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The Occasional Evil of Angels: Learning From the Experiences of Aboriginal Peoples and Social Work

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Abstract

This paper explores how the propensity of social workers to make a direct and unmitigated connection between good intentions, rational thought, and good outcomes form a white noise barrier that substantially interferes with our ability to see negative outcomes resulting directly or indirectly from our works. The paper begins with outlining the harm experienced by Aboriginal children before moving to explore how two fundamental philosophies that pervade social service practice impact Aboriginal children: 1) an assumption of pious motivation and effect and 2) a desire to improve others. Finally, the paper explores why binding reconciliation and child welfare is a necessary first step toward developing social work services that better support Aboriginal children and families.

Keywords: social work, residential schools, child welfare, Jordan's Principle, Touchstones of Hope

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What's the Harm?

Herwitz (2003) argued the first step in reconciliation is to understand the harm in a way that cannot be rationalized or abided. This is a fundamental first step for social work. We must learn from our professional past in order to avoid replicating past mistakes with Aboriginal peoples and other groups. Elder Wilma Guss (2004) suggested that those who did the harm do not have the right to define it or define the solutions to redress it – the definition of harm and the solutions to the harm are the first property of those who experienced it. The following historical summary of the harms is provided to contextualize a later discussion of possible factors eroding effective and respectful social work with Aboriginal peoples.

Aboriginal peoples have lived on the lands now known as Canada for thousands of years (Muckle, 1999). These diverse and complex societies embrace different linguistic, cultural, political, and spiritual systems which reflected their distinct ecological settings. Despite their diversity, Aboriginal peoples share a common belief in the interdependence of all living, spiritual, and physical forms; a preference for communal rights; and high regard for knowledge handed down in a sacred trust from one generation to another (Auger, 2001). These beliefs influenced all ways of knowing and being, including systems for caring and educating children and youth (Auger, 2001; Sinclair, Bala, Lilles, & Blackstock, 2004). No society was ever without its challenges and each community had laws and responses to help children who were receiving inadequate care. These responses included placement of the child with other community members, conflict resolution, and redistribution of community resources to ensure parents had what they needed to care for their children (Blackstock, 2003). Unlike today's social work practice, placement outside of the home never resulted in a complete severance of parental responsibilities to the child – parental roles were simply redefined so that the parent could safely and properly support their child to the degree they were able (Auger, 2001). To my knowledge, no Aboriginal language in Canada has a word for child removal or apprehension as we understand it in contemporary child welfare law.

Aboriginal concepts and systems of care sustained generations of Aboriginal children until the arrival of the British and French on the Eastern shores in the late 1400s and early 1500s. At the time, both colonial powers were feudal monarchies interested in expanding their respective empires with limited compromise or respect for the “savages” who lived on the new lands (Royal Commission on Aboriginal Peoples [RCAP], 1996). Although the earliest of contact was described as mutually beneficial as Europeans traded survival information and trade access for goods, it soon changed as European motivations shifted to settlement and resource extraction. Colonial powers initiated efforts to eradicate the Indians² through the intentional introduction of diseases such as smallpox and tuberculosis, removal of Indians from their traditional lands, imposition of restrictions of Indian movements, reckless harvesting of natural resources and, upon confederation, the regulation of Indians and lands reserved for Indians by the federal government's *Indian Act* (RCAP, 1996).

Deaths from disease, starvation, and willful murder related to colonization resulted in the complete eradication of some Indian communities such as the Beothuck of Newfoundland and an overall 80% (approx. 400,000) reduction in the Indian population from the time of contact until 1871 (RCAP,

² The term “Indian” used in this article is used to describe Aboriginal peoples who are defined as Indian pursuant to the *Indian Act*.

1996). This loss of life was most significantly experienced by Aboriginal children who, along with being the most vulnerable to death by disease, also experienced the profound grief and loss associated with losing so many members of their family and community.

