

# **Behind the Front Lines: Realities of Racism and Discrimination for IBPOC Social Workers**

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## **Abstract**

With the growing initiative to integrate social justice practices into social work praxis, frontline workers need a concrete understanding of what achieving advocacy looks like, particularly in the context of trauma-informed practice. Advocating as a social worker with an intersectional and forced marginalized identity causes further strife between social workers and the societal structures that they operate within, often oppressing Indigenous, Black and other people of colours' (IBPOC) knowledge systems that challenge colonial and mainstream ideologies. There is a continued recognition amongst the social work profession that there is a lack of knowledge regarding historical and contemporary policies and their current implications, when working with IBPOC, and a lack of support for those who seek to decolonize the social work profession. In this paper, we write from the perspective of a light-skinned, nêhiyaw/métis person and a South Asian settler, working as frontline social workers, to explore the ways in which advocacy work is a key part of a trauma-informed approach.

## **Keywords**

Social work, Indigenous, Black, People of Colour, Decolonization.

## **Identities and Intersectionality**

As social workers with intersectional identities —a nêhiyaw/métis Indigenous, French and Irish, Scottish and German female who benefits from white privilege, and a South Asian settler — we recognize the importance of acknowledging our place-based relation to Turtle Island. We acknowledge our presence as guests within the unceded Ancestral Territories of the Secwepemc and Syilx peoples, and the Songhees, Esquimalt and WSANEC peoples, of Western Canada. It is also important to recognize how our distinct identities separately impact our work and advocacy within a system of colonial and settler policies.

In Indigenous tradition, Indigenous research and paradigms, it is important to declare one's historical and place-based identity within a decolonized social work framework, in order to build relationships and acknowledge our cultural and knowledge systems (Hart, 2005; Linklater, 2016; Hart, Sinclair, & Bruyere, 2010; Wilson, 2008). It is here that we, the authors, claim our places of origin and work to situate our identities within the context of these broader systems we will discuss. In this way, we hope our readers will form a relationship with us and thereby build a relationship with this knowledge, as per Indigenous knowledge sharing traditions (Wilson, 2008).

## **Authors/Contributors**

I, Denica Bleau, am of nêhiyaw (Cree), métis and German descent on my mother's side, and Irish and Scottish descent on my father's side. Growing up within a mixed family, I understood the impacts of internalized colonization, but also of cultural revitalization on my mother's side, and a lack of understanding of colonial impacts from my father's side. My fair skin and light features have resulted in diverse experiences as I navigate living and working in Indigenous and non-Indigenous communities and settings. It is because of my lived experience, and upbringing that I seek to decolonize colonial systems of oppression, that I believe it is important to uphold Indigenous knowledge, tradition and sovereignty.

Similar to Denica, I would like to speak to my identities in the first person. I, Joban Kaur Dhanoa, am a second-generation Sikh South Asian settler, born and raised just outside of Toronto, Ontario, Canada. My family originates from Punjab, India — my paternal family is from Chandpur and maternal family from Jalbhe. My mother immigrated to Vancouver, British Columbia, in the 1960s, when she was quite young, whereas my dad immigrated in 1984. They resettled in Toronto, where my brothers and I grew up. Living as a cis-gender woman of colour has provided me with a unique view of the world, and it is through my lived experiences as both a recipient and provider of mental health care, that I am able to understand how systems interact with one another to cause inequities in health outcomes, including mental health, for both clients and providers of mental health.

It is through our shared and differing identities in which we examine the ways in which trauma informed practice in the colonial context further marginalizes social workers that recognize the importance of advocacy within social work practice.

