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"If You Fall Down, You Get Back Up": Creating a Space for Testimony and Witnessing by Urban Indigenous Women and Girls

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Abstract

Historical trauma and the negative effects of colonialism continue to be played out within Canadian culture. These processes have a deleterious effect on physical and psychological health outcomes among Indigenous Peoples. Through the creation of a safe space as part of a decolonizing, participatory activity program spanning 7 weeks, First Nations and Metis women and girls (aged 8-12) were able to begin to unpack what it means to be happy, healthy, and safe, and what is needed to actualize these goals. A community engaged, asset-based workshop approach provided a forum for participants to discuss the impact of traumatic experiences on the ability of adults to model a positive image of strength, independence, and confidence for their daughters, while creating a space to discuss change.

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There are a number of elements that contribute to the health and wellbeing of individuals and communities, many of which are affected by aspects outside of an individual or community's autonomy and shaped by policies and practices that exist within the historical and contemporary cultural landscape in which people live. Healthy attachment and self-determination are two key aspects of Indigenous wellbeing that have been systematically negated by the Canadian government and popular discourse. Healthy attachment is the relationship between children and their caregivers (Ratnamohan & Kozlowska, 2017; Watt, O'Connor, Stewart, Moon & Terry, 2008). It contributes to an individual's ability to develop important coping skills, and it affects physical health as well as emotional wellbeing (Landa, Peterson, & Fallon, 2012; Maunder et al., 2017). When there is a systematic disruption in the ability to parent children, the entire community is affected (Nelson & Wilson, 2017). Within the Canadian context, the residential school system and the Sixties Scoop were two government policies that interfered with the ability of parents to raise their children (McKenzie, Varcoe, Browne & Day, 2016). Historical trauma exists because of such experiences. Cultural memory continues the justification of racialized policies and practices such as inequities in the Canadian judicial, educational, and health systems. Through this community-engaged study using an intergenerational workshop model, the researchers created a space for collective testimony and witnessing. First Nations and Metis women and girls (aged 8-12) were able to begin to address some of the experiences they have had and begin to imagine what healing could look like within their families and communities. Through short quotations, descriptions, and theoretical positioning, we explore how the space for witnessing, testimony, and collective growth emerged in our study.

Background

There is a high level of collective distress and mourning in contemporary Indigenous communities related to events that happened in the past: For example, people have experienced physical, biological, and cultural genocide.[1] Genocide occurs when outside perpetrators engage in actions with destructive intent against a group of people (Michaels, 2010). There have been a number of such examples within Canada, such as Indian Residential Schools, the Sixties Scoop, and policies that limited Indigenous land use that have had a deleterious effect on Indigenous families and communities.

Colonialism is a distal determinant of health. It underscores all other aspects of health and wellbeing, especially mental health (Czyzewski, 2011; Reading & Wien, 2009). As colonial trauma is relived, restorative healing processes and reconciliation need to be undertaken with individuals, families, and communities (Bombay et al., 2014; Evans-Campbell, 2008; Gone, 2009; Yellow Horse Brave Heart, 1998).

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[1] The Truth and Reconciliation Commission of Canada (2015) summary report defined physical genocide as the mass killing of a group of people; biological genocide as the destruction of the ability to reproduce; and cultural genocide as the destruction of structures and practices that form cultural identity, such as loss of land, language, and spirituality.

Forced Removal of Children and Historical Trauma

Residential schools were run by various Christian religious denominations and the Department of Indian Affairs between 1834 and 1996. The purported objective was to educate children; however, it is often argued that the goal of residential schools was cultural genocide (Truth and Reconciliation Commission of Canada, 2015). Children were often forcibly removed from their families and sent to live at residential schools. Often these schools were thousands of miles away from the children's homes. Children were punished if they spoke their natal language or followed their cultural norms, and it was often impossible for parents and family members to visit their children. If parents did not send their children to residential schools, they could face criminal charges (Truth and Reconciliation Commission of Canada, 2016). At these schools, children received inadequate education, healthcare, social supports, and physical supports, including adequate nutrition. Many children died at residential schools and many more were injured through abuse, accidents, and neglect (Bombay, Matheson, & Anisman, 2014; Milloy, 1999), which has had a profound intergenerational effect on physical health and wellbeing (Mosby & Galloway, 2017). The Sixties Scoop, which took place during the 1960s, 1970s, and 1980s, followed government protocol of forced removal of Indigenous children from their families. Indigenous children were either placed in foster care with or adopted by non-Indigenous families within or outside of Canada. There often was no cause to remove children, except for the preconceived notion that children would be better off if they raised within settler society (Dubinsky, 2010; Johnston, 1983; Strong-Boag, 2011).

The removal of Indigenous identity through other policies had an equally profound influence on people and contributed to the legacy of historical trauma. For example, policies that restricted access to traditional lands and territories: Indigenous people were not allowed to go onto their traditional land unless they sought formal prior permission from the government and could face fines and possibly jail time if they were caught hunting of fishing without having obtained prior permission (Dickason & Newbigging, 2010). In addition, there was segregation within health care systems by placing Indigenous people in separate hospitals or wards away from non-Indigenous patients, often with insufficient medical care (Lux, 2016).

