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The elusive promise of reconciliation in British Columbia child welfare: Aboriginal perspectives and wisdom from within the BC Ministry of Children and Family Development

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Article abstract

This article considers the unique challenge for Aboriginal professionals working in a government child welfare system responsible for the oppression of Aboriginal children, families and communities. A non-Aboriginal organizational insider researcher uses an Indigenous/ethnographic approach to explore these issues with Aboriginal professionals within the British Columbia Ministry of Children and Family Development (MCFD). This study involves a dual focus that examines the history, identity, values, motivations, and practice approaches of Aboriginal professionals as well as how organizational structural and environment variables support or impede their efforts toward critically needed improvements to child welfare services for Aboriginal children, youth, families and communities. Analysis of these two areas results in significant findings for the organization and its perceived inability to achieve progress with transforming service delivery for Aboriginal peoples.

The findings contribute to better understanding of factors that impede Aboriginal professionals from achieving improved practice and outcomes. Organizational variables, such as low Aboriginal practice support, racism, cultural incompetence, hierarchical structure and decision making, risk-averse practice norms, poorly implemented or rhetorical change initiatives, and institutional physical environments impede the ability of Aboriginal professionals. However, significant mitigating factors were found to help, such as meaningful organizational support at the worksite level provided through dedicated culturally competent Aboriginal management and practice teams.

The elusive promise of reconciliation in British Columbia child welfare: Aboriginal perspectives and wisdom from within the BC Ministry of Children and Family Development

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Abstract

This article considers the unique challenge for Aboriginal professionals working in a government child welfare system responsible for the oppression of Aboriginal children, families and communities. A non-Aboriginal organizational insider researcher uses an Indigenous/ethnographic approach to explore these issues with Aboriginal professionals within the British Columbia Ministry of Children and Family Development (MCFD). This study involves a dual focus that examines the history, identity, values, motivations, and practice approaches of Aboriginal professionals as well as how organizational structural and environment variables support or impede their efforts toward critically needed improvements to child welfare services for Aboriginal children, youth, families and communities. Analysis of these two areas results in significant findings for the organization and its perceived inability to achieve progress with transforming service delivery for Aboriginal peoples.

The findings contribute to better understanding of factors that impede Aboriginal professionals from achieving improved practice and outcomes. Organizational variables, such as low Aboriginal practice support, racism, cultural incompetence, hierarchical structure and decision making, risk-averse practice norms, poorly implemented or rhetorical change initiatives, and institutional physical environments impede the ability of Aboriginal professionals. However, significant mitigating factors were found to help, such as meaningful organizational support at the worksite level provided through dedicated culturally competent Aboriginal management and practice teams.

Key terms

Aboriginal: A collective term for Inuit, First Nation, and Métis peoples.

First Nation: Describes persons that self-identify as First Nation regardless of Indian Status. The term is also used to describe First Nation governments (collectively) and organizations serving First Nation

peoples.

Indigenous: Persons who self-identify as Indigenous. Term often used in an international context.

Introduction: Aboriginal professionals' struggles to implement Indigenous practice approaches within the mainstream organizational environment of the British Columbia Ministry of Children and Family Development (MCFD)

The Elders took me out and taught me how to crawl around underneath the trees so I could see the tea. I couldn't see it. "Where is it?" You know what? Unless you are lying on the ground looking, you can't see the tea. The Elder introduced me to the tea and then I could see it and it was everywhere. It's the same with the Ministry—unless you get down on your knees, and you're down here [in the communities] working and experiencing, how do you know what it is? You can't see it. (MCFD Aboriginal Reconnection Worker)

Government child welfare involvement with Aboriginal communities in Canada has had significant and tragic consequences. These impacts are felt every day by Aboriginal peoples across this country. Extensive documentation and literature address the systemic abuse and oppression that has resulted in intergenerational trauma, the ongoing overrepresentation of Aboriginal children and families within child welfare systems, alongside the underrepresentation of prevention and support services that may help to address and ameliorate these ongoing impacts (Turpel-Lafond, 2015; Walmsley, 2005; Hughes, 2006; Hudson, 1997; Armitage, 1993; Johnston, 1983). Government child welfare agencies across Canada struggle to find adequate policy, practice, and resources to better serve Aboriginal people. An ongoing strategy has been to pursue the inclusion of Aboriginal social workers.

The Ministry of Children and Family Development (MCFD) provides child protection, foster care, adoption, mental health, youth justice, and disability services to children and their families in British Columbia. Due to the long history of oppressive and inappropriate system interventions in Aboriginal communities, Aboriginal children remain eight times as likely as non-Aboriginal children to live in foster care. In British Columbia, 56% of children in the care of MCFD (during the time of the study) were Aboriginal (Government of British Columbia, 2010). This number has been increasing, rather than decreasing, over the past 15 years.

