June 2014

Structural Racism and Indigenous Health: What Indigenous Perspectives of Residential School and Boarding School Tell Us? A Case Study of Canada and Finland

Sandra A. Juutilainen
Centre for Arctic Medicine, Thule Institute, University of Oulu, sandra.juutilainen@oulu.fi

Ruby Miller
Six Nations Council, ruby@williamsconsulting.ca

Lydia Heikkilä
North Finland Social Centre for Excellence, Sámediggi, SámíSoster (NGO)

Arja Rautio
Centre for Arctic Medicine, Thule Institute, University of Oulu

Follow this and additional works at: http://ir.lib.uwo.ca/iipj

Part of the Community Health Commons, Other Public Health Commons, and the Social and Behavioral Sciences Commons

Recommended Citation
DOI: 10.18584/iipj.2014.5.3.3

This Research is brought to you for free and open access by Scholarship@Western. It has been accepted for inclusion in The International Indigenous Policy Journal by an authorized administrator of Scholarship@Western. For more information, please contact nspence@uwo.ca.
Structural Racism and Indigenous Health: What Indigenous Perspectives of Residential School and Boarding School Tell Us? A Case Study of Canada and Finland

Abstract
The objective of this study was to explore, as an example of structural racism, the effects of residential school and boarding school on the self-perceived health of Indigenous peoples’ in Canada and Finland. Structured interviews were conducted at Six Nations of the Grand River and Inari municipality. The individual and intergenerational negative effects included themes of vulnerability (language and cultural loss, fractured identity, and negative self-worth), and resilience (Indigenous identity, language and cultural renewal). Indigenous identity, culture, and language are intertwined and key determinants of health. Further studies about structural racism and a strong Indigenous identity as a protective factor may provide valuable insight into health disparities.

Keywords
residential school, boarding school, Haudenosaunee, Sámi, identity, health inequalities

Acknowledgments
We would like to acknowledge Six Nations Council, the Six Nations ethics committee, and the community members at Six Nations who participated in the study in Canada and SámiSoster (NGO), Sámediggi, and the participants from Inari municipality in Finland. And to Anne Miesperå for conducting and transcribing the Finland interviews and Matti Luonua for translating the Finnish data to English.

Creative Commons License
This work is licensed under a Creative Commons Attribution-Noncommercial-No Derivative Works 4.0 License.

This research is available in The International Indigenous Policy Journal: http://ir.lib.uwo.ca/iipj/vol5/iss3/3
Structural Racism and Indigenous Health: What Indigenous Perspectives of Residential School and Boarding School Tell Us? A Case Study of Canada and Finland

Studies suggest that historical legacies of social oppression are the present day social forces that influence racial inequalities in health, with racism as the link between race and health (Chae, Nuru-Jeter, Lincoln, & Francis, 2011; Williams & Mohammed, 2009). Therefore, it is important to re-visit the past to better understand what is happening in the present. This type of research is important to give a better understanding of root causes of health inequalities; it has also shown that people who self-report experiences of racism have greater risk for mental and physical ailments (Brondolo, Brady, Beatty, Pencille, & Contrada, 2009; Paradies & Cunningham, 2012; Williams & Mohammed, 2009). Racism is a phenomenon that is multi-layered; therefore, it is important to investigate the structural layer because it may provide insight to the fundamental causes of health disparities (Gee & Ford, 2011). Structural racism is defined as the macro-level systems, social forces, institutions, ideologies, and processes that interact with one another to generate and reinforce inequities among racial and ethnic groups (Powell, 2008). Throughout this article, we investigate structural racism through concepts of racially motivated oppression, discrimination, or inequality experienced by Indigenous people in relation to the majority population.