## **Trauma and Trauma Informed Practice**

Before examining the ways in which advocacy work is intimately tied to trauma-informed practice, it is important to define trauma-informed practice. Operating under the original colonial ideologies and roots of social work, it is integral when working in contexts with IBPOC individuals to incorporate and exercise decolonized and trauma-informed practices (Hart, Sinclair, & Bruyere, 2010). Burstow (2003) describes trauma as “not a disorder but a reaction to a kind of wound. It is a reaction to profoundly injurious events and situations in the real world, and indeed a world in which people are routinely wounded” (p. 22). O’Neill (2004) explains that “In traumatic situations, all those integrated components of the embodied response — arousal, attention, perception and emotion – tend to persist in altered and exaggerated state long after the specific danger is over” (p.75). Bessel van der Kolk (2014) describes living in a state of trauma:

“To people who are reliving a trauma, nothing makes sense; they are trapped in a life-or-death situation, a state of paralyzing fear or blind rage. Mind and body are constantly aroused, as if they are in imminent danger. They startle in response to the slightest noises and are frustrated by small irritations. Their sleep is chronically disturbed, and food often loses its sensual pleasures. This in turn can

trigger desperate attempts to shut those feelings down by freezing and dissociation.” (p.95)

Randall and Haskell (2013) define trauma informed practice as committing to comprehending the vastness of the ways in which trauma impacts a person’s life and the roots of trauma symptoms, while also offering programs which support “their movement towards resilience, recovery and wellness.” (p.517)

Consistent across these definitions is the way in which trauma impacts all aspects of one’s well-being, including the emotional, physical, social and spiritual wellbeing of a person. Within a decolonial approach to trauma work, it is vital to honor and support all aspects of health. Trauma does not only affect one’s emotional health, trauma treatment must take into account the physical, emotional, mental and spiritual. Thus, decolonized, trauma-informed practice is to recognize, empathize, appropriately respond to and work with the changes that occur biologically (physically), emotionally, mentally, and spiritually, through interpersonal and intergenerational trauma, that affect how a person or communities see themselves in the world and the comfort or discomfort that the world and social interactions provide.

### **Decolonized Acts and Frontline Work: TRC and UNDRIP**

Trauma informed practice aligns with the Canadian Truth and Reconciliation Calls to Action (TRC) and International United Nations Declaration on the Rights of Indigenous Peoples (UNDRIP). Both the TRC and UNDRIP call on governments to ensure that social workers working with Indigenous Peoples, advocate for their needs with the understanding of continued colonial impacts. There are specific Calls to Action and articles that directly identify this in both the TRC (2015) and UNDRIP (2018). Trauma informed practice directly aligns with three Canadian Association of Social Work’s (CASW) Code of Ethics (2005). Sinclair (2004), an Indigenous social worker, scholar and researcher asserts that social work in a decolonizing context:

“addresses the intergenerational and current impacts of colonization as manifested through colonial culture and social suppression, intrusive and controlling legislation, industrial and residential school systems, the child

welfare system, and institutional/ systemic/ individual racism and discrimination” (p.76).

Thus, as 2010) acknowledges, it is essential to recognize that adhering to the expectations of UNDRIP, for “minimum standards for survival, dignity and well-being of indigenous peoples” (Sinclair, 2004; p.36 ) requires an understanding and further responsiveness of the interpersonal and intergenerational trauma which Indigenous people confront, as a result of colonial systems. Hart, Sinclair & Bruyere (2010) state that social workers must act and know the “historical, cultural, social and political context in which they work” (p.17) in order to serve Indigenous communities in a safe, trauma informed way. Johnson (2020) reiterates that colonial trauma is immersed within these systems, and is often intensified by these systems, “making [Indigenous Peoples] existence worse” (p. 144), due to the lack of understanding by social workers or health providers of trauma and trauma informed practice, and how this affects Indigenous Peoples and Indigenous communities.

