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A House of Healing: The Importance of Friendship Centres to Urban Aboriginal Populations

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Abstract

Friendship Centres seek to fill an important gap in service provision by providing Aboriginal-based and community-run programming. More than simply a social service provider, however, Friendship Centres offer individuals a safe, supportive environment in which to address issues of trauma and to explore their own identities. This leads individuals to develop a strong sense of place and positive-place identity. Research was conducted between May and August 2017 at the N'Amerind Friendship Centre in London, Ontario. Research methods included participant-observation, ethnographic interviewing, and the creation of a short ethnographic film. The thesis concludes that Friendship Centres are significant landscapes due to their cultivation of participants' sense of self and of belonging. Additionally, the thesis contends that participants' personal identification with space allows them to use Aboriginal English varieties without feeling self-conscious and without fear of censure or reprisal.

Keywords

Friendship Centres, Urban Aboriginals, Canada, Resiliency, Trauma, Aboriginal English Varieties, Therapeutic Landscapes

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Chapter 1

1 The Where, The Why, and The How: A Discussion of Context and Methodology

“Who are you and why are you here?”

I had been a regular attendee of the seniors’ crafting circle for about a month now. And, while I had introduced myself to a number of the women, I had never been formally introduced.

“Oh. Uh...I’m...I’m a researcher. In anthro—”

“What’s that?”

I pause, trying to decide whether her confusion is due to a lack of understanding or her inability to hear me without her hearing aids. Not missing a beat, however, Sherri pipes up from the other side of the circle.

“She works with dead people, Joanne.”

“What?”

“Dead people. Yknow, graves and corpses and stuff.”

Flustered, I open my mouth to clarify that while, yes, some anthropologists do work with human remains, I, in fact, do not. But, as I frantically attempt to piece together the words, Joanne looks over at me and says...

“Oh. It’s ok, honey. I understand now.”

Friendship Centres are uniquely Canadian organizations which combine social service provision with cultural revitalization. Compared to mainstream services, Friendship Centres employ culturally-based programming to mitigate the effects of deculturation and discrimination as experienced by urban Aboriginal populations. The N’Amerind Friendship Centre – located in downtown London, Ontario – is one of five Aboriginal-based and community-run organizations in the city. As a result, it is more accessible to Aboriginal clients than most Western institutions. When discussed in the literature, it is

the role of Friendship Centres as social service providers which often takes precedence. This thesis offers a different perspective by examining the personal benefits of the N'Amerind Friendship Centre according to those who use it.

As with any collaboration, the research project went through many forms prior to what is presented here. Initially, I intended to examine efforts to revitalize Oneida on the reserve. However, as those involved showed little interest in collaboration, I approached the N'Amerind Friendship Centre about conducting research there. Those I spoke with were more receptive; but again, were not interested in involving an outsider in their language revitalization project. I was told that staff and clients preferred to keep their language classes private as language learning was, to them, an intimately personal affair. In addition, my position as a white Canadian with no previous experience in the community made my presence in this area inappropriate. After much discussion, however, it was decided that were I to pursue a different area of research – one which focused on the Centre more broadly – I would be permitted to conduct fieldwork at N'Amerind. Thus, I began to look at why the N'Amerind Friendship Centre was important to those who use it. Although I was initially concerned that my position as a white researcher would be problematic, I was pleased to find out that my status as an outsider mattered more than my age, gender, or ethnicity. While these factors did influence how I responded in certain situations, they did not significantly impact how I was treated nor what I was allowed to experience. More often, I found that it was how well I knew a certain staff member or client that really affected my access.

The aim of this chapter is to contextualize the research I completed at the N'Amerind Friendship Centre during the summer of 2017. To do so, the chapter will be

divided into three sections: research context, methodology, and terminology. In the first section, I will discuss the N’Amerind Friendship Centre – where it is located; what its internal organization is; what its mandate is; and how it is funded. Following this, I will discuss the methods I employed during the research period as well as those I used during my analysis. Finally, a note on terminology will be provided to clarify my vocabulary choices throughout the paper.

1.1 Research Context

Under the *Indian Act* of 1876, Aboriginals¹ and their lands came under the control of the Federal government of Canada (Newbold 1998). According to Mary C. Hurley (2009, 1), the Act “reflected the government’s preoccupation with land management, First Nations membership and local government, and the ultimate goal of assimilation.” Today, the *Indian Act* “remains the principle vehicle for the exercise of federal jurisdiction over ‘status Indians’” through the “regulation [of] band membership and government, taxation, lands and resources and money management, among other matters” (Hurley 2009, 1). Aboriginal communities have long criticized the Act for its role in the Residential school system, the reservation system, gender-based restrictions on status, and the outlawing of Aboriginal cultures and traditions (Hanson 2009). In addition, assimilationist policies such as the *Indian Act*, have long been cited as the cause of contemporary inequalities in Canadian society.

¹ The Indian Act of 1867 only recognized First Nations not Métis, non-status Indians, or Inuit. Inuit were later included in an amendment to the Indian Act in 1939 (Newbold 1998); however, Métis and non-status Indians were only acknowledged after the Daniels Decision in 2016. Urban Aboriginals are not currently protected under any legislation.

According to the 2011 National Household Survey (NHS)², 4.3% of the total Canadian population identifies as Aboriginal (Statistics Canada 2018). This population rose 20.1% between 2006 and 2011, compared to 5.2% in the rest of Canada (Statistics Canada 2018). In terms of living conditions, 37% of First Nations children, 30% of Métis children, and 26% of Inuit children were cited as living in lone parent families compared to 17% of non-Aboriginal children (Government of Canada 2015). 4% of all Aboriginal children 14 years and younger lived in foster care (Government of Canada 2015). According to Statistics Canada (2011), of all children in foster care, 48% identified as Aboriginal of which 82% were First Nations. On reserve, 28% of First Nations and 30% of Inuit lived in crowded homes. Comparatively, of those living off-reserve, 7% of First Nations and 3% of Métis lived with crowding. In total, 26% of First Nations, 13% of Métis, and 30% of Inuit lived in homes in need of major repairs (Government of Canada 2015). Regarding education and employment, 48% of Aboriginal people aged twenty-five to sixty-four possessed a “certificate, diploma, or degree from a trades school, college, or university” (Government of Canada 2015). In contrast, 65% of non-Aboriginals had postsecondary qualifications. Of those with postsecondary credentials, 71.0% of First Nations, 78.4% of Métis, and 73.4% of Inuit were employed. Without such credentials, only 37.3% of First Nations, 52.6% of Métis, and 44.9% of Inuit had secured employment. Finally, according to the Aboriginal Peoples Survey (2012), 52% of Aboriginals aged twelve years and older “rated their health as excellent or very good.” However, 61% of First Nations, 60% of Métis, and 42% of Inuit were “diagnosed with at

² The available statistics on Aboriginals come from census data collected by the Canadian government. The data, therefore, does not reflect an Aboriginal interpretation or perspective on the topic. Currently, no sources exist to contest these views.

least one chronic condition” (Government of Canada 2015). For non-Aboriginals, the rate was lower with only 53% having been diagnosed with at least one chronic condition.

As will be discussed in chapter two, there is currently no government policy in place to address these issues for urban Aboriginal populations. Friendship Centres, along with other Aboriginal social service providers, fill this gap by offering programs and services which cater to these needs.

The N’Amerind Friendship Centre was established in 1967 in London, Ontario (Langford 2016; N’Amerind Friendship Centre 2017b). Originally situated in a house on York Street, N’Amerind served primarily as a drop-in centre. Over the years, however, the Friendship Centre has grown to include twenty programs between its London and Windsor locations for which it employs thirty-one staff and twelve members on its board of directors (N’Amerind Friendship Centre 2017c, [a] 2017).

To be nominated for a position on the board of directors, an individual must meet the following requirements: (1) be 18 years of age or older (except for the youth delegate); (2) be knowledgeable about Aboriginal communities in the area; (3) be willing and able to attend board and committee meetings; and (4) be nominated by a member with a current N’Amerind membership (Honyust 2015). An exception to this is the youth delegate who must be selected by the current members of the youth council (Honyust 2015). The board of directors is elected each year at the Centre’s Annual General Meeting (Honyust 2015; N’Amerind Friendship Centre 2016)

Membership requires an individual to fill out a form specifying their name, address, phone number, Aboriginal status, and family membership information.

Individuals not in the possession of a status or citizenship card, as in the case of non-status Indians, may need to be interviewed to verify their Aboriginal heritage (Emily Pitts “field notes” 2017). In all cases, board approval is required (N’Amerind Friendship Centre 2016). Membership at the N’Amerind Friendship Centre entitles the holder to: (1) vote at the Annual General Meeting; (2) receive the Centre’s bimonthly newsletter; (3) get a reduced rental rate for the N’Amerind Gym; and (4) receive a free membership to the Dorothy Day Learning Centre’s resource library (N’Amerind Friendship Centre 2016). In previous years, YMCA privileges were also included in Centre membership; however, those have since been removed (Emily Pitts “field notes” 2017). Yearly fees range from \$6.00 for seniors and students to \$18.00 for families (N’Amerind Friendship Centre 2016).

According to the Centre’s mission statement, N’Amerind is committed to “the promotion of physical, intellectual, emotional, and spiritual well-being of Native people and in particular, Urban Native People” (N’Amerind Friendship Centre 2017b). A commitment which is realized through

the implementation of culturally relevant programs aimed at social, recreational and educational needs, at developing leadership, at increasing awareness levels of native heritage, establishing resources for community development, and in promoting the development of urban aboriginal self-governing institutions (N’Amerind Friendship Centre 2017b)

Programming at the Centre occurs daily; however, public programming occurs primarily Tuesday through Thursday. Mondays and Fridays, in contrast, are filled with individual counselling sessions, meetings, and the completion of administrative tasks such as emails or paperwork. While most programs run during the morning and early afternoon, group healing circles occur three times a week in the evenings to

accommodate those who work. In addition to daily programming, the Centre runs a Community Kitchen on Wednesday nights and hosts many public events such as community socials, beginner fitness classes, craft sales, and various seasonal celebrations. A full list of programs and services can be accessed at www.namerind.on.ca/programs/.

As a charitable non-profit organization, the N’Amerind Friendship Centre relies on arm’s length donors to fund its operations. Defined by the Canadian Revenue Agency, arm’s length describes “a relationship where persons act independently of each other or who are not related” (Agency and Agency 2002). For the 2017 fiscal year, the N’Amerind Friendship Centre received a total revenue of \$2,589,998.00 from a combination of gifts from other charities, government funding, and other revenue sources (Canada Revenue Agency 2017). These include the Ontario Trillium Foundation, the United Way, and the Canadian Heritage Foundation (Government of Canada 2017a; The Ontario Trillium Foundation 2017; The United Way: London & Middlesex 2017). The Ontario Federation of Indigenous Friendship Centres (OFIFC) also provides N’Amerind with financial support; however, this aid is dependent on the Centre continuing to meet the OFIFC requirements for membership and Friendship Centre status (Ontario Federation of Indigenous Friendship Centres 2013).

1.2 Methodology

Fieldwork was conducted between May and August 2017 at the N’Amerind Friendship Centre in London, Ontario. Completed in accordance with the Tri-Council Policy Statement on research in Aboriginal contexts, this project was determined jointly by the

researcher and Friendship Centre staff (Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, and Social Sciences and Humanities Research Council of Canada 2010). Field methods used during this research period included participant observation, semi-structured interviewing, and ethnographic filmmaking.

Participant observation took the form of volunteer work in the Centre's public programs. The main programs in which participant observation was conducted were the Life Long Care Program, the Canadian Prenatal Nutrition Program, the Aboriginal Family Support Program, and the Kizhaay Anishinaabe Niin Program's public healing circle. Over the course of four months, forty hours were spent in the Life Long Care Program; between twenty to thirty hours in either the Canadian Prenatal Nutrition Program or the Aboriginal Family Support Program; and twelve hours in the Kizhaay Anishinaabe Niin Program. Time was also spent volunteering for the Mother's Gateway Program and the Apatisiwin Employment and Training Program; however, volunteering in these cases was conducted over the span of a single day rather than over several months. While the N'Amerind Friendship Centre supports over seventeen programs between its London and Windsor sites, much of programming is centered on individual consultation with clients or healing circles. In both cases, access is restricted for reasons of privacy and confidentiality. All the programs which I attended as a volunteer were public events open to all community members.

Semi-structured interviews were conducted individually and took between forty minutes to two and a half hours to complete. Intended to elicit participants' personal narratives, questions were open ended in nature and thus did not proceed in accordance

with an interview schedule. A general interview guide is included in Appendix I for reference. Participants were selected based on their involvement in the Friendship Centre as either an employee, a client, or a volunteer. Semi-structured interviews were only completed with N'Amerind staff, however, as a result of various complications in the lives of clients which made formal interviewing inappropriate. The perspectives of clients and volunteers were discussed during informal conversations. In total, ten individuals agreed to participate; nine of which agreed to have the results of their interviews used in this study. Of these individuals, three identified as female and six as male. Ages of participants ranged from twenty-six to sixty-five years old with most participants falling within the range of thirty to sixty years old. While all interview participants identified as Aboriginal a range of nations were represented in the sample. Specifically, of the nine interviewees, five identified as Oneida, one as Delaware, two as Anishinaabe, and one as part Munsee, part white. For a complete list of interviewees and their characteristics see Appendix II.

At the beginning of each session, participants received an Information and Consent Letter, which they were expected to sign as well as an explanation of the letter's contents. While most participants (i.e. eight of nine) provided written consent, one participant requested and was permitted to provide oral consent. Consent in this case was recorded on a handheld audio recorder. Seven participants allowed their interviews to be audio recorded, while two permitted only handwritten notes to be taken during their sessions. In cases where audio recording was permitted, additional handwritten notes were taken as required. All participants were provided with a copy of their interview transcripts to ensure no confidential information was disclosed without their consent. The

Research Ethics Board at the University of Western Ontario approved this research protocol (See Appendix III).

Given that the names of all current staff and board members are published on the N'Amerind Friendship Centre website, staff who agreed to participate in this study were made aware of the difficulties present in anonymizing their identities. That being the case, four staff members still requested pseudonyms be used to convey more personal information about their experience at the Centre.

Data analysis was completed using NVivo 10. Once uploaded to this program, interview data was coded under the following topics: trauma, healing, identity, and Aboriginal English. While all interview data was coded for trauma, healing, and identity, only transcriptions were analyzed for markers of Aboriginal English. These main nodes were then divided into sub-nodes to further refine the analysis. Both trauma and Aboriginal English were subdivided by type, while healing and identity were categorized by theme. The sub-nodes included under trauma were Residential schools, deculturation, crime and harassment, family trauma, addiction, and stereotyping. Those related to Aboriginal English included phonological features, morphosyntactic features, and discourse features. Healing was sub-divided into Aboriginal-based programming, health, home, and the good life; while identity's sub-nodes included our people, personal identity, reaffirmation of identity, sameness and difference, and negative names. Based on a sub-node's specificity and frequency of use, it was then further divided into additional sub-nodes. Thus, a broad category such as crime and harassment was broken into three sub-nodes – inequality in the justice system, police harassment, and discrimination in school or work – to better represent participants' experiences. All nodes

and sub-nodes emerged from the interview data during the analysis. A comprehensive list of codes is provided in Appendices IV through VII.