This article presents a summary and discussion of knowledge gained through in-depth ethnographic research that involved hearing from Aboriginal professionals within MCFD (Rousseau, 2014). It reveals their identities, values, motivations, practices and attempts to contribute to better outcomes for First Nations and Aboriginal children, families and communities served by MCFD. It reveals their experiences of not being included in relevant administrative, policy and practice changes they hope will ultimately transform children's services for First Nations and Aboriginal children, families and communities.

Despite ongoing commitments by MCFD to transform services, there appears to have been very little progress towards shifting control of services to Aboriginal groups and communities, let alone significant internal policy and practice changes to improve services the Ministry provides to Aboriginal children, families and communities (British Columbia Representative for Children and Youth, 2013). The 2013 report, *When Talk Trumped Service*, analyzed MCFD Aboriginal governance initiatives that occurred from 2008 to 2013. The BC Representative for Children and Youth (RCYBC) concluded the MCFD approach during that period had been "rife with perverse performance measures, the absence of any real incentives for change and no end-state goals on how services to Aboriginal children and youth will be improved" (p. 4). More recently the BC Representative, responding to the release of the Truth and Reconciliation Commission report, noted "true reconciliation must begin with families, but it also must depend on governments and communities to support the waves of children affected by intergenerational trauma" and the "the scope and scale of response required is not present on the ground and will not be until significant collaborative work is done" (Turpel Lafond, 2015, para. 5/8). The research presented in this paper supports these assertions that MCFD has yet to provide any realistic initiatives that could result in necessary transformation to children's services for First Nations and Aboriginal children, families and communities in British Columbia.

This research describes MCFD Aboriginal professionals' inability to implement Indigenous practice and policy approaches due to low organizational support, and therefore may provide some insight into the ongoing failed attempts by the BC MCFD to achieve necessary change. These insights may assist BC MCFD to identify and utilize the unique and invaluable internal resources of Aboriginal professionals to guide more effective efforts to transform children's services for Aboriginal peoples.

It is important to acknowledge that First Nations and Aboriginal peoples have altered the policy environment in response to the inability of mainstream child welfare systems to provide culturally relevant and transformative practices for Aboriginal peoples. Many First Nations and other Aboriginal communities in Canada are now delegated to deliver child welfare services through the Aboriginal Affairs and Northern Development Canada (AANDC) First Nations Child and Family Services (FNCFS) Program. However, the Assembly of First Nations, First Nations Child and Family Caring Society and other First Nations and Aboriginal groups point out the many inadequacies in the FNCFS program, including reliance on mainstream provincial legislation, policy, standards and grossly inadequate funding structures. These organizations continue to advocate for autonomous First Nations and Aboriginal child welfare structures that reflect relevant community/cultural practice, policies, standards and equitable funding.

While the obvious goal for First Nations and other Aboriginal peoples is to achieve fair and equitable autonomy over children's services, the current situation where many Aboriginal children are being served within provincial child welfare systems necessitates an immediate focus and priority on improving those services alongside that goal. Listening to the voices of Aboriginal peoples, and in particular Aboriginal professionals, is an obvious first step to improving services within provincial child welfare systems like MCFD.

Researcher standpoint

The research involves an in-depth ethnographic and Indigenous methodology undertaken by a

non-Aboriginal insider researcher and social work professional who gained insight and grounding within MCFD and its Aboriginal approach through seven years as a manager and director for MCFD Aboriginal Services in Victoria, BC. A shared Indigenous perspective that envisions First Nations and other Aboriginal communities caring for their own children, combined with positioning within the organization, allowed the researcher to gain credibility and trust with Aboriginal professionals to engage through in-depth conversations about their perspectives of how the Ministry supports their vision of systemic organizational change necessary to transform Aboriginal services. The research was motivated by over twenty years working alongside and witnessing the unique motivation of Aboriginal colleagues who choose to work for government children service organizations as a means to transform them within their communities.

Relevant literature

The motivations, practice and tensions of Aboriginal child and family practitioners form some of the starting points for inquiry in this research. The proliferation of Aboriginal voices in children's services has meant that growing focus on Indigenous practice and service approaches is relevant to the provision of services for Aboriginal children, families and communities. Better services will be informed by hearing the voices and perspectives of Aboriginal people who know best how to care for their children. The research also seeks to understand how a provincial child welfare system can begin to strengthen existing services, with the ultimate goal of seeing services being delivered through autonomous First Nations and other Aboriginal community structures.

