A Healing Journey

Final Report
Summary Points
Final Report of the Aboriginal Healing Foundation

A Healing Journey: Summary Points
Aboriginal Healing Foundation
A Healing Journey: Final Report Summary Points

Danet’e:

The Aboriginal Healing Foundation’s Final Report attempts to capture seven years of work among community-based healing initiatives that address the intergenerational legacy of Canada’s Indian residential school system. This publication summarizes the highlights of a larger, three-volume report and is intended to provide the reader with a useful understanding of the healing work the AHF has supported.

The Aboriginal Healing Foundation was established March 31, 1998 as a cornerstone of Gathering Strength—Canada’s Aboriginal Action Plan, a federal strategy to renew the relationship between Aboriginal peoples and the Government of Canada. The AHF was given $350 million and an eleven-year mandate, organized into three stages:

1) Setting up of operations,
2) Commitment of a $350 million healing fund towards initiatives that address the legacy of physical and sexual abuse in the Indian residential schools of Canada, and
3) Writing of a final report.

With the publication of this report, we have fulfilled the third and final stage of our mandate.

Perhaps the theme that emerges most powerfully from the report is the enduring resilience of Aboriginal peoples. Despite a century of efforts to forcibly assimilate “Indians” into Euro-Canadian society, Aboriginal peoples today look to traditional cultures for healing. As a funding agency, the AHF has had the honour and privilege of working in partnership with many courageous and inspiring individuals. While we at the AHF have played a role in the healing movement, the true foundation of healing has been the people, many of whom were labouring to improve the condition of Aboriginal communities before there was an AHF.

There is however much to do. The Final Report, not only assesses accomplishments, but indicates areas where further efforts are required. Here, the message in brief is that more time and more program support is necessary. Many have begun the healing journey, and many were not yet ready to undertake this journey when the Aboriginal Healing Foundation was created. Healing the effects of a century (and more) of historic trauma will require the sustained efforts of a generation.

On behalf of the Board of Directors and staff of the Aboriginal Healing Foundation, I thank you for your interest in this document and I hope you find it of personal use. To those who have come here to learn, perhaps for the first time, about the AHF and the residential school system, I offer a welcome. To those who have come for practical support in their healing work, I offer appreciation and gratitude for your commitment to helping our people. And to those who have come for a deeper understanding of their experiences as Survivors, I offer respect and hope that this work may contribute to healing.

Masi,
Georges Erasmus
Shirley I. Williams is an Odawa woman from Wikwemikong Unceded Reserve. She attended St. Joseph’s Residential School for girls in Spanish, Ontario from 1949 to 1956. Shirley’s parents negotiated a 3-year postponement of her enrolment in residential school with the result that she remained at home receiving instruction in Odawa culture and language from her family, as well as instruction in the Catholic catechism, until she was 10 years old. When she left by bus for St. Joseph’s school her father counselled her: “Do not forget your language. Do not forget who you are. No matter what they do to you in there be strong. Learn about the Indian Act and come home to teach us about it.”

Shirley describes her introduction to St. Joseph’s school: “As we were nearing the school the bus stopped and the gate opened. I remember feeling kind of sick when the gates closed. It was as if my heart shut down when the gates closed. I never knew why I became so unhappy.” She does not dwell on the pain and loneliness and punishments that she and the other girls endured at the school;
she talks instead with humour about the small acts of resistance that they engaged in. Despite the prohibition against using Aboriginal languages at the school, Shirley practised talking to herself in bed at night, her head covered with a sheet. She imagined that she was back home at the kitchen table speaking Odawa to her parents. She dreamed of joining the ranks of high school graduates, a possibility that became real with the addition of high school instruction at St. Joseph’s. But this was not to be.