### **Historical Context of Social Work**

It is essential to recognize the ongoing colonial, oppressive and assimilative policies that are present within the domain field of social work and social services. Historically, the profession of social work has played an integral role in the unjust mistreatment and persecution of Indigenous, Black and other people of color (IBPOC) (Johnson, 2020; Kreitzer, 2006; Sinclair, 2004, Stanfield, 2016). In British Columbia, Canada, governmental historical legislation such as the Indian Act (1876) and Child Welfare policies, allow deeply ingrained colonial and systematic forms of oppression, that perpetuate the ongoing overrepresentation of Indigenous children in the care of the state, and of Indigenous people within the criminal justice system (Johnson, 2020; TRC, 2015; Hart, Sinclair, & Bruyere, 2010).

Social workers have been immersed in and participated in the ongoing “assimilative policy projects” carried out by the government, which resulted in a disarray of Indigenous families and social systems (Hart, Sinclair, & Bruyere, 2010, p.20). This has caused social service delivery and mindsets, which have “been created out of the trauma of dispossession,” and that continue to disregard Indigenous identity, ways of being and governing. Instead, social services “work with the more muted goals of alleviating the worst suffering while consciously or unconsciously

supporting the ongoing process of dispossession” (Fortier & Wong, 2018, p.444). As a frontline service provider within a colonially dominant culture, social workers are indoctrinated in an education system that alters intellect, resulting in the assimilation of feeling as though, “[w]e will have learned to think like a settler” (Johnson 2020; p.39).

## **Social Work Surveillance and Censuring**

Within the context of social work educational pedagogy and practice, there is an urgent need for understanding how social workers are tasked with the job to surveillance IBPOC individuals, that in doing so harms individual and community healing. Historically Indian Agents and missionaries were employed by the government to monitor Indigenous people by providing gifts of ‘charitable’ relief food, while later reporting on the conditions of reserves (Brownlie, 2003). The relief food has been likened to modern social welfare (Fortier & Wong, 2018). Indian Agents were viewed as the social service providers, while also enforcing the law and Indian Act, and tasked to surveil and control Indigenous peoples and communities (Fortier & Wong, 2018). Missionaries were tasked to educate Indigenous children, and social workers accompanied Indian Agents for the forced removal of the children (Fortier & Wong, 2018; Johnson, 2020; Hart, Sinclair, & Bruyere, 2010). Since 1951, social workers have overseen the surveillance of Indigenous families, through child welfare colonial founded programs from which the social work profession has continued “the settler state focuses” of “monitoring and supervising people” (Fortier & Wong, 2018, p.451).

Similar systemic racialized patterns are present within black communities, where the criminal justice system has been utilized to oppress and silence black voices, and led to forced dependence of social services for survival (Stevenson, 2015). For example, the criminalization of black activism fighting for equity basic human rights has resulted in the separation and destruction of family systems, and ongoing surveillance through social and child welfare programs and incarceration/probation (Duvernay & Moran, 2016).

This type of social dominance is referred to as the ‘censuring process’ which establishes and determines what is considered moral and immoral from a colonial perspective. Those who do not fit in the dominant social norm/social order and are deemed unmanageable, are consistently incarcerated at higher rates (Sangster; 1999). Incarceration has been, and is contemporarily

utilized to punish people who have been surveilled and deemed uncooperative (Fortier & Wong, 2018; Jacobs, 2012). Those “who are unwilling to assimilate or accept the white settler colonial conditions placed upon their lives are marked as disruptive, angry, or labelled with tropes used to delegitimize Indigenous ways of being” (Fortier & Wong, 2018, p. 445). Fortier & Wong (2018) state that there is a limit of the CASW professional code of conduct, for the reason that it upholds the non-profit industrial complex, by encouraging social workers to continue forms of oppression such as surveillance to uphold ‘social order.’ Thus, placing social workers in a contemporary colonial based role of surveillance and having the power of Indian Agents, upholds the continuation of punishing and controlling IBPOC people, through the child welfare system, probation and mental health, leading to displacement, pathologization and criminalization. This colonially developed role, that has not evolved to include human rights of all peoples, continues the cause distrust of Indigenous and non-Indigenous social workers when working with IBPOC individuals and communities.

