IN WHAT WAYS CAN INDIGENOUS CARE PROVIDERS, BOTH RELATIONAL AND NON-RELATIONAL BE ADEQUATLY SUPPORTED WHEN CARING FOR CHILDREN IN THE BRITISH COLUMBIA CHILD WELFARE SYSTEM?

by

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Acronyms and Definitions

Child, Family, and Community Services Act: CFCSA.

Caregivers: Relational caregivers.

Foster Parents: Non-relational caregivers.

In care placement: Children who are in temporary care of the province and placed with foster parents.

Out of care placement: Children who are in temporary care of the province and placed with caregivers.

British Columbia: BC.

Delegated Aboriginal Agency: DAA.

Ministry of Children and Family Development: MCFD.

Resource Social Worker: RSW.

Guardianship Social Worker: GSW.

Complex Care Intervention: CCI.

Support Service Agreement: SSA

Adverse Childhood Experiences: ACEs

Abstract

It is challenging in British Columbia to recruit and retain Indigenous caregivers and foster parents. The over representation of Indigenous children in care is overwhelming, as is the under representation of Indigenous caregivers. Issues associated with recruiting and retaining Indigenous caregivers are numerous. In part due to historical trauma of colonization, along with other multiple systemic issues, such as oppressive legislation and polices that resulted in poverty, homelessness and lack of professional support. This paper will explore how social services can acquire and retain more Indigenous caregivers. An analysis of the literature will be used to evaluate information and reflect an in-depth review, which will be explored with both feminist and Indigenous theories. An anti-oppressive and culturally competent framework was valuable for assessing social issues and systemic inequities of potential Indigenous caregivers. This in turn provides professionals with a better understanding as how to recruit and retain Indigenous caregivers and foster parents, by enhancing understanding of the complexities that are impactful to Indigenous peoples.

Keywords: [Indigenous, Caregivers, Social Worker, Child Welfare, Foster Care]

Table of Contents

I. Introduction

This paper will focus on understanding what relational and non-relational Indigenous caregivers and foster parents require to care for children successfully. A relational caregiver is a family or extended family member who provides the day to day care for a child, and she or he are named the temporary guardian of the child in provincial court, and this is referred to as an out of care (OOC) agreement (Child, Family, and Community Services Act [CFCSA], 1986). A non-relational care provider is someone who is willing to temporarily care for a child in place of a parent and provide the day to day care of the child, such as a foster parent. Foster parents ensure care for the child is maintained, but do not hold legal guardianship of the child, whereas a relational caregiver, holds temporary guardianship and can make the same guardianship decisions as a parent (CFCSA, 1986).

The history of Indigenous people in Canada will be explored as it is a component of why there are not more Indigenous caregivers and foster parents. Equally important will be the analysis of the research on systemic barriers for Indigenous caregivers, such as colonization, poverty, trauma and the effect it has on Indigenous women, and care providers relationships with social workers. An in-depth analysis of the literature was used for recommending more culturally competent supports and services that aid in recruitment and retention efforts. This analysis will bring a better understanding of what Indigenous caregivers and foster parents require to successfully care for Indigenous children. The focus of this paper is Indigenous caregivers and foster parents, but it is important to note that due to a disparage of information on the topic the literature analyzed stretched out to all caregivers and foster parents.

The study will explore recruitment and retention efforts which child protection agencies need to take when encouraging Indigenous people to apply to become caregivers, or foster parents for Indigenous children in care. The information was analyzed using liberal and social feminist theories, and an Indigenous two-eyed seeing approach, which is necessary due to feminist theories being western social constructs (Baskin, 2016). Due to intergenerational trauma being a factor for Indigenous peoples,

an anti-oppressive and culturally competent framework was used to assess the literature. This framework was beneficial as it is holistic and connects the behaviors and experiences of those interacting within larger government systems (Baskin, 2016). Ultimately enabling social workers to further see the complexities and intersectionality of the issues Indigenous caregivers and foster parents face, due to colonialism, racism, and sexism.

The analysis of the literature was important to gain a better understanding of how to improve the allocation of supports for Indigenous caregivers and foster parents, with a strong focus on colonization, poverty, trauma, and relationships. When assessing the best way to support Indigenous care providers it is important to understand colonization and assimilation of Indigenous peoples as a substantial issue. The literature suggested that it is of great importance to analyze poverty at macro, micro and mezzo levels (Ibrahim & Burczycka, 2016). Also, reflected in this analysis is how Indigenous women have suffered generations of systemic abuse that has left deep scars, and this is of great concern as women are the societal primary care providers of children in most cultures (Baskin, 2016).

The cycles of historical trauma, intergenerational trauma, and racism must stop, as to provide a future for healthy communities. The relationship between Indigenous care providers and social workers can be challenging, as there is an ongoing power imbalance within the relationship. The literature indicated that social workers have an obligation and responsibility, to build alliance at personal and formal levels with Indigenous care providers (Brown & Campbell, 2007). Listening to the care provider's needs, wants, and ideas is imperative for success.

II. Thematic Literature Review

History

Canada has a black mark on its history, due to the deplorable treatment of Indigenous peoples (Ivo, 2017). Prior to European settler contact, Indigenous communities in BC were functional and cohesive groups. Upon first contact the introduction of disease wiped out many Indigenous populations

and communities. Later Indigenous children were forced into attending residential schools and communities were lost without their children (Carter, 2003). The results of mandatory residential school attendance, and the loss of children in Indigenous communities increased the prevalence of unhealthy coping mechanism such as, alcohol and drug use by many community members (Coyhis & White, 2006).

Colonization created and atmosphere of disfunction within Indigenous communities and increased domestic violence. In 1876, the Indian Act was introduced which perpetuated further racism and stigmatization of Indigenous people (Carter, 2003). Later these policies developed into practices and established organizations and policies that were based on western values and thus embedded systemic racism and oppression into the practices of government and its officials such as, the reserve classification, the 60's scoop, and current child protection models of practice in BC. These continued attempts at colonization destroyed children, families and their communities even further (Coyhis & White, 2006).

Due to the Indian Act (1876), for those who occupied land with agricultural potential, there was conflict, economic and environmental disruption, and policies were deployed to ensure the dispersal or removal of Indigenous peoples from their lands. After being eradicated from their lands they were given smalls spaces of earth to dwell on. These properties were small, crowded, and would soon become areas of addiction, depression, and disfunction (Carter, 2003).

Indigenous communities were traditionally matrilineal, and the new patriarchal and westernized processes dismantled Indigenous ways of empowering women and children. Prior to settler contact and the Indian Act (1876) women were not only the leaders of their communities, but they also owned their own land (Baskin, 2016). The matrilineal way of life empowered women and supported equality with men. This new colonized patriarchal way life was supported by oppressive federal government legislation, and policies which left Indigenous women exceedingly vulnerable to oppression,

marginalization, and abuse. It is important to note, that the dependency of Indigenous peoples on the system effected men, but Indigenous women even more so, due to sexism (Fiske, 1996).

The introduction and enforcement of western ways, such as enfranchisement, was harmful to women and their children, because they would be forced to leave their communities (Carter, 2003). If an Indigenous woman married a non-Indigenous man, she would lose her status. To have Indian status means you are Indigenous, and you are registered with the federal government of Canada, once lost women were often was forced leave their community. Enfranchisement was enforced by a section of the Indian Act (1876) (Baskin, 2016).

Due to the Indian Act (1876), and enfranchisement, Indigenous women were no longer as valuable and respected members of their communities. Colonization destroyed the traditional matrilineal way of life and created further oppression of women and children (Fiske, 1996). In 1985, there was an amendment to the Indian Act (1876) that ceased enfranchisement, but the devastation and destruction to Indigenous women and their communities was already immense. The Indian Act (1876) disrespected and devalued Indigenous women in numerous ways. For example, if an Indigenous woman's husband passed away before her, then the land would go to their children and not to her, also women could not vote in elections at federal, provincial, and community levels (Fiske, 1996).

Due to the enactment of historical genocide Indigenous communities are now in the process of rebuilding the losses of land, cultures, languages and family connections (Alfred & Corntassel, 2005). Indigenous women are still not at the forefront of their communities and until they are, women will be underrepresented in important discussions of what is needed to move forward in healing their communities. Women have valuable input, and it is important that they are heard and acknowledged, not only within their communities, but through education and employment opportunities. It has been stated by Indigenous researchers, that it will take seven generations before Indigenous communities reach a point of health and wellness, due to the devastating and lasting effects of colonialism (Coyhis & White, 2006).