When Shirley turned 16, her mother, at great personal sacrifice, sent Shirley a store-bought dress to celebrate her coming of age. The nuns saw the dress as an attempt to make Shirley “look like a whore.” When she defended her mother she was slapped and strapped and made to stand facing one of four punishment posts in the middle of the building for three days with only bread and water for food. She and the other girls were forbidden to speak to each other during this time. That year at Christmas break Shirley sought her parents’ permission to leave school and go to work.
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1979

1983

1986

1979

12

10

6
A Survivor’s Story

Shirley speaks of her confusion about her identity, trying to merge into mainstream society and cover her brown skin with make-up, of having no sense that she had a right to her own opinion, and of being like a zombie following without question the directions that others gave her. She worked as a laundry and scrub woman in a hospital near home, made and ended a bad marriage, and took night school and upgrading courses to attain high school equivalency. In 1979, at the age of 40, she undertook the challenge of entering Trent University to finish what she had promised her father as she departed for residential school.

When Shirley graduated with her Bachelor of Arts in 1983 everything seemed to point in the direction of teaching. With the background of her Native Studies degree she began teaching Life Skills and Natives in Transition preparing Aboriginal people for work or further education. In 1986 she followed in the footsteps of one of her mentors, Fred Wheatley, and obtained a position in the Native Studies Department at Trent University teaching Ojibway language, which is closely related to Odawa. She says: “Teaching helped me to heal myself because as I was teaching I also grew. In the language there are a lot of words and some of these are healing words. Last year I did a workshop on healing words.”

Today Shirley Williams is a Full Professor and a role model to the many Aboriginal and non-Aboriginal students who pass through her classes. She has completed a diploma in language teaching and a Master of Arts degree. She has produced books for language instruction and a CD-ROM bringing Ojibway language into the modern context of the hockey rink. Her residential school experience caused her to take a long, often painful, detour from her early goals. She credits her survival as an Odawa woman to the grounding in language and culture that she received within her family and to the healing power of learning. She is fulfilling the promises that she made to her father and herself so long ago.

Shirley and other Survivors have reclaimed wellness for themselves. There are many others who are still on a healing journey and yet others who are heavily burdened with the legacy of residential schools. The Aboriginal Healing Foundation was established to support their healing journeys.

Volume I: A Healing Journey: Reclaiming Wellness
- places the work of the AHF in the wider Aboriginal healing movement, summarizes what the AHF has learned from research and evaluation, and recommends upon the future healing needs of residential school Survivors and their families.

Volume II: Measuring Progress: Program Evaluation
- synthesizes the data collected through the 3 national surveys (2000, 2002, 2004), 5 focus groups, 13 case studies, 1,479 individual participant questionnaires (IPQs), and file review of 36 AHF-funded projects.

Volume III: Promising Healing Practices in Aboriginal Communities
- reports on AHF-funded healing programs with practices and interventions that are working well for Aboriginal communities or communities of interest based on questionnaires, file review, survey data and focus groups.
“Residential schooling, in short, typified the totalitarian and assimilation spirit of Canada’s Indian policy in the later Victorian era and the first half of the twentieth century. It amounted, as a candid missionary put it, to an effort to ‘educate and civilize a people against their will.’”

In the late 19th century the Canadian Government undertook a formal partnership with the churches to run industrial, boarding and residential schools for Aboriginal people.

The Indian residential school system was designed to teach Aboriginal children the English language, as well as the religion, values, and work skills of Canadian society.

Between 1831 and 1998, 130 industrial, boarding and residential schools would operate. The earliest was the Mohawk Indian Residential School, opened in 1831 at Brantford, Ontario. The schools existed in all territories and in all but three provinces – New Brunswick, Prince Edward Island, and Newfoundland. In the North, the residential school system also took the form of hostels.
was a state-sponsored, church-run network of 80 schools with an enrolment of over 17,000.

Of these 80 schools, 44 were under various Catholic orders, 21 under the Church of England which later became the Anglican Church, 13 under the United Church, and 2 under the Presbyterians. These proportions would remain constant throughout the residential school system’s history.

At its core, the Indian residential school system was an organized effort to “kill the Indian in the child.” Missionary Hugh McKay, writing in 1903, characterized the system itself as an effort “to educate and colonize a people against their will.”

Residential schools came to represent both in theory and in practice a deliberate systemic effort to remove generations of Aboriginal children, one by one, from family, community, language, culture, and, broadly speaking, Aboriginal ways of living in the world.

For those traumatized by their experiences in the residential school, the policy of forced assimilation has resulted in pervasive loss:
The Past

loss of identity, loss of family, loss of language, loss of culture.

