your care?
Notes/Comments _____

_____ 18. Do you believe the abuser is capable of killing you or the abused person or anyone in the family? Notes/Comments _____

_____ 19. Does the abuser follow or spy on you or the abused person, leave threatening notes or messages, destroy your or the abused person's property, or call when you or the abused person doesn't want him/her to?
Notes/Comments _____

_____ 20. Have you or the abused person ever threatened or tried to commit suicide?
Notes/Comments _____

_____ Total "Yes" Answers

Thank you. Please talk to your Eagle Feather, advocate, nurse
or counselor about what the Danger Assessment means in terms of your situation.

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Instructions for completing the Walking the Path Together Danger Assessment Seasonal Calendar

Use the calendar to document incidents of physical abuse by your partner.

Identify the approximate dates using the numbers to indicate the severity of the incident:

1 = slapping, pushing, no injuries and/or lasting pain
2 = punching, kicking, bruises, cuts, and/or continuing pain
3 = "beating up"; severe contusions, burns, broken bones
4 = threat to use a weapon; head injury, internal injury, permanent injury, miscarriage
5 = use of a weapon; wounds from a weapon

Other types of abuse can be indicated by the following letters:

C = cultural/customs   **E** = emotional; verbal and psychological   **F** = financial   **S** = sexual   **CH** = choking   **SP** = spiritual

Identify Person Implementing Abuse:

Spouse   **Cousin**   **In-Laws**   **Family Friend**   **Son**

Brother   **Father**   **Uncle**   **Grandfather**   **Daughter**

Sister   **Mother**   **Aunty**   **Grandmother**

* If any descriptions for the higher number apply, use the higher number.

Walking the Path Together

ACWS
Alberta Council of
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APPENDIX F:
The Impact of Colonialism and Assimilation Practices on Indigenous Peoples

«The legacy of history is the poverty, powerlessness, and breakdown of social cohesion that plague so many Aboriginal families and communities. These conditions did not come about by chance, or through a failure to modernize, or through some moral deficiency on the part of Aboriginal people. They were created by past policies that systematically dispossessed Aboriginal peoples of their lands and economic resources, their cultures and languages, and the social and political institutions through which they took care of their own.» (Brant Castellano, 1999[i]).

Introduction

The intent of this backgrounder is to support shelter staff's understanding and awareness on how colonial and assimilation practices impact Indigenous individuals, families, communities and nations today, always in the spirit of honouring and acknowledging the diversity, resiliency and strengths of Aboriginal peoples[ii] here on Turtle Island. The story is not a balanced one but needs to be told in order to understand how the past influences the present and how this understanding will support the healing journey for both Aboriginal and non-Aboriginal peoples today and for the generations to come. In the words of Harold Johnson in his book Two Families: Treaties and Government "It is not my intention to make you feel badly about what happened to our two families. There is nothing you or I can do to change the past. People made choices and we live with the consequences. They were not our choices. There is nothing we should feel badly about".[iii]

Colonization

The history of Euro-Canadian colonialism and assimilation practices has had profound effects on Aboriginal peoples of Turtle Island (North America). Since first contact between Indigenous peoples and European explorers and settlers, Euro-Canadian legislation and policies have attempted to eradicate Aboriginal ways of knowing and being and assimilate Native people into a Euro-Canadian worldview. It is important to understand history as it relates to contemporary community realities. The impacts of this history are numerous, complex and inter-related. There is also a need to understand the ongoing influence of the dominant worldview on individual and collective Indigenous healing.

As of the 2011 census, Aboriginal peoples totaled 1,400,685 people, or 4.3% of the national population. Aboriginal peoples have diverse cultures and histories and include, among others, the Cree, Blackfoot, Coast Salish, Algonquin, Dene, Haudenosaunee, Métis and Inuit. Historically, as the original occupants of Turtle Island, Indigenous peoples had their own forms of government, family, social and political organization, economies, and traditions, as well as practices regarding the distribution of tasks and sharing of territories. Societies were well

structured and every person young and old was valued as a member of their community. These traditional systems of governing and societal norms have essentially been transmitted through oral tradition and ceremonies. However, some nations have also documented their governance and norms in writing such as the Haudenosanee (Iroquois Confederacy) and the Inuit. Traditional forms of governance and ways of life are derived from Aboriginal peoples' relationship with the Creator in harmony with the natural world and their peoples, not from the laws of Canada.