Furthermore, the definitions Indigenous, Aboriginal, First Nations, Metis, and Inuit was a construct created by the Canadian government under the Indian Act legislation (Kovach, 2010). These are generic names used to label many unique and diverse populations of people, which is in itself oppressive and divides rather than strengthens Indigenous communities. In addressing these oppressive concerns social workers should be referring to Indigenous people and communities by their correct names they choose for themselves. This will assist in relationship building and decolonization (Baines, 2017). Due to colonialism and cultural assimilation in Canada, Indigenous populations had their unique cultures stripped down to the core, and communities are rebuilding what was lost. Indigenous communities are at the forefront of healing their own people and have taken on the challenging task of rebuilding their cultural identities (Baskin, 2016).

The research literature recognizes that assimilation and colonization efforts were largely futile, although there was certainly considerable damage done. Indigenous people have survived and will continue to thrive with support and appreciation, as they are strong, interconnected, and ceremonial cultures, whom are strengthened by community and not by separation (Baskin, 2016). They will regain what was lost and rebuild themselves to be stronger and more empowered in the future (Coyhis & White, 2006). This necessitates a powerful focus on healing Indigenous children, families, and communities. In the realm of child welfare, healing will need to be focused on preventative supports and services for families, and this includes recruitment and retention of Indigenous caregivers and foster parents (Brown, Ivanova, Mehta, Skrodzki, & Rodgers, 2014).

Statistics

According to Statistics Canada (2016), BC is home to approximately 155,020 Indigenous people. Indigenous children make up 45 percent of the Indigenous people in BC who are under 25 years of age. A significant 63 percent of children in foster care in BC are Indigenous, which is an extraordinarily high number (Statistics Canada, 2016). There is an over representation of Indigenous children in care, due to western ideals and standards of how children should be raised not aligning with

Indigenous ways of knowing and being. Also, residential schools diminished the ability for generations of Indigenous parents to raise their children, due to the trauma residential school survivors endured that left them and their communities devastated by oppression and abuse. These experiences are some of the underlying factors that led to the high rates of addiction, neglect, and domestic violence in Indigenous communities (Baskin, 2016).

In 2011, in Canada 9.7 percent of Indigenous children were living in skip-generation families, and 4.2 percent Indigenous children were living with other relatives (Statistics Canada, 2016). A skip-generation family consists of grandparents and their grandchildren, but do not include the children's parents. 13.9 percent of Indigenous children who were living out of the family home were living with family in Canada, and 12.6 percent of Indigenous children were cared for in foster placements (Statistics Canada, 2016).

This means that 27.8 percent of children were being cared for by family or extended family, and 12.6 percent were in foster care. These numbers are positive and indicates that more is being done to keep Indigenous children with their families, extended families, and communities. It is important for the state to financially support family placements, as it is may assist in building strong Indigenous children for the future. Research shows that Indigenous children have better outcomes when raised within their own families and communities (Truth and Reconciliation Commission of Canada [TRC], 2015).

There are approximately 4000 foster and group homes in BC, although no statistics could be located on how many of those homes are run by Indigenous caregivers or foster parents (Federation of Aboriginal Foster Parents, 2019). The difficulty in accessing information on the number of Indigenous care providers in BC is another gap in service to Indigenous children who are in care. It is important for this information to be readily available for research and a critical review. Children who are in care of the government of BC are overseen under the legislation of the CFCSA (1986). The age range of children, who are under the jurisdiction of this law are birth to nineteen years of age and many of these

children are Indigenous (CFCSA, 1986). The impacts of historical and present traumas inflicted on Indigenous people highlights a more pronounced need that Indigenous children be supported differently than other children in foster care.

In light of the historical legacy of colonization and assimilation, special attention needs to be given to address Indigenous children's unique heritage and cultural needs for them and their placements (Saylor & Blackstock, 2005). It is important to have more Indigenous caregivers and foster parents, due to the over representation of Indigenous children in the BC child welfare system. This will support Indigenous children with maintaining connections to Indigenous cultures, languages, ceremonies, and traditions (Brown, Gerritts, Ivanova, Mehta, & Skrodzki, 2012).

This is an exceptional time to be a social worker in Canada, because as a nation we are commencing a reconciliation process with our Indigenous peoples, and to accomplish this Indigenous peoples need to be in control of their own cultural identities. The Truth and Reconciliation Commission (TRC) calls to action request placing Indigenous children with their communities and cultures so they remain connected to their identities while in care, if they cannot safely remain in their homes (TRC, 2015).

The difference of numbers between Indigenous to non-Indigenous children in foster care in BC is staggering. Four percent of Indigenous children ages fourteen and under are in care of the province, and only 0.3 percent of non-Indigenous children are reported to be in care (Statistics Canada, 2015). Indigenous children coming into care is more prevalent with children who live off reserve.

As mentioned previously, status and on and off reserve living is impacted by government legislation, policy, and practices and has variable outcomes for Indigenous peoples. This may be because the Ministry of Children and Family Development (MCFD) remove children more often the Delegated Aboriginal Agencies (DAA). While both organization practice under the same legislation, and the policy and practice guidelines are similar, the practice of DAA's is seen as more culturally sensitive, meaning the DAA is more likely to consider the complexities of colonialism, poverty and

trauma when working with Indigenous peoples (Aboriginal Operational and Practice Standards and Indicators, 2009).

The statistics speak to the fact that Indigenous children live in complex family systems. It is common for Indigenous children from the ages 0 to 4 live with one parent, and to also live with grandparents in the same home. This is different than a skip-generation home, due to the parent living in the home. Historically, these latter types of placements have not been financially supported by MCFD or the DAA, due to legislation not allowing social workers to remove a child and place them in the same home with the parent (Kelly-Scott & Arriagada, 2016).

This practice has created many issues with identity and disconnection between children, parents, and caregivers. Recently there has been talk of changing that process and allowing, as long as it is safe, parents to remain in the home when the children are placed with family or extended family (Ministry of Children and Family Development [MCFD], 2019). This will not work for all circumstances, but in cases of their being a lack of capacity due to intellectual delays, or one parent is abusive, and the protecting parent leaving the offending parent, it would be beneficial for the child to have the parent or parents in the home. The caregiver can also support the family in the home by modeling positive parenting behaviors. In western cultures this practice could be taken as an issue, however it is immensely supportive for a single parent, especially a mother, as women battle with poverty more often than men. Therefore, to have the support of a healthy grandparent directly in the home is advantageous (Brown et al., 2012).

Many Indigenous families favour living with several generations in one home, and this is not a common western construct, so it not always respected (Baskin, 2016). It can be beneficial, as this practice creates a familial support system for the young, the working age, and the elders (Ibrahim & Burczycka, 2016). There appears to be more of an interconnected way of life for Indigenous communities than western populations. As stated by Baskin (2016), ‘community’ overrides the needs of the ‘individual’ in Indigenous communities, and both family and extended family support each other

for the greater good of the community and its members. Supporting this practice would be an asset to child welfare agencies, as the more children who can remain in healthy Indigenous homes or communities, the greater the potential for intergenerational healing (Blackstock, 2009). If grandparents, aunts, and uncles can provide safety, then Indigenous children should be placed within their families and communities more often, and that should be an ongoing goal for child welfare agencies (TRC, 2015). Social workers should concentrate on relationship building with Indigenous families, extended families, and communities to enhance support for the children in care (Aboriginal Policy and Practice Framework [APPF], 2013).

Poverty

It is of great importance to analyze poverty as a macro-level issue for Indigenous populations, and this includes potential caregivers and foster parents in relation to recruitment and retention (Brown et al., 2014). Recent Canadian research indicates that for children both on and off reserve, an astounding 35 percent of Indigenous children live in single parent homes. Comparingly only 16.1 percent of non-Indigenous children live in single parent homes (Statistics Canada, 2016).

The literature suggests that single parent homes are more often run by women and have higher levels of poverty and lower levels of education, and both elements increase the likelihood of child welfare involvement (Saylor & Blackstock, 2005). This indicates that we need to do more to establish resiliency in Indigenous communities, so they are more able to become cohesive and healthy family units. Indigenous ways are inclusive of each other, and the sense of community is much higher (Baskin, 2016).

Poverty and its limitations are not going to offer people opportunities to become adequate caregivers or foster parents, especially Indigenous women who often face racism and sexism as well (Fiske, 1996). Women, and this obviously includes Indigenous women, are more often seen as the care providers of children in single parent homes, and different approaches are required to break the cycles of historical and intergenerational trauma, poverty, abuse, and addiction to better support these mothers

and their children (Baskin, 2016). Preventative and support programs are therefore of paramount importance in addressing these issues (Ibrahim & Burczycka, 2016). Due to being impoverished Indigenous peoples are less likely to apply and become approved caregivers under the current standards and guidelines for potential caregivers. This reflects systemic oppression policy decisions that potentially leave Indigenous peoples feeling they cannot afford to care for their own family never mind other children who require support. Also, there is a deep distrust of government systems and officials (Brown et al., 2012).