### **Ethics of non-interference in Community**

Brant (1990), an Indigenous doctor, author and researcher, discussed the ethic of non-interference within Indigenous communities. The ethic of non-interference within a community can be viewed as surveilling other community members, rather than recognizing and addressing the harms caused through interpersonal and institutional abuse, as a result of colonization and internalized colonization. Challenging other community members, or community members who hold power, such as Chief and Council, who work within nation/band operated buildings, or who are prominent, hereditary or elected leaders within the community, can be detrimental for a person’s social status and accessing community resources (such as food and shelter) in Indigenous and Black communities. Linklater (2016) states that non-interference “discourages one from challenging another because such interference is viewed as culturally disrespectful” (p.43). Historically, there was no accountability or repercussions for those within institutional systems that perpetuated various forms of abuse, which normalized the ethic of non-interference (Linklater, 2016).

Those within Canadian colonial governmental systems (Indian Agents, priests and nuns, Royal Canadian Mounted Police (RCMP) who carried out the physical, mental, emotional and sexual abuse within Indigenous communities received monetary gains and administrative support (Linklater, 2016). These Canadian government initiatives continue to cause further complications within Indigenous communities, as it allows the continuation of various forms of institutional and interpersonal abuses to endure without being addressed (Linklater, 2016). The integration of the ethic of non-interference within communities and not challenging authority can be explained through internalized colonization (Sandoval, Lagunas, Montelongo & Díaz, 2016). Being unaware of internalized colonization can lead to further dissonance (Sandoval, et. al, 2016) and perpetuate “both the system and the suffering” (Johnson, 2020, p.41) within the community. These harmful and abusive practices further perpetuate oppression and internalized colonization.

### **Social Work on the Frontlines**

Working as a social worker and challenging dominant colonial ideologies in everyday practice, can result in or have severe consequences for the worker, which leave one in a place of turmoil. Social workers and advocates who have experienced systemically caused marginalization, often feel further pressure and unsafe liability of having the responsibility of educating others. Hart, Sinclair, and Bruyere (2010) report “Indigenous social workers with university credentials often find themselves having to be all things to all people” (p. 22). This often extends to non-Indigenous people of colour in which organizations and systems operate from a lens that assumes whiteness is the predominant and primary experience of its employees. In having a IBPOC identity while working in these environments, the expectation to be able to fill in the gaps for clients is often left to these “marginalized” social workers, who experience oppression and impact of colonial policies within their everyday lives as individuals and professionals, which further contribute to other social inequalities and disparities.

Historically, there is a continuation of dismissing the concerns and voices of IBPOC individuals and groups regarding structural changes, and that often face legal consequences of challenging these structures (Jacobs, 2012). This can lead to the repeated dismissal/firing of workers who have knowledge and values to challenge and oppose dominant narratives of social work and healing practice. As previously mentioned, working as a social worker as Indigenous, Black or

other Person of Colour, can result in complex multilayered conflict when challenging colonial systems of IBPOC elimination and genocide (Wolfe, 2006), and colleagues who enact and honour these systems. Within the widespread colonial systemic racist structures that stereotype, discriminate and prejudice and cause negative impacts, harm and death (Turpel-Lafond, 2020) working as a marginalized individual within these systems it is often unsafe and difficult. In expressing the lived experiences and knowledge as a person with an intersectional identity, the validity of their unique and specialized knowledge systems are questioned and often invalidated, ignored, and silenced across, within, and by all levels of government, health, wellness, and education systems in which they work (Fortier & Wong, 2018; Linklater, 2016).

With genuine intent for reconciliation and building respectful relationships, this sharing of knowledge, is the truths of our lived experience which is being perceived as overstepping, or, weaponizing one's identity. This forces us to silence and adapt our experiences and thoughts to fit within the confines of the dominate social norm respectability politics that are dictated by the leadership in an unsafe work environment. Conversations and previous studies may include the need for system wide change, but these recommendations for action often lack the experiences of IBPOC who need to enact these changes for their safety, inclusion and benefit, are penalized and further silenced, and marginalized within social work education and praxis.