This harm was compounded by Canada's introduction of compulsory attendance at residential schools designed to assimilate Indian children and thereby eliminate what senior government officials termed "the Indian problem."³ These schools, run by Christian churches and funded by the federal government operated from the time of Confederation until 1996 when the last one closed in Saskatchewan (Department of Indian and Northern Affairs Canada, 2003). The *Indian Act* authorized Indian Agents to remove every Indian child aged 5-15 years from their parent's care and place them in, often distant, residential schools. The schools themselves were poorly constructed using the cheapest possible material and workmanship and thus they were prolific incubators for the spread of tuberculosis and smallpox. In fact, Duncan Campbell Scott, Superintendent of Indian Affairs for the first three decades of the 20th century estimated that up to 50% of Indian children died in the schools from disease or maltreatment (Milloy, 1999). The federal government was advised of the problem by Dr. P. H. Bryce, Indian Affairs Medical Officer, as early as 1907 but their efforts to rectify it were inadequate and lacked any sustained effort. In fact, the lack of government action motivated Bryce to publish his findings in magazines and newspapers hoping that the public would become enraged and force the government into positive action. Sadly, despite Bryce's best efforts, the reports were met with silence and had little effect on government policy and practice (Milloy, 1999). This inaction prompted Queens Council S. H. Blake to note a year later that "in that the government fails to obviate the preventable causes of death it brings itself in unpleasant nearness to manslaughter" (Milloy, 1999, p.77).

There was child maltreatment as well. Throughout the history of residential schools, dating back as early as 1896, Indian Agents and others were advising the federal government of life-threatening incidents of physical abuse, emotional abuse, neglect, and servitude (RCAP, 1996; Milloy, 1999). Even after several deaths were reported due to child maltreatment, the federal government and the churches failed to implement measures necessary to protect Indian children (Milloy, 1999). Residential schools began closing in the mid-1940s with the last federally run school finally closing its doors in 1996.

There is very little evidence that the voluntary sector, including human rights groups, did anything significant to disrupt residential schools or the colonial policies of government overall (Blackstock, 2009). Even though children's aids societies were operating in Ontario since the early 1900s (Sealander, 2003) and thus logically must have been aware of Bryce's frequent public statements about the preventable deaths of children in the schools – there is no record of children's aid ever intervening. Even as reports of abuse and neglect at the schools mounted across the country, I know of no records suggesting children's aid organizations took note of the reports or did anything meaningful to intervene. A joint submission to the Senate and House of Commons in 1946, the Canadian Association of Social Workers (CASW), and the Canadian Welfare Council (CWC) indicates that social workers were well aware of the residential schools (Special Joint Committee of the Senate and House of Commons, 1946). The CASW and CWC joint submission suggested that Aboriginal peoples should be assimilated into Canadian

³ Duncan Campbell Scott, Superintendent of Indian Affairs for the first three decades of the 20th Century.

society and although shortcomings with the residential schools were noted, the CASW and CWC stated that “we feel they [residential schools] have a place in a well-rounded system of Indian education, particularly in so far as they meet special needs” (Special Joint Committee of the Senate and House of Commons, 1946, p. 158). Even if one argued that the CASW and CWC did not, for some reason, know about the prolific and preventable deaths from tuberculosis and other factors at the time of their testimony, it was clearly outlined in other parts of the report where their own evidence is reproduced and yet there is no evidence that CASW or CWC took up any meaningful campaigns to address the problems.

To be fair, CASW and CWC did successfully advocate with the federal government to ensure child welfare services were provided to Indian children on reserves⁴ but this advocacy was not accompanied by a persistent campaign to close the residential schools themselves. In fact, social workers were active participants in the placement of Aboriginal children in the residential schools as late as the 1960s (Caldwell, 1967; RCAP, 1996).

The professional oversight bodies did not effectively monitor the quality of child welfare services mainstream social workers began providing on reserves. This lack of invigilation, accompanied by a systemic ignorance of the impacts of colonization often resulted in the mass removals of Aboriginal children and their placement in non-Aboriginal homes – often permanently (Caldwell, 1967). This pattern of mass removals became known as the “60’s scoop.” It was not unusual for so many children to be removed that a bus would be hired by child welfare workers to transport them out of the reserve (Union of British Columbia Indian Chiefs, 2002).

Upon completing his investigation into the impacts of 60’s scoop practice on Aboriginal communities in Manitoba, Judge Edwin Kimmelman said these mass removals amounted to “cultural genocide” (Balfour, 2004). Some provinces and territories responded to Kimmelman’s concerns by setting temporary moratoriums on the adoptions of Aboriginal children in non-Aboriginal homes but little was done to redress the poverty, social exclusion, and impacts of colonization that resulted in these children being removed from their families in the first place.