When Indigenous communities both on and off reserve are thriving financially, emotionally, mentally, and physically they are naturally of better core health, and they will be better equipped to support their families and children (Brown & Campbell, 2007). They are also more likely to want to become caregivers and foster parents to support the children in their communities when they are healthy and feeling supported. The literature identified that caregivers and foster parents need to feel valued and that they are making a difference in the lives of children to continue providing care (Brown & Campbell, 2007).

In 2019, caregivers and foster parents, for MCFD and the DAA, both received increases in their monthly payments. The payment increase was to assist out of care options (OOCs) with being financially brought up to closer to par with foster parents, but foster parents still receive more financial support than OOC caregivers (Resource Work Policies, 2019). This financial support increase is especially important to the OOC caregivers, because these types of care providers are providing the same level of support, as foster parents, but earn less pay (Brown & Campbell, 2007).

Financial equality is required, as both sets of care providers support children who are struggling with grief and loss, mental health, and attachment traumas. Before the increases OOC caregivers were doing it for less pay because they are family, and it the parent's responsibility first, then the family, and then the state (CFCSA, 1986). Therefore, it is considered the families obligation to step in, but in order to recruit more family placements this view is changing, and there are less barriers for families who

require financial support to take in children that are related to them directly or indirectly. This practice has changed and is supported by the payment increases to family placements, and this will support efforts to create less of a discrepancy between Indigenous and non-Indigenous caregivers and foster parents. This may not be enough to recruit and retain Indigenous caregivers and foster parents, and more supports to heal trauma are needed and a focus on relationship building is important, before recruitment can be completely successful (Brown, Skrodzki, Gerritts, Ivanova, & Mehta, 2013).

It would be more impactful if increased financial aid was allocated to build up Indigenous caregivers and foster parents, to assist them with freedom from poverty. Due to the complex unequal social economical standards that keep Indigenous populations marginalized, they require extra financial assistance to increase the likelihood they will want to become caregivers or foster parents. The recent increases to caregiver and foster parent payments are beneficial, but the rate of poverty is much greater for Indigenous populations, and continuing to re-assess need, even yearly, may be beneficial in recruiting and retaining caregivers and foster parents (Brown & Campbell, 2007).

To move forward and better strengthen Indigenous communities there will need to be continued uncomfortableness between and Indigenous and western cultures. The uncomfortableness is caused by western cultures having to learn and acknowledge the history of Indigenous people. Therefore, making the necessary changes to negative attitudes and beliefs, about Indigenous people and their cultures.

Indigenous people are rightfully angry and frustrated as to how they have been treated, and so it can be challenging reinforce change for an Indigenous person, as someone from western cultures, as trust needs to be built into the relationships between Indigenous and western cultures, due to the negative history (Baskin, 2016). Social workers who work with Indigenous caregivers and foster parents have to be willing to be in those uncomfortable moments to be successful with building and maintaining relationships (Brown, Anderson, & Rodgers, 2015).

Brown (2007), discusses the impact that colonialism and intergenerational trauma have had on Indigenous populations and created poverty that is challenging to overcome. Historically, if it is known

to service agencies that Indigenous people are struggling with a lack of finances then they have been subjected to decades of systemic racism. Issues of neglect and other forms of abuse due to the experiences of poverty may result in children removed from their care (Brown et al., 2015). This practice does not encourage Indigenous people to seek out financial support to assist them as parents or care providers.

The legislation of the CFCSA (1986), also supports social workers with setting up agreements with caregivers to provide more financial aid under what is referred to as a support services agreement (SSA). This includes assisting families and caregivers with items they may need such as, winter tires or a new washing machine. These are just a few examples that can be purchased to help families and caregivers monetarily (CFCSA, 2019). This again is to provide extra funding to caregivers who may not have the financial means to support another person in their home and to make it more feasible for caregivers to take children into their homes, without fear of further financial hardship (Brown & Campbell, 2007). Also, daycare top up can be applied for with what is called a 2044 agreement, and this assists caregivers with not paying the additional cost that childcare subsidy does not pay (CFCSA, 2019).

Another barrier when recruiting Indigenous caregivers or foster parents is that they themselves may have child protection or a criminal history. This is particularly true for Indigenous populations, due to the over representation of this population in the child welfare and judicial systems (Baines, 2017). When social workers are considering placement with family or extended family in Indigenous communities this should not be an automatic rejection due to historical protection or criminal concerns (Baskin, 2016).

It would be best practice if the safety assessment, of care providers who have protection or criminal histories was made on a case by case basis with professionals, family and community involved in making the decision together, and not one group making the decision for everyone involved (Roger, Cummings, and Leschied, 2006). It is supportive and productive when government agencies and

Indigenous communities work together when making decisions for Indigenous children and families (APPF, 2013). Child protection agencies will need to take a measured look at the systemic issues and the impact colonization has had on Indigenous people, when making decisions regarding placement of children with caregivers who have child protection or criminal histories (Baskin, 2016).

Impact of Colonialization

Understanding the themes that emerged from the available literature regarding Indigenous women, and what they endured historically and presently, is essential in supporting them as caregivers and foster parents (Blackstock, 2009). In seeking to address the impacts of colonialism, sensitivity needs to be given to their complex needs due to years of ongoing racism and sexism that have created further barriers for Indigenous women. Increased education is paramount as this knowledge may benefit social workers as to what efforts need to be created and followed when standing beside Indigenous women and the children they care for (Baskin, 2016).

This in turn would hopefully lead to improved health and wellness for Indigenous women and children and empower Indigenous women to stand strong together and keep their children in their care, and to provide care for other children within their communities as well. Due to colonization and cultural assimilation, Indigenous women as primary caregivers of children need different supports than women of other minorities to be successful (Saylor & Blackstock, 2005). For, example financial support needs to be greater, and education on parenting children with attachment disruptions would be beneficial. Also, advocating for Indigenous women to get proper health care to increase their physical, mental, and emotional wellbeing is another much needed support (Baskin, 2016).

Women are most often the primary caregivers in families, and better supports are needed to ensure they are able to be independent caregivers or foster parents when wanted or necessary (Fiske, 1996). If we as social workers want to encourage more Indigenous women into becoming caregivers or foster parents, then we need to bring attention to the lack of financial support for Indigenous women (Brown et al., 2013). This can increase capacity to provide basic human needs to function in a healthy

way. It is important to note that it is understood that Indigenous homes have higher rates of poverty, and this was reported for both women and men, but Indigenous women face a greater disparage of income levels compared to their Indigenous male and non-Indigenous female counterparts (Fiske, 1996).

Federal, provincial, and community levels of government must work together with Indigenous populations and create legislation to increase health and wellbeing back to their communities, and this begins with empowering Indigenous women. When Indigenous women receive assistance with all facets of health, and not just financial aid, but also more employment and educational opportunities, plus access to support services for women's mental wellness this will contribute to women reclaiming their power back (Baines 2017). When Indigenous women are living in their power it is healing to themselves and their communities. This is may be because it takes women and their communities back to their historical roots of their traditional matrilineal ways of being, because before contact women were respected leaders in their communities for their wisdom, values, and strength (Fiske, 1996).

Professionals, such as police, medical, and crown counsel are getting further involved in understanding the history of Indigenous peoples. Learning and training will be beneficial at macro levels, so that positive changes are more likely at all levels of government (Baines, 2017). Living without violence, addictions, and mental health issues is key for children's success as adults. This centers around not being extensively traumatized due to historical and generational trauma (Centers for Disease Control and Prevention [CDC], 2019).

Empowering Indigenous women may begin to heal a broken culture, and strengthen communities, as it is strongly connected to life before contact. This way of life would benefit many cultures, as it assists the child bearers with attaining security and safety for themselves and their children. If a woman owns her housing and her land then she cannot be made to leave her house, land or community (Fiske, 1996). Having explored some of the aspects of colonialism and how oppression

and discrimination continues to impact many Indigenous peoples and communities, I am now going to examine the potential outcomes of the systemic issues mentioned above on individual functioning.