With the arrival of Europeans, Indigenous peoples were subjected to colonizing foreign legislation and eventually were placed under the protection of the British Crown supposedly so that their lands, culture and way of life would be safeguarded. What happened instead was that Canada took increasing control over the lives of Aboriginal peoples through paternalistic, patriarchal, and racist government legislation and policies that served primarily to oppress, assimilate and eventually integrate Aboriginal people into Euro-Canadian society. This process of colonization has resulted in the structural and systemic oppression that continues to impact many Aboriginal individuals, families, communities, and nations today.

Legislation

Indigenous peoples insist, as they always have since the arrival of Europeans, that they were never conquered and have never given up their right to self-government. In fact, the notion of Aboriginal rights is not inherent in traditional Aboriginal cultures; it emerged in response to colonial oppression. For First Nations, these rights are grounded in the Royal Proclamation of 1763 (which recognized Aboriginal peoples as a distinct political unit within the colonial system), oral tradition and wampums, treaties, the Constitution of Canada (which includes the Constitution Acts of 1867 and 1982), and case law. For example, Section 35 of the Constitution Act, 1982 "recognizes and affirms" the "existing" aboriginal and treaty rights in Canada but does not define what these rights are. It also defines "the aboriginal peoples of Canada" as the Indian, Inuit and Métis peoples.

Treaty relationships between Aboriginal peoples and European colonizers and later, the Canadian Crown have been entered into since time of contact. A treaty is the principle form in which the terms of nation-to-nation relationships are expressed and are considered international agreements confirming status as a sovereign group. Historical treaties made between First Nations and settlers were peace and friendship treaties. Later treaties deal with land cession. Treaties are constitutionally recognized agreements between the Crown and Aboriginal peoples. Throughout history since contact, the Canadian government and Aboriginal nations have had different understandings of the treaties. For the government, the treaties have been viewed as contracts that provided title and political control over Aboriginal nations and their traditional lands. In contrast, Aboriginal peoples have consistently held the treaties as agreements to establish a relationship, overseen by the Creator, in which Aboriginal peoples would share the land with settlers and both groups would live together cooperatively.

Canadian laws such as the Constitution Act, 1867 and the Indian Act, R.S.C 1985, c. I-7, vest the responsibility for Aboriginal peoples with the federal government. No other group of people are listed in the Constitution Act as the exclusive object of special laws of Parliament. In fact, Aboriginal peoples are listed in the same way as property or marriage in the division of constitutional powers. Prior to confederation and the first Indian Act, the province of Canada adopted legislation in 1857 entitled: An Act to Encourage the Gradual Civilization of Indian Tribes in this Province, and to Amend the Laws Relating to Indians. The title alone speaks to a colonizing and assimilation worldview. This legislation encouraged Aboriginal men who met legislative criteria to forgo their Indian status through the process of enfranchisement. The colonial government viewed enfranchisement as a privilege for Aboriginals, a way they could gain their freedom from the protected Indian status and gain the rights of full colonial citizenship (as such, become "civilized"). This Act also demonstrated the patriarchal worldview of the Euro-Canadian colonizing authorities. Enfranchisement was to be fully voluntary by the man seeking it. However, an enfranchised man's wife and children automatically lost their Indian status, regardless of whether or not they so desired.[iv]