In the early 1980s, the federal government began to respond to First Nations demands to operate their own child welfare programs to stem the tide of children leaving the community. These programs, known as First Nations child and family service agencies, operate pursuant to provincial legislation and are funded by the federal government (MacDonald & Ladd, 2000). Although the agencies have made substantial gains in ensuring that services are culturally based and children are given the best chance to stay in their communities, they express concern regarding inequitable funding, and the imposition of provincial legislation and standards that have substantially failed Aboriginal children (Blackstock, 2003). A national policy review conducted in 2000 confirmed First Nations concerns that the current funding structure from the federal government does not provide sufficient resources for children to stay safely in their homes – although there is no funding cap on resources for children removed from their homes (MacDonald & Ladd, 2000). A more recent and detailed analysis found that the funding inequality is in the order of 109 per annum (Loxley et al., 2005; Auditor General of Canada, 2009). This means that at home child maltreatment prevention services, which are broadly available to other Canadian children, are

⁴ Lands set aside by the Crown for the use of Indians pursuant to the *Indian Act*.

not provided to First Nations children on-reserve resulting in an astronomical over-representation of Status Indian⁵ children in care (Blackstock, 2009). Child in care data from three provinces indicates that 0.67% of non-Aboriginal children were in child welfare care as of May 2005 as compared to 10.23% of Status Indian children. Overall, Status Indian children were 15 times more likely to be placed in child welfare care than non-Aboriginal children (Blackstock, Prakash, Loxley, & Wien, 2005).

As *Maclean's* magazine (2004) noted,

the numbers of Status Indians taken into care has jumped by 71.5% between 1995-2001 – something experts put down to the general level of poverty and relative under funding of First Nations child welfare agencies – the situation can only fuel racial inequality and discord. In a verdict shared by adoption advocates across the country, ACC [Adoption Council of Canada] chair Sandra Scarth calls the overall situation “appalling” (Ferguson, 2004, para. 6).

By 2007, the federal government had done little to redress the drastic funding shortfalls prompting the Assembly of First Nations and the First Nations Child and Family Caring Society of Canada to file a complaint with the Canadian Human Rights Commission alleging that the federal government's conscious underfunding of child welfare amounted to racial discrimination within the meaning of the *Canadian Human Rights Act*. The federal government has not actively disputed the central claim that child welfare funding is inequitable and yet has pursued a plethora of technical objections in an apparent effort to derail or delay the hearing of this important case on its merits (Blackstock, 2009). Although this case was broadly covered in the Canadian press and the engagement of social workers is growing, there has been only modest support from non-Aboriginal social work organizations.

Responding to the Harm: The Search for Social Work

One would think that responding to the needs of First Nations children and families would be a national priority for social work – the reality is that they still are not. Whilst social work authorities, academics, and professional bodies acknowledge the over-representation of Aboriginal children, they typically devote very limited financial resources or sustained effort to redress it. For example, in 2004 a provincial child welfare authority allocated only 20% of its family support budget to Aboriginal families despite the fact that Aboriginal children composed over 80% of all children in care (Flette, 2005). Another province only placed 2.5% of Aboriginal children in care with culturally matched homes despite a statutory obligation to do so (British Columbia Children's Commission, 1998). Additionally, although several non-Aboriginal social work regional and national umbrella organizations will identify Aboriginal children as an organizational priority, an examination of programs, budgets, and outcomes rarely reflect any significant and sustained focus that is proportionate to the scope of the problem. From a research perspective, investment in national Aboriginal child welfare research is modest, representing approximately \$350 thousand in 2004 whereas the cost of keeping Status Indian children on reserve in care cost the federal government over \$300 million. By 2009, the reality was even bleaker with an approximate investment of \$100 thousand nationally whilst the child welfare expenditures for First Nations children on reserves had grown to well over \$400 million due to rising rates of children in care.

⁵ The term “Status Indian” refers to a person who is registered or is entitled to be registered pursuant to the *Indian Act*.

There are, of course, promising exceptions where social workers and social work organizations have meaningfully worked with First Nations to redress the over-representation of children in care but these continue to remain the exception. These positive examples need to be recognized and supported – but they should spur us on to further progressive action and not reinforce a professional slumber.

Despite the indications that social work requires courageous invigilation of its impacts on Aboriginal families, mainstream social work largely considers itself to have taken the steps necessary to insulate itself from its egregious actions of the past. We talk about the residential school and 60's scoop eras as if they were safely packed away to ensure they do not shape current practice. But is this true? Have we as social workers really learned from our past mistakes?

The following sections explore how professional notions of improvement, professional piety, mandates and borders, knowledge, and culturally appropriate services may have contributed to social work's largely poor history with Aboriginal peoples in Canada. This list is not exhaustive and is meant to inspire broad-based conversation to promote professional learning.