Motivation, practice approach, and tensions of Aboriginal professionals in a historically oppressive system

There have been several studies that examine the strong values-based motivations,, attempts to reconcile cultural knowledge and practice within dominant mainstream organizations, and resulting dual accountabilities of Aboriginal professionals within government children service organizations (Reid, 2005; Walmsley, 2005; Bennett and Zubrzycki, 2003). Each study used qualitative approaches to hear the voices of Aboriginal professionals, and all shared key findings that participants pursued their positions in an attempt to change what they perceived as the system's inability to effectively serve their communities. Similar to all three of the studies was the finding that participants felt mainstream social work organizational settings, and their pursuant mandates and policies, constrained them from responding to community needs through a strong focus on extended family and community engagement, in culturally consistent ways. Resulting from this, some participants expressed feelings that their communities were wary and suspicious of them because of the social work profession's complicity in historic and ongoing oppressive practices toward Aboriginal communities.

These three studies support the concept and premise within this study that Aboriginal professionals have a unique values-based commitment for improving the way in which BC children's services provides services for Aboriginal children and families that are consistent with community values and approaches. They also point to the difficulty inherent in what seem to be competing roles for Aboriginal professionals in their communities and children service organizations, and the tensions that are created when they are unable to reconcile differences and achieve a vision of improved children's services in their communities.

Indigenous practice approaches

Largely as a result of increasing numbers of Aboriginal people becoming directly involved in delivering services through First Nations delegated and community agencies, models for services designed specifically in response to the unique experience and needs of First Nations and other Aboriginal individuals and communities have emerged. One such model described by Morrissette, McKenzie, and Morrissette (1993), and since widely adapted, is based on four key practice principles: (1) a focus on an Indigenous worldview; (2) developing consciousness within Aboriginal clients about the intergenerational impacts of colonization; (3) utilizing cultural knowledge and traditions to help individuals explore their identity and reconnect to community and collective consciousness; and (4) empowering Aboriginal clients. Work with each Aboriginal person varies depending on their individual orientation and connection to the specific worldview and orientation of their community.

Similarly, Weaver and White (1997) assert that historical trauma and grief experienced by Aboriginal people, which are the root of current social issues, are viewed as a starting point for working with individuals and families. An understanding of the devastating effects of colonization, whereby Aboriginal peoples lost control of their lives through the removal of land, livelihood, traditional lifestyle, and the forced removal of their children and loss of opportunity to parent, provides a narrative in practice to assist impacted Aboriginal people to better contextualize their experiences in terms of trauma, loss and grief (Gray, Yellow Bird & Coates, 2008).

Essentially, the vital yet basic common values held by Aboriginal peoples are the cornerstone of the development of services to address social and health issues. Weaver and White (1997) echo the work of Morrissette et al. (1993) by outlining the differences between mainstream family values that focus on the nuclear family versus a collective Aboriginal orientation to the extended family and community. Hart (2008) says that, in the collectivist worldview, "the welfare of the individual is intricately bound to the well-being of the community and its relationship with the more than human world" (p. 133). Recovering and implementing traditional cultural approaches to child, family and community well-being are key features in Indigenous practice approaches (Gray, Yellow Bird & Coates, 2008). Indigenous ways of helping may include the use of medicines, ceremonies and spiritual interventions aimed at "restoring or maintaining a balanced life" (Weaver, 2008). Ultimately the importance of the community is expressed through all Indigenous practice. Weaver also asserts that Indigenous practice models should arise "directly from an Indigenous context" and be "developed by Indigenous social workers for Indigenous social work practice in a specific local context" and therefore reach beyond culturally competent social work practice (2008, p. 78).

Touchstones of Hope—reconciliation to improve Aboriginal services

Touchstones of Hope was developed by First Nations and Aboriginal peoples to provide a reconciliatory framework to engage mainstream child welfare system participants in an effort to reconceptualize how services are designed, implemented and delivered (Blackstock, Cross, Brown, George, & Formsma, 2006). Within a reconciliatory framework, relationships and partnerships between Aboriginal communities and mainstream child welfare organizations can be developed to move the agenda forward for appropriate planning and development of Aboriginal child and family services (Blackstock et al., 2006). Basic principles for reconciliation involve acknowledging past mistakes through

open communication, and establishing non-discriminatory practices within the child welfare system by affirming Indigenous families and communities as the best caregivers for Indigenous children and youth. Principles of reconciliation are intended to lead to improved systems of care for First Nations and Aboriginal children through strengthening child welfare professionals' capacity to respond to the needs of Aboriginal children and families and ensure that past mistakes are not repeated.

A combined ethnographic/Indigenous research methodology

The research was conducted through ethnographic methods framed in a persistent and ongoing effort to decolonize knowledge and research from dominant and Eurocentric influences that have pervaded Aboriginal peoples and cultures. Ethnography is best described as an insider's attempt to understand why group members believe, feel or do what they do (Fetterman, 2010). Quite importantly, it is not an attempt to capture an objective reality but rather "compels the recognition and acceptance of multiple realities" (p. 21). Indigenous approaches to knowledge, practice development and research re-centre Aboriginal beliefs, values, and approaches in relation to the concepts that are of critical interest (Bennett & Blackstock, 2002; Smith, 2012; Wilson, 2001).