Within the Indian Act legislation, the Canadian government has exerted extensive authority and control over Aboriginal peoples, their relationship with the land and natural world, culture, monies, businesses, health and programs and services for over a century. The Act, in its paternalistic approach, treated Aboriginal peoples as wards, or legally as children, and established the government as their guardian. The Indian Act imposed oppressive changes to the traditional ways of Aboriginal peoples. For example, the Act prohibited Indigenous healing and spiritual ceremonies, prevented Aboriginal people from voting or leaving their reserves without permission from the Indian agent assigned to their reserve, and forced Aboriginal children into residential school. The Act also grants different protections and privileges to women and men and has done so since it was first enacted in 1876. It is guided by patriarchal and racist assumptions and placed men (father/husband) in the role of family authority with women and children as dependants. Traditionally many Aboriginal nations, clans and certain family customs follow matrilineal lines. The Indian Act, with its gendered discrimination, privileged men within their First Nation and denied women the same rights in areas such as community governance (women were denied full participation in band democracy until the Act was amended in 1951). Of particular importance when considering impacts of colonialism on Aboriginal women, was the practice of compulsory enfranchisement for Aboriginal women who married non-status or non-Aboriginal men, forcing them to lose their status, while Aboriginal men marrying non-Aboriginal women could retain their Indian status. In fact, their non-Aboriginal wives gained status under the Act.[v]

Since its introduction in 1876, the Indian Act has undergone several amendments and reforms. Of note, in 1985 the Indian Act was amended to address the gender discrimination outlined above and to bring the act in line with the equality provisions of the Constitution Act, 1982. The

Indian Act, 1985 removed discrimination by asserting that women could no longer gain or lose Indian status as a result of marriage. Moreover, the new Act permitted the restoration of Indian status to several groups that had been forcefully enfranchised in the past. While the Act may have removed certain discriminatory provisions, discrimination has not necessarily disappeared. Many who have had to apply for restoration of status have undergone discrimination in their own home communities. Further, the mere fact that someone has to 'apply' to the Canadian government in order to be recognized as an Aboriginal person continues the colonizing oppression that has existed since contact. Bill C-31, (as the 1985 amendments are known), in and of itself created challenges that still exist in many communities although its legal intent was to remove discrimination from the Act. In many ways Bill C-31 has added to the complexities of cultural identity and band membership under the Act.

The oppression built into the legislation continues today in the current Indian Act which continues to define such matters as who is Indian and what are Indian reserves for the purposes of the Act. This legislation alone provides a clear illustration of how oppression of Aboriginal peoples is linked to colonization both historically and currently. The fact that Euro-Canadian legislation created the term "Indian" to represent First Nations peoples and inscribed in legislation who can claim "Indian' status in Canada under the Act is undeniably an oppressive practice that continues to cause ripple effects today. Think about how being told who you are, where you can call home, and what you can do impacts self, family and community. Being stripped of your way of life in every possible way in order to be 'civilized' and forced-assimilated into the colonizer's world has had huge consequences. Policy flows from legislation and in the case of the Indian Act, the residential school policy is considered as the most ambitious forced-assimilation policy of the Canadian government.

Canada's Indian Residential School Policy

Residential schooling for Aboriginal children has its origins in the 1600s with the development of boarding school arrangements run by religious orders with the goal of evangelizing Aboriginal peoples through the education of their children. In 1830, the Department of Indian Affairs was formed and it took the position that all native peoples could be "civilized". However, two key reports, the Bagot Commission Report (1844) and the Davin Report (1879) supported the premise that Aboriginal adults and elders would only make limited progress towards assimilation so the focus should be on Aboriginal children given that children's identities were malleable. These reports formed the basis of residential school policy: remove children from their home communities and place them in church-run institutions far enough away to minimize contact with their families and communities in order to meet the church's goal of evangelization and the federal government's goal of assimilation. From the mid-1800s until as recent as 1996, over 150,000 Aboriginal children from ages 6 to 15 were removed from their families and communities and placed in residential schools. It is important to note that initially, before residential schooling was made compulsory by law in 1884, some Aboriginal families thought the residential school system would be beneficial for their children but their reasons

were very different from those of the government and the church. Aboriginal parents thought that teachings in these institutions may be a way to learn more about the expanding Euro-Canadian society: assimilation was not something they sought or believed would happen for their children as part of their residential school education.[vi]