Both Sides of Improvement

The notion of improving other people is endemic to social work. It is both a source of moral nobility and trepidation. It implies an ability to define accurately another's deficit, to locate its importance in his/her life and assumes the efficacy of external motivations and sensibilities to change. As interventions with Aboriginal children by non-Aboriginal helping professionals testify, it is a delicate balance between freedom and dignity of individuals and societies at one end and cultural arrogance and oppression on the other.

Research suggests that social workers should avoid drumming up solutions to "Aboriginal issues" by themselves and instead invest in a relationship where the right of Aboriginal peoples to make the best decisions affecting them is affirmed and supported. The wisdom of this approach is documented in research by Chandler and Lalonde (1998) who found that although First Nations children in British Columbia have one of the highest suicide rates in the world, more than 90% of the suicides occurred in 10% of the First Nations communities. In fact, some First Nations reported a zero percent suicide rate over the 13 years prior to the study. Chandler and Lalonde (1998) wanted to know what differences between communities that could account for such wide variation in suicide. Findings indicate that First Nations communities with a low suicide rate or no suicide rate had substantial community-based decision making as represented in community-based service such as child welfare, health, education, and fire and police services. Moreover, women in government and advanced stages of self-government were also factors. The work of Cornell and Kalt (1992) compliments Chandler and Lalonde's findings in that they found that communities with sustained socio-economic development also had highly developed community decision making authorities. They argued that effective capacity building falls after decision making has passed to Aboriginal peoples. This finding challenges the assumption that Aboriginal peoples must build capacity to have decision-making capacity passed to them.

As Chandler and Lalonde (1998) observed, in many cases Aboriginal communities already have systems in place that prevent youth suicide that are so effective youth suicide rates are substantially lower than in non-Aboriginal communities. What is needed is to ensure that other Aboriginal communities have access to the information and resources needed to implement their own solutions.

This does not mean that non-Aboriginal social service providers get to walk away. As many Elders have said, “we did not get here alone and we are not leaving alone.” It does mean shifting the philosophy of our current social work practice away from one of solution holder and service deliverer to one where Aboriginal peoples make the best decisions for themselves. Non-Aboriginal peoples must play a critical and active role in making space for those decisions and ensuring adequate resources are available to implement them.

As the following section argues, it will also require a critical analysis of other factors influencing the profession such as the assumption of pious motivation and effect.

Understanding the Occasional Evil of Angels

The assumption of piety in social work blinds us from considering the need for anything along the lines of a Hippocratic Oath. The concept that we can do harm or even do evil rarely appears on the optical radar screen of professional training, legislation, or practice in anything other than a tangential way through procedural mechanisms such as codes of ethics. This is particularly true for those of us who work with children – believing that those who want to do good, trained to do good – could do harm to children is astonishing and upsets our sensibility of the world. Talking about it even seems too much as it breathes life into its possibility so often we are silent.

On the rare occasions when there are discussions of harm in social work, and helping professions more broadly, they are predominated by inaccurate assumptions that incidents of harm will be obvious, that it is done by others, social workers will act out against it, and when it does occur we will learn from it. It also wrongly assumes incidents are singular rather than systemic and that codes of ethics, professional training and standards, and anti-oppressive social work paradigms prevent its insurgence and persistence.

When evidence surfaces that harm did arise directly from the actions or inactions of social work or other helping professions we often default to rationalizing the occurrence as exceptional, using one of these predominant arguments: 1) they acted based on the sensibilities of the day – we know better now; 2) they did not know about the harm; 3) it was outside of their mandate, and; 4) if the harm is so appalling that it cannot be rationalized as coming from a place of good intentions, they were immoral or bad individuals who are exceptions to the group. We have also developed systemic approaches such as the emphasis on culturally appropriate services that whilst holding great promise for supporting Aboriginal families – have also been misused as a means of limiting critical systemic analysis and professional action. This section deconstructs these rationalizations to try to understand why social workers, and others, have demonstrated very limited, if any, sustained activism against the multiple harms experienced by Aboriginal children.

Sensibilities of the day

Some rationalize the lack of social work efforts to stop residential schools by noting that child abuse just recently surfaced on the societal radar screen as a problem deserving attention. The argument goes that “we had different standards back then – no one talked about child abuse” and thus it went unnoticed. But as John Milloy (1999) noted, the reports of child abuse at residential schools were made by people of the period who, given the sensibilities of those times, found the treatment of these children

unacceptable. And yet, despite having received the reports, government officials typically did little to stop the abuse, and in some cases deaths of children.