A quintessential model of structural racism is the educational experiences of Indigenous peoples within the residential school and boarding school systems. The main goal of these institutions, whether it was written into policy or implied by institutional practices, was to assimilate Indigenous children into the dominant culture. Indigenous children were taught that their own language and cultural practices were inferior to the dominant culture and were instilled with the notion that they were “less than” the majority society. Previous research extensively discusses how colonial education frameworks had profoundly negative impacts on Indigenous health and well-being in the past and present (Bastien, Kremer, Kuokkanen & Vickers, 2003; Chrisjohn et al, 2002; Royal Commission on Aboriginal Peoples, 1996; Smith, 2009; Truth and Reconciliation Commission [TRC], 2012a, 2012b; Whitbeck, Adams, Hoyt, & Chen, 2004). Colonization has been defined as a determinant of Aboriginal health (Baskin, 2007; Moffit, 2004) and Aboriginal status as a social determinant of health (Mikkonen & Raphael, 2010). Colonialism, in the context of residential schools, impacts the health of Aboriginal peoples by producing social, political, and economic inequalities that have a ripple effect on determinants of health, such as physical environments, health behaviour, education, food insecurity, employment, income, and cultural continuity (Reading & Wein, 2009).

Beliefs around health and well-being from an Indigenous perspective embody more than the medical model (i.e., the absence of disease and standard definitions of health). Indigenous peoples’ concept of health and survival is both a collective and an individual intergenerational continuum encompassing a holistic perspective incorporating four distinct shared dimensions of life. These dimensions are the spiritual, the intellectual or mental, physical, and emotional. In linking these four fundamental dimensions, health and survival manifest themselves on multiple levels where the past, present, and future co-exist simultaneously (World Health Organization, 1999).

This article aims to analyze experiences of residential and boarding schools, both individual and intergenerational, through the lens of racism at the structural level and to examine how structural racism
has impacted the health and well-being of Indigenous people in two communities: Six Nations of the Grand River in Canada and the Inari municipality in Finland.

**Residential Schooling in Canada**

The first group to be racialized in Canada were Indigenous people via policies such as the colonial Canadian government policy of Indian residential schools (Sunseri & Cannon, 2011). One hundred and thirty-two federally supported schools in Canada were located across every province and territory, except Newfoundland, New Brunswick, and Prince Edward Island. Most schools were operated as “joint ventures” with Anglican, Catholic, Presbyterian, or United Churches that operated from 1863 to 1996. The Government of Canada built an educational system in which very young children were often forcibly removed from their homes and often taken far from their communities. Many were inadequately fed, clothed, and housed. All were deprived of the care and nurturing of their parents, grandparents, and communities. First Nations, Inuit, and Métis languages and cultural practices were prohibited in these schools. Tragically, some of these children died while attending residential schools (Aboriginal Affairs and Northern Development Canada, 2008), with research confirming at least 3,000 deaths at Indian residential schools (The Canadian Press, 2012). The damage of the Indian residential school process has been defined by scholars as “cultural genocide” (MacDonald, 2007; MacDonald & Hudson, 2012) and genocide (Akhtar, 2010; Chrisjohn et al., 2002; Woolford, 2009).

The residential school system was not unique to Canada. Governments and missionary agencies in many countries around the world established boarding schools as part of the colonial process (TRC, 2012b). Although there are contextual differences in how the schools were operated worldwide, Indigenous peoples generally argue that the historic purpose was to assimilate Indigenous peoples into the dominant society in which they lived (Smith, 2009).

**Boarding School in Finland**

Assimilation tactics were not blatantly written into the education policy in Finland; however, Sámi language and culture were systematically repressed during this period (Lehtola, 2012). Finnish boarding schools, which were attended by both Finnish and Sámi children living in rural communities, played a key role in Finnish national identity building between 1866 and 1977 (Syväoja, 2004). During this time period, there were increasingly racially inspired discussions surrounding the ideal of an ethnically homogenous people in Finland, that is who shared the same culture and language (Nyyssönen, 2007). As a result, Sámi cultural ways were openly hindered and belittled during this time. Sámi identity was excluded in the national identity since the teaching language was Finnish, even in the Sámi regions with the exception of one school in Outakoski, Utsjoki. Sámi children were forbidden to speak their mother tongue at school and in the dormitories and were severely punished if they did (Aikio-Launiemi, 1995; Rasmus, 2008; Valle, 1998; Valkonen, 1998). Since the Finnish government did not consider Sámi languages worth preserving, many Sámi lost their native language, and this process occurred within a single generation (Aikio-Puoskari & Pentikäinen, 2001). Sámi children attending boarding school learned to adopt the Finnish language and culture and were directed to the majority culture’s way of thinking and living (Lehtola, 2012). Their cultural connectedness and family ties were undermined while attending boarding schools, which only allowed a few visits home during the school year.
Study Design

The aim of this case study was to investigate residential school and boarding school experiences of Indigenous people from Six Nations of the Grand River, a Haudenosaunee1 community in Canada, and the Inari municipality, a Sámi homeland area in Finland, to better understand how experiences of racism at the structural level impacts holistic health and well-being on the individual and intergenerational level.