## **Decolonizing Social Work Praxis**

To challenge these systems, we, the collective of social workers, need to become aware of the ways in which they continue to oppress and cause harm on all levels of practice. It is important for social workers' to understand of the historical, cultural, social and political contexts in which they work (Hart, Sinclair & Bruyere (2010). Social workers also need to evaluate and understand how the implications of one's values, practices and beliefs, can result in causing Indigenous people more harm, than help (Hart, Sinclair & Bruyere (2010). The practice of these recognitions and understandings is practicing cultural safety (Duthie, 2019). It is essential to know the history and influence of colonization, and how this impacts and continues colonial practices (Bennett, Zubrzycki & Bacon, 2011). Fortier & Wong (2018) state that this can be done by acknowledging the role of social work in the millennial scoop, rather than referring to the Sixties Scoop as a historical, exceptional event.

Hart, Sinclair & Bruyere (2010) refer to Bruyere's (1999) concept of decolonization, as "not just an activity for Aboriginal people; it must be embraced by all social workers in order to tackle prevailing inequities and "isms"." (p.22). As previously mentioned, Sinclair (2004) speaks about the importance of decolonizing social work by addressing past and present impacts of colonization on political, social and cultural systems, and subsequently supporting Indigenous knowledges and healing.

There have also been discussions about the inability to decolonize social work or change systems and structures that were colonially developed. Johnson (2020) states his understanding of the colonial systems, such as social work and the criminal justice system being "too large, too cumbersome, and too entrenched to ever change." (p.137). Fortier & Wong (2018) call on unsettling social work, rather than decolonizing social work, for the reason that social work was colonially developed.

One way in which to challenge ourselves is the integration of a race conscious lens for decision making in the workplace. Valandra & Hokšila (2020) define a race conscious lens as "to see how one's lived experience in the United States is largely dominated by one's racial place in the system" (p.16). It is widely acknowledged that it is easier for BIPOC people to develop a race conscious lens. This is believed because of first hand experiences of subjugation by colonial systems can often provide the ground work for seeing the ways in which these colonial systems play out in their daily experiences. However, for those who do not have the lived experience of this identity are unaware of and often overlook the implicit and explicit ways they continue to perpetuate systemic injustices that lead to resistance and inequities of care. Through integrating a race conscious lens in one's organizational culture and policies, it is possible to create a safer workplace setting to explore structural and racial inequities. This is done through it creating a space for organizations to critically examine the ways in which they are perpetrating systemic acts of oppression. Leadership can create a space where there is safe ways in which to learn how race plays out in the power structures of their organization, allowing space for more dynamic forms of advocacy.

There is importance in learning the history of how these systems continue to adapt in order to further subjugate communities, as it can allow for social workers to have a more nuanced understanding of anti-oppressive practice. Within the current justice system and child welfare system these ideologies continue to persist, resulting in the continued oppression and pathologization of Indigenous and Black people (Linklater, 2016). There is a continued need deconstruction of social work professionalization, examining saviour complex and recognizing that the client is the expert of their own lives, rather than a hierarchical system that the social worker is the holder of services/knowledge and management of Indigenous communities (Fortier & Wong, 2018; Jacobs, 2012; Tuck & Yang, 2014). Frontline IBPOC social workers and scholars have confronted the fact that many social workers continue to refer to these harms as historical, rather than working towards active change of the contemporary colonial relationships and systems (Fortier & Wong, 2018; Coulthard, & Alfred, 2014).