Today we have a significant evidence base to suggest that Aboriginal children and young people face pervasive risk in a way not experienced by other Canadians and yet our professional response has been lukewarm (Blackstock, Clarke, Cullen, D'Hondt, & Formsma, 2004; Blackstock, 2009). We are now the people of the period who should find such disproportionate risk unacceptable – but our professional actions are not, in my view, in keeping with the crisis before us. It is as if we have edged our collective tolerance for the risks experienced by Aboriginal children upwards to a degree where it is difficult to imagine what threshold needs to be reached for the profession to take action in a meaningful way.

We did not know

Another way to rationalize the mediocre response of social work to residential schools is to argue that information on the deaths and abuses were, not until recently, widely known. As John Milloy (1999) noted, this argument is weak as there was significant information on the abuse and deaths of children in residential schools and this information was available to governments, academics, and the public media. The availability of this information failed to inspire progressive action to redress the abuse and murders at residential schools.

The Royal Commission on Aboriginal Peoples (RCAP) (RCAP, 1996) found that social workers knew about residential schools and routinely served on admissions committees adjudicating child welfare placements in residential schools. In addition to serving on placement committees, social workers actually placed substantial numbers of Aboriginal children in the residential schools. As RCAP noted, “residential schools were an available and apparently popular option within the broader child care system” (RCAP, 1996, Chapter 10, p.21). According to Caldwell (1967), child welfare placements accounted for over 80% of the admissions in six residential schools in Saskatchewan. Caldwell’s reports outline a number of shortcomings in the residential school program but even he, a social worker by training, does not recommend the closure of these schools. Caldwell did, however, go further than most other social workers of his time by at least recommending improvements to the residential school system.

The temptation to believe “if we had only known – we would have acted differently” may provide some false comfort but in the case of social work – it did know and acted as it acted – largely in complicit support of the residential school system.

The application of the “if we only knew we could act differently” has very little merit in today’s context as well. Even with the multiple sources of information documenting the relationship between structural risks such as poverty, substance misuse, poor housing, and child maltreatment (Trocmé, Knoke, & Blackstock, 2004; Auditor General of Canada, 2009; Blackstock, 2009) active efforts by social workers and others to prioritize, protest, and redress the harms experienced by Aboriginal children continue to be inadequate and piecemeal.

We continue to confine our assessments of child risk to the family which fetters our ability to identify risk factors that impact the child, but are sourced outside the sphere of influence of their parents and we have done little to address the longstanding inequitable child welfare funding provided to First Nations children on reserves (Blackstock, 2009; Office of the Auditor General of Canada, 2009). In missing these structural risks, we set a situation in play where Aboriginal parents are held responsible for

things outside their control and we deprive Aboriginal families of the same access to services as other Canadians to redress risk to children.

We are needed

So, if information on its own is not enough to mobilize social workers, is it possible that by entrenching in the idea that social workers are positive agents for social wellbeing, we have unintentionally built a barrier that rebuffs or rationalizes information suggesting we are perpetrating harm? Take for example the assumption that social work is in the best position to respond to child maltreatment and neglect in Aboriginal communities. Increasing evidence suggests that Aboriginal communities, when provided with adequate supports, develop the most sustainable socio-economic improvements for children and yet as a profession, we continue to believe, almost at the exclusion of other options, that we are the best response. This should be a touchstone question for our profession but it is rarely asked, instead, we are busy developing programs and services to offer abused and neglected children and families instead of providing communities and families with the resources to implement their own best solutions (Blackstock & Trocmé, 2005).

Mandates and borders

Another way of rationalizing the harm is to say it was outside of the mandate of the various helping professions or organizations to intervene. Take the case of Jordan River Anderson, a First Nations boy from Norway House Cree Nation who was born with complex medical needs in 1999. His family placed him in child welfare care – not because he was abused or neglected but because that was the only way the provincial and federal governments would provide the money needed for Jordan’s special needs (Lavallee, 2005). In a policy that baffles common sense, the federal government will not provide adequate supports for special needs children on-reserve – unless they are in child welfare care. Shortly after Jordan’s second birthday, doctors agreed to allow him to return home, however, as Noni MacDonald and Amir Attaran (2007) of the Canadian Medical Association Journal noted, “bureaucrats ruined it.” Jordan was a First Nations boy whose family lived on-reserve and unfortunately, provincial and federal governments do not agree on which level of government is responsible for payment of services for children on-reserve. The standard practice by both levels of government has been to defer or deny First Nations children government services that are routinely available to other Canadian children until the dispute can be resolved, with little consideration of the child’s safety or wellbeing. For Jordan, provincial and federal bureaucrats argued over every item related to his at home care while he stayed in the hospital at about twice the cost (Lavallee, 2005). Days turned into weeks, weeks turned into months, and Jordan saw the seasons change outside of his hospital window. All the while, bureaucrats would be meeting somewhere, likely feeling good about doing “something about Jordan’s situation” while privileging their respective government’s desire to not pick up the tab. It seems that they became ethically blind to Jordan’s fate, and sadly Jordan died waiting at five years of age having never spent a day in a family home.