Following Mary Bucholtz's (2000) discussion on the politics of transcription, quotations in this study will conform to a naturalized transcription style. This means that quotes will be written using standard English spelling and grammar. Naturalized transcription was decided upon for two reasons. The first being that nonstandard linguistic forms will not be discussed as part of participants' narratives. As such, it was decided that retaining these forms would unnecessarily complicate the discussion. Building on this, the second reason in favour of naturalization was that nonstandard varieties are typically "marked as deviant through nonstandard spellings and special pronunciation" (Bucholtz 2000, 1452). While I understand that the act of standardizing nonstandard speech has political implications, I find the drawbacks of denaturalized transcription to be much more damaging. By standardizing my participants' speech, then, I do not seek to delegitimize their linguistic styles but rather aim to dismantle social stereotypes which equate nonstandard speech with social deviance. That being said, for the purposes of sociolinguistic analysis, denaturalized transcription was used. This was done to differentiate participants' use of standard and non-standard linguistic forms, as will be discussed in chapter four. However, while non-standard uses of language will be analyzed, these forms will be examined apart from participants' quoted speech. Where participants are quoted, such as in chapter three, naturalized transcription will be used.

Ethnographic filming was also conducted in the latter half of the research period. Completed in collaboration with the N'Amerind Friendship Centre, the film draws upon both interview data as well as information collected through participant observation. It

describes, in participants' own words, why the N'Amerind Friendship Centre is important to them. In particular, participants focus on how the environment of the Friendship Centre strengthens their sense of self and of community. While both filming and editing were completed by the researcher, drafts of the film were screened by both participants in the film as well as by N'Amerind staff and clients more generally. This was done to ensure that the Friendship Centre was portrayed accurately and appropriately. The film was intended to raise awareness about N'Amerind's programs and services both with community members as well as funders; the goal being that the Centre would also directly benefit from the research project. Given that the intention behind creating an ethnographic film was to benefit the community, the film will not be analyzed here.

1.3 Terminology

The term "Indigenous" has recently gained popularity as the politically correct way to refer to First Nations, Métis, and Inuit in general. Within the walls of the Friendship Centre, however, neither staff nor clients ever referred to themselves or each other as "Indigenous." Instead, terms such as "Native," "Aboriginal," or even "our people" were used. In keeping with this, I will be using the term "Aboriginal" as a general identifier and an individual's personal identity (i.e. Oneida or Cree) in cases where increased specificity is required. This choice is based on the stated and observed preferences of both clients and staff.

Additionally, I will be using the terms "client" and "participant" interchangeably depending on the speaker's personal preference. Although "client" is typically the preferred term within the social service sector, as the term "participant" conveys a more

egalitarian approach several staff stated a preference for it. As such, I will use the term “participant” when conveying these staff members’ narratives. I will also be using “participant” in situations where programming is strictly voluntary. Not to be confused with these terms, “member” will only be used in situations where an individual is known to possess a Friendship Centre membership.

1.4 Thesis Structure

The second chapter will discuss Friendship Centres more in depth. Beginning with the inception of the Friendship Centre Movement in the 1950s and tracking their importance through to the present day, this chapter delves into the increasing significance of Friendship Centres in Canadian society. Friendship Centres are a significant environment for many urban Aboriginals. This is because, in creating a safe environment in which to explore issues of culture and identity, Friendship Centres facilitate the processes of physical, mental, and spiritual healing.

These themes of trauma, healing, and resilience will be examined at length in chapter three. There, participants’ experiences will be analyzed in detail alongside my own observations at the Centre. Friendship Centres, in providing both resources and support to those experiencing trauma, allow these individuals to gain strength from their experiences as opposed to feelings of depression and isolation. This section will therefore focus on participants’ resiliency in the face of trauma, rather than on their victimization.

The final chapter of this study focuses on how the environment of the N’Amerind Friendship Centre affects participants’ linguistic choices. Specifically, I will discuss how

speakers' use of non-standard language relates to issues of environment and of identity. To accomplish this, the chapter will compare participants' use of standard and non-standard linguistic forms through a rate of usage analysis. A discussion of language socialization will then be presented in order to contextualize these findings.

Through each of these chapters, I will explore the many ways in which the N'Amerind Friendship Centre positively impacts the lives of both staff and clients. More than just a social service provider, the N'Amerind Friendship Centre provides urban Aboriginal people with a connection to their community and their culture. It provides some of Canada's most marginalized with a space in which to be themselves, surrounded by others who understand their experiences. It is important to remember that Aboriginal bodies and voices are still policed within Canada. Being able to fully express ones' Aboriginality, without judgement or consequence, is not always possible, especially for those living off-reserve. The N'Amerind Friendship Centre, as one of the few spaces in which this expression is possible, is an incredibly significant environment.

Chapter 2

2 Friendship Centres: Finding a Sense of Place within the Urban Canadian Landscape

Historically, the Canadian government associated Aboriginal in-migration to cities with a desire, on the part of Aboriginal persons, to assimilate. This treatment delegitimized urban Aboriginal experiences and negatively affected these individuals access to special rights and services. In response to this, contemporary scholarship has sought to recognize urban Aboriginality through the examination of Aboriginal places within urban spaces. This chapter aims to support the work of previous scholars by examining Friendship Centres as an important part of contemporary urban landscapes. In particular, I will explore how Friendship Centres, in their role as therapeutic landscapes, are key to the health and wellbeing of this community.

2.1 The Beginnings of the Friendship Centre Movement

The 1950s saw a significant change in the residence patterns of Aboriginal people in Canada. Between 1901 and 1950, only 5.1 percent of Aboriginal people lived in urban areas (Peters and Andersen 2013, 23). However, Aboriginal urbanization rose to 6.7 percent in 1951 and continued to rise throughout the post-war period, climbing sharply in

the 1970s and 1980s (Peters and Andersen 2013, 23; Langford 2016).³ According to the 2016 census, 51.8 percent of the total Aboriginal population in Canada currently reside in metropolitan areas of at least 30 000 people (Government of Canada 2017d). In London, Ontario, specifically, 2.5 percent of the total population identifies as Aboriginal (Government of Canada 2017b).

What, then, caused this dramatic increase in Aboriginal urbanization? Survey data collected during this period suggests that Aboriginal migration was primarily driven by economics (Peters 2002; Langford 2016). Situated on small plots of resource-poor land (Peters and Andersen 2013; Langford 2016), reserves suffered from a “chronic lack of economic possibilities”(Peters 2002, 75). Comparatively, cities offered “greater resources in terms of employment and educational opportunities” (Peters 2002, 79), and thus, proved attractive to Aboriginal persons looking to escape the economic limitations of the reserves (Peters and Andersen 2013; Langford 2016). In addition, social services like medical care and welfare programs made relocation appear worthwhile (Peters 2002). Although there is evidence that interpersonal conflicts motivated some to relocate to urban areas; for most, the reserve was associated with feelings of home and belonging (Peters 2002). Indeed, in a national study concerning off-reserve migration, it was found that the better the socioeconomic opportunities on reserve the lower the rate of outmigration (Peters 2002).

³ The available statistics on Aboriginal migration come from census data collected by the Canadian government. The data, therefore, does not reflect an Aboriginal interpretation or perspective on the topic.

Responses to Aboriginal urbanization by the Canadian public were overwhelmingly negative. To stem growing public anxieties, policymakers rationalized Aboriginal in-migration as a step towards integration. Compared to “reserve Indians” who were “characterized by cultures...suitable to pre-modern society” (Peters 2002, 81), “urban Indians” were seen as transitioning away from those cultures in favour of becoming Canadian citizens (Peters 2002). This transition, while considered to be ultimately beneficial, was not depicted as an easy change to undergo. Rather, many government agencies described Aboriginal urbanization as “inevitably damaging and disturbing” (Peters 2002, 82) due to the perceived “incommensurability of dominant and [Aboriginal] cultures and the inability of Aboriginal peoples to adapt to modern society” (Langford 2016, 4). Without direct government intervention, it was argued that Aboriginal people would succumb to culture shock and, as a result, would become destitute (Peters 2002; Langford 2016).

To manage this risk, the Citizenship Branch developed Friendship Centres to facilitate the process of integration. This was done by employing a “culture as therapy” approach whereby Aboriginal traditions were accommodated within the Centres in order to limit the effects of culture shock (Peters 2002). Following the initial adjustment period, however, it was expected that Aboriginal cultures would be replaced by the values and traditions of mainstream Canadian society. As J.H. Lagassé, a later director of the Citizenship Branch, put it: “[Aboriginal] people who make a satisfactory adjustment are those who can maintain their own culture long enough to learn the new culture” (Peters 2002, 84). Thus, while early Friendship Centres did provide cultural programming, they were generally superficial and limited in scope (Peters 2002).

The main role played by Friendship Centres during this period was that of referral agencies (Peters 2002; Langford 2016). Seeing no reason to “[duplicate] existing services” (Langford 2016, 5), the Citizenship Branch emphasized the responsibility of Friendship Centres to refer migrating Aboriginal peoples to provincial and municipal agencies (Peters 2002). There, it was argued, Aboriginal migrants could receive the assistance they required while still “[remaining within] the institutions of the dominant society” (Peters 2002, 84). In practice, however, traditional urban service providers were “less than responsive to the needs of First Peoples and Métis” (Langford 2016, 6). To fill this gap in service provision, Friendship Centre staff began to reshape existing programming in order to meet the needs of their communities. Overtime Friendship Centres began to provide language classes, lessons in Aboriginal craft and dance, speaker series, youth groups, as well as newsletters or radio shows (Langford 2016, 16). This shift ushered in a new period in the Friendship Centre Movement in which Centres became not only places of social service provision but also of cultural revitalization.

2.2 The Friendship Centre Movement, 1960s to Now

The 1960s saw this shift towards Aboriginal-control of Friendship Centres in terms of leadership as well. Previously, while Aboriginal people made up the majority of Centre staff, the boards of directors were populated by primarily white, liberal women from civic religious and welfare organizations (Langford 2016, 9). However, with the rise of Aboriginal activism in the 1960s, non-Aboriginal control of Friendship Centres came under fire (Langford 2016). Critical of what they described as “white do-gooderism,” Native activists advocated for increased opportunities to manage the Centres’ affairs and

funding (Langford 2016, 13). Although highly contested, such debates resulted in the overwhelming dismissal or resignation of non-Aboriginal executives from the Centres' boards (Langford 2016).

It is important to note, however, that while urban Aboriginals gained the right to self-governance within the walls of the Friendship Centre these rights were not extended to Canadian society in general. In fact, according to both the Constitution Act, 1982, and the Royal Commission on Aboriginal Peoples (RCAP) Report (1996), urban Aboriginal peoples do not exist as a separate community of interest (Andersen and Denis 2003; Legislative Services Branch 2015). That being the case, neither are they necessarily accepted as part of a larger reserve-based or Northern community (Andersen and Denis 2003). This is problematic because it has the potential to exclude over half of all self-identifying Aboriginal people from discussions on self-government and their constitutional rights (Andersen and Denis 2003).

The marginalization of urban Aboriginals became even more apparent following the Daniels decision in April of 2016. This Supreme Court ruling reclassified non-status Indians and Métis as "Indians" under section 91(24) of the Constitution making them the "constitutional responsibility of the federal government" (Vowel 2016). This leaves urban Aboriginals as the only Aboriginal population not under the federal government's jurisdiction and therefore ineligible for federal funding (Vowel 2016). In addition, as a "non-Indian" in the eyes of the federal government urban Aboriginals have "no rights to special programs and services" (Peters and Andersen 2013). In offering Aboriginal-based programming, then, Friendship Centres are one of the few organizations within the urban environment to cater directly to urban Aboriginals' special needs.

2.3 Friendship Centres as Therapeutic Landscapes

Alison Williams and Ann Marie Guilmette classify Friendship Centres as therapeutic landscapes (Williams and Guilmette 2001)⁴. According to their definition, therapeutic landscapes are “places, settings, situations, locales, and milieus that encompass both the physical and psychological environments associated with treatment or healing, and the maintenance of health and wellbeing” (Williams and Guilmette 2001, 2). This concept is based on three interconnected ideas: sense of place, authenticity of place, and place-identity (Williams and Guilmette 2001). Sense of place refers to the “significance, meaning, and felt value” attributed to a space by those experiencing it (Williams and Guilmette 2001, 7). Spaces associated with a strong sense of place are described as authentic landscapes while those considered placeless are seen as inauthentic. Authenticity in this case describes the “‘networks of interpersonal concern’ found in caring, therapeutic environments” (Williams and Guilmette 2001, 8). These networks typically result from “longstanding relationship[s] with the environmental, individual, and societal factors of a...place” (Williams and Guilmette 2001, 8). Personal identification with a space, or positive place-identity, typically develops as a result (Williams and Guilmette 2001, 8).

In this section I will discuss how the N’Amerind Friendship Centre operates as a therapeutic landscape through the examination of participants’ place-identity in three

⁴ While I recognize contemporary critiques of this theory which prefer the term ‘place’ over that of ‘landscape,’ I choose to retain Williams and Guilmette’s terminological usage here for the purposes of comparison.

different programs. These include the Life Long Care Program (LLCP), the Canada Prenatal Nutrition Program (CPNP), and the Kizhaay Anishinaabe Niin Program. Each program centres on participants' health and wellness, although the focus of each varies.

The objective of the LLCP is to provide “culturally appropriate long-term care to...vulnerable, frail, disabled, at-risk elderly, [or] chronically ill” Aboriginal people within the London area (N’Amerind Friendship Centre n.d.). To do so, the program offers various services such as transportation to and from appointments, congregate dining, referrals, caregiver support services, and bereavement support (N’Amerind Friendship Centre n.d.). In terms of weekly programming, the LLCP holds a seniors’ crafting circle every Thursday from 12pm to 3pm, a biweekly luncheon on Tuesdays, and semi-regular outings to craft stores and markets. Weekly programming is structured as a drop-in and thus sees high fluctuation in attendance rates. Depending on weather conditions, scheduling conflicts, and participants’ health, attendance rates for the LLCP range from as little as five people to upwards of fifty. Generally, the majority of participants are women in their late thirties to early eighties, although some men do attend the luncheons on Tuesdays. The health conditions of participants include arthritis, diabetes, obesity, fibromyalgia, cancer, depression and anxiety, as well as addiction.

For the purposes of understanding N’Amerind as a therapeutic landscape, particular attention will be paid to the LLCP’s crafting circle. This program hosts between five to twenty-five women depending on the week and, although scheduled to begin at noon, participants are constantly filtering in and out of the circle. Most days, programming begins with a light lunch prepared by staff and volunteers. Given the health conditions of most participants, the food is prepared in line with nutritional guidelines

and places an emphasis on vegetables and lean proteins. After lunch, the coordinators either provide instruction on a new craft or leave participants to work on their own projects. It is not uncommon, therefore, to see some participants working on beading while others focus on quilting or knitting. Additionally, as many women attend programming as a way to socialize with other people, frequently the three hours will be spent in conversation rather than on the completion of a craft.