While it is clear that the residential school policy was one of the Canadian government's methods of assimilating Aboriginal children into mainstream society, some have argued it was a method to completely eradicate Aboriginal peoples by suppressing culture and language. The residential school policy separated children from their families and set out to strip them of their culture, language, and traditions within a system of control, intimidation, and domination. The residential school system also created a culture of shame including shame in the child's Aboriginal heritage, parents, Elders, and home community. Children experienced a loss of pride, confidence and self-esteem after repeated lessons on how Euro-Canadian culture was superior to Aboriginal culture. Children were undernourished, undereducated and used as labourers for the schools' daily functioning. Many also died from preventable diseases. It is estimated that at least 4000 children died while attending residential schools. There are families across Turtle Island that have never known what happened to their children after they were taken away to residential school. Many have never known if their children died and if they did, where they are buried. It is not hard to imagine how this contributed to complicated individual and collective grief and loss in Aboriginal families and communities.

Children experienced institutionalized racism in many forms. For example, the residential school system forbade children from speaking their birth language and from practicing the cultural, spiritual and traditional ways of their heritage. Repercussions were swift and painful for those who did not conform. Loss of language and spiritual practices created distance between many families and their children, who may only have been allowed a visit home once or twice a year or not for years at a time. It also meant a loss of culture and teachings from the Elders in children's respective communities, most of whom did not speak English in those days. Language carries culture so given that oral traditions could not be passed on, it meant values, beliefs, and customs including traditional child rearing practices could not be taught to subsequent generations or, at a minimum, these teachings were severely disrupted. In many instances, children went home to unsafe conditions because their families were using substances such as alcohol to try and cope with the deep despair over losing their children to the schools. Compounded by the sexual, physical and emotional abuse that was prevalent in many residential schools, many former residential school students have faced immense challenges as adults. Residential school has significantly contributed to the erosion and in some cases, destruction of Aboriginal cultural identity, family structures, traditions, connections and kinship systems. The impacts of this forced-assimilation policy live on through subsequent generations for many Aboriginal individuals, families, communities and nations.

Impacts on Parenting

Parents play a vital role in making sure that their children are nurtured and have opportunities to play, learn and safely explore the world around them. Parents who bring up their children in this type of environment enable them to draw on traditional child-rearing features, transmit knowledge through positive role modelling and develop healthy life-long relationships with their children. In Western culture, the mother is typically the primary caregiver within what is termed the nuclear family setting of Mother, Father and Child(ren). Traditional Aboriginal parenting does not adhere to a linear relationship between mother and child or the nuclear family concept: it is inclusive of wider social relationships. In Native cultures, kinship structures such as the extended family and community play a large role in raising children: there is a collective responsibility for the sharing and nurturing of the child. In some households, families may live together in three or more generations of family members. Some Aboriginal family structures have changed with the movement of many Aboriginal people into urban settings but even with this movement to urban environments and more contemporary lifestyles, the "notion of the caring, effective, extended family, co-extensive with community, continues to be a powerful ideal etched deep in the psyche of Aboriginal people".[vii]

Residential schools were based on a parenting model of punishment, abuse, coercion and control whereas a traditional Aboriginal parenting model is based on nonpunitive and positive interactions with children. In the residential school system, there were rarely positive role models so children did not have opportunities to learn the tasks of parenting and child-rearing within a nurturing environment, as one would expect to in their own family settings. It is generally agreed that Canada's residential school system interrupted normal child development by restricting experience and interrupting expertise of essential life skills. For some, the unhealthy relationship behaviours modelled in residential schools have been passed on to their children who in turn have passed them on to their offspring and so on.

It is no wonder that the residential school policy has been identified by Aboriginal peoples and in the literature as a root cause of many of the poor health and social outcomes in Aboriginal communities today. In 2006, there were approximately 86,700 former residential school students still alive and approximately 387,310 individuals intergenerationally impacted by this policy.[viii] Many continue to live with cumulative effects of unresolved intergenerational trauma, discrimination, and racism. Research studies examining the impacts of residential schools on survivors and subsequent generations indicate that, for the cycle to be broken and healing to take place, former students' residential school experiences have to be acknowledged and the healing journey needs to be a self-determined process for individuals, families, communities and nations. It needs to build on the strengths and resiliency inherent in Aboriginal societies.