Adverse Childhood Experiences Study (ACES)

Statistics show if children face several adverse childhood experiences (ACEs) they are at higher risk for poor health, addictions, higher rates of incarceration and repeating the pattern of dysfunction as adults. Placement breakdowns are another issue for children, youth in care, especially if they are identified as having a high number of adverse childhood experiences, which is in direct correlation with the trauma they have suffered in care and out of care. Caregivers who are family or extended family may have a high number of ACEs, especially Indigenous caregivers due to historical and intergenerational traumas (Felitti et al., 1998).Care providers with a high number of ACEs also increase the chance of placement breakdowns Social workers need to assess and support trauma reactions and triggers in Indigenous caregivers and foster parents, due to the historical and intergenerational trauma.

ACEs speaks to the impact on the future physical and mental health of children who have faced various forms of maltreatment in childhood. The ACEs assessed 17,000 adults who experienced various trauma's through childhood (Felitti et al., 1998). ACEs are events in a child's environment that damage their sense of physical and mental wellbeing (CDC, 2019).

ACEs can occur by living with a person who suffers with mental health issues, addictions, exposure to violence, sexual abuse, physical abuse, neglect, and parental loss to incarceration or death (Felitti et al., 1998). If a child has four or more ACEs, then they are at considerable risk for significant health problems later in life (CDC, 2019). A high number of ACEs, seven or more, result in health problems such as heart disease, diabetes, stroke, cancers and suicide (Felitti et al., 1998). ACEs also increase the probably of incarceration, addictions, domestic violence, and significant mental wellness issues. "Sixty percent of middle-class Americans are permanently scarred by ten adverse childhood experiences or more, and then we need to consider American Indigenous people because they have the highest incidences of childhood trauma" (Felitti et al., 1998, p.1).

ACEs indicates that those who are maltreated as children face multi-faceted heath issues for the reminder of their lives (Felitti et al., 1998). Felitti completed a study that assessed issues that were occurring for American Indians on reserves and found that ACEs were more prominent for individuals on reserve than those in urban centers, but those who lived on reserve showed higher levels of abuse and dysfunction, and therefore show and increase in ACEs (CDC, 2019).

Children in care who have a high number of ACE's have greater risk of placement breakdowns, this is in part due to caregivers and foster parents not being educated and trained on how to manage and support behaviors in children who are in care who are struggling with ACE's and attachment disruptions (Felitti et al., 1998). Children who come into the care of the DAA or MCFD have endured significant levels of maltreatment and exhibit challenging behaviors, and they often have a multitude of psychological diagnosis, therefore they need a trauma informed approach to support the reduction of challenging behaviors (Geddes, 2013).

Thus far, I have explored the structural impacts of colonisation on Indigenous peoples through a historical account of how legislation and subsequence policy decision-making has marginalized many Indigenous peoples and communities in Canada. I have also identified through the use of ACEs the potential negative impacts of these systemic issues on Indigenous individuals generally, and Indigenous women more specifically. I am now going to explore what the literature revealed about the role of professionals and professional support in terms of addressing these broad and specific issues.

Professional Relationships and Support

The research literature identifies Indigenous caregivers and foster parents could benefit from supportive social workers who have strong understanding of colonial history, social and cultural supports, poverty, inadequate housing, high rates of addiction, family violence and child welfare history (Brown et al., 2013). Resource social workers (RSW) are workers who directly support recruitment and retention of caregivers and foster parents both for the DAA and MCFD. Their role is supporting the caregiver's contracts for the allocation of payments, education and training

opportunities, and support as needed with guidance on parenting children that may be a challenge behaviorally (Brown et al., 2015).

The government considers the current policies that RSW's follow to keep children in care safe when they are placed in foster care, but the process is very intrusive for Indigenous caregivers (Brown et al., 2015). The literature indicated Indigenous care providers find western ways intrusive and dismissive of the impact's colonialism has had intergenerationally on their people, for example frequent home visits by social workers, and home studies (Baskin, 2016). Resource social workers should be transparent and inform caregivers and foster parents that they should never consider looking after the children in their home as a career, because the level of money coming into the home will always be inconsistent, both increasing and decreasing every month, as children return to their parents or communities (Resource Work Policies, 2019).

In order to recruit and retain caregivers and foster parents it must be beneficial economically, as children and youth have costly financial needs. Care providers need income coming from outside the home and inside the home (Brown et al., 2015). This means they need to have employment opportunities and the government needs to provide additional supports for the children in the home. This has limitations, as children should never be considered a source of income, but it is noted throughout the literature that it can be a financial burden and this can limit the number of caregivers and foster parents (Ivanova & Brown, 2010).

Another issue in the relationship between RSW's, caregivers, and foster parents is that people needed to be treated as experts of their cultures. For social workers, best practice is to not focus on Indigenous trauma, but Indigenous strength. A strength-based approach will ensure better outcomes for Indigenous caregivers and foster parents. Too often social workers come across as all-knowing and authoritative, and this is not the Indigenous way (Baskin, 2016).

As explained by Heron (2005), social worker's need to be able to critically reflect on their interactions with clients, and this includes RSW's and their clients, who are specifically caregivers and

foster parents. Social workers should request support from Indigenous communities, as they know their people and what the needs of their communities are, so communication is important. The role of a social worker should be to support Indigenous communities and become allies to promote change in a historically dysfunctional system that believes that only western practices are correct, and therefore, creating room for more holistic and Indigenized ways (Brown & Campbell, 2007).

As with any kind of reconciliation efforts, this is, and will continue to be an uncomfortable process. Indigenous communities do not want to work with social workers due to the history of social work being complicit in oppressive practices, and therefore it is up to the workers to build trust with those communities and members (APPF, 2013). Relationship building may be the best way to encourage Indigenous peoples to become caregivers and foster parents, as everything is dependent on building trust, and that may happen with meaningful relationship building practices, such as slowing things down, not believing you are the expert, and listening first (APPF, 2013).

The need for Indigenous caregivers is well beyond what we currently have available for Indigenous children in care (Brown et al., 2012). As stated by Brown, there are benefits to children having stable foster placements rather than other forms of care, such as group homes. This is due to the "greater likelihood of family reunification, better life outcomes and better mental health for children" when placed in loving family care homes (Brown, 2007, p.539). Non-Indigenous family caregivers have indicated their needs as better social supports, collaboration with the agency and workers, relief care and relationship with the parents (Holen, Loock, Belenger, & Vanderfaeillie, 2017).

There is little research investigating barriers encountered by Indigenous caregivers and foster parents, although there is a great deal of literature on foster parents in general (Brown et al., 2014). It is important to restate that Indigenous children compromise the largest number of children in the child welfare system (TRC, 2015) and Indigenous caregivers comprise the smallest group of foster parents (Brown et al., 2014). Therefore, it may be beneficial to consider that changes are required enable better outcomes for Indigenous children. Good relationships between resource social worker's and caregivers

are key to the successful recruitment and retention of caregivers (Rodger et al., 2006). It is understood that there are barriers concerning the recruitment of Indigenous caregivers as stated above, such as poverty, trauma and other systemic barriers, and it is important to understand the barriers and find more appropriate methods of supporting Indigenous care providers.

Another common theme at the interpersonal practice level was children's behaviors and the struggle to maintain placements for traumatized children with attachment injuries (Geddes, 2013). Care providers require breaks when parenting children with challenging behaviors and extra supports. Respite and relief are supports that the DAA and MCFD can offer care providers, and this gives the child a safe place to spend time for up to ten days a month with another foster parent or approved caregiver, allowing room for the care providers to rest and recharge (MCFD, 2019). Caregivers need to live their lives as well and cannot be expected to parent twenty-four hours a day every day. Attention to the social needs of Indigenous caregivers is paramount when trying to understand what it takes for recruitment and retention.

There is still considerable racism in the helping profession (Baskin, 2016). If an Indigenous person reaches out for help there is the assumption, by professionals such as, social workers that it is the individual who is defective and in need of support. Exploration of multiple levels of systems that are oppressing the individual need to be considered (Baines, 2017). It is my opinion, that the negative stereotypes that some professionals hold is unacceptable. As suggested by the authors, at some point we all need support and that is where a strong sense of community is paramount to supporting Indigenous populations and a less judgemental manner (LeFrancois, Menzies, & Reaume, 2013).

It is important to have caregivers and foster parents who are willing to work with the children in their care and their families. It is essential for children to maintain connection to family and extended family to have a sense of identity, cultural beliefs and practices, as well as an understanding of who their ancestors are, and how they are still connected to them as supports, especially when they are in care. This act can support their sense of self identity and connection to their culture (Blackstock, 2009).

Caregivers and foster parents provide support to children and their families while healing takes place in the family unit. It has also been reported in research that caregivers and foster parents need to know that social workers are doing everything they can to support the family to get their children back (Brown et al., 2012). Indigenous caregivers and foster parents want to feel that everything is being done by social workers to encourage parents with accessing resources to get the support they need to be holistically healthy and move towards getting their children in back in their care (Brown et al., 2012).