The crafting circle is a significant landscape for those who attend as it provides participants with a sense of community. Due to various health conditions and mobility issues, many of the women are unable to access a number of the activities or programs which might be available around the city. As such, the LLCPC is one of the few places in which these women are able to socialize. Additionally, surrounded by women of a similar age and with similar experiences, the LLCPC offers participants a space where they can joke about domestic abuse or addiction just as much as they can talk about doctors' appointments or grandchildren. The relationships which have formed between these women extend far beyond the walls of the Friendship Centre, however. During the research period, participants organized trips to out-of-town beading shops as well as numerous excursions around the city or to each other's homes. Frequently, participants would also rely on each other to attend appointments or pick up medications when the LLCPC coordinators were unavailable. More than simply providing a service, the LLCPC attends to participants' mental and emotional needs. It provides a safe space where clients can not only gather without fear of discrimination but a place in which they can forge relationships and bonds. It provides those who might be incapable of significant mobility as a result of physical or mental debilitations a means and reason to leave the home. The

LLCP offers comradery to those who might otherwise find themselves isolated, who might be unable to access other programs or services as a result of their health conditions or other physical complications. In essence the LLCP is more than just a crafting circle, it is a tight knit group of elderly clients who have built friendships, shared stories, and helped support one another through trying times. Thus, clients' have developed a strong attachment to the LLCP which has led to the formation of a positive place-identity. As Ethel put it, "If I didn't [attend the LLCP], I don't know what I would do. I'd go crazy" (Ethel, June 22nd 2017). This feeling of attachment was also reflected by participants of the CPNP, to whom programming served as a safe space in which to explore their culture and community.

The CPNP also serves a primarily female clientele; however, rather than focusing on the chronically ill or elderly the CPNP works with Aboriginal mothers⁵ and their babies. Program coordinators assist expectant mothers throughout their pregnancy and birth, up until the child is six months old. As part of this program, clients are provided with food supplements and given access to counselling and support, education, as well as referrals to other services (N'Amerind Friendship Centre n.d.). Counselling typically takes place one-on-one with a program coordinator and focuses on how lifestyle choices such as smoking, alcohol use, and family violence can affect pregnancy (N'Amerind Friendship Centre n.d.). More general information is either presented as part of weekly programming or during informal consultations. Here, clients and staff discuss topics

⁵ It should be noted that while "mothers" and "women" are used to describe the CPNP's clientele any birthing person of Aboriginal descent would have access to these services. At the time of this study, however, only CIS gendered individuals were enrolled.

ranging from pregnancy basics, such as how to create a birthing plan or what prenatal vitamins to take, to personal accounts of giving birth.

In contrast to the LLCP, in which programming occurs on a set weekly schedule, the CPNP's services occur at various times two to three days a week. These programs cover a range of topics including regalia making, prenatal yoga, cooking classes, peer support or wellness sessions, arts and crafts, breastfeeding support, and doula consultations. Each combines health or nutrition information with relevant traditional teachings. Thus, during arts and crafts, participants learn how to create traditional rattles or medicine pouches. They are taught about the history of these objects, their cultural importance, and how to appropriately use them. According to the CPNP coordinator, the incorporation of Aboriginal teachings into the birthing process helps these women establish a strong sense of place. This is because, in addressing both kinds of knowledge, the CPNP fulfills not only clients' medical needs but their cultural and spiritual ones as well. Placed in an environment which acknowledges their needs as Aboriginal mothers, these women are left with feelings of safety and security. And, as will be discussed next, surrounded by others who share their experiences, these women develop networks of interpersonal concern with the environment as well as with each other.

Many of the mothers who used the CPNP's services were young with multiple children before their mid-thirties. While some could stay home fulltime, a number were balancing work and parenting. Although no formal interviews were conducted with these women, based on the CPNP's demographics, it is likely that many of the women who attended programming were either low income, single parents, or both. As the CPNP provided women with access to transportation and food, programming served as a

reprieve from the day-to-day struggles as they did not need to worry about finances or childcare. For those who came, these two to three hours spent at the Centre were the only outside socialization they would get all day. Programming was, therefore, often filled with storytelling, jokes, and general commiseration. Mothers would trade potty training horror stories, nutritious snack advice, and, most often, their experiences giving birth. For both new and veteran mothers, this served as a bonding device since it normalized their own experiences and made them feel less alone. For expectant mothers, on the other hand, these stories helped to prepare them for giving birth as it gave them both first-hand experiences along with general advice. Given that many women were disconnected from their families who lived on reserve, the relationships they made with other women in the program helped to fill this hole. These affective relationships contributed to clients' positive place-identity as they strengthened their sense of community and of belonging. For example, during a regalia making class hosted by the CPNP, one woman was gifted a ribbon skirt by another. This was important not only because of the cultural, spiritual, and emotional significance of regalia⁶ but because this was the woman's first skirt. The gift, which contributed heavily to her sense of belonging, served to connect her to both her home community and that which she had developed at the Centre. In discussing this, she stated, "it gave me goosebumps" (Helena, May 24th 2017).

Comparatively, the Kizhaay Anishinaabe Niin program provides abusers, both male and female, as well as victims of abuse with counselling and rehabilitation services.

⁶ Traditional skirts are thought to be a woman's connection to Mother Earth. The skirt, which is floor length and A-line, is intended to funnel the Earth's energies up into the woman to keep her healthy (Louise, Interview 1, June 13th 2017).

The program offers both one-on-one peer counselling and healing circles to assist clients' as they work towards "ending violence in their personal lives and within their community" (Ontario Federation of Indigenous Friendship Centres 2013b). These services are structured around the Seven Grandfather Teachings: wisdom, love, respect, bravery, honesty, humility, and truth (Ontario Federation of Indigenous Friendship Centres 2013b). According to the program coordinator, by using the Seven Grandfather Teachings to guide their behaviour, clients are taught to take responsibility for their actions and to respect the actions of other people.

The majority of programming is restricted to those court mandated to attend. However, twice a month the Kizhaay Anishinaabe Niin program offers a teachings and sharing circle which is open to the public. The circle is held from 6pm to 9pm so as to be accessible to those who work during the day. Depending on weather conditions, time of the year, and whether or not an outside speaker is scheduled to attend, the circle attracts between two to thirty-seven people. Those in attendance are typically past or present clients of the program, although N'Amerind staff, outside community members, as well as the families of clients or staff have been known attend as well. Programming begins with a pipe ceremony in which the coordinator gives thanks to the four directions, Mother Earth, the moon, and finally, the Creator. Following this, the room is smudged to remove any negative energy. As part of this process, participants are given the opportunity to smudge. Any empty chairs are smudged by the coordinator as they are believed to have spirit as well. The coordinator then begins his narration. Drawing on his own experiences, the coordinator discusses his journey towards wellbeing as it relates to one of the Seven Grandfather Teachings. To end the night, participants go around the circle asking

questions, relating the teachings back to their own experiences, and discussing the circumstances which brought them here.

The sharing circle was, for many, the most important part as participants often came to programming with the belief that they were alone in their experiences. After listening to others speak about their struggles with poverty, addiction, abuse, and criminality, however, they would begin to open up. This was especially true when participants' narratives focused on resilience and resistance, rather than on the trauma itself. For example, one older gentleman discussed how he regretted never receiving the longhouse teachings from his grandparents. Connecting his run-ins with the law to this lack of culture, the man viewed the Kizhaay Anishinaabe Niin program as a means of atoning for his actions while, at the same time, learning how to live a healthy and fulfilling life. In discussing this, he stated, "We don't walk alone or we shouldn't. I've learned. I know what I have to do. I want to walk the right path" (Gordon, June 23rd 2017). This perspective was articulated many times by clients who saw the reintegration of culture as fundamental to their healing process. In speaking with the program coordinator, he stated that by grounding the program in traditional teachings participants were given a sense of belonging and of identity. Put in his own words, he said,

...it's giving [pause] uh [pause] back an identity to the ones that may have had it [pause] taken from them. [pause] And it's giving a [pause] sense of identity to the ones that have never been raised in it. [pause] Because it was [pause] taken from their parents or grandparents [pause] so they-they never knew it. [pause] So that gives them a sense of-of belonging. Say, well, I belong you know [pause] somewhere [pause] (Niibiish, Interview 1, June 27th, 2017).

In establishing these connections, the Kizhaay Anishinaabe Niin program facilitates a sense of security among both its clients and those of the Friendship Center. It is a place of balance and vulnerability as it allows those who might feel victimized in Western society a place of respite and safety. The programs and the Friendship Centre provide a physical and spiritual place where individuals who are otherwise guarded, can make themselves vulnerable without fear of reprisal.

As an Aboriginal-based and community-run organization focused on urban Aboriginal populations, the Friendship Centre is a significant environment for community members. Surrounded by others who share similar experiences of trauma and resilience, participants are able to see themselves reflected in the environment around them. The strong sense of place which develops as a result provides participants with a “sense of security and direction, and a feeling of relationship with the world around [them]” (Williams and Guilmette 2001, 8). As will be discussed in the following chapter, the authentic landscape of the Friendship Centre allows individuals to grapple with ideas of trauma, healing, and identity without stigmatization. In the eyes of those who use it, the Friendship Centre is more than simply a social service center. It is a support network. It is a little reserve. And, importantly, it is a home away from home.

Chapter 3

3 I Am Safe With You: Narratives of Trauma and Healing

One morning in mid-July, I was sitting in N’Amerind’s waiting area watching the Centre wake up. Typically, the Centre was fairly quiet first thing in the morning, with only a few elders shuffling in to get their morning coffee. This morning was different, however. A man, unfamiliar to me, burst into the Centre, muttering under his breath and gesticulating wildly. He was incredibly agitated, to the point where he could not sit down. While in no way violent, his erratic behaviour was alarming; for, at this point only myself and two staff members, none of whom could restrain him, were around. Eventually though, his counsellor arrived and was able to take control of the situation. Although I found the incident deeply troubling, most staff were only mildly concerned. This is because trauma, in all its forms, was something they constantly faced, both personally and professionally.

In designing this research project, I was given certain guidelines to follow when approaching the topic of trauma. Namely, that I allow participants to initiate and guide the conversation. This was meant to ensure that participants only discussed what they were comfortable sharing. As everyone at the Centre was at a different stage in the healing process, it was important that nobody felt pressure to share experiences they were not yet ready to talk about. Topics considered particularly troubling included language loss, abuse, and Residential schools. Given that my original research design focused on language reclamation, I was kindly asked to alter my project as many staff and clients felt insecure about their heritage language abilities. In line with these guidelines, the

following chapter is based on participant-directed narratives. Thus, while many of the topics I was asked to refrain from discussing do come up, I never initiated nor actively pursued such conversations.

This chapter delves into the issue of trauma through the examination of participant narratives. As I quickly realized, everyone at the Centre had experiences with trauma which, given enough time, they would openly share. These stories were rarely coupled with feelings of sadness or depression, however. In fact, many of those I spoke with intertwined their narratives with ideas of resilience, growth, and healing. Frequently, participants would frame their traumatic experiences as the starting point in their journey towards wellbeing. In line with this, I will be examining the intersection between issues of trauma and healing within the context of the N'Amerind Friendship Centre.

The following discussion is based on interview data as well as informal conversations with both clients and staff. In each case, participants ranged from twenty-six to sixty-five years old. While everyone mentioned here identified as Aboriginal, participants' band affiliations, residence patterns, and upbringings varied widely. Given this broad demographic, the chapter will be structured according to themes rather than to each individual's personal narrative. At the most general level, these stories are categorized according to trauma's major sub-nodes: Residential School, deculturation, crime and harassment, family trauma, addiction, and stereotyping. This is done for two reasons. Firstly, traumatic experiences were the most frequently discussed topic by both clients and staff. In total, trauma was mentioned 164 times compared to the 108 times for healing and 61 for identity. Secondly, as these narratives focused on the speaker's journey towards well-being, discussions of trauma were frequently overlaid with ideas of

self-acceptance and healing. Thus, while not explicitly addressed, ideas of healing and identity are integrated throughout the discussion. Of trauma's major sub-nodes, addiction came up most frequently (28.7%), while stereotyping was mentioned the least (3.7%). Although seemingly inconsequential, I choose to include stereotyping here because, when it did come up, the repercussions for those affected were often severe. For a complete list of the codes discussed in this chapter, along with their frequency of use, see Tables 1 and 2.

Table 1: Trauma Nodes and Sub-Nodes, Frequency of Use

Nodes	Sub-Nodes, Layer 1	Total (Frequency of Use)
Healing		108/108 (100%)
Identity		61/61 (100%)
Trauma		164/164 (100%)
	Residential School	32/164 (19.5%)
	Deculturation	17/164 (10.4%)
	Crime and Harassment	33/164 (20.1%)
	Family Trauma	30/164 (18.3%)
	Addiction	47/164 (28.7%)

	Stereotyping	6/164 (3.7%)
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Table 2: Trauma Sub-Nodes, Frequency of Use

Sub-Nodes, Layer 1	Sub-Nodes, Layer 2	Total (Frequency of Use)
Residential School		32/164 (19.5%)
	Abuse (+Residential School)	13/32 (40.6%)
	Residential School	19/32 (59.4%)
Deculturation		17/164 (10.4%)
Crime and Harassment		33/164 (20.1%)
	Inequality in the Justice System	14/33 (42.4%)
	Police Harassment	10/33 (30.3%)
	Discrimination in School/Work	9/33 (27.3%)

Family Trauma		30/164 (18.3%)
	Traumatic Birth	4/30 (13.3%)
	Children's Aid Society	20/30 (66.7%)
	Abandonment	6/30 (20.0%)
Addiction		47/164 (28.7%)
	Drugs	23/47 (48.9%)
	Alcohol	24/47 (51.1%)
Stereotyping		6/164 (3.7%)

3.1 Residential Schools

Almost everyone at N'Amerind was affected by the Residential school system, either through their grandparents or parents if not directly themselves. Of N'Amerind's thirty staff members, two or three had been involved in Residential schools. Twenty-six, of the remaining twenty-seven staff, had at least one relative who experienced this system. As a result, experiences of abuse – whether physical, verbal, or emotional abuse – were incredibly common.

While I never initiated conversations on the topic of Residential schools, many of those I spoke with were more than comfortable sharing their experiences. Of my nine interviewees, three came from families affected by Residential schools while one was affected by Residential school himself. Two other staff members also mentioned their experiences with Residential school; however, these occurred during informal conversations rather than in an interview setting. One was a Residential school survivor, while the other was the child of a survivor. In terms of N'Amerind's clientele, only one ever directly referenced their family's history with Residential schools. More often, clients would discuss abuse, both that which they had endured as well as that which they had perpetrated. Overall, seven staff members and, at least, four clients experienced abuse. Of these, three stated that they had contributed to the cycle of abuse themselves.

While feelings of shame and resentment were experienced to some degree by those I spoke with, the majority of participants' narratives centered on ideas of resiliency and strength. In Mike's case, much of his strength was drawn from his eleven children. As a child, Mike and his brother were abandoned by their mother at the Mohawk Institute Residential school in Brantford, Ontario. For three years, they were subject to abuse, malnourishment, and hard labour on the Institute's farm. When they were finally released into their grandmother's care Mike was filled with anger. To alleviate the pain, he started drinking and picking fights with those around him. Reflecting on this time, Mike stated, "That's from Residential school...All the alcohol [pause] fighting [pause] yknow all that stuff. That was all [pause] part of that bad thing" (Mike, Interview 1, July 11th 2017). Alcoholism continued to be a struggle for him until the birth of his first child. As he put it, "I had to make sure [that] I took care of [my addictions] so it didn't affect my

children.” Thus, following the birth, Mike quit drinking. He quit smoking. He began searching out knowledge keepers in order to educate himself on traditional teachings and ceremonies. For Mike, the important part of his story, and the part which he emphasized to me, was not the fact that he was a Residential school survivor. Rather, it was that his children had grown up in a stable home environment free of addiction, abuse, or neglect. It was that the abuse he had endured never affected his children or grandchildren.

3.2 Deculturation

Deculturation came as a byproduct of Residential schools. Many survivors feared that exposure to Aboriginal culture would result in their families being stigmatized, discriminated against, and brutalized by police. Combined with government policies which promoted assimilation, this system disrupted the transmission of traditional knowledge. In discussing their own experiences, participants noted that they were affected by deculturation in three ways: through loss of language, loss of culture, and loss of identity.