The lead author originally collected the data during structured interviews in Canada and Finland for her master’s thesis entitled, *Less Than: Two Indigenous Communities Experiences of Discrimination and its Impact on Self-Perceived Health*. Ethical approval was received from the University of Oulu, Finland and the Six Nations Ethics Committee, Canada for both the original data collection and use in the master’s thesis and for use of the data in this article. All participants signed informed consent to participate in the study.

The original questionnaire contained 73 closed-ended and open-ended questions that solicited responses about socio-economic status, experiences of discrimination while accessing health services, individual level discrimination and racism, and residential school and boarding school experiences. Since there was additional information that was not analyzed in detail for the master’s thesis, the questions about residential school and boarding school experiences were further analyzed for this article and will be included in an article based doctoral dissertation entitled, *Structural Racism and its Impact on Indigenous Health: A Comparative Study of Canada, Finland, and Norway*.

For data collection, a purposive sampling method was used in order to recruit an equal number of male and female participants aged 18 to 80 years old. The ratio of female to male participants was 60% to 40%, respectively, in both countries. Participants had either attended a Canadian residential school or a Finnish boarding school or had family members who attended. The lead author conducted 25 interviews in Canada, which were recorded with permission and later transcribed verbatim. A Finnish translator conducted 20 interviews in Finland, which were recorded with permission and later transcribed and translated to English.

The aim of this paper is to give voice to Indigenous peoples in the body of work on structural racism by triangulating the data from the two countries to further investigate how racism at the structural level influences Indigenous health and well-being. The idea for this article arose from two of the major themes from the master’s thesis data: the impact of colonization on Indigenous health and responses about the various layers of racism (policy level, service level, and individual level racism). The intention was to reflect on the area of racism at the structural level (e.g., education policy) and conduct a deeper analysis of the open-ended responses about residential school and boarding school experiences in order to get explanations and increased understanding of how the interviewees defined the effects of structural racism. This process is described through firsthand and intergenerational experiences of racially

---

1 The Nations that recognize themselves as Haudenosaunee are: Mohawk, Oneida, Onondaga, Cayuga, Seneca, and Tuscarora. For more information on the Haudenosaunee confederacy see: [https://www.haudenosauneeconfederacy.com/index2.html](https://www.haudenosauneeconfederacy.com/index2.html)
Information about the Six Nations of the Grand River can be found on their website: [https://www.sixnations.ca](https://www.sixnations.ca)
motivated oppression and discrimination that occurred within the confines of residential and boarding schools.

Narrative data were analyzed using NVivo version 9.2 software for qualitative narrative analysis. The themes that emerged were Indigenous identity and resilience. For this article, the questions about residential school and boarding school experiences are analyzed in detail. In addition to the narrative material from the open-ended questions, the interviewees’ spontaneous narration in connection with close-ended questions are analyzed.

The two cases—one from Canada and one from Finland—were chosen in order to gain an enlarged scope and insight of the related phenomena internationally and to investigate whether there were essential differences in the Indigenous people’s experiences between the two countries with different education policies.

Solid, long-term working relationships were imperative to the successful collaborations with Six Nations of the Grand River in Canada and Inari Municipality in Finland. For the study, it was difficult to recruit people who had attended residential schools in Canada because it is a sensitive topic due to abuses (sexual, physical, emotion, spiritual) that occurred within this education system and the stigma attached to this experience. Even though the researcher had good long-standing relationships within the community, it was made clear when working with community contacts that recruiting respondents would be challenging. However, it was possible to talk with people who had family members who attended residential schools. In Finland, it took a lot of effort to recruit people to participate who had attended a Finnish boarding school; however, due to long-standing relationships with the Director of Sámi Sostoer, a non-governmental organization (NGO), the process of recruiting interviewees with both firsthand and intergenerational experiences at boarding school was well facilitated.