Historical trauma as a discipline emerged after World War II as a way to explain mental and physical health challenges experienced by Holocaust survivors, their children, and their grandchildren. The concept was then applied to other population groups, such as refugee populations and Indigenous populations, the common thread being extreme historical distress caused by cultural suppression, government practices, policies, and historical events (Hartman & Gone, 2014; Kirmayer, Gone, & Moses, 2014). Within the context of Indigenous Peoples, the term intergenerational colonial trauma is often used. This draws specific attention to the ongoing effects of colonialism and reminds people that colonialism is not limited to events that happened in the past, which means that addressing colonialism is an ongoing issue (Episkenew, 2009; Maxwell, 2014). By including the term *intergenerational* in intergenerational colonial trauma highlights that harms are passed on from generation to generation. These may be trauma that can easily be named as well as those experiences that are subtler, often woven into the racialized fabric of many social norms found within dominant cultural narratives. While intergenerational trauma is a reality for many families who have had traumatic experiences, such as violent deaths, when it is combined with the legacy of colonialism, the trauma often presents in a more heightened form of historical trauma response. Historical trauma response focuses on outcome

measures, whereas historical trauma explores pathways for distress. Historical trauma response also examines proximal stressors and contemporary trauma, including post-traumatic stress disorder (PTSD) responses.

The symptoms of historical trauma overlap with those of PTSD, however, addressing PTSD is different than historical trauma because the root cause is not a single event or series of events that happened to one person or to one family. For example, historical trauma goes beyond the cycle of abuse often experienced within households affected by PTSD. The experience of trauma is influenced by longstanding intergenerational and personal trauma responses (Evans-Campbell, 2008; Gone, 2013). Compared to PTSD, the response to historical trauma includes higher average levels of depression, withdrawal from community, anxiety, suicidal ideation, substance abuse, violence, anger, and a victim mentality. Historical trauma response may result in difficulty with building interpersonal relationships, reduced energy, pathological expressions of mourning, nightmares about traumatic experiences, insomnia, social isolation, exaggerated dependency or independence, concern over betraying ancestors for being excluded from the suffering, an obligation to share ancestral pain, and other psychological or mental disorders (Denham, 2008). Socio-economic conditions, poor access to healthcare, governmental policies, and racism may exaggerate historical trauma responses by limiting access to supports and services that may be seen as an attempt to dismiss experiences and further marginalize individuals and their communities (Denham, 2008).

It is important to note that it is possible to address historical trauma even if the individual is not exhibiting signs of historical traumatic response. Treatment for historical trauma often includes strategies to engage in cultural continuity, decolonizing methodologies, and traditional healing practices (Auger, 2016; Denham, 2008; Duran, Duran, Yellow Horse Brave Heart, & Yellow Horse-Davis, 1998; Evans-Campbell, 2008; Waldram, 2014; Wesley-Esquimaux & Smolewski, 2004; Yellow Horse Brave Heart, 1998). The understanding is that, in order to treat both historical and psychological traumas, it is essential to legitimize post-colonial suffering and destigmatize people who face distress caused by historical trauma. Hartman and Gone (2014) summarized what they call the *Four Cs* of historical trauma: colonial injury, collective experiences, cumulative effects, and cross-generational impacts. Colonial inquiry requires the consideration and positioning of the role that colonialism has had upon Indigenous Peoples; collective experiences highlights the collective injuries that have come from the shared experiences of colonization, such as loss of culture and language; cumulative effects calls for an examination of how these experiences have snowballed from generation to generation across communities; and cross-generational impacts explores the intergenerational response to the harms caused by colonialism (Hartmann & Gone, 2014). For historical trauma, the traumatic event is widespread and not contained to a specific individual or family experience (Kirmayer et al., 2014).

Cultural Memory

Historical trauma is ongoing. Experiences are often compounded by neoliberal racialized policies, triggered by experiences of racialized violence, and legitimized by cultural memory. Cultural memory for Indigenous Peoples, both within Canada and globally, includes memories of colonial policies that were designed to have a deleterious effect on individuals, families, and communities. These often have had the express aim of annihilating those who were not assimilated into the dominant culture. The lasting legacies for Indigenous communities are the significant economic, social, and health challenges that exist

today. The Truth and Reconciliation Commission of Canada referred to the political acts of the government as cultural genocide (Truth and Reconciliation Commission of Canada, 2015). Differentiated from other forms of cultural memory, the *cultural memory of institutions*, such as the federal government, has a profound influence upon individuals as these individuals attempt to find meaning within their lives (Erll, 2011). Cultural memory within institutions is grounded not only within individual and societal perspectives, but a legacy of funding, policy, procedural, and programming decisions. When decisions have been made that are seen as "effective" and "progressive" are questioned, such as hiring practices or access to resources and services, the ability to shift perspectives can become even more difficult—people may defend the institutional culture because they fear retaliation if they attempt to shift the status quo. This becomes even more apparent when trying to change both cultural memory at individual and community levels and the cultural memory of institutions. When continuously faced with barriers, questions arise as to how much freedom and autonomy people perceive they have within their own lives and their ability to affect change (de Finney, 2014; Smith, 2005; Thomas, Mitchell, & Arseneau, 2015).