Loss of language affected the highest number of people, with nearly everyone experiencing some restrictions on their Aboriginal language use. Given that many people felt self-conscious about their linguistic abilities, I was asked to refrain from discussing this topic. As a result, the information presented here is based on observational data and unprompted conversations. In terms of staff, only two were fluent speakers of an Aboriginal language, while six others expressed some linguistic competency in either Oneida, Ojibwe, or Munsee. Similarly, only a small number of clients possessed any fluency in an Aboriginal language. However, as this is based entirely on participants’

self-reported abilities and observations of either spontaneous or scripted language use, passive speakers⁷ likely remain unrepresented. While efforts to increase the conversational fluency of Oneida speakers had been implemented⁸, most remained minimally fluent, preferring instead to use English in their everyday interactions.

Culture loss also widely affected both clients and staff. Compared to language loss – which, for many, remained unaddressed – culture loss was typically combatted during adolescence and early adulthood. Of those I interviewed, four experienced a total loss of Aboriginal culture, while two experienced partial or minor deculturation. According to participants' narratives, many grew up with Christianity and the Church. Although for a few, Christianity existed alongside the sweat lodge; for many people, such as Louise, Christianity informed the bulk of their spiritual knowledge as children. As a result, Louise described her upbringing as relatively devoid of Haudenosaunee culture. It was not until her teenage years – when she was able to seek out traditional knowledge keepers for herself – that she was exposed to Haudenosaunee culture. In her case, these teachers came in the form of the elders who frequented N'Amerind. Although Louise did get emotional in talking about her early years, much of her emotion came from a place of gratitude rather than one of loss. This is because, although deculturation greatly impacted her life, her personal narrative focused on her journey towards cultural reclamation and healing. Specifically, she discussed how, in reclaiming this knowledge, she has been able

⁷ Passive speaker refers to an individual who understands a language due to their exposure to it early in life but has no active command of it (i.e. they are unable to speak it even though they understand it).

⁸ An Oneida conversation group existed in which people could improve their language skills. It was run by the only fluent Oneida speaker on staff on what appeared to be a casual basis. As I was asked to refrain from asking questions about language loss, I never pursued access to this group.

to put an end to the cycle of addiction and abuse which characterized her childhood. As she put it, “My children will never see their parents drunk. They will never see their parents lost to addiction. They will never be subjected to abuse” (Louise, Interview 1, June 13th 2017). Rather than learning about Christianity, her children live according to the Great Law⁹, attend the sweat lodge, and smudge every night before bed. According to Louise, her children “wouldn’t understand who they are as people without these teachings” (Louise, Interview 1, June 13th 2017).

The lack of Aboriginal identity which many experienced as a result of deculturation was highlighted in my conversation with Sharon. As a child, Sharon felt disconnected from her Aboriginal identity as her grandparents – both survivors of the Residential School system – had reservations about educating Sharon about her own culture:

I know with my own family [pause] um you know things were cut off from my grandparents. My grandparents forbade [pause] um [pause] the use of the language. They forbade us to attend ceremonies. They forbade uhm certain things to happen in our family an-and so [pause] They knew this because of [pause] the history of what they went through ... [pause] I knew as I was growing up that I was different [pause] but I didn’t understand [pause] how come? How come there’s no language? How come there’s no tradition? How come I don’t know about our foods? How come I don’t know about our people? (Sharon, Interview 1, August 9th 2017).

As is expressed here, the divergence between who others perceived her as and who Sharon understood herself to be created a disruption in her sense of self. Classified as Aboriginal, yet lacking any perceivable cultural or linguistic differences to justify this

⁹ The Great Law is the original instructions passed down to the Haudenosaunee people from the Creator.

distinction, Sharon grew up confused as to her own identity. Thus, in an effort to explore her roots, Sharon began to learn about the history of Aboriginal people in Canada. She stated that she wanted to understand “what happened [to her family], what happened with [her] people, [and] what happened with those traditions” (Sharon, Interview 1, August 9th 2017). Following a similar path to Louise, Sharon sought out knowledge keepers of all types in her personal exploration of identity. And, again, while she described her experiences with passion never did these stories slip into the realm of self-pity or resentment. Instead, Sharon emphasized her own resiliency throughout the process and the feeling of empowerment which comes from rediscovering one’s identity. This feeling is emphasized in the following quotation in which she states:

It’s almost like that aha moment. [pause] It-it it’s-it’s it’s a feeling of no other. That [pause] wow [pause] I have something. [pause] I carry something. Something that is so unique [pause] to my family [pause] to my community [pause] to [pause] living here in a urban area and-and so. It’s it’s-it’s it’s definitely a connection that [pause] uhm once they once they find it and once they feel it um [pause] they can then really begin to experience [pause] uhm [pause] and address their own experience [pause] uhm [pause] and address their own identity. [pause] Who they are. [pause] And that’s something that we want all our people to be able to do. [pause] To be able to talk about who I am, where I come from, [pause] and that I know [pause] my family legacy. [pause] So [pause] what’s better than that you know?! (Sharon, Interview 1, August 9th 2017).

3.3 Family Trauma

One of the long term effects of Canada’s assimilatory policies has been the dismantling of Aboriginal families. This has resulted in the overrepresentation of Aboriginal children within the welfare system and the proliferation of familial trauma (Emily Pitts “fieldnotes” 2017). Although a plethora of issues exist, at N’Amerind, the primary sources of trauma were traumatic birth, childhood abandonment, and the Children’s Aid

Society of London and Middlesex (CAS). In the first place, many pregnant women experienced discrimination in hospital, leading them to feel out of control. This came from many healthcare practitioners ignoring their needs; discrediting traditional practices meant to soothe them; and failing to communicate vital information about their health and that of their child (Browne and Fiske 2001). In certain cases, this ended up complicating the birth, further traumatizing both mother and baby. Although I did not speak to these mothers directly, I did talk with the coordinator of the CPNP about both her personal and professional experiences.

Using her own birth stories to exemplify the treatment many of her clients faced, Louise described the birth of her first child which she stated was incredibly traumatic. To begin with, Louise was in labour for thirty-six hours during which a midwife attempted to break her water three times. Adding to this, her needs were frequently overlooked in favour of what made the medical team most comfortable. Thus, while Louise found crouching over the toilet relieved much of her pain, she was forcibly returned to bed where she was expected to lay down and not move. Often, Louise would be left with little to no information on the status of her unborn child. She remembers being told that the doctor needed to monitor the baby's vital signs but, only after much prodding, was she told that to do so the doctor needed to insert two needles into the child's skull. Upon refusing the procedure, Louise was informed that she required a C-section as her son had a "short cord". Although she did not want the operation, after thirty-six hours of labour she consented anyways. Following the birth, Louise required four feet of packing in her incision site and three months of home care once the incision ultimately became infected. It was six years later when Louise learned that, contrary to what she had been told, her

son never had a “short cord.” Rather, the reason the doctor requested to monitor her son’s vitals was because the umbilical cord was wrapped around his neck.

This experience, though traumatizing, ultimately lead her to become a doula. She stated that, having gone through these experiences herself, she wanted to ensure that nobody else had to experience them. Thus, earlier this year, upon being notified that CAS intended to apprehend her client’s newborn, Louise rushed to hospital. As is the reality for many families involved with CAS, the agency was immediately alerted when it was found that a hospital alert¹⁰ had been issued for the woman. The young mother, having received no notice that contact with CAS had been initiated, was alarmed when a CAS officer walked into her hospital room. In this particular case, rather than responding appropriately to the woman’s questions, the officer answered with, “we like to take Native babies,” when asked about his intentions (Louise, Interview 1, June 13th 2017). Although when the incident was later investigated the officer did apologize, neither Louise nor the mother were satisfied. For, as Louise remembers it, the young mother spent the entire night in hysterics, frantically trying to figure out whether or not she would be allowed to leave with her baby. It was experiences such as this which made discussing CAS such a sensitive topic. According to the Community Liaison officer at the time, clients had experienced multiple children being removed from the home; newborns being apprehended; and all manner of abuse being done to these children while in CAS care. In one case, a child even died after being apprehended. For this reason, CAS was a topic I only discussed with staff during more formal interviews. Throughout most of

¹⁰ According to Mount Sinai’s hospital policy and procedure manual, a hospital alert is a document which identifies all individuals known to CAS who may go to the hospital for prenatal care or to give birth.

these conversations staff members displayed a combination of sympathy and strength. Sympathy for the families affected by welfare and strength in their hope for a better, healthier future.

3.4 Stereotyping

Stereotyping was less frequently addressed in an interview setting. In a total of nine interviews, only three participants made any mention of stereotyping and only one discussed it in terms of his own experiences. More often, issues of stereotyping came up during informal conversations between staff members.

When stereotyping was discussed, speakers often focused on well-established stereotypes such as the drunken Indian, the warrior, and the Aboriginal person who never pays taxes. However, in a few cases, staff members opened up about their or their clients' own experiences. In one instance described by staff, two London police officers were overheard discussing a recent court case involving an Aboriginal man. While this practice is not uncommon, the language used in discussing the case was racially loaded and extremely upsetting for the N'Amerind staff within earshot. According to those present, the officers referred to the Aboriginal offender as a "savage" and described his crime as "scalping." This experience was met with a lot of anger, with some staff members pushing for an email to be sent to the police commissioner denouncing this behaviour. However, as N'Amerind's justice programs rely on maintaining a good relationship with the police, others preferred to deal with the issue in-house. As one member stated, "I know how to deal with racism. I've dealt with it all my life" (Emily Pitts "fieldnotes")

2017). Although a serious issue, staff could be heard joking about it a few weeks later by referring to everyday objects as “scalping tools” (Emily Pitts “fieldnotes” 2017).

Another example, this time related to the prosecution of an Aboriginal offender, was mentioned during a more formal conversation about the London court system. The offender in question identified as Aboriginal, could prove his Aboriginal heritage, but did not have stereotypically Aboriginal features. Thus, although he was legally entitled to special rights as an Aboriginal person, the prosecution argued that his appearance made him ineligible. As the court justice made it clear that she was inclined to agree with the prosecution, the case became about proving the young man’s identity rather than trying the crimes he was accused of. Again, while this experience generated a lot of rage, in retelling it the speaker did not intend to garner sympathy from the listener. This, like the one mentioned before it, were both told to emphasize the resiliency and strength of Aboriginal people in the face of systemic discrimination.

3.5 Crime and Harassment

Discrimination was an experience which united both clients and staff. However, as many of N’Amerind’s clients were court mandated to attend programming, it is likely that they experienced discrimination to a greater degree than others. Still, it is important to note that collectively Aboriginal people face higher degrees of harassment and inequality as compared to Euro-Canadians and are overrepresented in prisons (John Howard Society of Canada 2017). Overall, most people experienced harassment from non-Aboriginals in positions of authority, such as from police officers, court justices, teachers, and government employees. This behaviour was not limited to authority figures, however.

Although less frequently discussed, participants did face discrimination from non-authority figures, both Aboriginal and non-Aboriginal. Of those I spoke with, six described being harassed themselves while eight discussed the harassment of others, such as friends, family, or clients. Importantly, four of the individuals who talked about being harassed also shared stories of others' harassment. Those who discussed their own discrimination focused on their experiences with people in positions of authority. Out of the five, two experienced prejudice within the justice system, one within the education system, one in hospital, and two within the workplace. Comparatively, seven people discussed their clients' experiences with people in positions of authority, paying specific attention to discrimination within the workplace, justice system, education, and government. Finally, experiences of harassment from non-authority figures focused on discrimination of urban Aboriginals by those living on reserve.

One of the most poignant narratives on the topic of discrimination came from my interview with Jacquie, N'Amerind's Aboriginal Community Justice Assistant. As part of her job, Jacquie holds healing circles in which participants are asked to discuss their actions, motivations, and perspectives on the crimes they are charged with committing. In many of these cases, particularly in those dealing with assault, police harassment and brutality are the motivating factor. This is particularly the case in the following narrative in which Jacquie describes the events leading up to the arrest of a young Aboriginal man accused of assault:

I had this one guy. He went to the [pause] to the [pause] he took his girlfriend to uh the John Labatt [Centre], at the time, [pause] and they were out and it was just a real big crowd [pause]. And some guy beside him. [pause] It wasn't him. [pause] He-he lit up a cigarette. [pause] And he's smoking and the security guards, the little baby cops, they come running along and [pause] told him to put

the cigarette out. He said, I'm not smoking. [pause] So they start yelling at his girlfriend right?! [pause] And uh she starts arguing with them and they grabbed her and brutally threw her out the door. [pause] Well he saw it. [pause] He got angry. [pause] And he went after them. He said, don't touch my girlfriend. And he ended up, they took him down, and they charged him with assault. [pause] He was charged. But...whose fault was it? They're the ones that manhandled the girl. [pause] And I'll tell you, if anybody touched my daughter like that do you think I'm just [going to] stand there and say, oh it's ok?! [pause] No. [pause] You defend yourself and you defend your family. [breath] He sat at this table and he was crying when he got here. And after we talked a while [pause] He was terrified he told us. [pause] I said why? There's more to the story. I said, tell me more. [pause] He said he wanted to be a cop. [pause] He said, now, with this criminal record, he said that [pause] knocks me right out of [pause] trying to be a cop. [pause] He said, so I don't know what I'm going to do because that's what I've always wanted to be. [pause] And he was broken because of this charge. [pause] ... So when we finished up with him [pause] and we assure him that things are going to be ok. You can still do this. This isn't going to be on your record. His whole [pause] demeanor changed. He turned around and said, I can still be a cop then? And we said you can do anything you want. [pause] The biggest thing we need to...learn from this is a lesson. [pause] What to do next time. Maybe next time don't do that. Maybe next time walk away. [pause] So when he found that out he was ok. He said, oh my gosh and he [pause] he said you'll never see me in here again. And [we] never did. [pause] But those are the things that happen to our people out there (Jacquie, Interview 1, August 3rd 2017).

Here, as was the case for most participants, it was discriminatory behaviour on the part of the authority figure which instigated the conflict. While the young man escalated the situation, he was first falsely accused, verbally assaulted, and forced to witness the verbal and physical harassment of his girlfriend. As Jacquie implies in the final line, and goes on to elaborate further on in the interview, this treatment is neither uncommon nor unexpected. Speaking from both personal and professional experience, Jacquie describes how police officers like to exert their authority on Aboriginal people as often there is little consequence to doing so. To exemplify this, Jacquie tells the story of her daughter getting pulled over by a cop. As with the first narrative, the police officer in this case uses both verbal and physical intimidation tactics in order to exert his authority.

My daughter got pulled over one night and she's a hot headed little bugger eh?! And she had to get her stuff out and [the cop was] just taunting her and he slammed the door. On my truck. ... And he broke the lock on the door. I said what happened to the truck and she said that the police officer slammed the door. [pause] After I got in the truck he went like that and slammed the door and it-it [pause] started and I think the window broke. I'm not sure. I think it did [pause] the windows shattered inside. She said he was mad at me and she said well of course I was mad at him too so it was on both sides [laugh] [pause] But that's it. [The police] treat [Aboriginal people] like dirt when they get pulled over (Jacquie, Interview 1, August 3rd 2017).