Our research design encompasses a de-colonial framework that ensures collaboration, communication, and relationship building between the Indigenous community and researcher at all stages of the research project from design and approval of the research tools to dissemination of the results (Kovach, 2009a; Kovach, 2009b; Nicholls, 2009, Wilson, 2008). Stories and experiences from Indigenous perspectives can give us insight into how knowledge and worldviews interrelate, and can open up new perspectives and raise consciousness (Balto & Østmo, 2012). This type of decolonizing methodology acknowledges that Indigenous peoples have been constructed and represented in negative ways and that power and knowledge are interconnected (Sunseri, 2007).

Power dynamics are also apparent in state definitions of Indigenous identity. Therefore, identifying and defining Indigenous peoples internationally is complex. It is best to ask Indigenous peoples themselves to determine how they will be defined and how they will be viewed for purposes of research (Bartlett, Madariaga-Vignudo, O’Neil & Kuhnlein, 2007). For the purposes of this study, all participants were asked to self-identify their Indigenous identity. In Canada, all participants self-identified as First Nations. In Finland, all participants self-identified as Sámi.
Results

Individual and Intergenerational Level Impacts to Health and Well-being

Participants were asked if they had attended residential school or boarding school and if they believed it had an overall impact on their health and well-being: negative impact, positive impact, negative and positive impact, no impact, or don’t know. Table 1 summarizes the participants’ responses to the questions.

Table 1 shows that, at the individual level, Haudenosaunee respondents stated that their attendance at residential school had a negative impact on their individual health and well-being. For Sámi participants, there were more diverse responses: negative impact (5 out of 16), and negative and positive impact (5 out of 16), no impact (4 out of 16), positive impact (1 out of 16), and don’t know (1 out of 16). It appears that more Sámi females (4 out of 9) than males (1 out of 7) reported that attendance at boarding school had a negative impact on their health and well-being. More of the Sámi participants reported that their experience at boarding school had both a negative and positive impact on their individual health and well-being.

The negative impacts to health and well-being were well articulated in the narrative responses:

Haudenosaunee perspective:

I think emotionally, yes, it had an impact. If I have to take a view, I was never the same person afterwards: emotionally, mentally. There was something different about me after that. I didn’t feel like the same kid. I wasn’t a kid after that.

Sámi perspective:

The school world of that the self-esteem was flattened altogether...because it was always when being there, you were dirty, you were always a rotten Lappish, it was a thing that has affected my self-esteem a terrible amount. It’s in a way mentally affected, surely affects to this day and it affects a lot for sure. Nothing positive but I managed to finish that school.

Additionally, Sámi respondents talked about how their experience at boarding school contained both negative and positive elements:

The boarding school life did make me neurotic in a certain way. That way I got more shy towards people. Positive things as well, that I can be a really balanced person.
<table>
<thead>
<tr>
<th>Questions</th>
<th>Canada $n=25$</th>
<th>Finland $n=20$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>60% Female</td>
<td>60% Female</td>
</tr>
<tr>
<td></td>
<td>40% Male</td>
<td>40% Male</td>
</tr>
<tr>
<td>Did you attend residential school/boarding school?</td>
<td>Yes: 1</td>
<td>Yes: 9</td>
</tr>
<tr>
<td></td>
<td>No: 14</td>
<td>No: 3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No: 1</td>
</tr>
<tr>
<td>Do you believe it had an impact on your overall health and well-being?</td>
<td>Negative: 1</td>
<td>Negative: 4</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Positive: 0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Negative and Positive: 4</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No impact: 1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Don’t know: 0</td>
</tr>
<tr>
<td>Did a member of your family attend residential school/boarding school?</td>
<td>Yes: 13</td>
<td>Yes: 11</td>
</tr>
<tr>
<td></td>
<td>No: 2</td>
<td>No: 1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No: 0</td>
</tr>
<tr>
<td>Do you believe that their attendance at a residential school/boarding school has had an impact on your overall health and well-being?</td>
<td>Negative: 6</td>
<td>Negative: 2</td>
</tr>
<tr>
<td></td>
<td>Positive: 1</td>
<td>Positive: 2</td>
</tr>
<tr>
<td></td>
<td>Negative and Positive: 2</td>
<td>Negative and Positive: 0</td>
</tr>
<tr>
<td></td>
<td>No impact: 3</td>
<td>No impact: 6</td>
</tr>
<tr>
<td></td>
<td>Don’t know: 1</td>
<td>Don’t know: 1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Don’t know: 3</td>
</tr>
</tbody>
</table>
We also asked about the intergenerational impacts of those participants who had family members attend a residential school or boarding school and if they believed it had an impact on their own health and well-being. Almost all of the participants interviewed had a member of their family who had attended residential school and boarding school, respectively: 21 out of 25 Haudenosaunee participants, and 19 out of 20 Sámi participants. Almost half of the Haudenosaunee respondents stated they felt their health and well-being was impacted negatively if a member of their family had attended residential school and a few of the Sámi respondents stated they felt their health and well-being was negatively impacted if a member of their family had attended boarding school, with more responses of “don’t know”. One third of Haudenosaunee responses and half of the Sámi reported that it had “no impact” on their health and well-being. Equally, Haudenosaunee men and women responded that it had a negative impact, and equally Sámi men and women reported that it had a negative impact on their health and well-being.