The Sixties Scoop

As residential schools became discredited over time, the child welfare system became the new agent of assimilation and colonization. Many refer to the Sixties Scoop as a continuation

of the residential school system because mass removal of children from their homes and communities continued, only under another form of assimilation. The Sixties Scoop refers to a particular phase of history, rather than an explicit government policy. Although it is referred to as the Sixties Scoop, the time period actually extends well beyond the 1960s. Status Indian children were taken from their homes and communities by provincial child welfare authorities to be placed in non-aboriginal foster homes for adoption. Justification for this practice was due to changes in the Indian Act in 1951 that allowed some provincial legislation to apply on reserve whenever a provincial law dealt with a subject not covered under the Indian Act, such as child welfare. The federal government did not provide any funding to the provinces to help pay for these new provincial responsibilities until the mid-1960s when they signed agreements with the provinces (funding formulas that were provided to child welfare provincial agencies based on head count of children in placement). This saw a ballooning of Aboriginal children in care. Of great significance, the longstanding colonial practice of not consulting with Aboriginal peoples on matters that concern them continued with this new federal-provincial agreement: no commitment was made to preserve Aboriginal culture or to provide for local Aboriginal community control of child welfare. Services were to be delivered by non-Aboriginal agencies employing non-Aboriginal child welfare social workers. As a result, cultural differences in parenting practices between non-Aboriginal and Aboriginal worldviews led most non-Aboriginal social workers to misunderstand traditional practices as neglect. Children were also removed due to poor living conditions in their communities: a tragic outcome stemming from historical and contemporary colonizing policies rather than traditional Aboriginal ways of living.

Statistics from Indian and Northern Affairs Canada (INAC) indicate that 11,132 Status Indian children were adopted between 1960 and 1990. Because of inaccurate recording of information, the actual numbers are believed to be much higher. Further, from a social desirability perspective, the less Aboriginal a child appeared to be on paper, the more "adoptable" the child might be so many were recorded by government staff as Métis or French or as singles rather than as members of sibling groups. Those children who were considered "adoptable" were adopted into non-Aboriginal homes in Canada, the United States and overseas. Through multiple placements and inaccurate records, tribal connections were sometimes completely lost so many children of the Sixties Scoop have never discovered their ancestry and families of origin. Similarly, many families of origin have never been able to locate their children who were taken away. Further compounding this tragic reality, many parents whose children were removed during this time period themselves had been removed to attend residential schools when they were children. It is not hard to imagine how this compounds the despair and grief for individuals, families and communities. The negative effects of the Sixties Scoop live on and many adult children of the Sixties Scoop struggle with a number of identity issues today. Many have argued that the Sixties Scoop never really ended and has actually increased in its intensity and scope as evidenced by the over-representation of native children currently in care across Canada. There are now three times more Aboriginal children in care than at the height of the residential school era. In Alberta, 65 per cent of all children in

child welfare care are First Nations, even though they represent well under 10 per cent of the population.[ix]

Historical Trauma

Aboriginal peoples of Turtle Island are not unique in having a traumatic history; generations of people around the world have experienced mass trauma such as ethnic and cultural genocide, war, forced assimilation and relocation. However, for the purposes of this backgrounder, traumatic history will be discussed in relation to what has happened to Aboriginal peoples of Canada. Evident from the historical and contemporary legislation, policies and practices outlined above, multiple generations of Aboriginal peoples have been subjected to oppression and suppression of culture and have endured innumerable significant traumatic events and losses since contact with European colonizers.

To understand the contemporary impacts of colonialism and assimilation practices on Aboriginal peoples, it is important to develop a framework of understanding about traumatic responses and historical trauma. A traumatic event is any event that is extremely distressing to a person, and one that usually evokes a reaction of intense fear, anxiety, and helplessness. It is an experience that is emotionally and psychologically painful, and usually involves a threat to a person's physical integrity or the safety of someone that is in close proximity. Trauma can alter the way we view ourselves, the world around us, how we process information and how we respond to the environment. Traumatic experiences impact us physically, mentally, emotionally and spiritually. A traumatic experience can result from a single event such as a natural disaster, assault or accident or can result from chronic, repetitive events such as physical and sexual abuse, genocide or war. Acute traumatic stress responses can lead to complex trauma responses including post-traumatic stress disorder (PTSD).