Cultural memory is what allows us to remember events and make meaning of both objects and experiences, including those we have and have not experienced directly. Through cultural memory, we create a collective understanding and rationale that places meaning upon social, material, and mental aspects of objects and events. Cultural memory provides a context for positionality as we place ourselves within various locations, institutions, and environments and try to make meaning out of our experiences (Bal, 1999; de Szegheo Lang, 2015; Hirsch & Smith, 2002). Cultural memory allows meaning to be attributed to a red dress, reminding both Indigenous people and the general public of missing or murdered women, just as an image of a hockey stick, an eagle feather, or a red poppy connote cultural meaning. Certain items hold deep significance and shape perspectives, even if one has not directly experienced the emotions associated with the symbolism of the items. Understanding the influence of cultural memory on dominant mainstream culture is essential to understanding how historical trauma continues to affect Indigenous communities. Trauma is often heightened due to longstanding, intergenerational political oppression that limits the ability of Indigenous Peoples to act autonomously (Maxwell, 2014).

Reconciliation and changes to the existing narrative need to take place within institutions and within the general population. Cultural memory within the dominant culture often views First Nations, Metis, and Inuit as the "other," as lesser than and as either undeserving of or needing more assistance than other people. This point of view remains part of the popular narrative. Indigenous Peoples often distrust government policies and procedures because they see their purpose and rationale as being based on inaccurate perceptions and stereotypes of Indigenous Peoples, which includes the noble savage among others, that are perpetuated through popular discourse (Henry & Tator, 2009; Larocque, 2010; Strega et al., 2014). There is a clash between the dominant cultural narrative grounded in colonial ideology and the narrative grounded in the experiences and truths of Indigenous Peoples. The clash between the two narratives, that of settler colonialism and Indigeneity, poses a challenge as Indigenous Peoples attempt to both situate themselves within and apart from the dominant culture (Marshall, Marshall, & Bartlett, 2015). This has been highlighted within Canada with the acquittal of Gerald Stanley in February 2018 in the murder of Colton Boushie, a First Nations man who was shot in the back of the head while asleep or passed out in a parked car after he and some friends came onto the Stanley's rural property in the summer of 2016 seeking help to fix a flat tire. The case divided the county: A portion of the population

felt strongly that Stanley had the right, and possibly the responsibility, to protect his property from the Indigenous trespassers that he saw as a threat, and those who felt that there was no cause for violence, regardless of the reason that the youth were on the property. Within days of the murder acquittal, crowdfunding to show support for Stanley raised over $220,000 CDN from 33,000 donors (Go Fund Me, n.d.). Fake donor names listed well-known Indigenous activists and others, such as "Farmers need a voice," further exacerbated the racialized divide within the country. These events led many to question the state of reconciliation and relationship building within the country because the case revealed very different concepts of justice and viewpoints on racialized violence perpetuated by the colonial state and its citizens (Jago, 2018; Starblanket & Hunt, 2018).

Racialized violence towards Indigenous Peoples is a significant challenge within the fabric of Canadian society. A study in Ontario demonstrated that First Nations people within that province were 2.7 times more likely to have intentional injuries than the general population (Macpherson, Jones-Keeshig, & Pike, 2011). Within Manitoba, in 2009, Indigenous women were 3 times more likely than non-Indigenous women to have been the victim of a violent crime and are more likely to report experiencing severe violence (Government of Manitoba, 2017a). Within Manitoba's capital city of Winnipeg, the majority of youth who access emergency medical services identify as Indigenous (Snider, Jiang, Logsetty, Strome, & Klassen, 2015), with over 1,000 youth accessing the emergency departments in 2012, of whom 20% visited on multiple occasions (Snider et al., 2016). Although causal inferences are neither possible nor appropriate, there are a number of theories about why violence occurs, and why it seems to occur more often in certain populations than in others. There are multi-faceted factors accounting for violence. Factors include witnessing violence at a young age; lack of resources to provide for basic needs, such as safe housing or sufficient food; violence as part of initiation into social groups, such as street gangs; and political and social experiences that are used to justify violence, such as the acquittal of Gerald Stanley in the murder of Colton Boushie (Gill, 2006). Many of these mirror systemic inequities perpetuated by racialized policies that target Indigenous Peoples.

Cultural memory creates space for the interplay between the past and present, allowing for both individual acts of remembering as well as socio-cultural contexts of meaning-making (Erll, 2011). This allows for the contextualization and shaping of future events, ideals, and rationalizations. Cultural memory can also be of a place. Thus, a physical location becomes a site of testimony, as people associate places with both events and sentiments. Sometimes, the act of setting up a public space as in memoriam to an event is an attempt to call for action as well as a testimony to collective memory. Testimony of place is often an act of remembrance for those who are both directly and indirectly involved in the creation and witnessing of such spaces.

Methods

A decolonizing, participatory activity program was developed to assess priority-setting activities among urban Indigenous women ($n = 24$) and girls ($n = 36$) in Winnipeg, Manitoba between September 2015 and March 2016 (University of Manitoba ethics number: H2015:169). Data collection included a series of three workshops that were one evening weekly for 7 weeks with women and girls between the of ages 8 and 12 within the women's care.

The workshops had a series of research objectives and participant goals. The research objectives were established by the researcher and the Manitoba Metis Federation Health and Wellness Department

(MMF-HWD). This study would serve as a needs assessment and would also collect information about health decision-making and priority-setting practices. Participant goals were developed with the women and girls on the first week of each workshop series. These goals highlighted the need to improve intergenerational relationships, while providing a space for capacity building opportunities. Through group discussion and games, participants determined the types of activities and themes that they would like for each of the seven workshop sessions, such as a nutrition night, a self-care night, and a games night.