Bennett and Blackstock (2002) assert that Aboriginal knowledge and approaches assured that children were best cared for prior to colonization. Specific values, beliefs, and cultural practices varied in relation to different Aboriginal peoples and communities; however, consistent concepts within Aboriginal worldviews saw children as "important and respected members of an independent community and ecosystem" (p. 1). Holism, the foundation within all Aboriginal community approaches, is often viewed as essentially antithetical to the individual rights approach found within Canadian child welfare legislation and practice. Moving an Aboriginal child welfare agenda forward involves building on "the cultural strengths of communal rights, interdependence and knowledge which are often diametrically opposed to the legal requirements to operate within the realm of euro-western provincial values, laws regulations and standards" (p. 1).

An Aboriginal research committee, composed of three Aboriginal child welfare professionals, provided invaluable feedback and direction, sharing their understanding of Indigenous worldviews and encouraging the researcher to engage in self-awareness and reflexivity required to complete the research project.

Research design, participants, gathering and analyzing the data

The qualitative ethnographic research project included intensive researcher grounding in the organization; examination of organizational documents; discussions with organizational leaders, including one focus group with nine Aboriginal professionals; and in-depth interviews with 22 Aboriginal participants. The overarching research question was:

What are the identities, motivations, and approaches of Aboriginal professionals and how does MCFD support or impede Aboriginal employees to actively represent the interests of Aboriginal youth, families, and communities through the provision of effective and culturally relevant services?

Judgmental sampling techniques that seek to locate the most appropriate members of a

subculture or unit of focus for the study were used to recruit participants (Fetterman, 2010). The interviews occurred in 2010 and were conducted in person at 18 different MCFD worksites across the province (each interview averaged two to three hours in duration). Of the 26 Aboriginal employees who participated, 19 were female and seven male. Fourteen identified as belonging to a First Nation and the other 12 identified as other Aboriginal peoples. Twenty-one participants were currently employed by MCFD while five had recently left their employment with the Ministry. Only four participants worked with individuals in their home community or territory. Four of the five participants who recently left their employment had worked in their home community or territory.

Interviews were conversational and, while open-ended questions sometimes guided participant responses, initial discussion provided a natural opening and opportunity for participants to talk openly and at length about their experience as an Aboriginal employee within MCFD. Kovach (2010) describes using a conversational method in Indigenous research interviewing designed to encourage participants to share their meanings in an unfiltered way.

A qualitative approach to synthesizing data into smaller units of meaning, then identifying similarities and differences between them prior to transforming them into patterns and themes, was used to analyze the data (Unrau & Coleman, 1997). Themes were analyzed for both similarity and diversity of thought and experience. A conscious effort to go beyond dominant and researcher assumptions in an effort to create alternative explanations and challenge dominant discourses was made (Ristock and Pennell, 1996). The results reflect deep, rich descriptions of particular themes that emerged through this process.

Discussion of research findings

Extensive research findings are presented through visual maps (at the end of each section) that present and illustrate major thematic areas that flowed from the research. This overview of the extensive thematic results is not exhaustive or fully representative of the in-depth sharing of participants but a condensation for the purposes of discussing the failure of MCFD to make space within the organization for the values, beliefs, practices and contributions of its Aboriginal professionals. The stories and experiences of the Aboriginal participants are honest and impactful.

Identity, value and beliefs, motivation and practice approach

Participants described both strengths and challenges of growing up in communities where the impacts of colonization have resulted in widespread poverty and socioeconomic challenges. Participants reported feelings of community belonging as critically important. They exist parallel, and at times in sharp contrast, to the knowledge and experience of extensive family and community dissolution and intrusive involvement of government systems.

Some participants described being raised in traditional and connected ways to their communities while others describe their families burying their Aboriginal heritage in an attempt to assimilate into dominant culture. Others describe various experiences that fall in between. One participant who disconnected from her culture as a youth compared her experience to that of the challenge of Aboriginal children in care to find connection with families, culture and communities:

I absorbed something negative about being Aboriginal. I know what it did to me and I know how much my life has been changed by reconciling that within myself, and I think of the children in care and so many don't know their identity, their cultural identity isn't nurtured.

Another participant revealed feeling deep responsibility to her community after coming to terms with her Aboriginal identity. Becoming involved in traditional ways through ceremony and practices within her community was an important part of her journey to becoming a social worker. She described how, at her graduation, respected community members gave her a name that represented her significance and responsibility within the community. The deeply personal nature of this responsibility is something she carries throughout her career.