If traumatic events are left unresolved, this can result in a ripple effect that spreads out and encompasses the person, family, and community. Unresolved trauma can also become cumulative if the trauma continues over an extended period of time. Unresolved trauma can lead to the transmission of intergenerational trauma, which passes trauma down to subsequent generations. Intergenerational transmission of trauma is a relatively recent focus of mental health. It was first observed in the 1960s by mental health practitioners alarmed by the high numbers of children of Holocaust survivors seeking mental health treatment for anxiety, depression and other mental health issues. In the scientific or medical model worldview, intergenerational trauma is still not widely accepted or identified as a primary concern because the symptoms are occurring in those who did not experience the original trauma. In many cases today, the intergenerational aspects of trauma are treated as secondary concerns and consequently the behaviour of many children of survivors of massive trauma is misunderstood, pathologized, and not treated appropriately.

Historical trauma is referred to as a collective spiritual, emotional, and psychological wounding over the lifespan and across generations. Historical trauma specific to Aboriginal peoples is understood to be linked directly with colonial and assimilation practices such as the banning of cultural practices, forced-relocation to reserves and forced-assimilation of children into residential schools. Historical trauma is trauma resulting from successive, compounding traumatic events perpetrated by those with power and privilege on a population over generations. This type of collective trauma is significant in that the trauma need not be directly experienced for it to have a profound effect on future generations. As noted above, the intergenerational transmission of trauma is still often overlooked or treated as a secondary concern, so it is critical to understand, for example that subsequent generations of residential school students did not have to attend residential school to be impacted mind, body and spirit. Historical trauma "accentuates and implicates the processes of colonization rather than faulty genes or broken brains as causal in the origins of epidemic levels of distress in so many First Nations communities".[x] Many Indigenous and non-indigenous scholars have identified historical trauma as stemming from colonialism, acculturative stress, cultural bereavement, genocide and racism that has been generalized, internalized and institutionalized.[xi] Further, historical trauma is considered cumulative, unresolved and ongoing and continues to cause distress and disruptions in balanced ways of living for many Aboriginal individuals, families and communities today.

Contemporary Impacts

The historical trauma that Aboriginal peoples have endured has led to cultural, language and spiritual losses, difficulties in forming healthy relationships, high incidences of substance abuse and family violence and complicated, unresolved grief for many. Loss of cultural identity has also occurred. Cultural identity is the core of who a person/community/nation is and its loss due to colonial and assimilation policies such as residential schooling is often associated with coping difficulties at the individual and collective levels. Colonialism is also considered a root cause of poor health and social status and Aboriginal peoples face greater disadvantages in comparison to the Canadian population overall. Some examples include higher rates of poverty; homelessness and inadequate housing; unemployment; chronic diseases; infant mortality; accidental deaths; suicide; incarceration; children in care, and greater exposure to violence. While all oppressed groups experience social inequalities, the impacts as measured by the rates of various forms of violence are highest for Aboriginal peoples in both Canada and the United States. Factors linked with these high rates of violence include loss of land and traditional ways of life, destruction of language and spiritual ceremonies as well as economic and social deprivation. It is not hard to conclude that these factors are the result of forced-assimilation policies and legislation on the part of Euro-Canadian governments and institutions since the time of first contact. These vulnerabilities are linked to other outcomes and conditions related to Canada's history of colonization and related policies of oppression and assimilation, including the Indian Act, the residential school system, the Sixties Scoop and a long history of broken promises by the European colonizers and Canadian government. In fact, Native people as a

whole are at a greater risk than any other ethno-racial group for experiencing traumatic life events than the general population and are twice as likely to develop posttraumatic stress disorder (PTSD) when compared with the general population.[xii]

An important contemporary impact of colonialism and assimilation to understand is the concept of internalized oppression. One of the effects of oppression is that people learn to adapt so well to the oppressed lifestyle that they become their own oppressors. Internalized oppression is a belief that one's self and one's social group is inferior to other social groups. It also encompasses self-destructive behaviours that contribute to one's own oppression. Internalized oppression is described as a form of self-hatred and it expresses itself in many ways such as drug abuse, suicide, violence and depression. In effect, internalized oppression can cause those who are oppressed to believe the messages they have heard about themselves and subsequently internalize them. It has been suggested that because of the mostly negative images and stereotypes presented in society regarding Native people, Aboriginal peoples are particularly vulnerable to internalized oppression.   A small but growing body of research has identified perceived discrimination as an important contributor to negative health and mental health outcomes for native peoples.