As early as 1907, residential schools were also noted by inspectors as places of disease, hunger, overcrowding, and in disrepair.

As late as 1950, according to an Indian Affairs study, over 40 per cent of the teaching staff had no professional training.

This is not to say that past experiences were all negative, or that the staff were all bad. Such is not the case. Many good and dedicated people worked in the system. Indeed, their willingness to work long hours in an atmosphere of stress and for meager wages was exploited by an administration determined to minimize costs.

The staff not only taught, they also supervised the children's work, play and personal care. Their hours were long, the pay below that of other educational institutions, and the working conditions exasperating.

The residential school system is not solely responsible for the current conditions of Aboriginal communities, but it did play a role.
In the early 1990s, beginning with Phil Fontaine, National Chief of the Assembly of First Nations, Survivors came forward with disclosures that included:

- sexual abuse
- beatings
- punishments for speaking Aboriginal languages
- forced wearing of soiled underwear on the head or wet bedsheets on the body
- faces rubbed in human excrement
- forced eating of rotten and/or maggot-infested food
- hair ripped from heads
- use of students in medical experiments
- bondage and confinement in closets without food or water
- electric shocks with an electric chair
- children forced to sleep outside – or to walk barefoot – in winter
- forced labour
- and much more.

Many former students today are pursuing healing and reparation for the humiliations they suffered in residential school.

Very gradually, the residential school system was discarded in favour of a policy of integration. Aboriginal students began in the 1940s to attend mainstream schools.

The Department of Indian Affairs and Northern Development assumed full management of the residential school system on April 1, 1969.

Throughout the 1970s, at the request of the National Indian Brotherhood, Government undertook a process that saw the eventual transfer of education management to Aboriginal people.

In 1970, Blue Quills Residential School became the first residential school managed by Aboriginal people.
The last band-run residential school closed in 1998.

We look back today at a system that tried to erase Aboriginal cultures from history and we look forward to a time when there is again a relationship of mutual respect based upon the historic treaties between Aboriginal people and the Government of Canada.

With the lessons of history in their service, Aboriginal people have begun to heal the wounds of the past.


On March 31, 1998, the Aboriginal Healing Foundation was created. It was given ten years to disburse this $350-million fund beginning March 31, 1999 and ending March 31, 2009.

Since June 1999, the Aboriginal Healing Foundation has been providing funding support to community-based initiatives that
address the intergenerational legacy of physical and sexual abuse in Canada’s Indian residential school system.

To sustain the healing work once the Aboriginal Healing Foundation is gone, the Legacy of Hope Foundation was created in 2001 by the Aboriginal Healing Foundation’s Board of Directors. The Legacy of Hope Foundation works in conjunction with, and will build on the successes of, the Aboriginal Healing Foundation, eventually taking over its work completely.

Their vision is one in which those affected by the legacy of physical abuse and sexual abuse experienced in the residential school system have addressed the effects of unresolved trauma in meaningful terms, have broken the cycle of abuse, and have enhanced their capacity as individuals, families, communities and nations to sustain their well-being and that of future generations.

The incomplete nature of school records makes it impossible to say precisely how many children attended residential school throughout the entire span of the system. However, it is clear that the system’s intergenerational effects have been felt beyond the attendance role.
The Past

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Qu’Appelle Indian Industrial School, 1895, Library and Archives Canada, PA-182246

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In 1994, the Assembly of First Nations released a report on residential school entitled *Breaking the Silence: An Interpretive Study of Residential School Impact and Healing as Interpreted by the Stories of First Nation Individuals*.  

On 7 January 1998, then Minister of Indian Affairs and Northern Development Honourable Jane Stewart issued a *Statement of Reconciliation* and unveiled *Gathering Strength—Canada's Aboriginal Action Plan*.  

The federal government announced a one-time grant of $350 million to establish a fund for community-based healing of the physical and sexual abuses that occurred in residential schools.

In 1998, the Aboriginal Healing Foundation with a 17-member board of directors was incorporated to administer this Healing Fund under an 11-year mandate ending 31 March 2009.
The AHF’s mission is to encourage and support Aboriginal people in building and reinforcing sustainable healing processes that address the legacy of physical abuse and sexual abuse in the residential school system, including the intergenerational impacts.