The intergenerational impacts were further discussed in the narrative responses of both Haudenosaunee and Sámi participants:

**Haudenosaunee perspective:**

The people that did attend the residential schools and learned all the dysfunctional behaviours and the abuse, they did come back to our community… and because our community is so intertwined that abuse was spread throughout our community: the sexual abuse, the physical abuse. And the language…they were taught not to speak their language at the residential school and it brought shame to them.

**Sámi perspective:**

At least it still has a strong impact, even now …now that we talk about the boarding school times and this when the children have been subjected to all kinds of actions there, and the church talks about apologizing, that people dare to think how bad the situation has been. There would be a lot to do, actually there would be concrete things to do, need of support, chances to talk about things.

**Negative Impacts to Indigenous Identity**

More often with the discussions about residential and boarding schools, Haudenosaunee and Sámi participants talked about its negative impacts to Indigenous identity, in the past and present. The main themes that emerged from these discussions included: language and cultural loss, fractured identity, and negative self-worth.

**Language and Cultural Loss**

Language, culture, and identity are all intertwined and cannot be separated. Participants talked about how the language loss also is equivalent to cultural losses because so much of the culture is embedded in the language. This created a break or disconnect from their Indigenous identity. Some Sámi participants talked about their feelings of not being “as good” as other Sámi because they lost their language and, as a result, they developed feelings of negative self-worth. The loss of language was seen as impacting all
individuals in the community through negative impacts to self-esteem and self-worth. Participants describe this experience below:

**Haudenosaunee perspective:**

I always tell people, that in my grandmother’s case, she was 8 years old when she went in, she came out when she was 14. When she went in - all she spoke was Mohawk, when she came out - all she could speak is English, she couldn’t even speak Mohawk until she was on her deathbed...that’s how big of an impact it had. So much of the culture is in the language. That important part of us as human beings, as communities, was lost for that time span.

Another respondent stated that:

I think it’s really impacted the language, which has a profound impact on identity, which really has negatively impacted all individuals: self-esteem, motivation and confidence. I think those are some of the ripple effects we are seeing now from a multi-generational standpoint.

**Sámi perspective:**

What I run into in my work is that when you’ve lost the language you experience that you’re not as good a Sámi as others.

Another respondent stated that:

This type of lingual and cultural continuity from one generation to another, we were torn away when we were 6 years old, so we were torn from that growing environment where we had lived our first 6 years. Firstly, our Sámi language development ceased altogether, even though we of course had others who shared our fate, but everything concerning the livelihood and the life that was lived in the community, for example the vocabulary of the livelihood, that was broken.