### **Resistance and Allies within Practice**

Linklater (2016) recognizes that challenging the mainstream systems, ideologies of social work and colonial approaches may result in tension and resistance from both Indigenous and non-Indigenous practitioners, who place value on these dominant structures. Johnson (2020) states that colonially systems do not have the best interest of the community in mind, but rather have their own agendas and this continues to disregard Indigenous people in the discussion of Indigenous solutions. It is acknowledged that when transitioning systems of oppression: “Those who have a vested interest in the present system, whose identities and self-worth are woven into the fabric of the system, are going to oppose you. But be assured, the majority of Canadians also know the present system is not working for them, either. You will have allies” (Johnson, 2020, p.147).

### **Unsettling Social Work**

It is through acknowledging these historical contexts and understanding their implications, that we hope to bring awareness to the extended pressures that IBPOC people experience through frontline advocacy. Johnson (2020) states that “We [Indigenous people] can no longer wait for Canada or the provinces to make changes. They are clearly not going to come and fix this. It is

not in their interest to do so. We have to do it ourselves. We have to reclaim our jurisdiction, establish our own processes.” (p.144). Fortier & Wong (2018) refer to Tuck and Yang (2015) when stating that we, as social workers, “must recognize settler complicity in colonial violence” (pg.447). Fortier & Wong (2018) call on unsettling social work, through:

“deprofessionalization (the restructuring of the ‘helping’ practices of social work back under the control of communities themselves); deinstitutionalization (fighting against the non-profit industrial complex and re-focusing on mutual aid, treaty responsibilities, and settler complicity); and resisting settler extractivism (working towards the repatriation of land, children, and culture and the upholding of Indigenous sovereignty and resurgence).” (p.447)

Tuck & Yang (2014) speak about the need to recognize settler complicity, by examining how a role as a non-Indigenous social worker includes the responsibilities of active decolonization, rather than actively excluding one’s role. Non-Indigenous allies, Borg, Brownlee and Delaney (1995), assert that social workers must challenge dominant hierarchical systems of power and inequality, in order to support and empower those, more specifically Indigenous social workers, who experience marginalization and oppression. Indigenous communities have long asked for the implementation of decolonizing practice, as one community member stated: “The best way to communicate with Aboriginal people is to keep your mouth shut ...to listen to what people are saying” (Bennett, Zubrzycki & Bacon, 2011, pg. 28).

## **Recommendations**

It is through this work, personal lived experience, and the experience of other Indigenous, Black, and other peoples of colour formerly mentioned in this paper, that we recommend the implementation of the ‘unsettling social work’ principles stated by Fortier & Wong (2018) through deprofessionalization, deinstitutionalization and resisting settler extractivism. Moreover, as initially stated, these principles require social workers to make and hold intentional space for Indigenous, Black and other peoples of colour. To respectfully listen to Indigenous, Black and other peoples of colour people and build relationships (Tuck & Yang, 2014). We further call upon implementing cultural safety and decolonization processes within social services, as stated in the BC College of Social Workers 2020 Strategic Planning (2020), and that the CASW redress

colonial violence and policies as stated in their June 2020 “CASW Statement of Mourning, Solidarity and Call to Action.”

## **Conclusion**

We offer insights in which to reform accountability held within social work, social service and non-profit industrial complex organizations, ‘unsettling social work principles,’ the TRC and UNDRIP for the purpose of serving lack, Indigenous and other peoples of colour and communities. As Johnson (2020) mentions, there has been a continued discussion of implementing change, however accountability and intentionality are often disregarded, and thus principles are not enacted. We acknowledge that this requires the recognition of discomfort from those who do not experience marginalization or oppression, as IBPOC.

Unsettling social work utilizing trauma informed and decolonized practice and adhering to the TRC and UNDRIP can be accomplished by understanding colonial histories as they uniquely pertain to communities. By examining one's own values, understandings and worldview, by maintaining consistent conversations with IBPOC communities and community members, by reviewing policies that disregard IBPOC communities and knowledge systems, and by actively engaging in sincere reconciliation for the continued harms of social work practice, social workers can begin the process of supporting communities and unsettling social work.

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