The current legislation and practice of child protection in BC states that when a report is made on a family, a child protection social worker must only remove the child when no other protective measures are available for keeping the child safe in the home (CFCSA, 1986). Social workers must exhaust all efforts to be creative and find measures and supports that will keep children safe in their homes (Blackstock, 2009). The government should follow this legislation up by allocating preventative measures and supports to enable children to remain in the care of their immediate families (United Nations, 2018). To better support Indigenous children, it is highly recommended that understanding by social workers of what their cultural needs are, as well as what is in their best interest. As advocates for change, social workers need to support Indigenous care providers when caring for children in the British Columbian child welfare system by questioning the system itself, and making concerns known (Blackstock, 2009).

Children deserve caregivers and foster parents who share the same or similar cultural foundations as them (TRC, 2015). Within agencies and practice it is understood that recruiting and retaining Indigenous caregivers and foster parents is challenging to achieve due to past and present issues of racism, poverty, and colonialism and the disruption to Indigenous cultures (Baskin, 2016). This has directly impacted the service and support to Indigenous children in care, as being placed with people from their own culture or similar culture is not often possible (Sherlock, 2017). A practice shift will be important, as this will enable more children to remain with their extended families and communities when they cannot safely stay with their immediate family in their homes. Knowledge and

education are key to effective positive change although the process has been slow, if not for Indigenous populations speaking up to share what they need for their children, families, and community's child protection legislation would not be where we are today.

Social workers become involved in people's lives in the most intimate ways and are responsible for ensuring that families understand what is going on in a potentially traumatizing situation. One approach to address this concern is effective relationship building and following "restorative policies and practices that support and honour Aboriginal peoples' cultural systems of caring, wellness at the community, family and individual level" (APPF, 2013, p. 2). The APPF ensures that social workers are meeting clients where they are at and the framework concentrates on relationship building and learning about different cultures from the Indigenous communities themselves, and not going into a situation with preconceived notions (APPF, 2013).

III. Theoretical and Practice Frameworks

Liberal feminism

Liberal feminism is described as a theory where women are empowered to have more choice, both personally and publicly (Remlinger, 1994). Through liberal feminism women seek to maintain equality through exploring actions, choices and the potential to have equal rights to men in all avenues, especially legal and political rights (Baines, 2017). Liberal feminism "maintains that female subordination is a result of unequal social and legal practices that deny women access to individual rights" (Remlinger, 1994, p. 1).

Through liberal feminism women have more opportunity to change policies that limit possibilities for women and create inequalities with men, and this ability can be used to influence rights and should include child welfare policies and practices (Andrews, 2019). Liberal feminism accomplishes this by ensuring women's voices are heard through activism and writings of feminist scholars, and this work supports opening up conversations about the differences between Indigenous women and western women (Baskin, 2016). This can better support changes to child welfare policies

and practices that are needed for Indigenous women by understanding how current legislation does not account for the cultural differences in parenting practices, and as a result more Indigenous children are in care (Blackstock, 2009).

Liberal feminism can assist Indigenous women by identifying the complexities that they experience differently due to colonization and the Indian Act (1876), and by gaining a deeper understanding of how unequal treatment is created and supported at larger systemic level of government through legislation, policy and procedures. Therefore, causes Indigenous women to be further disparaged and vulnerable to domestic violence, poverty, and discrimination than their western counterparts (Baskin, 2016). The work of liberal feminism is better supported by weaving several feminist frameworks together such as liberal and social feminist theories, as socialist theory focuses on the dependence of women on men, due to patriarchal forces at all levels (Remlinger, 2014).

Socialist feminism

In addition, a socialist feminist approach explains how "capitalism has separated the domestic from the public work sphere based on the capital value of each domain" (Remlinger, 1994, p. 1). This view understands how underappreciated women are in their roles as care providers. Capitalism is valued as the cornerstone of globalization (Lightman and Lightman, 2017). Capitalism encourages patriarchy and oppression through the exploitation of women through media, stereotypes, and roles as caregivers, and further depresses the value of childcare, and work within the home (Remlinger, 1994). Women who are working within the home face not only oppression from financial freedom, but women can also be challenged with oppressive behavior from her partner due to the power imbalance capitalism and patriarchy create within the home (Remlinger, 1994).

Socialist feminism can address concerns for all women, as social feminism brings to light that women are often expected to be caregivers for children and take care of the home. This can lead to added inequality, as caring for children and the home is often unpaid work, and not seen in society as valuable like paid work outside the home (Remlinger, 2014). Indigenous women are further marginalized as

they are disparaged by lack of employment and educational opportunities outside of the home. Often the inequity is greater for Indigenous women than western women who work within the home as they are more likely to have less educational and work opportunities outside of the home (Baskin, 2016). Culture plays a role in socialist feminism because culture is the heart of empowerment, and for Indigenous populations to be empowered they need to support each other as a community supports, as their understanding is they are powerful in numbers when spirituality connected together in ceremony and ritual on the land (Baskin, 2016).

Indigenous Theory and Two-eyed Seeing Approach

An Indigenous lens is also necessary in the analysis of the literature for this paper, ensuring that Indigenous views remain central to the outcomes, and addresses longstanding harms to Indigenous peoples that have resulted from colonial academic and research practice. An important aspect that was used in the analysis of the literature was a two-eyed seeing approach (Kovach, 2010). Western ways are unavoidable, but there are models which support caregivers and foster parents with more cultural competence, and one way is applying a two-eyed seeing approach. A two-eyed seeing approach assesses the information or the problem presented with both eyes together in order to ensure that both the western ways and the Indigenous ways are working together, and supportive of each other. A two-eyed seeing lens was used throughout this paper by analyzing the literature written by researchers who focus on Indigenous social justice issues. Some of the researchers work utilized for this two-eyed seeing approach were Brown (2007), Blackstock (2009), and Baskin (2016) who are all currently and actively seeking knowledge and understanding as to how to better support Indigenous care providers and Indigenous communities.

This method is paramount for conducting holistic and safe analysis of research, legislation, policy, or issues at micro and mezzo levels (Kovach, 2010). One eye analyzes the information with a western lens, and the other eye with an Indigenous lens. A two-eyed seeing approach is now the corner stone to my practice, as this theory when applied to practice supports Indigenous, feminist, and western

ways of practice (Baskin, 2016). When faced with a dilemma in the field of child welfare, workers can use a two-eyed seeing approach to support their practice in a culturally competent way, by gaining a richer understanding of the particular Indigenous ways and cultures of the local Indigenous people they serve (Baskin, 2016). This will support more Indigenous caregivers and foster parents with receiving culturally competent support from their social worker, and not just support through a western lens.

This lens supports more cultural competence by looking at Indigenous ways as strengths, and this can lead to further anti-oppressive practice which will support Indigenous caregivers and foster parents having their needs met (Baskin, 2016). It may be beneficial for those who create and update policy to be educated on the benefits of a two-eyed seeing lens, as there is potential to create less oppressive policies for Indigenous peoples. As reflected in the research, a two-eyed seeing is trauma informed as it builds on holistic and spiritual methods of knowing and understanding what colonization has done to Indigenous peoples (Wilson, Pence, & Conradi, 2013).

Anti-Oppressive and Culturally Competent Framework.

When assessing the literature, an anti-oppressive and culturally competent framework was chosen. Oppression may be a substantial contributing factor in the lack of Indigenous caregivers and foster parents. Oppression is also seen by the over representation of Indigenous children in the foster care system, due to the lasting effects of colonialism, intergenerational trauma, and poverty (Blackstock, 2009). Western culture is still thought to be correct in its ideas, but by using an anti-oppressive and culturally competent framework, a shift in practice could be supported (Carter, 2003).

An anti-oppressive social worker ensures that clients are included in the descion making that impacts their lives (Blackstock, 2009). It can be challenging for anti-oppressive social workers, as there is an ongoing power imbalance within the client-helper relationship. The anti-oppressive social worker understands that the sharing of power begins with relationship building to create positive partnerships with Indigenous peoples, which will lead to more trust between the anti-oppressive social worker and may lead to stronger alliances at personal and formal levels (Baines, 2017). Listening to caregivers and

foster parent's needs, wants, and ideas about the children and their families is imperative for success, as they are the twenty-four hour a day front line worker's (Baskin, 2016).