### Key Dates: Aboriginal Healing Foundation

<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 31, 1998</td>
<td>AHF Incorporated</td>
</tr>
<tr>
<td>December 4, 1998</td>
<td>Launch of first Program Handbook and Call for Proposals</td>
</tr>
<tr>
<td>March 24-26, 1999</td>
<td>Board meets &amp; approves first round of projects</td>
</tr>
<tr>
<td>June 23, 1999</td>
<td>First 35 grants announced</td>
</tr>
<tr>
<td>February 28, 2003</td>
<td>Final deadline for funding applications</td>
</tr>
<tr>
<td>October 5, 2003</td>
<td>Healing Fund is fully committed ($425 million)</td>
</tr>
<tr>
<td>February 23, 2005</td>
<td>$40 million announced for 2-year extension of AHF</td>
</tr>
<tr>
<td>January 2006</td>
<td>Publication of Final Report</td>
</tr>
<tr>
<td>March 2007</td>
<td>All AHF project funding ends</td>
</tr>
<tr>
<td>September 2008</td>
<td>AHF will close its doors</td>
</tr>
<tr>
<td>March 31, 2009</td>
<td>11-year mandate ends</td>
</tr>
<tr>
<td>October 5, 2003</td>
<td>Healing Fund is fully committed ($425 million)</td>
</tr>
</tbody>
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The Aboriginal Healing Foundation Logic Model

<table>
<thead>
<tr>
<th>Long-term Goals</th>
<th>Short-term Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>broken cycle of physical and sexual abuse</td>
<td>sustainable well-being</td>
</tr>
<tr>
<td>enhanced healing</td>
<td>increased positive ties between those in need and healers helpers</td>
</tr>
<tr>
<td>increased understanding and awareness</td>
<td>increased documented history and skill to address needs issues</td>
</tr>
<tr>
<td>more increased honour</td>
<td>increased capacity knowledge and skill to address needs issues</td>
</tr>
<tr>
<td>increased understanding and awareness</td>
<td>increased awareness use of research resource material</td>
</tr>
<tr>
<td>increased knowledge and skill to address needs issues</td>
<td>more strategic planning with a focus on healing</td>
</tr>
<tr>
<td>increased awareness use of research resource material</td>
<td>more strategic planning with a focus on healing</td>
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<tr>
<td>increased knowledge and skill to address needs issues</td>
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<td>more strategic planning with a focus on healing</td>
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</table>

<table>
<thead>
<tr>
<th>Outputs</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>participation in healing</td>
<td>support healing efforts build reinforce conditions conducive to healing</td>
</tr>
<tr>
<td>participation in conferences and gatherings</td>
<td>promote awareness and understanding of needs and issues</td>
</tr>
<tr>
<td>educational and training curricula developed or offered</td>
<td>support remembrance</td>
</tr>
<tr>
<td>historical materials developed</td>
<td>develop and enhance capacity</td>
</tr>
<tr>
<td>participation in training</td>
<td>engage in research support needs assessments and project design</td>
</tr>
<tr>
<td>distribution and use of research and resource material</td>
<td>strategic plans produced</td>
</tr>
<tr>
<td>strategic plans produced</td>
<td>strategic plans produced</td>
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The time frame for AHF program and evaluation activity has been too short to measure long-term impact on sexual abuse, physical abuse, suicide, incarceration and children in care. However, AHF has gathered valuable information on the nature and impact of Aboriginal healing activities. This information can provide the basis for longer-term research.
<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
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</thead>
<tbody>
<tr>
<td>2005-01-01</td>
<td>The project began with the collection of data and interviews.</td>
</tr>
<tr>
<td>2005-04-30</td>
<td>Preliminary findings were presented to the community.</td>
</tr>
<tr>
<td>2005-07-15</td>
<td>Mid-project evaluation revealed significant progress.</td>
</tr>
<tr>
<td>2005-10-31</td>
<td>The project team celebrated the halfway mark.</td>
</tr>
<tr>
<td>2006-01-15</td>
<td>Data analysis began, focusing on key indicators.</td>
</tr>
<tr>
<td>2006-04-30</td>
<td>An interim report was submitted to stakeholders.</td>
</tr>
<tr>
<td>2006-07-15</td>
<td>Ongoing challenges were identified, leading to adjustments in the project scope.</td>
</tr>
<tr>
<td>2006-10-31</td>
<td>The project reached the final phase, with a focus on dissemination and recommendations.</td>
</tr>
<tr>
<td>2007-01-31</td>
<td>The final report was completed and submitted.</td>
</tr>
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</table>