This sad example shows just how easy it is for something as insignificant as a mandate to overshadow the precious life of a young boy. This astounding story is not unique. A recent study found that in 12 sample First Nations agencies there were 393 jurisdictional disputes in the past year alone between governments around children’s services (Blackstock et al., 2005). Government’s put their needs ahead of children’s needs far too often. Jordan’s passing prompted the development of Jordan’s Principle

which is a child first principle to resolving government jurisdictional disputes. Although it is supported by over 1,900 individuals and organizations, including growing numbers of social work organizations and governments, the reality is that as of December 2009, no provincial, territorial, or federal government in Canada has fully implemented it and I continue to receive reports of First Nations children who are being denied lifesaving and wellness government services available to other children because of jurisdictional wrangling.

I have often wondered what the provincial and federal officials involved were thinking when they allowed Jordan to languish in the hospital. I have decided to believe that they were not evil people and yet their collective actions had devastating consequences for Jordan. I have no good answers as every rationale I come up with that would help me understand what the bureaucrats were thinking seems so very small in the face of Jordan's needs.

Mandates are both a necessary act of pragmatism and a cop out. They are pragmatic because no profession or institution can manage it all and a cop out because it should not support inaction in the face of gross and demonstrated immorality. Perhaps part of the reason that good people can do such immoral things in the name of mandates is explained by the work of Zygmunt Bauman (1989) who argues that too often our personal morality is usurped by our need to comply with what is deemed morally good by institutions we affiliate with or work with. He argues that there is a reason why whistleblowers are the exception – because they accomplish what is too rare – to break through the institutional moral code calling for company or professional loyalty to act on the basis of their moral conscience. In social work, we talk about social change but not as honestly about how our bureaucracies often prefer conformity versus courageous conversation and innovation in child welfare (Blackstock, 2009). Social change is what we do externally – but not as often internally.

The power of mandates and borders can also be more subtly shaped by interfaces between our national, professional, and personal ideology and assumptions which locate harm outside of what has already been deemed to be good. This partially explains why Canada, considered a bastion of human rights, was able to sign the Universal Declaration on Human Rights in the same year it operated residential schools, did not recognize Indians as people under the law, and invited South African apartheid delegates to learn about its Indian pass system without any public protest by human rights organizations or institutions. It also partially explains why the British Columbia government was able to run a referendum on Aboriginal treaty rights in 2002 while refusing to educate the public on the treaty process. This, the first referendum on minority rights, was held with only moderate intervention by human rights groups and only modest disapproval of the federal government. As this example illustrates, too often, nongovernment organizations (NGOs) and human rights organizations do not think to look within Canada for human rights transgressions; instead, they focused abroad. As Aziz Choudry explained “many social justice campaigns, NGOs and activists in these countries operate from a state of colonial denial and refuse to make links between human rights abuses overseas, economic injustice and the colonization of the lands and peoples where they live” (Choudry, 2001, para. 5).

It is easier to believe some other society is perpetrating human rights abuses than to believe that your own country and society is – because that frames the accountability on a more personal level to do something or own the responsibility of remaining silent and still. There are few things more courageous than to stand up to people or a government that you respect and care for – especially for interest outside of oneself. P. H. Bryce did it and should be celebrated as one of the great Canadian heroes.

Evil: A domain of the well intentioned?

Another rationalization hinges on the propensity to believe that if we as social workers are well intended our actions, regardless of consequences, are substantially absolved from moral responsibility. As Zygmunt Bauman (1989) noted, the idea that evil is obvious and is the league of crazy individuals serves to absolve us all of being evil and affords false security that we will know it when we see it. As a child protection worker, I have seen evil in its many faces and it has rarely been obvious or predictable. It is more often grey than black and white. It can be multi-dimensional, rationalized, and normative and carried out by many instead of one. It often has benefits for someone and the benefits can seductively legitimize the costs experienced by another. As John Milloy (1999) noted, the motivations of staff at the Department of Indian Affairs and those of the churches were not always evil in the way they understood them to be – they used words like “civilizing,” “integrating,” and “educating” to describe what they were doing. RCAP echoes Milloy’s findings, having noted that,

politician, civil servant and, perhaps most critically, priest and parson felt that in developing the residential school system they were responding not only to a constitutional but to a Christian “obligation to our Indian Brethren” that could be discharged only “through the medium of children” and therefore “education must be given its foremost place” (RCAP, Chapter 10, p. 3).