**Ripple Effects of Learning in an Institutionalized Environment**

Within the Canadian context, residential schools depended on student labour to survive. Until the 1950s, the schools ran on what was called the “half-day system”. Under this system, the older students spent half a day in class, while the other half was supposed to be spent in vocational training. In reality, this training often simply amounted to free labour for the school (TRC, 2012a, 2012b). In Finland, the need for children’s daily labour was less because the boarding schools were subsidized by the national education system. However, within both systems, there were similar consequences of receiving an education in a foreign language and not being allowed to speak one’s mother tongue. Indigenous education principles were not included, which also had a negative impact on learning ability. Both systems had the outcomes of learning in an institutionalized environment. Participants talked about how their learning environment could be compared to a prison or institution. Participants discussed the main outcomes of receiving an education in this environment as creating learning difficulties that continued into adult life, which affected their choice of jobs and income earning potential.
Haudenosaunee perspective:

First of all, being in residential school, I never got an education so I took all these high-risk jobs. But up there, it wasn’t a healthy place to be, I didn’t think: mentally, psychologically, physically, because we almost never got enough to eat. Just the situation up there, it was like an institution, you could compare it to prison. When I was there everybody had a number, got a number.

Sámi perspective:

I didn’t even learn Finnish and I haven’t learned the new writing form of Sámi because I haven’t learned grammar in school. I have writing problems, then it’s affected that I’ve had to do more physical work and have to hire support on the side for interpreting.

Another respondent stated that:

In the boarding school, I really had to give up everything, almost like my entire home and related things and had to become the kind (of person) who are directed all the time by someone. In the morning they ring the bell to wake you up and when you go to sleep they tell you, “Lights out!” You change entirely: (become) part of that machine.

Fractured Identity

Discrimination of Indigenous language and culture resulted in a fracturing of Indigenous identity. This had two main negative outcomes: shame and displacement. It was further described by some participants as feeling ashamed of their Indigenous identity; others felt displaced—like they no longer belonged in their home community or in the dominant society. The feeling of being placed somewhere between two worlds was described as an overall feeling of not being whole or broken. Whole or holistic is a key definition to health and well-being for Indigenous peoples where the definition of health includes a balance of the physical, mental, emotional, and spiritual realms.

Haudenosaunee perspective:

Now today I’m kind of like torn between church and the Longhouse. I’ve got nothing against churches. I go to Longhouse or church. But all these things get back to that they planted that little seed, way back when the younger you are, the more they are going to change you.

Another respondent stated:

Once my parents ended up taking me out of the schools here (on reserve) because they didn’t want me to learn all the traditional teachings and sent me an hour away to go to another school, it was just chaotic. So I really did grow up with the feeling that to be native was to be very, it was a less-than, an embarrassing, and inferior culture.

Sámi perspective:

Another part in life is when you’re separated from your own community and how you can return to be part of the community again? It’s the part I think is even worse, that you’re not accepted
with your own. You’re not good there, you’re no good here, you’re like between two worlds, not whole, not part of the community, not as good in the community.

Another participant noted similar negative feelings about one’s self:

That I was always considered lower, a rotten Lapp, that you were like a rotted person.

**Coping with Negative Self-Worth**

Experiences of social oppression and adverse trauma produce deep feelings of negative self-worth, which resulted in feelings of anger, stress, depression, and low self-esteem. Pathways of vulnerability and resilience were explained within the process of coping. The participants talked about the ongoing healing work that was required to overcome traumatic experiences. Some of the participants discussed various coping mechanisms at the individual and intergenerational level, such as overeating to “stuff feelings”, an inability to show feelings or love, and using drugs or alcohol as a form of escape. Other forms of coping were described as feeling the need to overcompensate or the notion of feeling more work was required to prove you were just as “good” as the majority population. Others talked about observations made of former attendees of boarding school or residential school as people who strived to model “perfectly ordered” lives, or keeping a very sterile environment. These forms of coping, including workaholic tendencies, were recognized as unhealthy ways to try to be accepted by the majority society.

**Haudenosaunee perspective:**

When you read up on residential school and stuff like that, they wanted to kind of like civilize us and they denied our language and culture and everything, but yet, they didn’t want us to be really smart either, we just had to be down one notch, it seemed like. So these things cause hurt feelings. Even if you did have an education, you had to be “extra” good. You had to be better than someone with the same education, you had to be a little bit better to get them to accept you.

**Sámi perspective:**

Still just like when being Sámi, you have to stay sharp to be as good as a Finn. Somehow this kind of defensive state and apologetic attitude, it’s probably because they always belittled, pushed down, and so that’s how I’ve had to struggle with myself...