Activities included non-competitive and improvisation games (e.g., telephone), walks around the neighbourhood, crafts, and shared meals. A combination of qualitative elicitation methods were used. These included arts-based methods, such as drawing pictures, creating sculptures, and creating jewellery; Indigenous methods including discussion circles and storytelling; sports-based methods like playing group games, scavenger hunts, and games based on the medicine wheel; and participatory action data collection, which included transect walks and ranking activities. Data collected included 877 photographs, 3 hours of video recordings, 19 hours of audio recordings, as well as 60 hours of observation and field notes. While all activities were designed to meet the needs and interests of participants, not all activities formed a base for data generation. In order to ensure consent, participants were asked prior to an activity about how it should be recorded (audio, video, field notes, or not recorded). Participants were given the opportunity after each activity to determine if they were still comfortable with the activity being used as part of research. In addition, participants were given the opportunity to withdraw data for a month following the completion of each workshop, which also corresponded with a month-after member-checking activity. The majority of the meaningful conversations discussed within this article took place when the video camera and audio recorder were not turned on, since participants would frequently state, "Don't record this, but you can write and talk about this for your project." As such, this article provides stories and short quotations to demonstrate the study's findings, rather than longer participant quotations.

Descriptive data analysis was completed with participants during the workshop. While participants were offered the opportunity to be involved in more detailed data analysis and review of manuscripts, all declined. Transcripts were transcribed verbatim and imported along with descriptive notes of art projects, field notes, and observation notes into NVivo 9™, a qualitative data analysis software program, for theoretical and thematic analysis conducted by the authors. Initial results were returned to participants within 2 weeks of the end of each workshop (Cooper & Driedger, 2018), with more nuanced results shared upon completion of the study.

<div align="center">Situating Study Findings</div>

A Pan-Indigenous Approach

The study was intended to be Metis-specific. The Metis focus was chosen to avoid various problems associated with pan-Indigenous research. It also addressed a variety of gaps within literature, including a lack of intergenerational research and information about priority setting among Metis families. It would also add to the data on Metis wellbeing. While there are First Nations-specific opportunities for research, programming, and access to services within Manitoba, Metis-specific opportunities are fewer and harder to access. The MMF-HWD was confident that with a young urban Metis population, the recruitment of

8 to 10 families per workshop would be easy. Based on previous research and community engagement carried out in partnership with the MMF-HWD, we were as well.

Recruitment efforts included posters (electronic and print), handbills, emails sent to targeted organizations, and by word of mouth through employees at community organizations. A number of phone calls from the general public were received in response to the recruitment advertisements, although not about participating in the study. Members of the public, who had not previously engaged with the researchers, accused us of perpetuating the stigmatization of Indigenous Peoples by limiting recruitment to Metis families. People asked why there was a research study that would "discriminate against families based on race." Some community organizations did not display the recruitment poster because of the perception of "racial profiling," as one organization later stated. The rationale for using Metis-specific sampling was met with scepticism. People articulated that this project was yet another attempt to "control" Indigenous families. After discussions with the MMF-HWD about the general response we had been receiving, we decided to go ahead with the study without modifying the recruitment criteria. The first workshop would be a pilot, during which we intended to work with the four families who had signed up and then re-evaluate. Three families completed the pilot workshop. One withdrew because they thought it was a language immersion program. Indigenous language programs are an outreach initiative offered by another university within the city.

On the first week, participants in the pilot workshop noted their concerns about the Metis-specific recruitment criteria. The women explained that if the study was looking for a connection between ethnicity and a disease Metis-specific research would be reasonable because there might be a genetic component. Participants explained that families and communities are often comprised of individuals who self-identify as more than one Indigenous category. Participants also noted that there are many families where one parent identifies as Metis and the other as First Nations. Their children may identify as Metis, First Nations, or both throughout their lives. Participants also explained that community-engaged research about health and safety needed to be rooted within the broader community, where people with similar experiences could work together to promote healing and effect social change. They noted that this was especially important in light of the large number of missing and murdered Indigenous women.

In response to the requests to modify the recruitment criteria from participants and the community, changes were made for the second and third workshops. Participants in these workshops said they appreciated the pan-Indigenous approach. They explained that they were not seen as Anishnaabe, Cree, Oji-Cree, or Metis within the urban context, but that identity, as one of the child participants stated, is based on "First-Nations colours." When her mother asked her what that would be, she replied "brown." Participants also wanted any familial female caregiver to be able to participate, rather than specifically recruiting mothers, explaining that many girls live with extended family. With the new recruitment criteria, community organizations not only put up the posters, but made additional copies and provided support to distribute posters around the city. We received phone calls thanking us for being inclusive of all Indigenous Peoples within the study, including Metis who are often excluded in favour of a First Nations-specific focus. After the changes to recruitment criteria were made and the recruitment for the second round of data collection was opened, the next two workshops were filled to capacity, necessitating the creation of a waiting list, within 36 hours.