Another participant, whose mother was raised in an abusive non-Aboriginal foster home as a result of the sixties scoop, said she became a social worker to address the history in her family and to develop a practice "to sort of make amends…I wanted to ensure that the children that I worked with didn't end up losing their culture, their identity, like my mom, and therefore myself and my siblings". Several other participants described being young single parents experiencing government intervention as a daily part of their existence—much like the parents they now work with—and believed they can help make a difference in how those services are provided and experienced.

Values and beliefs

Participants described their values and beliefs as being deeply influenced by personal identification with the social-historical context of colonization. Having personally experienced or witnessed the impacts of child welfare systems, participants valued structural explanations of colonial impacts and resist attempts to isolate and pathologize individual behaviours. One participant said, "the social-historical context is really important … I wouldn't be able to move forward without that context being acknowledged."

Indigenous holistic perspectives and worldviews that include understanding the interconnected clan and family systems as the focal point for community healing were widely promoted by participants. Collective well-being was viewed as being attained through partnership within the community to explore and reassert cultural teachings and family values. As one participant expressed:

I'm learning from my people, what their tradition is, and sometimes they share with me that little bit of scared knowledge that we have … children who do not have these connections end up dividing their own culture.

Other values expressed by participants included deep respect for community protocols and approaching communities and families from a non-expert orientation of not "knowing all the answers". Sharing power with individuals was believed to assist in gaining acceptance in and learning about the community. The importance of building trust and respect in relationships was described by several participants as having the ability to acknowledge the impact the system has had on Aboriginal peoples. As one participant put it: "I'm always mindful of how I present to people in a really respectful way … and keeping an openness, like a curiosity. I'm just mindful of the power."

Other values shared by participants included modeling for, rather than directing, others. This approach involves more process and complexity, as one participant shared: "it is harder to do our job that

way than to just bark orders and tell people how to run their life". Use of authority was seen as the ability of participants to remove barriers for clients rather than to use authority to compel them to change their behaviors. A participant said, "[I would] use my authority to get into jails so I could talk to the dad … or get [a client] into a welfare line quicker". Participants commonly talked about the need to demystify the system for Aboriginal clients and provide advocacy and support rather than to exert authority or power.

Motivation

The impacts of colonization on individual participants appeared to shape and inform an Indigenous values and beliefs-based orientation that motivated Aboriginal participants to seek change in the Ministry. Their values and belief-based approaches clearly emerged from lived collective experiences, their desire to express and engage an Indigenous worldview, and a deep internal passion to change and improve services for Aboriginal people. This is well illustrated by a participant who said:

> We're here because we want to help our kids. We want to empower our people. We take the hits of the oppressors because we want to do good work and we want to promote families. We are resilient, so we'll do it. This is my purpose. This is what's laid out for me.

Some participants anticipated challenges and deficits within MCFD, given their experiences of the system growing up in and around First Nations and Aboriginal communities. Participants revealed remarkably similar perspectives of working in the highly complex, emotionally challenging and contentious environment of a government child welfare system that is seen to be complicit in the oppression of Aboriginal people. Their shared motivation was to seek child welfare system change and transformation through the increased design and delivery of services by Aboriginal people committed to empowering and strengthening Aboriginal families and communities to keep children out of care and to reconnect children who are in care. As one participant said, there is a critical "importance of having Aboriginal people working within to make those shifts", and another who added that there needs to be "overall recognition for the need for services to be delivered by Aboriginal people to Aboriginal people". Shared perspective and openness was described by one participant as essential as she saw non-Aboriginal counterparts as often reluctant and even fearful to work openly with Aboriginal children and families.

Practice

Flowing from strong collective values, beliefs and motivations, participants' identified striking similarities within their practice approaches. A congruent vision of necessary systemic and practice approaches to providing effective services for Aboriginal children and families was shared by participants. Practice goals were repeatedly identified throughout participant descriptions as: first, keeping children out of government care; and, second, reconnecting system-impacted children and families to their cultural teachings and communities.

Participants described an expectation that practice should occur within the context of Aboriginal communities where children and families reside or come from. Given the historical impact the Ministry has had for Aboriginal people, participants believed community focus should be coupled with the strong need to build relationships, trust and respect; they saw renegotiating and strengthening Ministry-worker relationships within communities as a critical starting point for practice. A commitment to this means having a presence in the community through direct participation in the community. As one participant

explained, when social workers are invited to participate in the community,

> the government has to understand that that's okay....what I find is [Aboriginal workers] go without being paid. They just go. They show up for their kids at the pow wows. They show up at the namings and the events, whether they get paid or not.

Many participants said MCFD needs to legitimize informal relationship building in Aboriginal communities because it provides the groundwork for gaining trust needed to work effectively. Following protocols, engaging informally within the community, and using collaborative and non-authoritative approaches to decision making were described as essential. As one participant stated:

> Really the core of it is our system stepping back and letting the community fill that void. Child protection was imposed into a society that already had those laws in place and we saw the results of that—it's really about us stepping back and our community leaders taking over some of those roles.