 Hand in hand with internalized oppression is the concept of lateral violence. Lateral violence has come to be understood as what happens when oppressed people act out rage, anger, and frustration, typically directed at one's own people rather than lashing out at the oppressor. It occurs when oppressed groups turn on each other and where there is outward jealousy and envy of others. It includes gossip/shaming/blaming, putting down others, family feuds, and community divisions (for example, division of spiritual beliefs between traditional and Christian community members). It has been suggested that the rage of the oppressed reaches levels that cause them to attack their own group members in order to reduce the pain of feeling devalued and powerless. Some scholars have coined this as the final stage of oppression: when the oppressor is no longer needed because the oppressed are oppressing each other. Lateral violence keeps the oppression alive. It provides people who have experienced oppression, violence and shame with ways to oppress, violate and shame others in their communities. This speaks again to the importance of understanding history as a function of current community realities and understanding the roles internalized oppression and lateral violence can play in impeding individual and community healing.[xii]

Colonization and Gender
Traditionally Aboriginal men and women had defined roles and responsibilities in their societies that were based on respect, collaboration, and cooperation. Aboriginal women were honoured and celebrated as life givers and Aboriginal men were protectors and providers and taught respect for women. Colonization and patriarchy have undermined those traditional roles and the contemporary impacts of this are tragic. The removal of Aboriginal peoples from their traditional lands, their placement on reserves and the loss of the traditional male and female

roles have caused role conflicts.

Aboriginal women experience the highest rates of victimization including intimate partner violence and sexual violence of any group in North America. In Canada, Aboriginal women are disproportionately affected by sexual victimization, family violence, inequalities, discrimination and poverty than non-Aboriginal women. Aboriginal women between the ages of 25 and 44 are five times more likely to die of violence than other women in Canada and do comparatively worse on almost every socio-economic and health indicator than their non-Aboriginal counterparts[xiv]. Aboriginal women face unique challenges stemming from the many effects of colonization of their nations, communities, and families as well as the racism and stereotypes that are prevalent in society. Stereotypes that have been perpetuated by European men since the earliest contacts. The image of the Indian princess gave way to that of the promiscuous "squaw" which rendered Aboriginal women vulnerable to violence and mistreatment. Many continue to reel from the many losses including traditional roles, livelihood and self-sufficiency, the overpowering social, economic and political marginalization, racial stereotyping, discrimination, and the loss of culture, language and often pride in who they are.

Aboriginal men have also faced many losses due to colonization. Eurocentric constructions of men's role as the heads of households, clans and communities and dominant decision makers were inconsistent with many Aboriginal nations' traditional family and community structures and constructions of masculinity. The roles of traditional men included being protectors and providers for their families and communities. The loss of traditional ways of living has diminished Aboriginal men's sense of self and connection to community and the land as well as their specific roles and responsibilities with respect to the survival and thriving of their communities. There is a collective deep sense of pain, anger and powerlessness within Aboriginal men that often finds its outlet in violence, particularly intimate partner violence. As a population, Aboriginal men are considered the most socially excluded in Canada, with higher unemployment, homelessness, injuries, incarceration, suicide, and lower education and life expectancies than all other Canadians.