A Space for Testimony About Indigenous Experiences and Expectations

Finding a location to hold the workshop that held meaning for participants and would serve as a safe space for Indigenous women and girls was a vital component of this study. The spaces selected were places that provide services and supports to Indigenous community members and have collections of regional Indigenous art and artifacts, such as baskets and clothing, displayed prominently. Two spaces were used: The first workshop was held in a community office space, and the second and third were held in an Indigenous community library. The design of these two spaces allowed them to act as sites of testimony and remembrance. The office space featured buckskin dresses, moss bags, birch bark baskets, photographs, posters, and signs in English, French, and Michif (the language of the Metis people). The library features an extensive collection of books and videos in multiple languages and at various literacy levels that are dedicated to Indigenous topics. Words of welcome in different Indigenous languages surround the circular space. There was a wood inlay blanket pattern in the middle of the open space, and art adorned the walls, which included artifacts such as photos of chiefs, moss bags, cradle boards, drums, and jingle dance dresses from across Canada. These elements highlighted that the space was a place for testimony and narrative. The artifacts create a sense of belonging and shared history. The artifacts and the memories associated with them, as well as the physical spaces these artifacts inhabit, foster strength, which are felt for generations (hooks, 2009).

The location set a tone of respect for Indigenous cultures and cultural safety within the workshop. The locations were designed to place value on Indigenous cultures and histories and were intended to convey this sentiment to participants. The artifacts decorating the rooms from floor to ceiling encouraged discussion among individuals and families about the objects and their significance. Participants shared stories with one another about attending pow wows, participating in drum circles, using moss bags or cradle boards, and other memories with positive cultural connotations. The simple act of remembrance triggered by the artifacts on display seemed to encourage further testimony and witnessing from the participants. Being surrounded by artifacts seemed to enable the girls and women to begin to let go of some of the melancholy they expressed over the course of the workshop. The more positive outlook was enhanced throughout the 7-week workshop as women and girls discussed what wellbeing and happiness could look like, and how they could break the cycle of trauma.

Within the research workshops, participants drew on their experiences in various contexts and raised the notion of hidden, overt, and transitory locations of identity and meaning making. Rebecca, a research participant who spoke about having multiple family members and friends on the list of murdered and missing Indigenous women, discussed her participation in the creation of one such space. She also discussed how, through the workshop, she realized the need to voice her experiences within the greater community. She participated in a community-organized project in which community members tied red ribbons to bridges in Winnipeg, Manitoba. This act of testimony was inspired by a similar activity in The Pas, Manitoba, earlier in the year. The ribbons were a visible reminder of the ongoing need to continue to address racialized gendered violence (Blunt, 2015). The bridge is a symbol of crossing and the ribbons act as a reminder to bear witness to the ongoing struggles families and communities face as they try to understand what has happened to their loved ones. The ribbons were a way to help shift cultural memory and provide a place of testimony and place of healing, reminding the general public, family members, and community members that the women who were lost are not forgotten. For Rebecca, walking and sharing with others who had similar experiences was a meaningful act of healing.

The act of sharing testimony was achieved through collective moments and a shared understanding and creation of meaning. Through the shared construction of meaning, made by being present within a space, an archive of meaning and witnessing is both created and maintained. The archive of the collective memory includes the testimony of events, objects, and stories that remind people of cultural memory and also inspires change (Emberley, 2015; Episkenew, 2009). The archive is not necessarily of events that happened in the distant past; it also includes more recent events that add to the story. Some memories are personal, whereas other stories have played out publicly within the media. We will explore two such narratives. While participants did note these events in each of the three workshops, the following information was not a prominent feature of discussions. We believe this was due to the forward-looking nature of the research. Participants discussed the past briefly, contextualizing both their own lived experiences and the historical experiences of colonialism in Canada. They used this as a stepping stone to focusing on the possibility of shared learning and actualizing change. It is important to understand the context and living memory that exists pertaining to Indigenous women and girls within Winnipeg: Many participants said they were afraid that the children may not reach adulthood. There were two recent cases of violent attacks on young Indigenous women that contributed to this fear. In 2014, the body of a teenage girl, Tina Fontaine, was found in a river in Winnipeg. The tragedy surrounding her death was well documented within the news media (CBC News, 2014b; Sinclair, 2014; Taylor, 2015). A vigil, attended by hundreds of people, was held to pay homage to a life lost too soon. The eagle within Anishinaabe teachings holds significant value, as it is able to pass messages from the Earth to the Creator. The eagle is a protector and is often associated with teachings of love. After Tina Fontaine's body was found, an eagle was seen flying low over the location until the vigil began (Sinclair, 2014). This memory of the vigil and the eagle remained a central part of the narrative shared as participants discussed the loss of this young life, and the loss of other women and girls.

The testimony of the trauma that Tina Fontaine experienced in the last days of her life, as reported in the media (CBC News, 2014b), was followed a few months later by the violent attack on another First Nations youth, Rinelle Harper, who was left for dead on the banks of a river within the city (CBC News, 2014a). The river bank where she was found has become a location of testimony and cultural memory. It has also strengthened recognition that more support, beyond what can be provided by the police, is needed to ensure safety. Rinelle Harper survived and has been placed in a role that she did not envision when she came to Winnipeg to complete high school. She now speaks out against racialized and gendered violence (Dean, 2015). The tragedy surrounding the death of Tina Fontaine led people in Winnipeg to re-establish a group known as the Bear Clan Patrol that was active in the 1990s. The Bear Clan Patrol partners with the police and city government; however, they are largely an autonomous group that employs a non-violent approach to addressing challenges and conflicts. The Bear Clan Patrol is a volunteer-run group who actively work to create a safe community and prevent violence by being present, visible, and engaged ("Bear Clan Patrol," n.d.). Among participants, there was the communal memory of the Bear Clan Patrol as an Indigenous effort to create a peaceful and safe community for Indigenous and non-Indigenous people. In the media, the public affirmed the importance the Bear Clan Patrol once had in ensuring safety, protection, and community mobilization, and it was re-established to meet growing recognition of community needs (Taylor, 2015). A key part of the cultural memory transmitted through the dominant popular discourse and reported in the media, places blame on Indigenous women and girls when they experience violence and see them as less worthy than non-Indigenous girls (Henry & Tator, 2009; Strega et al., 2014). However, through the living testimony of

Indigenous youth, families, and communities, and the actions of groups such as the Bear Clan Patrol, the dominant narrative is beginning to change. The active mobilization of the Bear Clan Patrol in 2015 was a central event for many families within the Girls Night Out research study. Many participants envisioned a model that would ensure the safety and wellbeing of their daughters that did not involve the police or government and the Bear Clan Patrol provided a beacon of hope for many.