Another participant explained:

> There are going to be some key people in each community that can help you navigate some of it. There are going to be some families that are not going to be healthy and even though you engage with them they might not come up with the best plans. Yes, so you need to have all those pieces and after you work in a community for a good amount of time then you're able to know what that is, you are able to challenge a little...You need those key people who know the families.

Strength-based holistic practices, that more effectively respond to intergenerational trauma, and that emphasize an Indigenous worldview through cultural knowledge and teachings, were described as difficult to engage within the Ministry. A participant who was a long time MCFD employee said:

> Because we are spiritual people, the approach is different. We need to put the belief, the culture or the teachings, the ethics, the family values back into how we work with our families and for me it is very important that we, as one of the Chief's said, "we lead from behind, we walk, we model, we teach", and that is a big responsibility.

A repeated theme in participant interviews was viewing each community as a unique entity with different belief systems, social structures, and cultural teachings where community engagement needs to occur through appropriate and respectful adherence to community protocols. Participants also stressed the importance of sharing information and decision making with involved Aboriginal individuals and communities, resisting an expert orientation, acknowledging system impacts, and being comfortable with not always having the answers.

Prevention and support were promoted by most participants. Child protection workers tended to focus their practice on support services following critical intervention—placing more emphasis on strengthening families so children can potentially remain in or near their communities. Many described ongoing tension with mainstream colleagues whom they perceived as having a strong child-safety stance while failing to spend time identifying and supporting strengths in Aboriginal families and communities. One participant described this dilemma in the Ministry:

> I think a big piece of working with Aboriginal people is looking at a strength-based perspective

... but a lot of the time we are practicing in fear, a trembling system—if something happens to the child—so sometimes that affects how we practice.

Another participant spoke about how her cultural orientation conflicts with the organization and delivery of services within the Ministry, thereby impacting her ability to practice. She contrasted a highly rigid, task-oriented environment to a worldview that focuses on process, patience and presence. One participant talked about "trying to jam as much as you can into a day" which prevents her from being "on the same page as that person you are walking into the room to talk to". Another said she gets "really stressed out sometimes, mainly because I don't have the time the community wants me to have".

Participants also spoke of empowering Aboriginal communities to find appropriate solutions for their children and families who are experiencing the effects of intergenerational trauma. These practice approaches include looking to extended family and community for support and caregiving, and as partners in the child welfare decision-making process. These approaches were described by many participants as standing in sharp contrast to that of the existing mainstream organization.

The visual map below illustrates prevailing themes that emerged in the study regarding how MCFD Aboriginal professionals' described their identity, values, motivations and practice approaches.

Figure 1: The identity, values, motivation and practice of Aboriginal professionals

Disempowering organizational environment

Many descriptions of Ministry work settings by participants include examples of discriminatory treatment of themselves and Aboriginal children and families. One participant described the "blatant use of racist or discriminatory terminology around clients". One example given was, "they are playing the residential school card now because I said I'm applying for permanent custody". Another participant described hearing co-workers in the halls outside her office, as she said, "speaking with such disrespect for respected members in our community. It just tears you apart ... I would just slam my door or I would just leave". Another said, "Some of the situations that I've come up against that really used to hurt me and make me angry are workers mocking Aboriginal clients". And yet another participant said, "it is disheartening to me to hear ... when they are putting down Aboriginal communities and families for whatever reason and they don't believe that some of the things from the past [colonization practices] have affected where they are today".

These expressions of racism were viewed by some participants as a reflection of wider mainstream societal attitudes. A research participant who worked as a manager said she saw limited support for the Ministry's "Aboriginal agenda" and that she witnessed many conscious or unconscious attempts to sabotage organizational goals to improve services:

> Really the root of all that misunderstanding is racism, is prejudice ... that affects our system and affects our organization. ... I don't think the values were there. It was very clear, I think to everyone, myself and other managers ... the only reason we were doing it in this region, because provincial office was forcing it ... none of us saw any commitment to it.

When asked why she thinks there is reluctance within MCFD to openly address racism, one participant explained:

> Because this is an organization of social workers. Social workers don't have biases, they can't be racist because they are social workers ... so you can't acknowledge that that exists ... what's worse than calling a white, middle class person a racist?

Participants saw many of their non-Aboriginal colleagues as dismissive of both historical perspectives on oppressive practices with Aboriginal people and the significantly increased challenges Aboriginal people face due to the impacts on their families and communities. Mainstream attitudes and assumptions, and a distinct lack of Aboriginal cultural competence amongst many professionals, were seen to guide Ministry practice values, norms and approaches in ways that lead to intolerance and resistance to change. Prevalent Ministry practice was described by participants as characterized by the exertion of power and a low-risk approach that often results in child removal. As one participant described:

> You have too many people delegated to remove children that don't have the experience. Their mentorship is coming from people that practice from an adversarial place ... they are not being challenged ... they are not being asked to do anything differently.