Again, it is the Aboriginal person, not the officer, who is expected to behave appropriately in this situation. Given this, one might expect Jacquie to feel rage at the injustice or sadness about the current inequalities in Canadian society. Yet, in this narrative she laughs. Laughter occurred frequently during this interview, not because the subject matter was particularly funny, but because Jacquie chose to find the humour in everything. As was the case with many of N'Amerind's staff, incidents such as these were told to educate and to foster understanding, not to incite bitterness or grief. Thus, as Jacquie no longer harboured feelings of resentment towards these officers, she was able to laugh at an incident which, when it occurred, likely caused her a lot of anxiety and frustration.

3.6 Addiction

Conversations on the topic of addiction would often arise at N'Amerind. This is due, in part, to the number of programs focused on substance abuse and thus, the prevalence of clients struggling with addiction. In total, three programs – the Aboriginal Healing and Wellness program, the Aboriginal Drug and Alcohol program, and the Kizhaay Anishinaabe Niin program – formally addressed issues of drug and alcohol abuse. An

additional five programs, most of which dealt with the justice system, offered referrals to clients struggling with addiction; however, in contrast to the above programs, they did not provide these services themselves. As a result, addiction was often formally discussed in terms of counselling and treatment. That being said, a number of clients and staff did openly address their personal struggles with sobriety. Of those I spoke with, five clients and three staff members stated that they were alcoholics; although, all were sober at the time. Given the sensitive nature of this topic, I never initiated conversations about addiction nor did I ever push participants to continue the conversation once it was brought up. Instead, discussions about addiction were always initiated and directed by participants.

Although clients mentioned their addictions more often, it was generally not a conversation topic they actively pursued. In most cases, alcoholism was only discussed in conversations about addictions counselling or healing circles and then, only as an indication of effectiveness. Thus, a client would often mention how his or her desire to drink was greatly reduced after attending a healing circle. In comparison, personal testimonies or reflections on addiction were more frequently communicated by staff as they often drew upon their own experiences when providing guidance or counselling. This is not to say that clients did not reflect on their histories with addiction, but just that these narratives were oftentimes not expressed in informal conversations or open access programming.

As is the case for many people who suffer from addiction, both clients and staff used alcohol as a form of self-medication. Based on participants' narratives, alcohol was used to deal with abuse, loss, familial insecurity or trauma, depression, and

discrimination. While these substances helped to numb the pain, they did little to heal the underlying trauma and, in many cases, actually added to it. For Ethel, drinking allowed her to forget the six years of physical, verbal, and emotional abuse inflicted on her by her first husband. As she explained it, following their separation, she was filled with an incredible amount of rage. Alcohol, while it helped her to repress these feelings, did not allow her to process them or to heal from this period in her life. As a result, the rage found other ways of expressing itself; namely, by her throwing objects, hitting furniture, and screaming at her kids. At its height, Ethel's alcoholism made her incapable of being a parent. The breaking point came when her eldest got ill and required hospitalization. In that moment she realized that, had it not been for her drinking, her child would not be in the situation she was currently in. Feeling disgusted with herself, Ethel stopped drinking and began therapy to address the underlying trauma which led to her addiction. As Ethel explains it, while her drinking began as a coping mechanism it ultimately perpetuated the cycle of abuse within her family. While it is clear that this narrative is tinged with regret, the ending is also filled with pride. This is because, now in her eighties, Ethel has maintained her sobriety and repaired much of her relationships with her seven children. In addition, all of her grandchildren have been raised in sober homes. Her narrative, rather than casting herself and her children as victims, focuses on their strength, resiliency, and perseverance in the face of trauma.

3.7 Discussion

Often, examinations of the Aboriginal experience focus on the pain of trauma (Yellow Horse Brave Heart 1998, 2003; Hartmann and Gone 2014; Kirmayer, Gone, and Moses

2014). They begin and end an individual's story at the most traumatic point in their life forgetting, in many cases, that while unified by trauma Aboriginal people are not necessarily defined by it. Of all the people I spoke with at N'Amerind, no one ever identified as a victim. Rather, I spoke with survivors, with fighters, with advocates for their communities. This conscious rejection of perceived victimhood came out strongly in their narratives. As is discussed above, participants frequently shifted the focus of their narratives, emphasizing strength over pain and positivity in the face of bitterness. This is not to say that pain and resentment did not exist; for, as many people openly admitted, the journey towards healing is not an easy one. Most who opened up to me had been walking the Red Road¹¹ for years. They had time to process their experiences, to let go of resentment, and to heal. Instead of finding pain, participants drew strength from their past experiences. For some, this came from their families while for others, this came from a desire to better their lives and their communities.

Conversations on the topic of healing tended to emphasize the role of the Friendship Centre. This is because, more than providing clients with access to resources, the N'Amerind Friendship Centre surrounded them with support and understanding. Particularly important, as both clients and staff were at all different points in their healing journey, was that individuals were able to find comfort from others with different experiences and at different stages of wellbeing. While this environment allowed individuals to develop a sense of solidarity with those around them, it precluded them from indulging in self-pity. Since everyone experienced trauma, and many had healed

¹¹ The Red Road refers to the concept of the right path in life and is based on Aboriginal spiritual teachings

from it, pity felt like defeatism and was often considered condescending. To dissuade feelings of pity, staff would frequently emphasize both theirs and their clients' strength and perseverance in the aftermath of trauma. This is why the narratives presented above focus so heavily on personal growth and overcoming obstacles. These stories, often employed for educational or motivational purposes, emphasize the fact that trauma does not define the individual. It does not limit them or reduce their value. It is simply one part of a larger story. According to those I spoke with, it is how an individual heals from that trauma which is important. Thus, in talking about N'Amerind, participants would often discuss how the Centre facilitates the pursuit of the good life. They would talk about how the Centre, and those in it, look out for the welfare of the community. How it gives people struggling with poverty, with addiction, with abuse, a second chance at life.

3.8 Conclusions

Every morning I spent at N'Amerind the receptionist would put on a pot of coffee and place the day's newspaper, usually the London Free Press, on the table in the waiting room. Eventually somebody would sit down and flick through the paper as they waited for their appointment. However, instead of turning straight to the sports section or filling in the crossword most people would start by looking at the obituaries. The majority would quietly scan the page looking to see if a family friend or second cousin had suddenly passed away. A few, though, would start cracking jokes. "Nobody I know is on the dead list. But, honestly, so long as I'm not on there, it's all good," one woman jovially commented to me. Taken aback by her candour I quietly smiled and then, almost

immediately, stuck my head back into my fieldnotes. How could she make a joke about something so sensitive, I wondered.

Looking back, I now realize that, confronted by trauma on a daily basis, gallows humour is a means of processing this pain. And, while taboo outside the walls of the Friendship Centre, inside this behaviour is more than acceptable, it is promoted. Both staff and clients would frequently joke about racism, addiction, and death. They would laugh and talk openly about their experiences because everyone could relate. Those I spoke with experienced abuse, neglect, the breakdown of their communities and cultures as well as systemic discrimination. For some, these hardships led them to abuse drugs and alcohol; for others, this led them to abuse those around them.

In addressing the effects of trauma on all aspects of the individual, the N'Amerind Friendship Centre assists both clients and staff in discovering their own self-worth. Individuals are given the space to explore those aspects of themselves which were taken from them, either through government policy or by concerned family members. And, importantly, they are able to do so with the support of people who understand their journey. As I was told on the first day of my fieldwork, everyone at N'Amerind is at a different point in their healing. They are at a different point on the Red Path. Thus, while, at times, this journey may feel never-ending, the Centre provides those who undertake it with the will to push on.

Chapter 4

4 You Are What You Speak: The Crossroads Between Language Use and Identity

We were built on [the drop-in centre]. [A place] for them to walk in and to have a home [pause] away from home. Safety. Security. Somewhere to put their head when they're when they're tired. That kind of thing. That's what we are. (Jacquie, Interview 1, August 3rd 2017)

In a country struggling with reconciliation, urban centres are not always the most welcoming environment for Aboriginal people. Even for those who grew up in the city, there is a significant amount of pressure to conform to Canadian society both socially and linguistically. Friendship Centres offer a reprieve from these pressures. As Aboriginal-run organizations, with an Aboriginal-centric mandate, clients are safe to fully express themselves as Aboriginal people without fear of censure or retribution. Previous chapters have examined this theme in terms of how the therapeutic landscape of the Friendship Centre facilitates healing through the re-adoption of cultural teachings and identities. Here, however, I will be focusing on the role these Centres play in the linguistic choices of both staff and clients. Specifically, I will examine how the environment of the Friendship Centre allows clients and staff to use linguistic varieties which would be heavily policed within the urban centre of London, Ontario.

4.1 Aboriginal English

Aboriginal English, alternatively known as Indigenous, First Nations, or Indian English, is a variety of English which developed during the time of contact with Europeans (Ball and Bernhardt 2008; Wiltse 2011). Originating as *lingua francas*, these varieties “[merged] features of [Aboriginal] languages with the language of the colonizers” (Fadden and LaFrance 2010, 144). Following centuries of assimilationist policy in Canada however, all but three of the country’s seventy Aboriginal languages are considered endangered “due to [their] small numbers of [primarily Elder] speakers” (Ball and Bernhardt 2008, 571; Cook and Flynn 2008; Government of Canada 2017c). Resulting from this language loss, Aboriginal English varieties have “increasingly converged with standard English” (Ball and Bernhardt 2008, 573). Even so, distinctly Aboriginal “sound systems, word constructions, sentence forms, reference structures, and usage strategies” are evident within the varieties (Leap 1993, 93).

The study of Aboriginal Englishes has generally been overlooked in the literature apart from a few scholars in the areas of education, speech-language pathology, linguistics, and anthropology (Dubois 1978; Wolfram 1984; Flanigan 1987; Darnell 1993; Leap 1993; Schilling-Estes 2000; Ball and Bernhardt 2008; Sterzuk 2008; Fadden and LaFrance 2010; Genee and Stigter 2010; Wiltse 2011). While over half of the studies cited here were conducted in Canada (Darnell 1993; Ball and Bernhardt 2008; Sterzuk 2008; Fadden and LaFrance 2010; Genee and Stigter 2010; Wiltse 2011); until recently, most researchers in this area focused on varieties in the United States. As such, the bulk of what researchers understand about the linguistic characteristics of Aboriginal English

varieties have historically been based on data from the United States. The data has typically been organized in a list and grouped together based on linguistic categories (i.e. phonological, morphosyntactic, and discourse features). Only three studies calculated usage rates as part of their analysis (Dubois 1978; Wolfram 1984; Schilling-Estes 2000), and no studies examined rate of usage at the scale of the individual. Importantly, all three of these studies were based on Aboriginal English varieties in the United States.

4.2 Research Context and Methodology

In the following sections, I will discuss the non-standard features found in the speech of my participants and how these findings compare to the broader literature on Aboriginal English. First though, a few notes on my research context must be mentioned. To start with, the sample size is smaller since only six of the nine interviewees permitted audio recording during our conversations. Of the six, four are between the ages of fifty and sixty-five, while the other two are in their thirties or forties. Consequently, the varieties spoken by these individuals are well-established and likely reflect an older version of Aboriginal English. However, given the small sample size, their speech cannot be said to be representative of all Aboriginal English speakers.

Between these six individuals, three identify as Oneida, one as Delaware, one as Anishinaabe, and one as mixed, Munsee and White. In terms of upbringing, five were born on the reserve but only three spent their formative years there. Of the remaining two, one moved to the city while the other was sent to Residential School. All six grew up without any fluency in their heritage language. For some, this was because family members refused to teach them, but for others, this was because there were simply no

fluent speakers left in their community. Although not fluent, two have gained some linguistic competency in these languages as adults. Currently, while everyone comes to the city for work, only three reside in London full time. Of those remaining, two choose to live on the reserve and one makes his home in a rural area off reserve.

Evidently, the variety of experiences documented here veers away from studies of single speech communities, or reviews of those studies, which focus on the reserve. As shown above, data collection in those cases tends to focus on settings like the home or the school. Spontaneous speech acts, as a result, generally make up the bulk of research in this area. While spontaneous utterances were recorded by hand – given the constraints of working within the Friendship Centre – they do not account for the bulk of my data. Instead, I focus on the data collected from recorded interviews. Because of this more formal interaction interviewees can be assumed to adopt a more professional speech style. In addition, due to my identity as a White Canadian and my position as a researcher, certain styles of interaction may be excluded. Thus, the data recorded below does not represent an exhaustive list of the linguistic resources possessed by each participant.

Interview data was analyzed for the following characteristics: consonant cluster reduction, multiple negation, h-dropping, the pronunciation of “th” as a stop, the plural forms “they all,” “we all,” and “yous,” as well as the discourse particles “eh” and “yknow.”¹² Rate of usage was then calculated for each linguistic feature. Overall, the

¹² This discourse marker has been spelled both with and without an apostrophe in the available literature (i.e. y’know v. yknow). Here, I choose to spell it without an apostrophe.

most commonly used features were consonant cluster reduction and the pronunciation of “th” as a stop. Rate of usage ranged from 41.5% to 72.6% for the former and 11.2% to 57.4% for the latter. While all participants used the most common features, only one participant, Jacquie, used ten of the eleven forms. The results are presented below in Figures 1-3.

Figure 1: Phonological Features Rate of Usage (%)

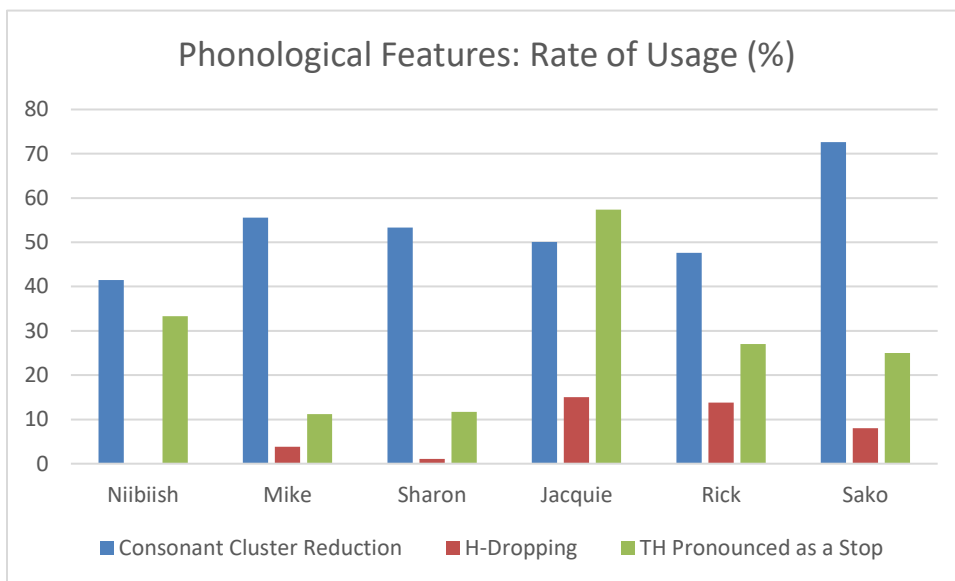


Figure 2: Morphosyntactic Features Rate of Usage (%)