Moving Beyond Violence

The women who participated in this study saw the future for Indigenous women through a cautionary lens. When asked to envision a future for their daughters, participants' comments were filled with despair and melancholy. The women talked about their daughters' futures. Cheryl said, "I just want her to be strong and make the right choices." Violet believed, "it's not going to be the way they hope it is." As the women discussed their vision for their daughters' lives as adolescents and young adults, they also reflected upon the experiences and perspectives that influenced their decisions and experiences. The women articulated a desire for their children to have more social supports than they currently had. They also discussed the financial challenges they faced as adolescents and expressed hope that their daughters would not have to engage in the same risky behaviours that they did in order to survive, such as engaging in gang-related activities. The women wanted their daughters to keep drug and alcohol use to a minimum in order to prevent the girls from becoming street involved and to enable them to finish school, gain employment, and to be viewed without the stigma that the dominant culture places upon Indigenous women. The women felt that there was a slim possibility that their daughters would survive adolescence without experiencing the challenges that typified their experiences growing up. Participants hoped that the girls will be able to "be strong through it all" [Cheryl] and to "always appreciate what they have and be happy with what they get" [Rebecca].

Narratives as Healing

Identity often hinges on the narratives told and how people position themselves within the story. When examining historical trauma and historical trauma response, the narrative of wellbeing is central within Indigenous determinants of health (Mowbray, 2007; Reading & Wien, 2009), creating an intersection where experience and cultural memory meet. These narratives provide guidance and a sense of purpose as people make decisions about how they are going to live their lives (Tedeschi & Calhoun, 2004). The ability to reconstruct personal and community narratives as characterized by strength, rather than victimization, allows people to address historical trauma and lessen the intergenerational effects of trauma (Kienzler, 2008). When the girls were describing what an ideal Indigenous community and/or family structure would look like, the description included single-parent homes, homes of other family members that they would visit, graveyards to bury family and friends, places to escape violence such as community centres or locations with signs that indicate they are safe spaces for children, and low-income housing played prominently. The women were often upset when girls explained why these locations needed to be part of their communities. For example, a cemetery was needed for people who had been killed and signs were needed to indicate safe spaces to hide if you were in danger. This was a problematic finding for the women—they thought that they had successfully shielded their girls from realities such as unexpected death, interpersonal violence, and homelessness. The current dominant cultural narrative suggests that certain environments are "ideal" for raising children and the others are unhealthy or unsuitable, which has affected the identity of many families who participated in this

research. In addition to trying to live up to the standards in the dominant narrative, the participants were also trying to find ways to ensure that their daughters were not part of the negative stereotypes and statistics often cited as the rationale for racialized programs and policies. The women were afraid that their children will be removed from their homes and placed under the care of the State. Currently in Manitoba, 90% of children in the child welfare system are Indigenous (Manitoba Families, 2017), while making up only 17% of the child and youth population in the province (Statistics Canada, 2017). Other statistics, like that Indigenous youth are 3 times more likely to witness family violence, that 53% of First Nations children and youth under 18 years of age in Manitoba were living in poverty (compared with 17% in the non-Indigenous population), that 1 in 6 Indigenous youth did not meet the numeracy performance expectations for Grade 7 (Government of Manitoba, 2017b), contribute to negative perceptions about Indigenous children and families. These statistics are used, in part, as a justification for funding allocations, but it also plays strongly into the cultural memory of who Indigenous people are, what children are like, and the justification for intervention by state organizations. Even when reports make claims about historical trauma and the need for reciprocity and cultural relevancy, these stark statistics paint a picture of children suffering rather than succeeding, which reinforces the narrative that continues to support the removal of Indigenous children from their communities to be placed in the care of the government.

Cultural memory has perpetuated the stereotype of unfit Indigenous families, which has contributed to removal policies such as the Sixties Scoop—a topic that was raised by participants within each of the three workshop groups. The Sixties Scoop had a direct impact on many of the adult participants in the group who had either personally experienced being removed or had a family member who had been. Currently, there are more youth in the child welfare system than were attending residential schools at the height of their operation (Blackstock, 2003). The women discussed how they had lost their identity including their names, familial histories, and sense of who they were and where they belonged. They shared that they wanted their daughters to always feel proud of who they were, where they came from, and to know that they would always be loved and have a family to come home to, regardless of where they lived or how old they were. They stated that these feelings were something they still were working on in their personal lives. Stories define us, shape who we are and how we see ourselves, and they help to define our backgrounds (Coiser, 2011). Mainstream culture provides a limited narrative, embedded in cultural norms, about what it means to be a woman or a girl. When those narratives intersect with cultural narratives related to race and colonialism, many Indigenous women and girls feel overlooked (Driscoll, 2002). Institutional racism, classism, sexism, and ageism are embedded within identity formation (Coiser, 2011; Driscoll, 2002; Sue et al., 2007). Participants discussed how the narratives of missing and murdered Indigenous women and Indigenous women as unfit parents shaped the definition of what it means to be an Indigenous woman or girl. This narrative is perpetuated by discourse within popular culture through the media, the public, and government policies. It was also discussed within the workshops and was challenged in the final weeks of the workshop as participants engaged in critical reflection about self-determination and planned strategies to prevent violence rather than accepting the seeming inevitability of violent experiences. Participants noted that it is vital to continue to shift public and private perspectives on what an Indigenous woman or girl looks like.