Participants pointed out that some non-Aboriginal colleagues might have low empathy and display low-risk behaviour due to both a lack of cultural competence and a lack of overall support within the Ministry for frontline work, which can result in compassion fatigue or burnout. Change fatigue, described as change initiatives being implemented at the frontline without clear organizational direction and support,

was also viewed as contributing to an overall feeling of powerlessness and apathy at the frontline. This translates into an environment where Aboriginal practitioners have to constantly rationalize and justify, or even conceal, their practice approaches to colleagues and team leaders. As a result, participants described feeling powerless to make change within the organization.

The physical environment was described by participants as institutional and cold and also contributing to a poor fit for Aboriginal staff and service recipients. When all of these variables come together in terms of the impact on Aboriginal professionals, the situation is best described as an unsupportive and depersonalized environment where highly motivated and value-driven individuals are challenging a bureaucratic, rigid practice environment to become more collaborative and community based.

The following conceptual map visually illustrates the prevailing themes that resulted from participant descriptions of organizational support for their practice within the MCFD organizational environment.

Figure 2 Perceptions of the organizational environment
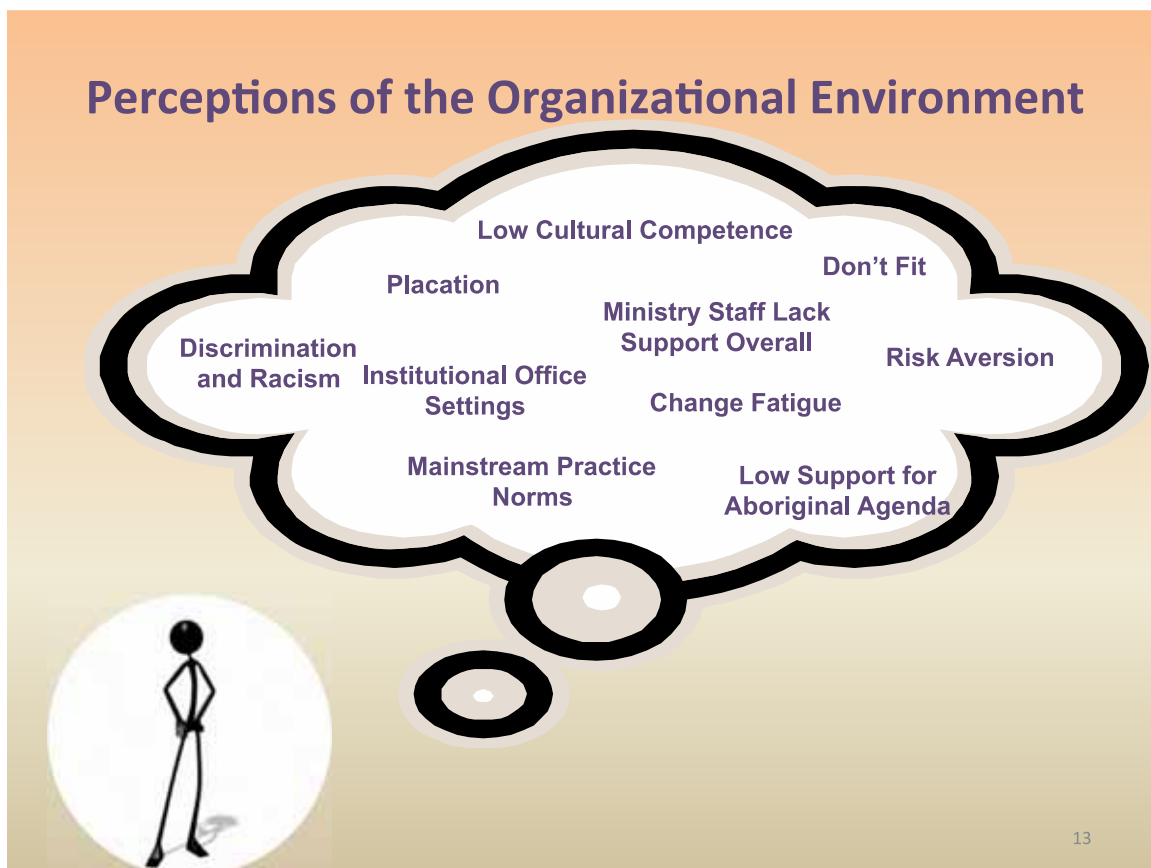
Organizational commitment to change is conceptual and politically driven

While there appears to be strong conceptual support from Ministry regional and provincial leaders with respect to the Aboriginal agenda, many participants felt there is a disconnect with the operational/frontline structure. One participant described how "management had this great dream of change and it really sounded positive, but that didn't trickle down to the frontline". Another frontline participant said mainstream frontline staff "do not respect management". This is a critical contradiction for effective Aboriginal service delivery.