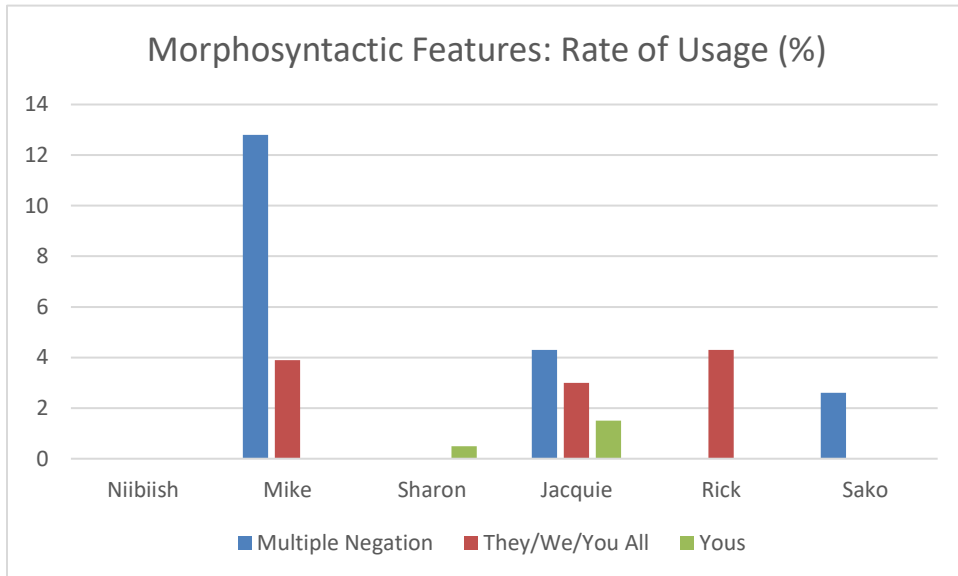
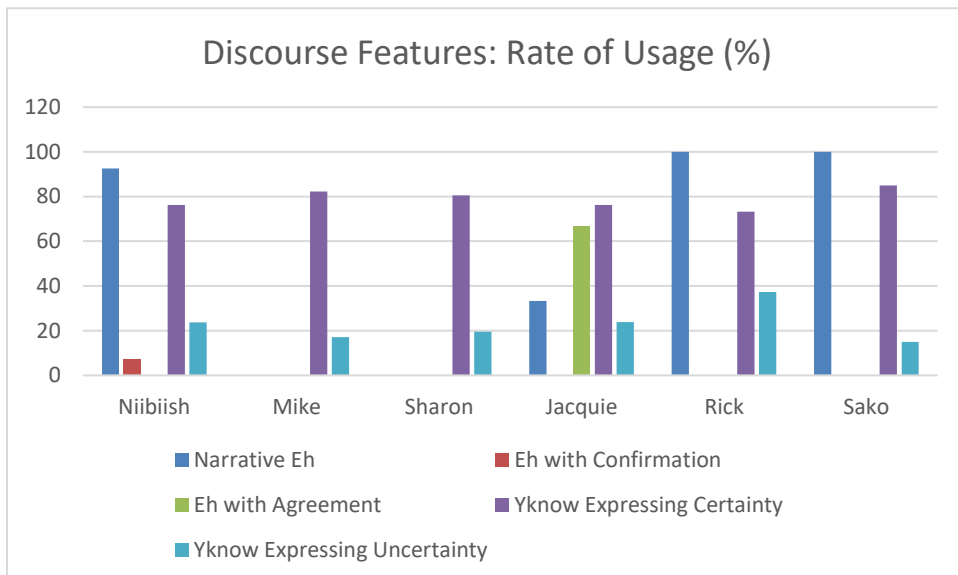


Figure 3: Discourse Features Rate of Usage (%)



4.3 Phonological Features

The phonological features of Aboriginal English have been variously described in the works of Beverly Olson Flanigan (1987), William Leap (1993), Natalie Schilling-Estes (2000), as well as Jessica Ball and B. May Bernhardt (2008). Although the studies vary both structurally and contextually, phonological similarities do exist across the Aboriginal English varieties they examined. To begin with, in each study, Aboriginal English speakers are described as reducing consonant clusters located at the ends of words (Flanigan 1987; Leap 1993; Schilling-Estes 2000; Ball and Bernhardt 2008). Thus, the phrase, “when I first started working here” is pronounced, “when I firs’ start’ workin’ here” (Flanigan 1987, 183). Consonant cluster reduction occurs when the word “first” /fɜrst/ is pronounced as /fɜrz/. Additionally, Flanigan notes that Lakota English speakers commonly pronounce “th” as a stop and words ending in “-ing” with alveolar rather than velar nasalization (Flanigan 1987, 183). These variations in the pronunciation of consonants and vowels may be attributed to a shift in the “overall position of the oral and laryngeal articulators...in some [Aboriginal] speakers” (Ball and Bernhardt 2008, 577). However, as Ball and Bernhardt explain, instrumental observations are required to “clarify differences in tongue position in different [linguistic varieties]” (Ball and Bernhardt 2008, 577). Use of airflow may also contribute to the appearance of an Aboriginal accent. In the case of Plains Cree and Dene Suline, differences in airflow affect the production of voicing and glottalization in stops (Ball and Bernhardt 2008, 577). Finally, in both Flanigan’s (1987) study of Lakota English and Ball and Bernhardt’s (2008) review of Aboriginal English varieties, variations in rhythm, stress, tone, intonation, speech rate, voice quality, and syllable length are noted. Specifically, Flanigan

shows how the flattened intonation contours, shortened syllable lengths, variations in vowel quality, and altered stress patterns of Lakota English mark it as “Indian” (Flanigan 1987, 188).

Phonologically, participants’ speech showed evidence of consonant cluster reduction, the pronunciation of “th” as a stop, and h-dropping. H-dropping refers to the phenomena in which “h” sounds are deleted at the beginning of words. For example, the word “him” /him/ would be pronounced as /ɪm/. Overall, consonant cluster reduction was the most frequently used phonological feature, with an average rate of 53.45%. Pronouncing “th” as a stop occurred next most frequently with participants employing this form 27.6% of the time on average. H-dropping was the only phonological feature used by only five of the six participants. Compared to the other forms h-dropping was used considerably less often with an average rate of usage of 8.34%.

Consonant clusters were reduced in words ending in “-ing,” in the contraction “don’t,” along with the terms “and” as well as “just.” While I recognize that the shift from “-ing” /ɪŋ/ to “-ing” /ɪn/ is misclassified as consonant cluster reduction in the literature (Flanigan 1987), for the purposes of comparison I choose to retain this treatment in my analysis. Additionally, it is important to note that forms similar to “don’t” and “just” showed no evidence of consonant cluster reduction. Thus, in the phrase, “I didn’t want to come...yknow I dun wanna I dun wanna know,” Jacquie only reduced consonant clusters on the word “don’t” (Jacquie, Interview 1, August 3rd 2017).

Four participants (Mike, Sharon, Jacquie, and Sako) employed consonant cluster reduction in all four linguistic environments, with Sako reporting the highest frequency

of use (72.6%). Rick and Niibiish each used three types of consonant cluster reduction: “and,” “just,” as well as words ending in “-ing” for Rick and “-ing,” “and,” as well as “don’t” for Niibiish. In total, Niibiish reported the lowest frequency of use (41.5%) for consonant cluster reduction. The rate of usage for each participant is shown in Table 1.

Table 3: Consonant Cluster Reduction (CCR), Rate of Usage (%)

CCR	Niibiish	Mike	Sharon	Jacque	Rick	Sako
and /æŋ/	67.8	84.8	92.8	82.8	86.5	97.1
-ing /ɪŋ/	11.3	44	3.6	22.5	9.3	70.2
don't /daʊn/	5.9	17.1	17.9	10.8	0	14.3
just /dʒʌs/	0	50	72.5	28.2	67.5	96.3
Average	41.5	55.6	53.3	50.1	47.6	72.6

Participants more frequently employed consonant cluster reduction when using “and” or “just.” The non-standard form of “and” ranged from 67.8% to 97.1% in terms of usage, while “just” ranged from 50% to 96.3% in cases where Aboriginal English was preferred over the standard. Note, while all participants preferred the non-standard form of “and,” only four out of six participants showed a high rate of consonant cluster reduction on the word “just.” Conversely, the standard pronunciation was preferred for

contractions and words ending in “-ing.” The standard form, “don’t,” averaged 89% in terms of use, while “-ing” was reported around 73.2% of the time. The non-standard forms, /dʌn/ and /ɪn/, were reported at 11% and 26.8% respectively.

In total, the non-standard pronunciation of “-ing” was used most frequently as a verb ending. For example, “are they holdin’ the doors” or “are they cleanin’ up their mess” (Mike, Interview 1, July 11th 2017). Nouns typically retained the standard pronunciation; although, Mike did employ the non-standard form in the phrase, “grab somethin’ t’eat” (Mike, Interview 1, July 11th 2017). This was the first and only time he employed this variation, however.

The pronunciation of “th” as a stop only occurred in determiners, pronouns, and adverbs which began with a voiced dental fricative. These words included: the, there, that, they, their, then, them, this, those, and these. While all participants showed evidence of the variety in their pronunciation of the first eight terms, when it came to pronouncing “those” and “these” most preferred the standard pronunciation. In fact, only Jacquie and Rick ever used the alternative pronunciation, /doʊs/, and only Mike, Sharon, and Jacquie ever used the nonstandard /deez/. Compared to the others, Jacquie had the highest rate of usage with 57.4% while Mike reported the lowest rate with 11.2%. Regarding the use of specific terms, however, Niibiish used /den/ the most frequently (92.3%) while Rick used /dɪs/ the most out of all the participants (60%). Although the rate of usage for pronouncing “th” as a stop is significant, standard forms still appeared more frequently in participants’ speech. The exception to this is Jacquie whose use of the non-standard feature surpassed that of the standard much of the time.

Table 4: Pronunciation of "th" as a Stop, Rate of Usage (%)

TH as a Stop	Niibiish	Mike	Sharon	Jacque	Rick	Sako
the /di/	31.1	12	13.4	68.6	27.6	35.2
there /dɛr/	47.1	32.4	7.5	51.4	13.6	37.5
that /dæt/	38.5	12.1	15.6	67.3	39.1	22.1
they /deɪ/	19.8	5	6.9	43	8.5	13.3
their /dɛr/	64.3	1.9	4.8	68	42.1	50
then /dɛn/	92.3	22.9	25.8	58.3	38.9	46.4
them /dɛm/	29.4	27.9	5.3	50	40	3.1
this /dɪs/	9.1	6.7	8	42.1	60	13.3
those /doʊz/	0	0	0	28.6	13.3	0
these /di:z/	0	50	11.1	50	0	0
Average	33.3	11.2	11.7	57.4	27	25

H-dropping occurred in two places: on the pronoun “him” and on the verb “to have” conjugated in the present tense. Rick was the only participant to use h-dropping on the verb “to have,” however. Usage rates ranged from Sharon’s 1.1% to Jacquie’s 15%.

Table 5: H-Dropping, Rate of Usage (%)

	Niibiish	Mike	Sharon	Jacquie	Rick	Sako
H-Dropping	0	3.8	1.1	15	13.8	8

4.4 Morphosyntactic Features

Aboriginal English morphosyntax can be grouped into three categories: (1) the deletion of standard features, (2) uninflected standard features, and (3) the addition of non-standard features. These findings are based on data collected from literature reviews (Wolfram 1984; Leap 1993; Ball and Bernhardt 2008), as well as the study of Lakota English and Lumbee English in the United States (Flanigan 1987; Schilling-Estes 2000), and Blackfoot English in Canada (Genee and Stigter 2010).

The most commonly cited morphosyntactic feature of Aboriginal English is copular “be” deletion (Flanigan 1987; Leap 1993; Ball and Bernhardt 2008). A copula is defined as a word which links the subject of an utterance with a predicate. In English, this refers to the form “to be.” Copula deletion removes this form, resulting in utterances such as, “the room \emptyset too small,” in place of the standard form, “the room is too small” (Flanigan 1987, 184). Most frequently, copular “be” deletion is employed in either

passive or perfective constructions (Ball and Bernhardt 2008, 579). Other forms such as pronouns, prepositions, function words, auxiliary “be”, as well as definite and indefinite articles may also be deleted (Flanigan 1987; Ball and Bernhardt 2008; Genee and Stigter 2010). The deletion of pronouns and prepositions may only be permitted in cases where they are contextually recoverable while auxiliary “be” deletion may only occur in passive and perfective constructions (Ball and Bernhardt 2008, 579). In addition, subject-verb agreement, plural marking, and number agreement are typically absent in Lakota English although they are retained in other Aboriginal English varieties (Flanigan 1987).

According to the authors, nouns and verbs may be uninflected in Aboriginal English (Ball and Bernhardt 2008; Genee and Stigter 2010). In many varieties, speakers either do not inflect nouns and verbs or only use verbal inflection as permitted in the Aboriginal heritage language (Ball and Bernhardt 2008). For example, in Blackfoot grammar, “many verbs allow both inflectional and non-inflectional markings of past tense” (Genee and Stigter 2010, 66). Thus, in Blackfoot English both regular and irregular verbs may be uninflected for past tense (Genee and Stigter 2010). It is important to note however that verbs uninflected for tense are only permitted in cases where “the time reference of the clause is clear either from the context, from time adverbials, or from preceding or following inflected verbs” (Genee and Stigter 2010, 66).

Aboriginal English deviates from the standard in its inclusion of an unmarked past tense and multiple negation. Unmarked past tense describes an utterance where “the grammatical marking of [past] tense is not present in the verb phrase” (Wolfram 1984, 33). An example of this is as follows: “They all speak in Indian when we first started school we had to learn it, the English, in school” (Wolfram 1984, 33). In this example,

the present tense form of the verb “to speak” is substituted for the past tense form even though the utterance refers to the speaker’s past experiences. Multiple negation, on the other hand, occurs when two or more negatives are used within a single utterance (Leap 1993; Ball and Bernhardt 2008). Unlike in Standard English, in which two negatives are thought make an affirmative, here each negator reinforces the other thereby maintaining the negative aspect of the phrase (Nevalainen 1998). Thus, an individual might say, “they haven’t learned nothing,” in place of the standard form, “they haven’t learned anything.”

The morphosyntactic features employed by the participants in this study include multiple negation as well as the plural forms “they all,” “we all,” and “yous.” Of the non-standard features discussed here, Aboriginal English morphosyntax was used the least frequently and by the fewest number of participants. Taking the average rate of usage, multiple negation was used 6.6% of the time while the plural forms “they all” and “we all” had a rate of 3.7% and “yous,” 1%.

Three participants – Mike, Jacquie, and Sako – used multiple negation in their speech. Mike used this construction the most frequently, with a rate of 12.8%. Jacquie and Sako, on the other hand, used multiple negation less than 5% of the time. Jacquie averaged a rate of 4.3% while Sako’s usage capped at 2.6%.

The plural forms – they all, we all, and yous – were used infrequently in participants’ speech. Although four individuals showed evidence of at least one of these forms, nobody exceeded a rate of usage of 5%. “They all” and “we all” were used by Mike, Jacquie, and Rick with usage rates of 3.9%, 3%, and 4.3% respectively. “Yous” was only used by Sharon, at a rate of 0.5%, and Jacquie, at 1.5%.

Table 6: Morphosyntactic Features, Rate of Usage (%)

Non-Standard Features	Niibiish	Mike	Sharon	Jacquie	Rick	Sako
Multiple Negation	0	12.8	0	4.3	0	2.6
They all/ We all	0	3.9	0	3	4.3	0
Yous	0	0	0.5	1.5	0	0

4.5 Discourse Features

According to the literature, Aboriginal discourse is characterized by participant frameworks which emphasize silence. These frameworks reflect cultural attitudes which associate listening with respect. As speakers are taught to weigh their words carefully, Aboriginal children may choose to remain silent during casual conversations or, if they choose to speak, may take a long time to respond (Ball and Bernhardt 2008, 580-581). Going along with this, individuals may refrain from maintaining eye contact with the speaker to more carefully consider what is being said (Ball and Bernhardt 2008, 581). While those I spoke with did not appear to avoid eye contact with me, participants did take noticeably longer to respond. In general, participants would pause prior to answering a direct question as well as in between thoughts in a single conversational turn. As a result, the pace of the conversation was much slower than average.