This created a moral cushion that blinded them to the end result of their actions which some of their contemporaries such as P. H. Bryce and S. H. Blake found repugnant if not criminal.

This moral cushion was strengthened by limited acts that workers would carry out to redress the harm. These acts were often perfunctory and unmonitored but it served to liberate them from the moral responsibility to do something. For example, upon hearing reports of child deaths and maltreatment, staffers would often issue edicts saying it was not to happen again but nothing was done to ensure these edicts were followed up – even in the face of substantial evidence that the abuse was continuing.

These cushions have served to comfort thousands of Canadians, including those active in human rights, the voluntary sector, and academia that either contributed to the harm or stood silently in its wake. Some lived proximal to the residential schools, some read P. H. Bryce’s article in *Saturday Night Magazine*, others saw the graveyards on residential school grounds or the buses collecting children from reserves to be placed in foster homes and yet, except for some courageous instances, there was silence.

Evil happens in degrees – there are those who beat children to death, those who issued edicts without following up, and those who lived next door and said nothing (Neiman, 2002). Are they all accountable? If so – how, and why? To what standard of courage and compassion should we hold social workers – are we willing to support them when they identify acts that upset our sensibilities or are we as a society willing to tolerate their silence in the face of atrocities. These are difficult questions that have remained underground in social work and need to be unearthed if we are to deconstruct our past reality in a way that makes obvious the thinking that fuels colonization.

Culturally Appropriate Services: A Step Forward?

In the absence of recognition of Aboriginal child welfare laws, a subsidiary movement has been underway to deliver “culturally appropriate” services. This sounds good – it feels like we are moving in the

right direction as a profession but the problem is that very few of us really understand what being culturally appropriate means. This is due in part to the fact that few services are analyzed for their cultural value underpinning in order to determine what program elements are culturally predicated and on what culture. Too often services are proclaimed culturally neutral, often by those for whose cultures are embodied in the service, in the absence of any thorough analysis or search for perspective from other cultural groups. In the absence of this analysis, social workers can wrongly assume that nothing needs to be changed in the fundamental elements of the service – it just needs to be made “culturally appropriate” by adding in Aboriginal symbols or ceremonies. I am open to debate on this issue but in my own experience I have yet to see a Euro-Western program of any stature deconstructed from a value perspective by Aboriginal and non-Aboriginal peoples and then reconstructed on an Aboriginal value base.

What we do know is that this movement toward culturally appropriate services has gained increasing authority as governments amended their internal operational guidelines as well as contract service guidelines to require child welfare service providers to ensure Aboriginal children receive culturally appropriate services. As a result, large numbers of organizations began redefining their services as culturally appropriate. However, as there was an absence of guidelines and monitoring bodies for culturally appropriate services, what began as an earnest attempt to better support Aboriginal children has largely degenerated to a movement that gains culturally ascribed organizations social capital and funder recognition without having to critically evaluate the cultural efficacy and relevance of their programs. I argue that the focus on culturally appropriate services takes attention away from the real need to affirm Aboriginal ways of knowing and caring for children. After all, the basic assumption underlying culturally appropriate services is that one can adapt a mainstream model for application to Aboriginal children – without compromising the basic integrity of the service – including the values and beliefs that drive it. As Aboriginal values and beliefs respecting children are very divergent from Euro-Western understanding marrying the two into a coherent and effective program for Aboriginal children would be difficult. This difficulty has been well recorded by Aboriginal child welfare agencies who describe the problems inherent in delivering child welfare services to Aboriginal children within the realm of Euro-Western legislation. Until there are effective evaluation and monitoring mechanisms developed to measure the efficacy of culturally appropriate services we need to be vigilant about the usage of such terms and any conclusions we may draw between said services and the wellbeing of Aboriginal children.