A culturally competent worker practices critical reflexivity and seeks to identify the negative assumptions and assessments he or she may have. This is supported by the anti-oppressive culturally competent framework, because the social worker understands to complexities of the history and current systemic implications for Indigenous peoples (Baines, 2017). Helpers who are able to decolonize where biases stem from, and move passed them, will be more effective when supporting Indigenous families, caregivers, and foster parents (Brown et al., 2014). It is imperative that social workers look at the larger system that surrounds the individual or family that is needing support, because in order to identify what is affecting the individual the worker needs to assess the bigger picture of how to break the cycles of poverty, and inequity. Relationship building is essential to providing culturally competent support and understanding what is truly going on for people on a larger systemic scale of oppression (Baskin, 2016).

In culturally safe practice it's important to identify that "white ways" are not all encompassing and the only way of being, and to consider how harmful those ways have been for Indigenous people for decades and to move beyond and look at a more Indigenous model of support and practice (APPF, 2013). Additionally, when working with Indigenous care providers in a culturally safe way this practice may create a culture that is more empowering and understanding (Baskin, 2016). This may be accomplished by recognizing that Indigenous caregivers and foster parents' have strong abilities to understand his or her needs when facing adversity, which are important aspects of the strength's perspective to helping (Brown et al., 2014). Indigenous care providers do not need to be told what they need to do to fit a white norm (Brown et al., 2013). What may be beneficial is to give Indigenous care providers is for recognition by social workers that it is culturally safe practice to make space to Indigenize their methods of fighting oppression and parent their way.

When looking through liberal and social feminist lenses it is important to recognize they are both western constructs, although they have both moved all women ahead, they fail to recognize the deep systemic issues that Indigenous women face, especially those who are not living in urban centers (Remlinger, 1994). An Indigenous lens with a two-eyed seeing approach is paramount to supporting Indigenous women as well as men who are facing systemic oppression, as knowledge is understood in both the Indigenous and western ways. What may be seen as oppressive, due to actually being a western construct through one eye, may be dismantled with an Indigenous perspective that is seen through the other eye (Baskin, 2016). Therefore, providing some balance and equality to both perspectives, because it is not looked and through just a western lens. A discussion regarding theories and empowering practice is now complemented with a review of ethical considerations.

Ethics

The Aboriginal Healing Foundation *Ethical Guidelines* (2000) provides guidance to social workers who are working with Indigenous caregivers and support the helper relationship by advocating for a relationship that is healthy and maintains equality. Equality needs to be built into the relationship, because it makes space for caregivers and foster parents to control the outcome of the working relationship they have with social workers. Indigenous caregivers and foster parents can be better supported by a circle and team approach (APPF, 2013).

The circle begins with introductions of self, and family, prayer, and food. A circle encourages cultural competence as all people involved are made to feel welcome, heard, and respected. Whomever, the family identifies as a community support system attends a team circle. The process is meant to honour the people at the table, and is often used when supporting Indigenous care providers, as it assists with opening lines of communication (APPF, 2013). In the literature reviewed for this paper the research process was not indicated as consistently as it could be. Therefore, it leads one to wonder about the rapport building, consultation with elders and community. This is an ethical implication of

the current literature that seems to ignore how process in Indigenous communities is essential in achieving ethical and socially just outcomes (Kovach, 2010).

Social justice is a creation of equality and equal opportunities in the social order of the world (Lightman & Lightman, 2017). Research and researchers can promote social justice by being aware of personal beliefs and biases and taking appropriate action in communities to support equality for all individuals within their written work (Lightman & Lightman, 2017). The Canadian College of Social Workers Act (CASW) (1970), describes social workers in relation to social justice as advocates for marginalized populations, who assist with the equal distribution of support services. Also, they understand the complexities of being vulnerable and treat those populations fairly, thus speaking up when a situation is oppressive or unethical.

Child welfare social workers take an oath to uphold professional ethics and accountability and obviously this is true of child protection social worker as a piece of their onboarding documentation with the government (MCFD, 2019). Ethically there is a professional obligation to see that oppressive practices stop and are counteracted by empowering practices, training, and advanced education (Canadian College of Social Workers, 1970). This historically has not been upheld, by racism and continued colonialism (Baines, 2017).

IV. Analysis

The aim of this research was to obtain a better understanding of what is needed to recruit and retain Indigenous caregivers and foster parents. When applying the theoretical frameworks of liberal and social feminist theories, two-eyed seeing, and an anti-oppressive practice and culturally competent lens to the literature, I identified the following themes for analysis: Colonization, Poverty, and Professional Relationships and Support. The themes all intersect with historical and intergenerational trauma that needs to be healed. However, to assist the reader once I have applied the theories to the literature, I will explore the structural effects of colonialization and the oppressive sub theme of

poverty, both under separate headings. I will then explore implications for social work practice using anti-oppressive and culturally competent practice lenses.

Application of Theory and Practice Frameworks

Liberal and social feminism were effective theories to use in the analysis of the information in the literature to understand issues that Indigenous women have ongoing struggles with. These feminist perspectives were important in establishing and exploring the issues that Indigenous women have been subjected to in relation to colonialism and patriarchy, such as loss of their rights to land, and the loss of being matrilineal leaders of their communities (Fiske, 1996). A feminist lens is highly relevant, because women are the primary caregivers for children and compromise the majority of foster parents for children in care (Brown et al., 2014).

These two empowering feminist views are important when looking at issues that affect Indigenous caregivers and foster parents as liberal feminism protects liberty and focuses on women having rights that are inclusive to all women (Andrews, 2019). Liberal feminism may support this, as the they argue that all women are just as intellectually able as men to become educated and are able to successfully be financially independent as men if given the same opportunity. This can also be true for Indigenous women, as if they are not under the constraints of systemic and community racism and colonialism and given opportunities supported by their cultures and ways of life, then they too are able to thrive (Fiske, 1996). Liberal feminists believe in equality in opportunity for all women (Andrews, 2019).

Socialist feminism focuses on financially and culturally empowering women to be independent from men and social constructs of patriarchal power. It argues that women, need special considerations given them due to historical and present-day oppression and sexism (Remlinger, 1994). This can support Indigenous women and care providers but expressing concern over the difference in opportunities both with financial and excepting cultural practices and ceremonies that strengthen Indigenous peoples and their connections to each other (Brown & Campbell, 2007). Therefore,

empowering Indigenous peoples through the community level, by encouraging cultural understanding at the larger systemic level (Baines, 2017).

It is well documented that women are affected by poverty more often than men, especially women from a minority group, and who also have a history of trauma (Ibrahim & Burczycka, 2016). Indigenous women are affected by many oppressive factors, such as colonization and poverty, which oppresses and creates higher rates of abuse, and this poses detrimental impacts to their caregiving abilities (Brown et al., 2013). It is challenging to find literature on this issue, due to research projects historically having fewer women participants (Kirby, Greaves, & Reid, 2017). This is a limitation in the literature, and this is something that needs to change, as women's voices are important, and their viewpoints are needed (Kovach, 2010).

By using a feminist lens women's viewpoints and challenges are heard and discussed in a strength-based and empowering manner (Baines, 2017). It is necessary to address social exclusion and power inequities of Indigenous female caregivers, and a feminist standpoint allows room for that analysis to be conducted when reviewing the literature (Kirby et al., 2017). It is important to listen to Indigenous female caregivers as they are the primary caregivers and the matriarchs of their families. Every caregiver is different, and a one size fits all approach will not be effective for recruiting and retaining Indigenous caregivers and foster parents (Brown, 2007).

Using feminist practice approaches social workers may support Indigenous women and therefore, be better supports to them by listening to Indigenous women's different histories, cultures, and ideas about their own healing and mental wellness (LeFrancois et al., 2013). As indicated in the literature, there are multiple structural factors that impact people at an individual level and therefore if an Indigenous woman asks for help, there should not be an assumption that it is her fault she needs support (Baines, 2017). There is also great utility in using a feminist lens as it can be applied to male caregivers and foster parents as well, especially as Indigenous men face such extreme systemic marginalization (Baines, 2017). In the paragraphs below it will be explained more in detail as to how

liberal, social, and a two-eyed seeing theoretical approaches can support Indigenous caregivers and foster parents in relation to colonization and poverty.

Liberal feminism supports women with becoming systemically free of oppression and can support Indigenous caregivers and foster parents by supporting a macro level of change, as in the government policies that oppress Indigenous peoples. This is also supported by the macro levels of government ensuring there is attainable educational and employment opportunities both inside and outside of the home (Remlinger, 1994). Research indicates the more training and educational opportunities Indigenous care providers have the more likely they will remain care providers (Brown, Serbinski, Anderson, & Gerritts, 2016). The literature that supports this theory suggests, that current Indigenous care providers both relational and non-relational need to have tools in their toolboxes for how to connect with children who have been raised in families who have endured years of intergenerational trauma due to colonization and assimilation practices (Baines, 2017).