**Resilience**

Resilience was a topic of discussion and also viewed as source of power: a positive outcome of negative experiences. The participants talked about how they were able to overcome abuses experienced during their childhood and how they were able to develop healthy relationships within their own families and work towards ending generational abuses. Participants reported a self-awareness of their own issues and noted that the healing process is possible but ongoing. A key focus on the stories of resilience by both Haudenosaunee and Sámi was the ongoing healing journey and restoration of their culture and languages.
**Haundenosaunee perspective:**

As I was growing up, it was confusing; I had to do a lot of learning, teaching and healing so that I can function in a healthy way, so that I don’t continue doing those things that I was taught to do. And that is an ongoing process, there is always something that comes up.

Another respondent discussed language and culture restoration:

I make sure my kids are aware of their languages, one is now fully in the curriculum and her baby is only learning Mohawk, she’s now writing the curriculum for the Mohawk language. I told her about this program out here and they just loved her, she picked it right up. It can be brought back, if you have people like that.

**Sámi perspective:**

More negative than positive, living in the boarding school… has caused a lot of things that I’ve had to later sort of go through, caused traumas that I’ve had to work on later.

Another respondent discussed experience with Sámi language in the school system:

I think 20 years back when my daughter went to school. The daughter left as a pioneer to study as a Sámi speaker in an elementary school. I felt it was pretty exciting that I wanted the child in a Sámi speaking school, in a Sami speaking class to begin that class … then when the teachers said that you are really demanding for Sámi language and they have to organize it. But it was strange when I had the right to get the education for my child in her mother tongue, so why do they come to ask me whether I’m serious?

**Discussion**

This case study situates the topic of structural racism and its consequences on holistic health and well-being within the context of residential schools in Canada and boarding schools in Finland. This study serves to give voice to Indigenous perspectives on how holistic health and well-being was and is influenced by residential school and boarding school experiences and allows for an expanded consciousness of the phenomenon of racial-oppression. Structural racism is a conduit within the colonial framework of the institutionalized educational experiences of Indigenous children. The residential schools and boarding schools were representations of racist thought within education policy and provided arenas for racist actions, both at the individual and institutional level. During the past several decades in Canada, more research results have emerged documenting Indigenous viewpoints on how racial oppression within the education system negatively impacts health and well-being. However, in Finland there are only a limited number of studies on the subject and the matter has only recently been addressed in the media. Namely, with more attention to the issue following a documentary that was released in 2011, “Kun Suomi tuli Saamenmaahan” (“When Finland came to Samiland”), which included interviews with and stories from people who went through the process of changing their identities while attending Finnish boarding schools (Väliahdet & Ahola, 2011).
For this study, it was earlier discussed how it can be difficult to get people to talk about their firsthand experiences within the residential school and boarding school systems. However, the documentary example from Finland shows how film has the power to encourage people to discuss their own experiences on sensitive topics. In Canada, a research project included digital stories of the intergenerational effects on professional First Nations women whose mothers are residential school survivors (Stout & Peters, 2011). The addition of digital stories to research is an impactful tool and can be an accessible way to start and continue conversations and should be a part of future research in which the topic area is sensitive.

These conversations are important not only for a greater understanding of the link between structural racism and health but also to allow for healing to occur. Other research indicates that having opportunities to discuss historical trauma can order, situate, and provide meaning for troubling experiences (Garro, 2003). It can go beyond the individual level to also further expand the concept and connections surrounding the intergenerational transmission of fragmented trauma narratives, or the fragmented “history” within historical trauma, which may benefit individuals or communities suffering from the effects of intergenerational trauma (Denham, 2008).

Our research results show that the overall effects on the self-perceived health and well-being of the two Indigenous groups were very similar regardless of the contextual differences in how the education systems operated in Canada and Finland. This finding gives us reason to believe that these effects are not only individual experiences or situation-specific to certain countries. Structural racism seems to operate in similar ways and have similar outcomes regardless of the contextual differences in national policy, legislation, and institutional practices.