An important component of this observation is there does not appear to be effective and committed management support for improved Aboriginal service delivery. Slow organizational system response (because of the reactive and fear-based nature of the organization) may also be due to what participants describe as reactivity to public opinion, oversight bodies, and subsequent political intervention.

Many participants viewed the hierarchy of the organization as rigid and creating a huge disconnection between leadership, management and the service delivery frontline. Participants offered several causes for this disconnect. They saw the limiting of communication through prescribed narrow and formal channels as decreasing the amount of information available both to the frontline and to the decision makers at the top of the organization. They characterized the hierarchy as being personality driven, based on longstanding relationships, like-mindedness, regional bias and narrow communication where there is a superficial appearance of conformity to the top which ultimately creates a buffer for the deputy minister who is purposely shielded from the reality of what is happening at the frontline. First Nations and other Aboriginal individuals placed into key leadership positions were seen as unable to make substantial changes within the impenetrable hierarchy.

Relentless ongoing strategic planning was viewed largely as rhetorical without enough sustained effort or sufficient resources being directed to actual implementation. Participants described the organization as experiencing ongoing implementation of new practice initiatives with inadequate resources: "it seems like every year it always switches ... we got this new thing ... you get all excited then – well, we won't put any money in it".

According to participants, a highly bureaucratized workplace, driven by mainstream policy, within a constrained union environment where staff have limited decision-making autonomy, translates to a structure that is unsupportive to Aboriginal employee attempts to shift practice that requires more time invested in the community and with families.

A focus on the importance of team leaders was also noted by participants. There was a perception among participants that team leaders are promoted for conforming to mainstream values that emphasize complying with and completing administrative requirements. Another prevalent theme was how high caseloads translate in to critically high work demands that de-prioritize collaborative time spent with children, families and in communities.

Aboriginal participant perspectives on the effectiveness of the Ministry organizational structure for supporting Aboriginal employees and effective Aboriginal children services are presented visually in the conceptual map below.

Figure 3 Rhetoric or reality: Organizational structure and support for Aboriginal agenda

Rhetoric or Reality: Organizational Structure and Support for the Aboriginal Agenda

Discussion of Aboriginal practice approach within MCFD

MCFD has been noted in the past several years to continue to drift in terms of setting observable goals and direction for improving services for Aboriginal children, families and communities. This research provides valuable information regarding the identity, values, motivation and practice approaches of Aboriginal employees and the potential they have to help transform practice within MCFD. The findings develop an understanding of the unique orientation and circumstances that bring Aboriginal employees to work for MCFD and their subsequent interface within the organizational environment, culture and structure. Participants described systemic racism, organizational change fatigue, low levels of support regarding their own motivations and the Aboriginal agenda, a lack of cultural competence, mainstream practice and policy norms and extreme risk aversion (opting for child removal).

While they come from highly diverse and varied backgrounds, participants share a remarkably collective, value-based orientation and motivation to work in MCFD. More simply, they want to improve services for Aboriginal children and families. Unfortunately, they indicated that services provided to Aboriginal people by MCFD are culturally unresponsive, inadequate and need to change. Based on participant responses, a focus on rhetorical, and poorly planned and implemented, initiatives appears to characterize an organization that is hierarchical, under-resourced, and lacking in effective communication. Fear of political fallout from oversight bodies and public opinion results in a low risk

approach that results in reactive practice, policy and organizational practices—a situation likely responsible for the ongoing over-representation of Aboriginal children in care.

The study participants are highly motivated and intrinsically driven to seek better outcomes for Aboriginal children, families and communities. They share a collective belief and orientation regarding re-energizing community values and restoring capacity within Aboriginal communities. Their ultimate goal is to support the community to regain responsibility for Aboriginal children—ending the need for government system intervention. A critically important finding in this study is that Aboriginal professionals require more support, mostly by having obstacles within the organization removed, to work to their full potential in MCFD. They can then direct passionate, insider value-based knowledge, skills and experience to full potential to improve services within the organization for Aboriginal children, youth, families and their communities.

Given the limited internal capacity and low cultural competency described within the organization, a more realistic approach for improving services may be to pursue some promising approaches described by participants. Focusing on a specialized stream of practice within the ministry, where the capacity of culturally competent Aboriginal and non-Aboriginal professionals is tapped into, appears to make considerably more sense than another rhetorical attempt to Indigenize the organization. The impact of effective team leaders and specialized management streams where dedicated resources exist to create equitable policy and practice approaches may lead to both better utilization of highly committed and knowledgeable Aboriginal professionals (and their non-Aboriginal allies). These teams may provide better services for Aboriginal children, families and communities until autonomous community control of Aboriginal children services becomes a reality.

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