Total Cost: $377,745,857

PA-185530

Shubenacadie Indian Residential School, 1929, Library and Archives Canada, PA-185530
AHF Funding

<table>
<thead>
<tr>
<th>AHF has funded the following types of projects:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Healing Services</strong></td>
</tr>
<tr>
<td><strong>Prevention/Awareness</strong></td>
</tr>
<tr>
<td><strong>Conference</strong></td>
</tr>
<tr>
<td><strong>Honouring History</strong></td>
</tr>
<tr>
<td><strong>Training</strong></td>
</tr>
<tr>
<td><strong>Knowledge-Building</strong></td>
</tr>
<tr>
<td><strong>Needs Assessment</strong></td>
</tr>
<tr>
<td><strong>Project Design and Setup</strong></td>
</tr>
</tbody>
</table>

As of 31 March 2005:

1,346 contribution agreements have been signed for a total of $377,745,857 (audited). These figures do not include the $40 million allocated to the AHF in February 2005, which extended 91 projects for a 2-year period ending March 31, 2007.
The Distribution of the Healing Fund

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>All groups</td>
<td>29%</td>
</tr>
<tr>
<td>Inuit</td>
<td>5%</td>
</tr>
<tr>
<td>Métis</td>
<td>5%</td>
</tr>
<tr>
<td>First Nations</td>
<td>59%</td>
</tr>
<tr>
<td>Direct healing services</td>
<td>59%</td>
</tr>
<tr>
<td>Prevention and awareness</td>
<td>15%</td>
</tr>
<tr>
<td>Knowledge building</td>
<td>9%</td>
</tr>
<tr>
<td>Training</td>
<td>7%</td>
</tr>
<tr>
<td>Needs assessment</td>
<td>3%</td>
</tr>
</tbody>
</table>

**Ontario**: 291 grants or 21.6% of grants
**British Columbia**: 248 grants or 18.4% of grants
**Alberta**: 152 grants or 11.3% of total
**Saskatchewan**: 238 grants or 17.7% of grants
**Manitoba**: 168 grants or 12.5% of grants
**Quebec**: 81 grants or 6% of grants
**Atlantic Region**: 52 grants or 3.9% of grants
**Yukon**: 40 grants or 3% of grants
**NWT**: 35 grants or 2.6% of grants
**Nunavut**: 23 grants or 1.7% of grants

Projects with a National scope: 6 grants or 0.4% of grants

*sums have been rounded to the nearest percentage
Approximately 86,000 Survivors of residential school are alive today.

This figure is an estimate based on a 1998 Department of Indian Affairs and Northern Development analysis of data from the 1991 Aboriginal Peoples’ Survey (Statistics Canada). In 1991, it was estimated that approximately 105,000 to 107,000 Aboriginal people were alive who had attended residential school.

Based on an analysis of the 1991 Aboriginal Peoples Survey data on surviving residential school attendees:

- First Nations – 80%**
- Métis – 9%**
- Inuit – 5%**
- non-status – 6%**

- Approximately 287,350* intergenerationally impacted (on- and off- reserve)

- Total conservative estimate of Survivors and the intergenerationally impacted is 373,350

- Estimated 204,564*** participants in AHF-funded healing projects - only 33% engaged in prior healing activity

- Estimated 49,095*** participants in AHF-funded training projects

*Extrapolated figures based on information from the Indian Residential Schools Resolution Canada’s (IRS) analysis of the Aboriginal Peoples Survey 1991.

** Extrapolated figures from Indian Residential Schools (IRS) Data Project (1998) prepared by DIAND IRS Data Task Group.

*** Extrapolated figures based on information from 2000, 2002 and 2004 AHF surveys.
36 months is a minimum time to move through needs identification, outreach and initiation of therapeutic healing.