Children generally learn from what they see and hear around them, even if it is not explicitly stated. However, if not explicitly stated, the narrative about why particular decisions were made may change and become distorted by the perception of other people involved. Girls may not realize that the reason

their parents respond in a certain way is because of experiences of racial violence that parents have had. One of the girls in the workshop, Tia, had a habit of running away. This scared her mother and often resulted in ineffectual punishments and no change in behaviour. At the workshop, Tia's mother was asked how she felt when her daughter was missing. She talked about how scared she was. Tia looked surprised and said, "I didn't know that you felt scared. I'm always okay." The family reported the following week that they had discussed the issue further at home and Tia agreed to a plan to let her parents know when she would be home and the general location she was going to, such as by the river or at the library. A month after this conversation, the family reported that the plan they devised was working and communication in general had improved within the home.

Many of the families had faced tragedies within their lives, in addition to the traumas experienced by previous generations. Every adult participant independently discussed experiences of extreme violence within either her life or the lives of family members. The women strove to create a shared narrative to prevent less-optimal decision making regarding personal safety and wellbeing. As Julieen, one of the adult participants stated:

> I am strong because I made it through everything. I'm still here. I haven't given up and I'm not going to 'cause I don't want Jessica to think, "Oh, that's how you live life. I can't do it, so I'm not going to try again." I tell her, "You can do it, try again. Keep going, keep going, you can do it. If you fall down, you get back up. If you have a hard day you just move on to another day."

Testimony and Witnessing as Healing

Testimony involves moments that provide an instance of recognition and interconnectedness. Emberley (2015) explained that testimonies and testimonials tell us whose bodies are lovable and which "represent objects of violence to be disavowed or rendered disposable" (p. 136). Episkenew (2009) wrote that "silence leads to isolation, causing many Indigenous people to suppress their feelings, believing that they are alone in their experiences and responses. The effects of emotional repression on emotional and spiritual health are long lasting" (p. 16). Bearing witness by peers is an important part of the healing journey and allows people to address historical trauma responses.

Participants within this project felt a lot of shame over a perceived lack of daily living skills often seen as necessary to lead successful lives, such as literacy skills or cooking skills. The women also experienced difficulty in dealing with acting-out behaviour among pre-pubescent girls. The adults questioned the impact their previous life choices and experiences would have on their daughters. They often expressed hope that their daughters would be able to have different experiences and opportunities and not knowingly enter into potentially dangerous situations.

Girls and women were asked to think about their ideal community. In their responses, they expressed a desire for a community that was safe, where everyone would be respected, and where community members would share and support one another. Around week three of the workshop, this sense of community that participants envisioned began to take shape. The women stopped focusing on completing activities or talking specifically with their daughters and embraced all of the girls equally— helping them, listening to them, and encouraging them to voice their thoughts and opinions. It was interesting to watch the participants deliberately create by a space free from violence and "othering" during the workshop. For example, when a girl refused to sit next to another child and made negative

comments about the other child's physical appearance or her use of traditional language, the girl was admonished by the adults, including but not limited to her family members. Negative comments about life expectancy, violence, and sentiments of hopelessness were typically reserved for moments when adults were speaking out of earshot of the girls. However, the girls often mirrored negative sentiments within their own commentaries, thus demonstrating that the ideas were not as hidden as parents might have wished.

The women continually tried to demonstrate what it means to be supportive of one another. The mask of insecurity began to fade during the course of the workshops. The women and girls wore less make-up, stopped worrying about checking their appearance throughout the night in the bathroom mirror, stopped wearing clothing to impress one another such as fancy shoes or form-fitting dresses, and began to embrace the space as one where they could be themselves. Data collection activities were designed in a way to encourage positive thinking and capacity building. Participants young and old were encouraged to play, to be silly, and to try new things. Participants discussed how the workshop was a place where they could be themselves and learn together. In addition to trading in heels for moccasins and styled hair and extensive make-up for lip gloss, messy buns, ponytails, and braids, as women saw that value was placed on what they thought and felt rather than on their appearance, they appeared to become more comfortable within the space and provided what seemed to be less guarded responses within data collection activities.

Participants openly discussed how comments made during the first few weeks of data collection were not accurate representations of their situations. They explained that once they felt as if they were not being judged, they felt they could share different information and regretted providing misinformation initially. Examples of topics included living situations, educational attainment, religious belief systems, and health-seeking behaviours. The women tried their best to be positive with one another, especially with the girls. They made a point of encouraging all the girls in the group by letting them know that they were doing a good job, that their ideas were of value, and that they were proud of them. Jersey, one of the girls, was especially proud of her newfound ability to draw stars. Although she was unsure about how to write her name, she said that she could draw stars instead because "Kandace [one of the other mothers in the group] says I'm a star" and taught her how to draw stars.