Liberal feminism supports care provider with receiving more educational opportunities, by educating the decision makers on the importance of reconciliation with a two-eyed seeing approach to educated others at a systemic level that, Indigenous care providers may not need the western approach to education on attachment and healing trauma (Brown et al., 2016). Indigenous care providers already know how to connect with their children but need understanding and room to practice what culturally connects them (Baskin, 2016). Therefore, by using both a liberal feminist lens and a two-eyed seeing approach this may assist with increased understanding of what the Indigenous ways of education on attachment may look like, such as connecting with children through cultural activities such as ceremony, which is known to bring the individual together at the community level to create not just individual healing, but cultural healing (Baskin, 2016)

Socialist feminism supports financial freedom for women, as a method to empower and change women's lives so they can become independent of men and the state (Remlinger, 1994). As indicated in the literature, more financial support can assist with the recruitment and retainment of Indigenous

caregivers as the more money in the hands of the individual can create a feeling that one can support, not only themselves and their immediate family, but having other children in their care, such as nieces, nephews, grandchildren, or may children in care (Baines, 2017). When oppressive systems are changed at a macro systemic level to be more inclusive and understanding to policy and procedures that continue to colonize and impoverish Indigenous peoples, that may empower the individual to want to support others, because they financially can do so without causing undue hardship to them or their immediate families, as the care provider is able to care for successfully financially themselves and their families (Brown et al., 2014).

In a culturally competent and anti-oppressive lens it is essential to use a two-eyed seeing approach to practice with Indigenous caregivers and foster parents. This enables good work to be done with Indigenous communities. As it is a trauma informed lens, and therefore it looks at colonization and poverty outside of the individual, and instead looks at the larger systems of oppression that cause the cycle of colonization and poverty to continue. These approaches all signify that oppression and inequality are at the root of the problem that Indigenous people are facing. It is important to look at how work is conducted through several frameworks, which complement each other when advocating against the complexities of colonization and poverty.

Colonization

The negative impacts of colonization on Indigenous peoples has been immense resulting in numerous intersectional limitations being experienced by many Indigenous peoples, and their communities. As stated in the literature, these reflect the intergenerational legacy of the Indian Act (1876), which established the systemic oppression of Indigenous peoples in Canada. The legislation was intended to assimilate Indigenous peoples into western society and eradicate their culture, this was somewhat achieved through the reserve classification, residential schools, the 60's scoop, and current child protection models of practice in BC.

While some aspects of the Indian Act have been amended it continues to marginalize Indigenous peoples today. The social issues that has most implication for my study is how legislation and resulting in polices and practices have led to poverty that have impoverished many Indigenous peoples. For example, Indigenous children being forced into attending residential schools and communities that were devastated by the loss of their children (Carter, 2003). The results of residential school subsequently increased the prevalence of unhealthy coping mechanisms such as, alcohol and drugs, which increased violence and health related issues (Coyhis & White, 2006).

Colonization amplified disfunction within Indigenous communities and increased domestic violence and addictions in communities (Coyhis & White, 2006). The Indian Act perpetuated further racism and stigmatization of Indigenous peoples (Carter, 2003). This legislation developed into policies and practices that were based on western values, which increased racism and oppression into the practices of government and the public body towards Indigenous peoples. These continued attempts of assimilation further impoverished children, families and their communities (Coyhis & White, 2006).

Poverty

Professionals may provide better support to Indigenous care providers by looking at the information and different situations they are in through a trauma lens. This may be accomplished by focusing on the systems around the individual and supporting the individual in a strength-based supportive manner (Wilson et al., 2013). By not blaming the individual and putting pressure on the oppressive systems that need to change in order to elevate Indigenous peoples out of systemically created poverty, imposed on them due to colonization and continued racism (Baines, 2017).

Poverty affects women more prominently than men, and Indigenous women are even further affected, due to their gender and indigeneity (Baines, 2017). Colonization has taken opportunity for financial, educational, and spiritual opportunities for Indigenous peoples. Providing support, to lift a culture out of poverty, does not just include financial support, but educational and employment opportunities as well, and these opportunities need to be provided in a culturally competent way (TRC,

2015). This will in turn make it more advantageous and beneficial for potential Indigenous caregivers and foster parents who are impoverished, as it provides better physical and emotional health outcomes for Indigenous peoples (Brown et al., 2015).

All levels of government and support services would benefit from having a better understanding of the importance of assessing necessary improvements to the allocation of supports for Indigenous caregivers and foster parents, with a strong focus on poverty and its limiting effects along with enhancing supportive professional relationships. When assessing the best way to support Indigenous care providers it is important to understand poverty as being a substantial issue (Brown & Campbell, 2007). Many Indigenous women require more support than what they are currently getting from social work agencies to empower them and create a new generation of healthy care providers. (Saylor & Blackstock, 2005). Anti-oppressive and feminist social work practice can assist with starting to address the issues relating to colonialism such as poverty, sexism, and racism, by seeking to bring equality to Indigenous women by ensuring they have a voice in their communities and in policy and practice decision-making (Baines, 2017).

Implications for social work practice

As highlighted above legislation, policy and practice implications often intersect, which creates further complexities in addressing them. There are many social justice issues that affect Indigenous peoples, and are troublesome such as, being dispositioned from their lands, a lack of available and culturally competent resources, and an inability to exercise their rights over their needs and interests (UN, 2018). To promote holistic healing, Indigenous peoples may benefit from making their own decisions on their needs (Baskin, 2016). To achieve this, it is important for social workers to understand their core beliefs and stereotypes and keep looking inward as to what these are, and not be avoidant and pretend they do not exist. Critical reflexivity is essential to provide culturally competent supports when engaging with Indigenous caregivers and foster parents who have suffered harm by people in the helping field. This is essential practice when attempting to recruit and retain Indigenous

caregivers and foster parents (Brown & Campbell, 2007). In the next section I am going to explore the role of social workers and how they can potentially achieve anti-oppressive and culturally competent practices to address the above concerns.

Professional Relationships and Support

As informed by the literature, the need for Indigenous caregivers is well beyond what we currently have available for Indigenous children in care (Brown et al., 2014). As stated by Brown, there are generally benefits to children having stable foster placements rather than other forms of care, such as group homes. This is due to the "greater likelihood of family reunification, better life outcomes and better mental health for children" when placed in loving family care homes (Brown, 2007, p.539). Non-Indigenous family caregivers have indicated their needs as being better social supports, collaboration with the agency and workers, relief care and relationship with the parents (Holen et al., 2017).

There appears to be a correlation with successful long-term placements when caregivers and foster parent feel supported by the RSW (Brown et al., 2015). Social workers need to give evidence to support caregivers and foster parents with praise that they are doing a good job raising the children in their care, and this was made evident by the workers who gave both verbal and written feedback to the care providers that the child was succeeding in their care (Ivanova & Brown, 2010). Tangible evidence given to the care providers was satisfactory performance at school, positive peer relationships, and a mutually supportive relationship between the child's family, caregivers and foster parents. Foster parents need to feel they are a positive experience in the child life and his or her family, and this is important for maintaining long term placements (Brown & Campbell, 2007).

Indigenous caregivers and foster parents indicate the need to have social workers who are there to support them, and who are practicing from a good place. Relationships of trust between Indigenous caregivers and foster parents are built by consistency and reciprocity. Principles of authentic engagement are important and engage early and often. Always, listen first and talk later, and allow for silences. It is supportive to bring something to the home, such as food, and close the establish ongoing

connections by being genuine, empathetic, and human (Blackstock, 2009). If social welfare agencies want to recruit and retain Indigenous caregivers, then a comprehensive understanding of the history of colonialism and understanding of intergenerational trauma is paramount.

However, due to the colonized history of child welfare (Carter, 2003), many Indigenous communities are resistant and fearful of working with social workers. Social workers need to concentrate on relationship building to encourage healthy relationships within Indigenous communities, and this is supported by acknowledging that Indigenous communities know what is best for their children (Brown & Campbell, 2007). Encouraging Indigenous peoples to become caregivers and foster parents is supported by building relationships and can be accomplished though effective listening, communication, and trust building (APPF, 2013).