36 months was selected as the minimum time because this was considered the longest duration of funded organizations since AHF’s initial granting period at the time of analysis.

Less than 1/3 of all projects received AHF funding for 36 months or longer. Of 209 respondents in the 3rd national survey, 67 or 32% received funding for more than 36 months.

34% used initial funding for awareness, knowledge building or training.

8.9% applied for funding for awareness, knowledge building or training before initiating healing services.

42.9% of longer-term projects were funded for outreach and training in advance or in support of therapeutic healing.

Less than 1/3 of funded organizations had support for a sufficient period to train before delivering therapeutic programming.

13.5% were certain their efforts were reaching those in greatest need.

69% were probably reaching those in greatest need, but their efforts could be better.
12.5% were probably or definitely not reaching those most affected by the Legacy

5% were unsure

Estimated 204,564* participants (55% of total target population of Survivors and intergenerationally impacted) received healing services

Approximately 33% of participants have previously participated in a similar program, leaving 66% of participants who are engaged in addressing the legacy of residential school abuses for the first time

In a typical month, over 21,148 volunteer hours contributed to AHF projects. Assigning a conservative rate of $10/hour to volunteer service, then $211,482

Impact of AHF Funding

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Impact of AHF Funding

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What the Projects Tell Us

• Healing is a long-term process

• Healing occurs in stages

• Regarding impact of AHF-funded healing activities in the communities (e.g., level of understanding and awareness of the Legacy, level of team capacity, number of participants in healing):
  - 20% of the communities are just beginning their healing activities
  - 65.9% of the communities accomplished a few goals, but much work remains
  - 14.1% of the communities accomplished many goals, but some work remains
Community Healing Journey

- Increased organizational & leadership support
- Increased partnerships
- Increased capacity to facilitate healing
- Suicide
- Family violence
- Addiction
- Despair

The journey begins

Gathering momentum

Hitting the wall

Vision

Healthy individuals

Vibrant community

Transformation

Reduced rates of physical & sexual abuse, children in care, suicide & incarceration, reconciliation

Increased awareness of Legacy

Increased personal healing

Increased # of individuals engaged in healing
Stage One: The Journey Begins

- Well-defined needs and high local demand for services catapults communities to act

Stage Two: Gathering Momentum

- An increase in healing activity, both at the individual and organizational levels, an increase in healthy behaviours and a growing sense of hope in the community

Stage Three: Hitting the Wall

- A great deal of progress has been made, but momentum is beginning to stall
- Service capacity has grown and an increasing number of individuals have pursued education and training and are now employed
- Hope and excitement often evident in the second stage has dulled, healing becomes more institutionalized and frontline workers are beginning to burn out
- More of the community’s adults are pursuing healthy lifestyles
- Previously undisclosed abuses may be brought forward
- Gambling, prescription drug use and youth crime may arise

Stage Four: Transformation

- Healing becomes more integrated with other community development initiatives
- Focus shifts from fixing problems to transforming systems
- Debilitating effects of poverty and unemployment on individual and community health become structural focal points, since healing from the Legacy by itself does not sustain well-being
What Participants Tell Us

57% of project participants tell us their goals changed over the course of attending AHF-funded activities.

The four most commonly-cited changes were:
• improved self-awareness
• relationships with others
• knowledge
• cultural reclamation

The majority of participants felt better about themselves because:
• they found strength
• they improved their self-esteem
• they were able to work through their trauma

THE HEALING JOURNEY

• Begins with awareness, followed by an understanding of the impact of the residential school legacy on one’s self and one’s family
• Requires that Survivors feel safe
• Addresses trauma issues
• Involves reclamation of healthy productive lives
• Embarking on a healing journey takes considerable time and requires immense discipline, as well as continued support and guidance to establish stability
Survivor’s Healing Journey

A Healing Journey: Final Report Summary Points

- Establishing safety
- Remembrance and mourning
- Partial recovery
- The long haul
- Transformation and renewal
- New life way
- Capacity to heal others
- Self-reflection/discovery
- Awareness & understanding
- Recognition & acceptance
- Crisis
- Learning
- Guidance and support
- Community
- Family
Participation in Healing Activities