Final Thoughts
Aboriginal peoples have consistently spoken out about the despair and poverty that have taken root in their communities since contact with Europeans, yet it is only in the last thirty or so years that serious attention has been focused on Canada's treatment of Aboriginal peoples. The cycle of oppression Aboriginal peoples experience due to colonization is often not fully understood even though many have studied and written about it. Societies of Aboriginal people have been oppressed, generation after generation. With the countless historical and contemporary oppressive influences on Aboriginal communities, it is difficult to ascertain which factors most influence the challenges many of these communities continue to experience. That being said, some nations have returned to their traditional ways, in as much as they can, either via negotiated self-government agreements or within the boundaries of current Canadian

legislation. Others have adapted traditional Aboriginal practices and customs to address contemporary realities in Aboriginal families and communities (for example differences in urban and rural ways of life). Others struggle with acculturation and assimilation influences such as internalized oppression that impedes the reclamation of cultural identity.

This brief look at the impacts of colonialism and assimilation practices on Indigenous peoples of Turtle Island serves mainly to point out the complexity and depth of the oppressive forces that have eroded Indigenous societies. It also points to the resilience of spirit of Indigenous people. As ongoing colonialism and assimilation practices and systemic oppression (racism, discrimination, and marginalization) continue to influence the restoration of personal, family, community and nations' well being, hope for a brighter future remains. In fact, the recovery and resurgence of Indigenous ways of knowledge, being and governance are well underway across Turtle Island: "Belief in traditional culture and values and participation in cultural practices provides some kind of buffer against adversity and risk-taking. The very element that government policy sought out to destroy has turned out to be vital to the physical and emotional well being of Indigenous peoples".[xv]

We produced many tools that we are pleased to share with you. May they make a difference in your community as they have in ours. Our tools include
- This Guide, Walk Proud, Dance Proud: Footprints on a Healing Journey
- A Social Return on Investment Case Study: A social return on investment demonstrated that for every one dollar invested by the funders, $5.42 in value was generated
- Appreciative Inquiry
- Danger Assessment and the Danger Assessment Circle
- Phase I and Phase II Evaluation Reports
- Business Case

More about these tools can be found on the ACWS website.

In March, 2014, we ended much as we had started: united under the protection of a teepee at Maskwacis, guided by the wisdom of Elder Lillian Gladue. We recognized the power in working together and most importantly the resilience and strength present in First Nations families and communities. Efforts will continue to reclaim the teachings for First Nations children.

We remain hopeful as our journey together continues…

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ii The terms "Aboriginal", "First Nations", "Native", and "Indigenous" are all used interchangeably in this backgrounder without prejudice and unless otherwise specified include treaty, status and nonstatus peoples as defined in the Indian Act, as well as Inuit and Métis peoples without referring to their separate origins, cultures and identities. The term "Indian" is only used when required for legal/doctrinal accuracy.

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iv For a detailed analysis on history, legislation and policies impacting Aboriginal peoples in Canada please see: Belanger, Y. D. (Ed.). (2008). Aboriginal self-government in Canada: Current trends and issues, 3rd Edition. Saskatoon: Purich Publishing; Burrows, J. (2008). Seven generations, seven teachings: Ending the Indian Act. National centre for First Nations Governance. Retrieved from http://fngovernance.org/ncfng_research/john_ borrows.pdf; Erasmus, G., & Dussault, R. (1996). Report of the Royal Commission on Aboriginal Peoples (Vol. 5). Ottawa: The Royal Commission on Aboriginal Peoples; Fleras, A., & Elliott, J.L. (1999). Unequal relations: An introduction to race, ethnic, and Aboriginal dynamics in Canada. Scarborough: Prentiss Hall Allyn & Bacon, Canada; Hylton, J. H. (Ed.). (1999). Aboriginal self-government in Canada: Current trends and issues, Saskatoon: Purich Publishing; Miller, J. R. (2000). Skyscrapers Hide the Heavens: A History of Indian-White Relations in Canada (3rd ed.). Toronto: University of Toronto Press.

v See: Belanger, Y. D. (Ed.). (2008). Aboriginal self-government in Canada: Current trends and issues, 3rd Edition. Saskatoon: Purich Publishing; Native Women's Association of Canada: http://www.nwac.ca/.

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viii Aboriginal Healing Foundation. (2006). Summary points of the AHF final report. Retrieved from http://www.ahf. ca/publications/research-series.

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