Social workers must critically reflect on their personal core beliefs, biases, and stereotypes to avoid any negative thought process being carried into meetings with Indigenous caregivers and foster parents, as this may create practice implications that further supports colonization and racist practices (Fiske, 1996). To be self-reflective and to not allow "claims to innocence" to cloud thoughts and skill sets, as it is culturally competent practice to be real with oneself, and this leads to anti-oppressive practice (Heron, 2005, p. 350). When in a helping role, social workers would benefit themselves and the people they serve by being honest and accountable for personal biases. It is only then social workers begin calling themselves anti-oppressive practitioner's (Baines, 2017).

It is important for social workers to understand their core beliefs and stereotypes and to practice critical reflexivity, and apply a two-eyed seeing lens, as to what his or her beliefs and bias are, and to not be avoidant and pretend they do not exist to be a culturally competent worker. Social workers must be as supportive as possible, while understanding the ongoing effects of continued colonialism and racism, which perpetuates poverty and trauma (Baskin, 2016). Providing cultural safety by engaging with Indigenous caregivers and foster parents who have suffered harm by people in the helping field is essential to recruiting and retaining caregivers and foster parents (Brown & Campbell, 2007).

I have discussed how practitioners can assist in recruiting and supporting Indigenous caregivers and foster parents within social just practices. Workers can also recommend ethical and culturally competent anti-oppressive practices when working and support child and youth who will be in the care of Indigenous caregivers and foster parents. One example of this is Complex Care Intervention approach.

Complex Care Intervention (CCI)

A practice method that is a necessity to incorporate into child protection social work are the principles of Complex Care Intervention (CCI) (Geddes, 2013), as strong component of CCI is a trauma informed practice. When using at trauma informed practice, and CCI, approach the social worker creates a safe space with the child's care team, by being transparent with the process, and making room for the care team to share without judgement and criticism. It is hoped that this process will lead to a trust based and collaborative working relationship (Geddes, 2013). CCI is specific process that supports stabilizing children in care, who demonstrate significant challenges with behavior and those behaviors threatens their placements to repeatedly breakdown (Brown et al., 2014). It is my opinion that CCI should be used in all agencies and all child protection team leaders should be trained as CCI coaches and have at least two trained CCI coaches on their teams.

The approach of CCI is holistic, trauma informed and culturally competent. A reason why CCI is so effective is because it is a trauma informed practice approach. A trauma informed approach is important to supporting the healing of the historical and present factors that affect Indigenous caregivers and foster parents, because it promotes cultural humility, empowerment, and transparency (Wilson et al., 2013). For Indigenous populations to heal from the intergenerational trauma cultural traditional healing practices must be included in intervention and treatment plans (Wilson et al., 2013). CCI makes room for this because the care teams are the experts, so it is inclusive and supports cultural competency.

A CCI coach supports the child's care team with how to approach significant behaviors, or adverse childhood experiences, in a cohesive attachment focused manner. The CCI coach ensures there is structure to the meetings, and that everyone is heard and feels supported in the discussion. CCI care teams consist of two coaches who have been trained in CCI, caregivers, foster parents, GSW, RSW, counselors, teachers, or anyone who is directly working with the child. The coaches provide the care team with education, encouragement, and intervention strategies to support connection and foster attachment with the child. The process is strength based and opens dialogue up in a good way (Geddes, 2013).

CCI is a good approach to use with Indigenous peoples, as it is focused on attachment and the importance of human connections, and the intervention strategies are attachment based. The meetings are held in a circle that is inclusive and supportive to all views. Indigenous peoples have had tremendous breakdown in their attachments between parent and child, due to residential school and its aftereffects, namely trauma (Coyhis & White, 2006). The CCI approach to practice addresses the past and why it is causing issues in the present. This is beneficial to Indigenous people, because the past is part of the issues that surround their communities today (Cordell, 2013). CCI is a circle approach that highlights the way to help children is to have communication between the care team that surrounds the child.

The strengths of using a team based CCI approach are a strong focus on communication and no one team member can decide without it being a table discussion for the entire team (Geddes, 2013). Therefore, it is an inclusive method of support and team members feel heard. With teams who are coming from different experiences with the child, such as schools, caregivers, foster parents, social workers, and counselors there can be a disconnect, animosity, and a lack of understanding of each other and what the individual members of the team's goal are in relations with the child (Geddes, 2013). The CCI care team may consist of family members, but it is not always recommended. For example, it is not considered beneficial to have family involved who are not able to be accountable for their part in

the reason the child is in care (Geddes, 2013). This is a limitation as it is important for family to be included and this process could branch out to be more inclusive of family, but it would require a slightly different process. The approach takes the focus from the child's behavior, and instead focuses on the support surrounding the care team and their accountability to the child and the process of effectively supporting the child. The child's trauma history, current issues and functioning are discussed and what intervention strategies the team envisions will be do able for the care team (Geddes, 2013).

There are limitations with this process when working with Indigenous caregivers and foster parents. There can be reluctance for members of care teams regularly participate in the meetings, especially Indigenous caregivers and foster parents who are fearful of the system, who do not feel respected, and who do not feel they are listened to or heard (Brown & Campbell, 2007). It is my thought that the meetings would be made more culturally competent if there was food present, and a honouring ceremony to add an extra layer of comfort and respect for the care providers and the rest of the team.

If social workers can engage in open dialogue between Indigenous caregivers, foster parents, and service providers, then social workers may be able to assist with improving quality of life for Indigenous children and youth (Brown et al., 2012). If CCI coaches cannot relationship build successfully with Indigenous members of the care team in a culturally competent and sensitive manner the process of providing support to the team will be ineffective. With the CCI approach meetings consist of an agenda which is prepared ahead of time and the team has had the chance to add their input. The monthly meeting begins and ends with the team sharing their experiences with what is working well for the child at home, school, etc. There is no talk about what has not been working at this time, as the focus on skill building and intervention strategies that will support the child. Another topic of conversation within the care team focuses on what intervention strategies are working well for the caregivers and foster parents, and which need tweaking to be a more effective and supportive

(Geddes, 2013). To support Indigenous caregivers and foster parents it is important to recognize a large number of Indigenous people are in various stages of healing. We need to implement more support for Indigenous caregivers and foster parents educationally and attachment focused, such as trauma informed support services and CCI attachment-based programs that are built within child protection models.

V. Conclusion

The intention of this paper was to bring attention to the ongoing issue of the lack and need for Indigenous caregivers and foster parents in BC. This topic is of tremendous interest to me professionally, as I see it as a gap in service for Indigenous children when they are placed outside of their families, extended families, and communities. Children have far better outcomes when connected to culture and family connections so Indigenous children would benefit from Indigenous caregivers and foster parents.

Reconciliation efforts will continue to be an uncomfortable process. For example, the process of establishing new legislation and policy, and ensuring that there is appropriate practical and financial support in place is challenge at all levels. Therefore, it may be helpful to have more research conducted on how colonialism and racism effects Indigenous care providers, and how these practice implications negatively affect family, caregivers, foster parents and community's ability to care for their children. To better support Indigenous care providers, social workers may benefit from looking at practice implications such as colonization, poverty, trauma, and relationships with a two-eyed seeing and feminist approach, as this may assist with practicing in an anti-oppressive and trauma informed style.

Looking at the issues of poverty, trauma, and relationships through a liberal and social feminist view may support recruiting and retaining female Indigenous caregivers and foster parents. Even though these are western constructs paired with a culturally competent and anti-oppressive framework they may add further change for care providers who are impoverished and marginalized. Bringing

Indigenous care providers up to a living wage may assist with recruitment and retention of caregivers and foster parents (Saylor & Blackstock, 2005).

Moving forward the assessed literature indicates that more supports needed to recruit and retain Indigenous caregivers and foster parents. Such as better financial support to the caregiver and foster parents, which needs to be looked at on an individual level as some Indigenous caregivers and foster parents will require more financial support than other care providers, due to continued systemic oppression (Brown et al., 2014). When social workers are relationship building with Indigenous peoples and communities it may be of benefit to meet with the elders of the community first, as they will provide another layer of information about their people. Elders are their community's knowledge keepers, listeners, educators, and spiritual leaders. Indigenous caregivers, and foster parents expressed that they need to feel heard and supported an elder who listens, and not just a social worker, CCI coach, or support worker to give them feedback from their mandates and western models of caring for children (Ivanova & Brown, 2010).

Indigenous communities desire to have control of what their communities need to keep children safe, and I am hopeful with that more Indigenous caregivers and foster parents will come forward to support Indigenous children and families. Social workers may benefit Indigenous caregivers by decreasing practice implications by being anti-oppressive and culturally competent workers. Also, to make room for Indigenous communities to take the lead on what their children, families, caregivers, and foster parents need for success. To empower Indigenous communities, they need to be the experts of their lives, and it is then we may see less Indigenous children in care.

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