Although generally associated with Canadian English, the discourse particles “eh” and “yknow” were not used infrequently in participants’ speech. Given the strong association between discourse markers such as “eh” and a Canadian national identity (Gold and Tremblay 2006), the inclusion of this finding may appear out of place in a discussion of Aboriginal English and its characteristics. However, as these features can be employed in a variety of ways – not all of which are positively associated with Canadian-ness – it is important to explore how participants’ use compares to that of other Canadians.

In Gold’s (2005) study, the author conducted a survey of “eh” usage among Canadian-born and international students at the University of Toronto. She found that, among Canadian-born students, most recognized and reported using “eh” with opinions, “eh” with exclamations, and the expression *I know, eh?* (Gold 2005, 3). Unsurprisingly, these three types of “eh” were also the most positively evaluated. The least used and most negatively evaluated form was the narrative “eh” (Gold 2005, 5; Denis 2013). Of the four participants who used “eh” in my interviews, Niibiish, Rick, and Sako used the narrative “eh” most frequently. Additionally, this was the only form of “eh” used by Rick and Sako. Mike and Sharon showed no evidence of “eh” in their interview data. See Table 5 for more details.

Table 7: Eh, Rate of Usage (%)

Eh	Niibiish	Mike	Sharon	Jacque	Rick	Sako
Narrative Eh	92.6	0	0	33.3	100	100

Eh + Confirmation	7.4	0	0	0	0	0
Eh + Agreement	0	0	0	66.7	0	0

As a discourse tag, “yknow” functions either as a hedge or as an intensifier based on the speaker’s certainty in the addressee or in the content of the message (Holmes 1986). Used as a hedge, “yknow” may mark a false start, linguistic imprecision, or a plea for validation from the addressee. As an intensifier, this form is used for “positive politeness functions, such as emphasis, and to confidently...attribute relevant background knowledge and experience to [the] addressee” (Holmes 1986). Participants in this study used “yknow” primarily to express confidence. Most often, “yknow” was used to “emphasize, intensify, or boost the strength of the speech act, to stress the speaker’s confidence and hence reassure the addressee concerning the validity of the proposition asserted” (Holmes 1986, 8). Overall, the frequency of usage for “yknow” as an intensifier ranged from 73.2% to 85%. Within its function as an intensifier, participants used this marker emphatically between 42.5% and 91.2%. Although used less frequently, “yknow” also functioned to introduce mutual knowledge and to express confidence in the knowledge of the addressee (i.e. Attributive yknow) (Holmes 1986, 8-9). The rate of usage for each of these functions was between 7.7% and 43.8% for the former and 1.1% and 35.3% for the latter. In contrast, “yknow” was used as a hedge between 15% and 37.3% of the time. Hedging, in most cases, resulted from false starts or linguistic imprecision, with participants averaging 33.3% to 60% in the first case and 20% to 66.7% in the second. Comparatively, Canadian use of “yknow” is in decline. Adults aged

thirty to sixty-nine have an average rate of usage of 17% while the youngest generation, those aged ten to sixteen, average around 5% (Tagliamonte 2006).

Table 8: Yknow, Rate of Usage (%)

Yknow	Niibiish	Mike	Sharon	Jacqueie	Rick	Sako
Intensifier	76.3	82.3	80.5	76.2	73.2	85
Hedge	23.7	17.1	19.5	23.8	37.3	15

Table 9: Yknow as an Intensifier, Rate of Usage (%)

Yknow As Intensifier	Niibiish	Mike	Sharon	Jacqueie	Rick	Sako
Mutual Knowledge	24.6	29.4	7.7	43.8	13.5	8.8
Emphatic	42.5	35.3	91.2	81.3	86.5	91.2
Attributive	31	35.3	1.1	6.3	0	0

Table 10: Yknow as a Hedge, Rate of Usage (%)

Yknow As	Niibiish	Mike	Sharon	Jacqueie	Rick	Sako
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Hedge						
Linguistic Imprecision	37	28.6	50	20	36.8	66.7
Introducing Qualifying Information	14.8	28.6	4.5	20	5.3	0
False Start	48.1	42.9	45.5	60	57.9	33.3

4.6 Discussion

In the 1990s, Leap suggested that Aboriginal English was the first language spoken by two-thirds of Aboriginal youth (Leap 1993, 93). Following a century of Aboriginal assimilation in North America, Aboriginal English, he argued, represented the “only contact speakers [had] with their tribe’s verbal tradition” (Leap 1993, 93). This conclusion has become well established within the literature, with scholars correlating the use of these varieties with a strong sense of Aboriginal identity and solidarity (Ball and Bernhardt 2008, 573; Fadden and LaFrance 2010; Wiltse 2011). Such conclusions, however, do not account for the long-term consequences of assimilationist policy still experienced within Aboriginal communities, both urban and rural. Specifically, it does not account for the fracturing of Aboriginal speech communities and the consequent impacts this has had on language socialization.

Language socialization refers to the process by which novices acquire both “appropriate forms of sociality and competence” in a language or linguistic variety (Ochs and Schieffelin 2017, 3). According to Ochs and Schieffelin (2017, 3), this process is “rarely explicit, instead relying on novices’ ability to infer meanings through routine indexical associations between verbal forms and sociocultural practices.” Due to Residential Schools, language socialization within Aboriginal communities has been disrupted. While community-based revitalization efforts have been implemented to combat these issues, intergenerational traumas, a lack of social homogeneity, and long held stigmas make the process difficult. As a result, most people are socialized in standard Canadian English, rather than in an Aboriginal English variety or an Aboriginal language.

In examining participants’ use of Aboriginal English no clear pattern emerges based on age, gender, ethnicity, occupation, residence, or upbringing. Age wise, the six participants can be divided into two categories: those aged thirty to forty and those above fifty years old. Rick and Sako belong in the first category while Niibiish, Mike, Sharon, and Jacquie can be grouped in the second. Even though the second group is larger, neither group can be said to use the variety more than the other. In fact, when considering the two most frequently used features, it is Sako who uses consonant cluster reduction most frequently and Jacquie who pronounces “th” as a stop the most of all the participants. The two women, Sharon and Jacquie, vary considerably in their use of the variety as well. Jacquie frequently uses eight features and has the highest rate of usage for four: h-dropping, pronouncing “th” as a stop, plural “yous,” and “eh” with agreement. Sharon, on the other hand, typically has a low rate of usage and only uses five features.

While these differences could be explained due to residence patterns – as Jacquie grew up on reserve while Sharon lived in the city – Rick was also raised in an urban area and has a much higher rate of usage than Sharon. In terms of ethnicity, the only three that are comparable are Sharon, Jacquie, and Sako who all identify as Oneida. But again, each individual uses a different number of the traits as well as a different rate of usage for each one.

The lack of standardization in participants' use of Aboriginal English, I argue, stems from the fact that they were socialized in Canadian English rather than the variety. Without a speech community to guide their acquisition, these individuals simply picked up the features they were exposed to in their day-to-day life. This resulted in the variable acquisition of the variety as individuals developed different sets of linguistic resources. Some features, like consonant cluster reduction or pronouncing “th” as a stop, were commonly used and thus acquired by most learners. Others – for example, multiple negation – were used less frequently and only acquired by those exposed to them. In the case of multiple negation, among others, this infrequent usage is most likely due to the stigmatization of non-standard features. This lack of cohesion suggests that Aboriginal English, as it is described here, is not a separate variety of English. What we see instead is the remnants of a variety integrated within standard Canadian English.

This is not to say that those I spoke with identified more as Canadian because of this lack of a cohesive linguistic variety, however. Everyone I interviewed expressed a strong sense of self and of community. While this sense of Aboriginal pride might have

been artificially heightened given the research environment¹³, these findings do appear to undermine the central theme of much of the current literature. For, rather than seeing a marked increase in Aboriginal identification for those who frequently use the variety, there is no clear correlation between rate of usage and sense of identity. Of course, these findings are based on a small subset of the population and thus are only preliminary. Further research which examines the use of Aboriginal English varieties in adults, particularly those without an Aboriginal mother tongue, is required to substantiate these claims.

Furthermore, it is still unclear to what extent there is a sole Aboriginal English variety and how this variety would be standardized, acquired, and passed on. If Aboriginal English is an English variety which incorporates features of Aboriginal languages, and there are over seventy Aboriginal languages in Canada (Government of Canada 2017c), then where exactly did these various features come from? Additionally, to what extent does the spread of language features reflect an Aboriginal community that identifies and imagines itself as part of a larger group (Anderson 1991)? Although beyond the scope of the current study, these questions can hopefully be used to guide future research in this area.

While the above correlation cannot be substantiated, it is possible to conclude that both participants' use of the variety and their strong sense of identity are enabled by the Friendship Centre. As has been previously mentioned, the N'Amerind Friendship Centre

¹³ The N'Amerind Friendship Centre is mandated to promote the overall well-being of Native persons through culturally appropriate programming. Thus, while not required, most staff members speak about choosing to apply for a position here because of their pride in their community.

proves a safe space where individuals – no matter their state of personal healing – can find, explore, and express their identities as Aboriginal people. One such means of expressing these identities is through language use. Within the Friendship Centre, speakers are not expected to conform to standard speech forms. This is because, surrounded by other speakers, the use of non-standard forms does not mark users as different. Although in a more classic Anglo-urban setting users might feel pressure to conform to standard linguistic formats; the sense of belonging which is fostered by Friendship Centres allows for a freedom of expression which might otherwise be repressed. This sense of solidarity allows speakers to engage with their Aboriginal identity both socially and linguistically without fear of persecution. In this way, the N’Amerind Friendship Centre fosters participants’ use of Aboriginal English varieties as well as their overall sense of identity. Contrary to previous studies, then, it is not a direct correlation between use of the variety and identity which is evidenced here but rather a relationship between language use, identity, and environment.

In urban settings, Aboriginal bodies are marked as deviant and heavily policed. Surrounded by similarly marked bodied within the N’Amerind Friendship Centre, however, both clients and staff are relieved of their deviant status and the pressure to conform which comes as a result. Consequently, individuals feel the security needed to express themselves as Aboriginal people in both their actions and words. Participants, here, show evidence of both the use of the variety and a strong Aboriginal identity as a result of this environment. As noted in the opening quotation, Friendship Centres provide those who come here with a home away from home where they can speak and act without judgement.

4.7 Conclusions

The existing literature on Aboriginal English correlates use of the variety with a strong sense of Aboriginal identity. While all six of the participants in this study proudly identified as Aboriginal people, there was no direct correlation between participants' identities and their language use. Of the non-standard features examined here, consonant cluster reduction, the pronunciation of "th" as a stop, and the discourse marker "yknow" were the only forms used by all six participants. Even so, there existed a high variability in participants' frequency of use. Consonant cluster reduction ranged from 41.5% to 72.6% in terms of use while the pronunciation of "th" as a stop averaged between 11.2% and 57.4%. Comparatively, "yknow" used as an intensifier had a higher rate of usage with a range of 73.2% to 85%, however, used as a hedge, this rate dropped significantly to between 15% and 37.3%. Overall, the highest rates were evidenced by Sako, Rick, and Jacquie. Sako employed consonant cluster reduction and "yknow" as an intensifier the most often. Rick had the highest usage rate for "yknow" as a hedge, while Jacquie pronounced "th" as a stop most frequently. Although differing in terms of age, gender, ethnicity, residence, and upbringing, these individuals were connected through the N'Amerind Friendship Centre. As a community-run and Aboriginal-based organization, the N'Amerind Friendship Centre did not restrict the use of non-standard forms in participants' speech. Rather, surrounded by other Aboriginal people, participants felt safe to speak as they wished without fear of censure or stigmatization. It is the environment, therefore, which allowed for both the use of the variety and participants' strong Aboriginal identification as is evidenced here.

Chapter 5

5 So, Why Are Friendship Centres Important?

In 2017, the N'Amerind Friendship Centre celebrated its fiftieth anniversary. As part of the celebrations, staff members compiled photographs from as early as the Centre's opening all the way through to the present day. These photographs were much more than a visual record of the Centre's history. They represented all the reasons the Friendship Centre was, and continues to be, a significant environment for community members. Captured in these photographs were fifty years of laughter and tears, of hardship and healing. Fifty years of having a place to turn to when the community back home was too far away. For those present, the photographs elicited strong reactions. These ranged from raucous laughter at the sight of 1980s fashion choices to teary-eyed sighs when presented with images of elders long passed away. The emotional significance of these landscapes is often of secondary importance in the literature, with certain academics preferring to frame their discussions of the movement in terms of history or public policy. While these studies are important, in backgrounding the Centres' felt-value, they present a narrative which may not fully capture participants' perspectives.

The importance of Friendship Centres can be attributed, in part, to their role as a culturally-based social service providers. In serving urban Aboriginals – who, due to their chosen place of residency, are denied their rights as Aboriginal peoples – Friendship Centres fill an important gap in public policy. To those I spoke with however, service provision was not what classified N'Amerind as a therapeutic landscape. Rather it was

the combination of culture and community which resulted in participants' strong sense of place. For those who frequented the Centre, N'Amerind represented a refuge from the judgement and discrimination of the mainstream. Individuals could feel comfortable behaving and speaking as they wished since, surrounded by others who shared their experiences, they did not feel obligated to blend in. This sense of security allowed participants to explore ideas of Aboriginality in healthy and productive ways. On the one hand this meant unpacking the negative perceptions of Aboriginality many had developed as a result of trauma; while on the other, this led to participants' reaffirmation of their own identities through traditional teachings. In becoming comfortable in themselves, these individuals began to feel comfortable in the world around them. They began to joke about their experiences, about their pain, rather than feeling resentment. They began to speak using Aboriginal varieties without feeling insecure or embarrassed about their linguistic choices. Most importantly, through their participation in the Friendship Centre, those I met began to feel proud of themselves and of their communities. This is what makes Friendship Centres important.

Friendship Centres exist as part of Canada's invisible infrastructure. They play a critical role in the lives of many urban Aboriginal people yet their contribution is, at times, downplayed in mainstream discussions of Aboriginal experiences in Canada. As the country's urban Aboriginal population continues to grow, Friendship Centres will play an even more significant role in the provision of services such as healthcare, education, legal aid, and culture. Additionally, the interpersonal relationships which the Centre fosters will be key to establishing a sense of community within this historically disconnected population. It is more important than ever to recognize the positive

contributions – whether physically, mentally, emotionally, or spiritually – which Friendship Centres make to the lives of their clients, staff, and members. For, if we, as a country, ever want to achieve the goal of reconciliation, we must begin to support and acknowledge both Aboriginal people and the services which sustain them.

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Appendix I: Interview Guide

QUESTION	RESPONSE
1. What is the _____ program?	
2. What does this program do?	
3. Who does this program support?	
4. Why is culturally-appropriate programming important?	
5. Can you describe your experience at the N’Amerind Friendship Centre?	
6. Why is this work important to you?	
7. Has your experience working here affected you in any way?	
8. Do you think Friendship Centres are important?	