Reconciliation and Social Work

After the Prime Minister’s apology for the wrongs done by the Government of Canada during the residential school era, reconciliation between Aboriginal and non-Aboriginal Canadians sounds like just the thing social work should be involved in – and it should. But not before it courageously engages in reconciliation itself. This means that social work must look in the professional mirror to see its history from multiple perspectives, including that of those who experienced the harm. We must look beyond our need to not feel blamed so we can learn and change our behavior. It sounds trivial to write about the power of blame and shame among social workers but I have seen its power. I have seen many bright and compassionate non-Aboriginal social workers raise walls of rationalization and distance to insulate themselves from it. As the doers of good, we have not been trained to stand in the shadow of our harmful actions so we ignore or minimize them. It is a privilege to put up those walls – to be able to insulate

yourself from what happened. When Aboriginal people put up the wall they are left alone to deal with the harm. When social workers put up the wall they can pretend the pain does not exist at all and go about doing their daily business. The problem is that putting up the walls does not change the reality – Aboriginal peoples lost in colonization and social work did too.

Social work misplaced its moral compass and in doing so perpetrated preventable harms to Aboriginal children. It denied itself the opportunity to learn from Aboriginal cultures and make a meaningful contribution to the safety and wellbeing of Aboriginal children. As social workers, we must understand that our failure to engage in an internal process of reconciliation has immobilized our strength and efficacy.

It is not enough to issue a statement on Aboriginal peoples from time to time or tinker with services if what social workers really want is justice, respect, and equality for Aboriginal children and young people. We must courageously redefine the profession using reconciliation processes and then move outwards to expand the movement into society. In 2005, over 200 Aboriginal and non-Aboriginal experts in child welfare came together to develop a process for reconciliation in child welfare and five principles to guide the process known as *Reconciliation in Child Welfare: Touchstones of Hope for Indigenous children, youth and families* (Blackstock et. al., 2006). The reconciliation process is described as having four phases: truth-telling, acknowledging, restoring, and relating and having five principles to guide the process: self-determination, holistic approach, structural interventions, culture and language, and non-discrimination. The touchstone principles are constitutional in nature in that they are intended to be interpreted by both Aboriginal peoples and social workers within the context of the unique culture and context of different Aboriginal groups. To be effective, entire systems of child welfare need to engage in the process and embed the principles in all aspects of the work. To date, a number of First Nations and provincial/state child welfare authorities in the USA and Canada have begun implementing the Touchstones of Hope framework but social work more broadly has done little to embed the process in its own work.

Conclusion

So although there has been some marginal progress, the lived experience of Aboriginal children and youth in Canada continues to be predominated by social exclusion, discrimination, and oppression. The significant body of evidence regarding the disproportionate risk faced by Aboriginal children has been inadequate to motivate the actions needed to move them out of the categories of marginalized, at risk, and vulnerable. Nor has it promoted substantial internal reflection within social work or other helping professions on what our role has been in perpetrating the harm and our concordant responsibility to understand and reconcile the harm. There is a need to affirm and support traditional ways of helping that have sustained Aboriginal communities for generations.

I look forward to a time when talking about justice for Aboriginal people is no longer an unusual or courageous conversation but is instead one that is encouraged and recognized by all Canadians as being important and necessary to affirm our national values of freedom, democracy, justice, and equality. A time when the conversation of reconciliation is just as likely to be initiated by non-Aboriginal people as by Aboriginal people themselves. It is only when we, as Canadians, share what Michael Walzer (1983) described as “collective consciousness.” In creating common understanding of culture, history, and

language, through conversation and political action, a veracious challenge to inconsistencies in our professional social work values and concepts of justice becomes possible ensuring that democracy, freedom, and equality become the real experience of every Canadian – not just a privileged few standing on one side of a one way mirror of justice (Blackstock, 2003).

To get there we must collectively make loud the legislation, values, regulations, systems, and actions that perpetuate colonization and its concordant impacts on Aboriginal children and their families, including those harmful and colonial philosophies and practices that are embedded in social work itself. It means understanding the harm from those who experienced it, it means setting aside the instinct to rationalize it or to turn away from it because it is too difficult to hear – or we feel blamed. It means having conversations about some of the basic values and beliefs that shape our concepts of what social work is. It means working with, versus working for, Aboriginal peoples. It means understanding that good intentions and conviction are not enough. It is about what we do in our actions that is most important. It is about embedding the reconciliation process set out in the Touchstones of Hope document throughout the social work profession.

Most of all it means not standing still – or moving just a little – it means social work takes the long journey of reconciliation. And as we walk and grow tired of the journey let the images of children like Jordan River Anderson flash across our consciousness and urge us firmly forward.

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