The response to adversity and the way that people negotiate public narratives of both survival and change can be a transformative process in and of itself (Mohatt, Thompson, Thai, & Tebes, 2014). For participants in the "Girls Night Out" workshops, there was a change in how they positioned themselves at the end of the 7 weeks. The women began to characterize themselves as strong, capable caregivers who would be guiding the girls as they made decisions. The girls began to refer to themselves as strong in their own right. These changes were significant for many families and led people to return to school, seek employment changes, seek out healthcare services, and make different decisions regarding their interpersonal relationships. Transformation occurs when people are able to exert power to achieve change (Kienzler, 2008). The women often stated that they did not have strong role models around to guide them in using positive parenting methods with school-age girls. They talked about how this project helped to shape a new narrative about parenting. The women often talked about wanting to encourage their daughters, so they would be able to be strong. They also noted that there is a need for external support from family members and communities to ensure that they have the tools to stay strong

in the face of the various challenges that both adults and youth will likely face, such as lateral violence within the workplace and unexpected deaths of family member and friends.

Mohatt et al. (2014) wrote, "strong cultural identity may be emblematic of public resilience in the face of historical trauma" (p. 131). Healing from wounds accumulated over generations is a slow process; it does not happen overnight and often it is realized in subtle ways when people see that they are not alone and that they are important (Episkenew, 2009). Feeling a sense of support and strength within the group provided the opportunity for parents to discuss their hopes for their daughters' futures. Many parents said that they want their daughters to know they are supported and to feel a different level of connection to family than they experienced. As Georgina explained, "I want my daughters to know that I love them so very much, and that I will really stand by their side, encouraging them, loving them, and just cheering for them." The girls replied with statements such as, "I want her to know that I'll make her proud when I grow up" [Mysti].

Conclusion

The legacy of residential schools, the Sixties Scoop, a staggering number of children within the child welfare system, and racialized violence against Indigenous women and girls had a profound effect on participants. No matter how hard the women have tried to shield their daughters from trauma, the girls have witnessed the challenges their caregivers face and have had their own experiences of racialized aggression. As participants began to find a way to work together to promote safe spaces for dialogue and testimony, the cultural memory and positioning of Indigenous experiences as explained by Indigenous individuals and communities began to shift from neo-colonialist perspectives to their own notions of what an Indigenous woman can and should be.

When participants, both adults and children, discussed how to be healthy and safe, they pointed to the Four C's of historical trauma. Participants discussed collective experiences and cross-generational impacts, framing these within cumulative experiences that shape who they are and how they see the world. For the participants within this research study, finding inner strength and the ability to carry on regardless of external challenges was of central importance in order to have the ability to be happy, healthy, and safe. Participants identified the need for love as central in the exploration of these outcomes. They noted the need to have both the ability to love themselves and to demonstrate love for each other. Participants discussed how this had been lost through the various colonial practices, such as the forced removal of children from their families and the need for colonial inquiry to provide space for changes to take place within intergenerational environments.

In order to move forward, policies are needed to ensure that all stakeholders have the opportunity to engage in program planning and service delivery to help ensure both cultural relevance and capacity building. It is equally important to have opportunities to foster the development of decision-making skills because part of the legacy of colonization is that individual and community autonomy has often been stripped away. Mentoring opportunities should feature prominently in culturally responsive service and education delivery platforms. In addition, all organizations that work with Indigenous communities, including government, and the public and private sectors, need to receive training on identifying and understanding historical trauma and historical trauma response.

Shared engagement, through testimony and witnessing within the workshops, enabled the women and girls to better articulate their aspirations for a healthy and safe future for all members of their families and communities. It is important to understand that change does not happen quickly. Creating a space for testimony and witnessing within the research, where participants could share as much or as little as they wanted, was an essential part of the study design. Participants worked to build communities that would allow them to frame their understandings of what it is that they want to see in the future and how to achieve a place where their girls would be happy, healthy, and safe. Everyone actively listened to the thoughts and feelings of the children and worked to create a space that was more than just one of speaking and listening, but of testimony and witnessing where changes began to take place and healing was encouraged. Activities were planned around the wishes of the girls, which led to the involvement of all participants in acts of witnessing and building reciprocal relationships. Ultimately, everyone within the workshop space articulated that they wanted to see the girls and their families succeed. The hope and pride children had in their female family members seemed to act as an instigator for adults to explore their own hopes and pride in both themselves and one another. This became apparent as relationships formed from week-to-week through the workshops and discourse moved from despair to hope.

The trauma experienced and witnessed occurred over centuries, and daily, ongoing racially motivated micro-aggressions continue to influence people. Children dream of a future where they have access to hospitals "to have babies in" [Callie], as well as schools and libraries where they "can learn" [Shalane]. They hope to have community centres where they can read books, watch movies, and play games. Girls dream of communities where animals are treated fairly, where Elders and parents are together, and where, as 10-year-old girls, they still embrace the thought of "no boys allowed . . . okay maybe some boys" [Kylie]. The girls wanted a place where they could act as witnesses, where they could tell their stories, and they could be "brave girls" [Lexi]. They want a place where they can feel safe, healthy, and happy together within an Indigenous community filled with Metis, First Nations, and Inuit people. They dream of a different future. Hopefully, their dreams will become realities.

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