Appendix II: Table of Interviewees

Pseudonym	Age	Gender	Aboriginal Group	Language Status
Louise	33	Female	Oneida	Unknown
Niibiish	60	Male	Anishinaabe	Moderate Fluency
Kennedy	34	Male	Oneida	Minimal Fluency
Mike	63	Male	Delaware	Moderate Fluency
Sharon	65	Female	Oneida	No Fluency
Client A	26	Male	Anishinaabe	No Fluency
Jacquie	60	Female	Oneida	Unknown
Rick	40	Male	Munsee/ White	No Fluency
Sako	30	Male	Oneida	No Fluency

Appendix III: Ethics Approval



**Western
Research**

Western University Non-Medical Research Ethics Board
NMREB Delegated Initial Approval Notice

Principal Investigator: Dr. Tania Granadillo

Department & Institution: Social Science/Antropology, Western University

NMREB File Number: 109285

Study Title: A House of Healing: The Study of Friendship Centres and their Importance to Urban Indigenous Populations

NMREB Initial Approval Date: June 02, 2017

NMREB Expiry Date: June 02, 2018

Documents Approved and/or Received for Information:

Document Name	Comments	Version Date
Western University Protocol	Received May 13, 2017.	
Letter of Information & Consent	Clients	2017/05/13
Letter of Information & Consent	Staff	2017/05/13
Recruitment Items	Script/email to be sent. Received April 26, 2017.	
Instruments		2017/04/26
Letter of Information & Consent	Video Release	2017/04/26

The Western University Non-Medical Research Ethics Board (NMREB) has reviewed and approved the above named study, as of the NMREB Initial Approval Date noted above.

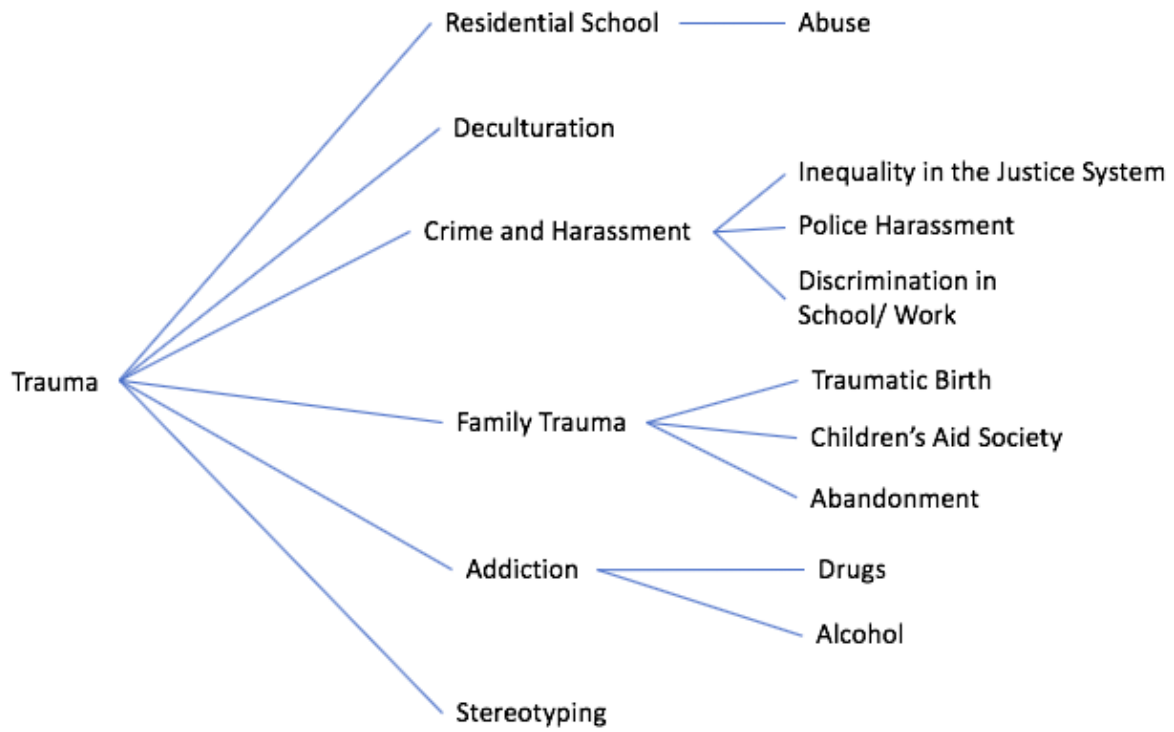
NMREB approval for this study remains valid until the NMREB Expiry Date noted above, conditional to timely submission and acceptance of NMREB Continuing Ethics Review.

The Western University NMREB operates in compliance with the Tri-Council Policy Statement Ethical Conduct for Research Involving Humans (TCPS2), the Ontario Personal Health Information Protection Act (PHIPA, 2004), and the applicable laws and regulations of Ontario.

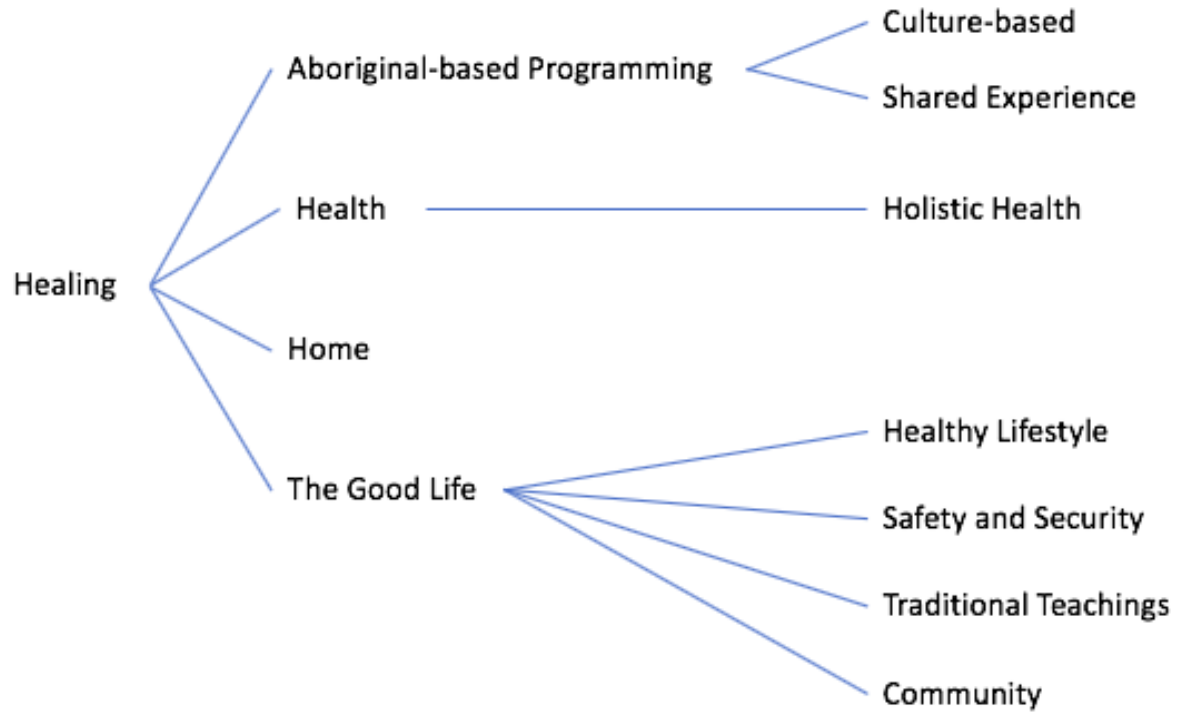
Members of the NMREB who are named as Investigators in research studies do not participate in discussions related to, nor vote on such studies when they are presented to the REB.

The NMREB is registered with the U.S. Department of Health & Human Services under the IRB registration number IRB 00000941.

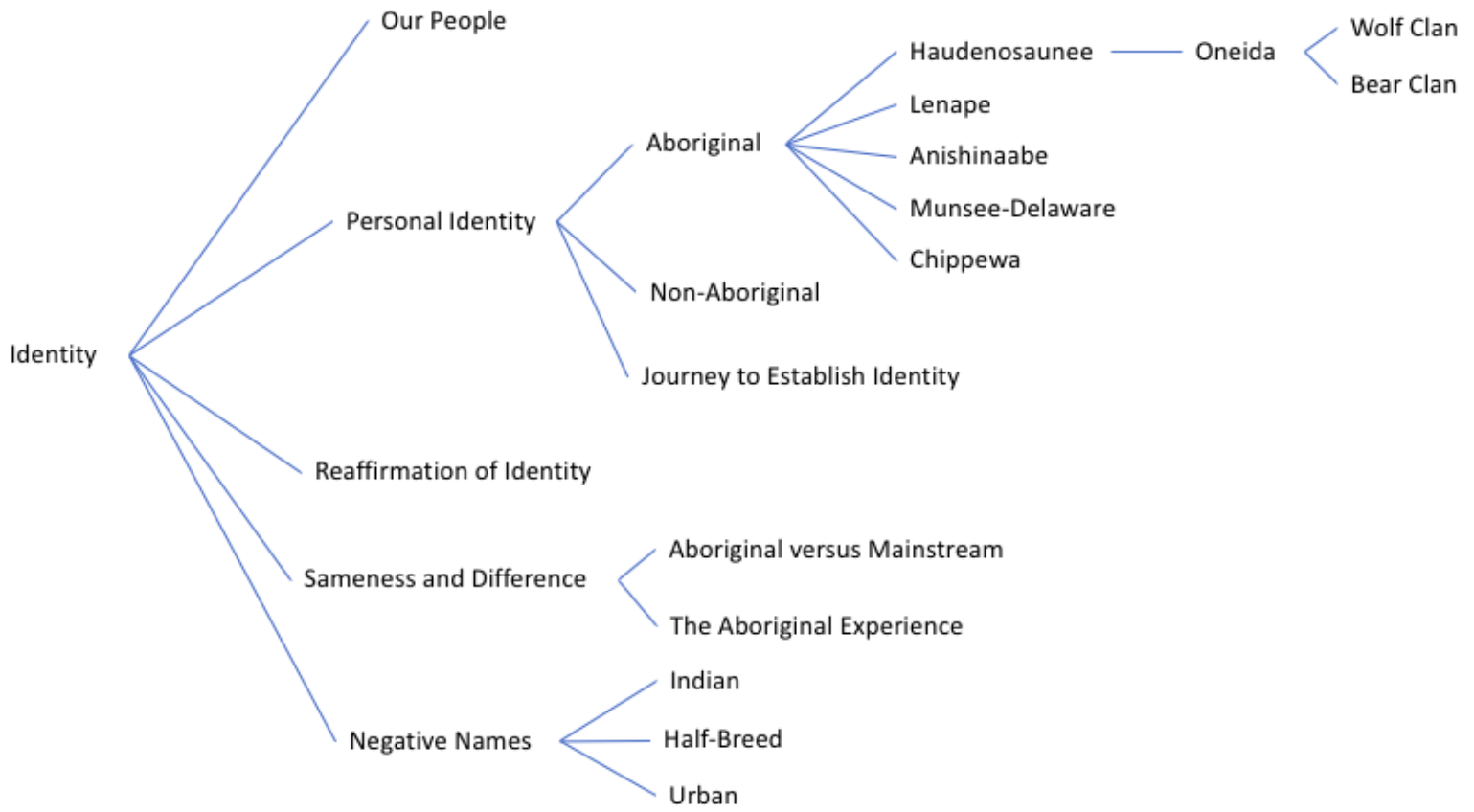
Appendix IV: Code List (Part 1)



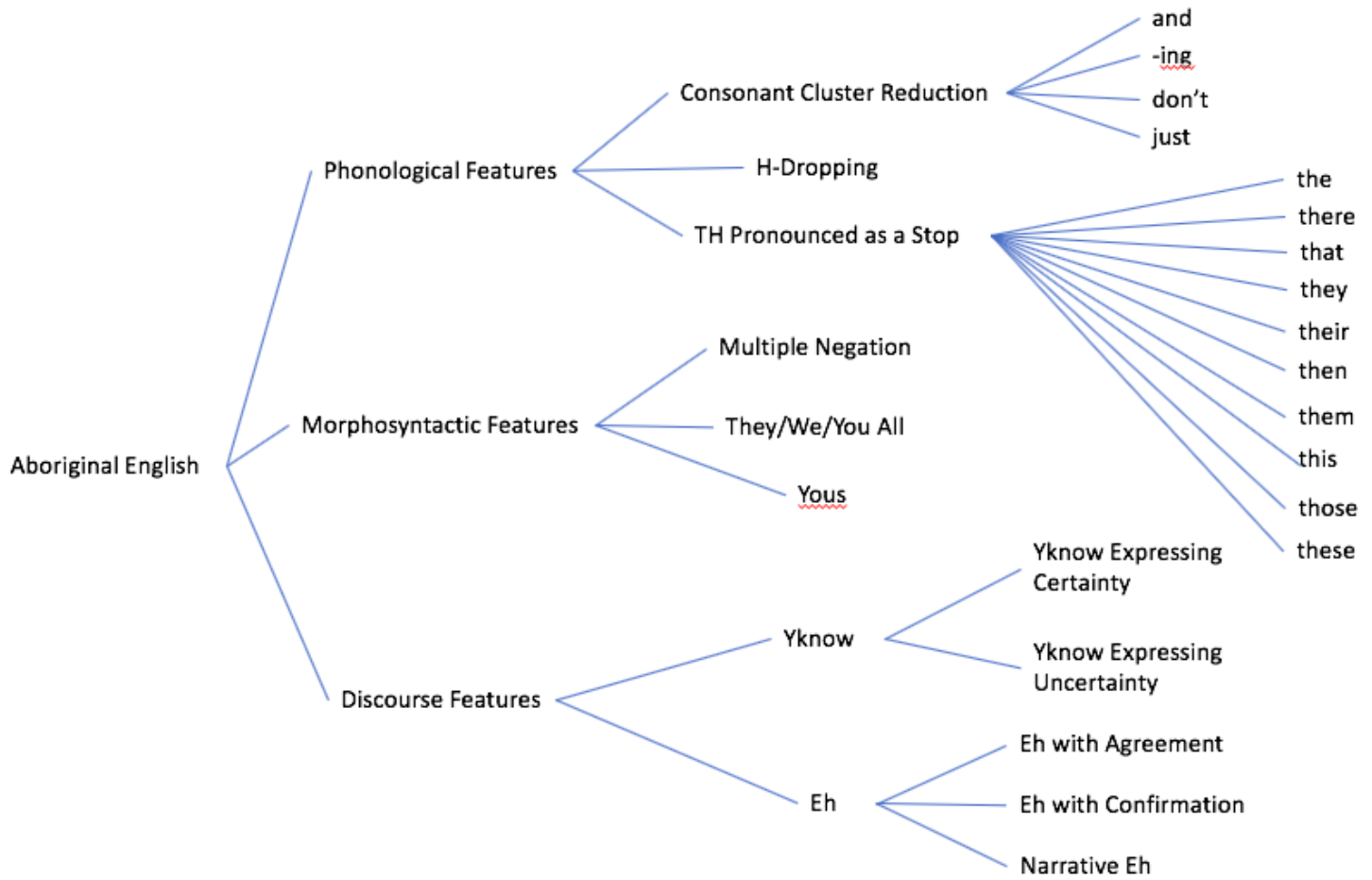
Appendix V: Code List (Part 2)



Appendix VI: Code List (Part 3)



Appendix VII: Code List (Part 4)



Curriculum Vitae

Name: Emily Pitts

Post-secondary Education and Degrees: University of Alberta
Edmonton, Alberta, Canada
2012-2016 B.A.

The University of Western Ontario
London, Ontario, Canada
2016-2018 M.A.

Honours and Awards: Canada Graduate Scholarship (CGS M)
Master's Program
2017

Related Work Experience Research Assistant
The University of Western Ontario
2016-2017

Teaching Assistant
The University of Western Ontario
2018