Canada’s government policy “to kill the Indian in the child” and Finland’s nation building process, whereby Sámi identity, language, and culture were systematically repressed, produced similar negative impacts to Indigenous identity based on the narratives of Haudenosaunee and Sámi interviewees. When viewing trauma through a multidimensional lens, both survivors and their offspring have areas of both vulnerability and resilience (Daniël, 1998). Based on individual and intergenerational responses, interviewees consistently reported that language, culture, and identity are directly connected, and that the Canadian residential school and Finnish boarding school systems created a disconnect between interviewees and their Indigenous identity, which then has ripple effects to holistic health and well-being. This supports previous research that has shown that Aboriginal identity, sometimes referred to as the concept of “connectedness”, is seen as a key social determinant of health (Bourassa, McKay-McNabb, & Hampton, 2005; Carriere, 2008; Johner, Gingrich, Jeffery, & Maslany, 2008).

Our findings about the shortcomings of receiving an education in a foreign language and in an institutionalized environment that did not respect or tolerate Indigenous language, culture, and epistemologies are similar to previous research that used psychological research and theory to explain the increased risk of poor academic performance, reduced capacity to continue education after leaving residential school, limited employment prospects, and reduced income as adults (Barnes, Josefowitz, & Cole, 2006). When coping with historic traumas, there was potential for both vulnerability and resilience. Areas of vulnerability included internalizing the attacks to culture, language, and identity,

---

2Digital stories available at: http://www.pwhce.ca/program_aboriginal_digitalStories.htm
which produced an inability to show emotions and feelings of shame about one’s Indigenous identity. Whereas other Survivors possessed an awareness of the ongoing effort to heal from negative experiences, strived to end generational abuses, and had a positive outlook about keeping their language and culture alive. These experiences described in our study are similar to Braveheart’s (2000) findings. She explored emotional experiences related to historical trauma, including anger, an impaired ability to bond, transposition, guilt, and somatic symptoms. Yet, others had positive coping strategies, including having deep emotional attachments to others, holding traditional values, helping others, and focusing on future generations.

Our research results clearly show similarities between the two Indigenous groups with respect to how Indigenous identity was fragmented on the individual and intergenerational level and this coincides with other studies on historical trauma and the fragmentation of one’s sense of self or identity (Caruth, 1996; Crossley, 2000; Greenberg 1998). There were similar experiences between the Haudenosaunee and Sámi in the connection between resilience and Indigenous identity. This builds on discussions in other research which shows how strong Indigenous identity has a buffering effect to the impacts of discrimination on mental health (Hansen & Sørlie, 2012; Whitbeck et al., 2004).

Besides many similarities of experiences of Haudenosaunee and Sámi respondents, there were certain points of differences as well. In general, the Haudenosaunee respondents appeared to be more critical to the effects of residence schools. As mentioned earlier, of the majority of those responses represented intergenerational impacts. While the second-generation Sámi experiences were clearly not as negative, the firsthand Sámi experiences were predominantly negative. This result may reflect differences in the national minority policy and institutional practices between the two countries. Second, the result may reflect a difference in cultural communication patterns. The Sámi narrative way typically builds on positive aspects, while negative experiences are addressed covertly.

It reminds us of the importance of having an understanding of the multiple dimensions to Indigenous epistemologies and that a pan-Indigenous approach is not suitable for discussing different Indigenous groups. More research to investigate the mechanisms between racism at the structural level and Indigenous identity, which include a thorough understanding of Indigenous epistemologies, may provide valuable insight into the health disparities experienced by Indigenous peoples worldwide.

Participants discussed how repressed Indigenous identity, language, and culture manifested in their own life experiences as low levels self-esteem, motivation, and confidence, and as feelings of shame, displacement, anger, and depression.

Indigenous identity, language, and culture are key determinants of health. The traumatic experiences of racial oppression of Indigenous people will continue to challenge their everyday health and well-being as long as these matters are not addressed properly. Structural racism encompasses social mechanisms that have made the privileges associated with being White and the disadvantages associated with being a person of colour as relatively permanent characteristics of Western societies (Harrell et al., 2011). With this in mind, an analysis of education policies, through the lens of structural racism, is a necessary endeavour to ensure that current policies are seeking to eliminate racism at the structural level provide a real pathway that will lead to closing the gap on inequalities.
References


Stout, R. & Peters, S. (2011). Kiskinohamamatotapanask: Inter-generational effects on professional First Nations women whose mothers are residential school survivors. Winnipeg: Prairie Women’s
Health Centre of Excellence. Digital stories for the project available at
http://www.pwhce.ca/program_aboriginal_digitalStories.htm