- Healing/talking circles
- Legacy education
- Workshops
- Ceremony
- Elder
- One-on-one counselling
- Traditional medicine
- Conferences
- Life skills
- Land-based activity
- Residential treatment
- Parenting skills
- Family counselling
- Alternative Western therapies

# of participants using this service
A Healing Journey: Final Report Summary Points

Effectiveness of Healing Activities

- Elder
- Ceremony
- One-on-one counseling
- Healing/talking circles
- Traditional medicine
- Workshops
- Conferences
- Legacy education
- Land-based activity
- Life skills
- Residential treatment
- Parenting skills
- Family counseling
- Alternative
- Western therapies

# of participants who rated services most effective
• The Future
While informed practitioners suggest that community healing takes sustained effort for up to 20 years, AHF proposes that 10 years is the average period required for initiating, establishing and evaluating therapeutic healing from residential school trauma in a community or community of interest.

It takes time for individuals and communities to reach the “readiness to heal” stage.

Stable funding is required for communities to engage in a continuum of healing.

10 years is needed for a community to:

- reach out
- dismantle denial
- create safety
- engage participants in therapeutic healing

The progress and duration of healing is affected by:

- level of community awareness
- readiness to heal in individuals
- availability of organizational infrastructure
- access to skilled personnel
Responses to surveys indicate healing goals are achieved best through:

- services by Aboriginal practitioners
- longer involvement in counselling and therapeutic activities

AHF-funded projects play a pivotal role in:

- partnerships between community and health service agencies
- identifying and filling gaps in community-based health services
- engaging Survivors of residential school and those intergenerationally impacted by the Legacy
Between 1877-1965, the federal government spent an estimated $1,504,225,122 to maintain residential schools. This estimate is extrapolated from an analysis of INAC records from 1877-1965. However, no annual breakdowns were available for the period 1877-1909.

By applying the Law Commission of Canada’s economic model (2003) on the annual cost of child abuse to Canadian society, Survivors of residential school and those intergenerationally impacted cost Canada $440 million per year (i.e., costs of incarceration, social services, special education and health).

A study of Hollow Water’s Community Holistic Circle Healing (CHCH) indicates that funding of healing as an alternative to incarceration is cost-effective and lowers recidivism rates. Holding the cost of the prison system constant, for every $2 spent on an individual in the CHCH program, federal and provincial governments save $6 to $16 in incarceration costs.
Currently, AHF expends $65-68 million per year on projects.

AHF funding will conclude 31 March 2007.

AHF will close its doors in September 2008.

Although we have committed our funds, we continue to deliver the message to government and to the Canadian public that healing is a long-term effort requiring long-term planning and resources.

The announcement of $40 million in the February 2005 budget extends the life of 91 projects, but does not extend the AHF wind-down schedule.

An endowment of $600 million will support a 30-year healing strategy.

$28.4 million per year will be available for community-based projects, based on a 2.5% inflation rate and 5% return on investment.

By year 30, the AHF will have invested $1.2 billion in community-based healing.
AHF Recommends

The Government of Canada renew the mandate of the Aboriginal Healing Foundation to enable it to continue its mission for a period of 30 years.

The renewed mandate address the legacy of abuse, and social, psychological, cultural and spiritual injuries, including intergenerational impacts.

The mandate be designed to complement and advance the interrelated goals of acknowledgement, redress, healing and reconciliation.

The AHF be funded to support a public education role to conduct research and share knowledge related to the legacy of abuse in residential schools and promote healing and reconciliation.

$600 million as a one-time grant be invested to generate income and be expended over 30 years to fulfill a renewed mandate of the AHF.

AHF FUNDING PRIORITIES

- Continue outreach to underserved or special needs of Aboriginal communities to provide for an opportunity to begin healing
- Continue support in Aboriginal communities and communities of interest for AHF-funded projects for an average of 10 years
- Continue to document and evaluate effective healing practices to share with stakeholders
- Support self-determination and self-reliance in Aboriginal communities through culturally appropriate healing services, training and networks
Individuals who have been severely damaged by abuse may be in recovery throughout their lives, turning to healing services and community support in times of crisis. Communities that have suffered the loss of successive generations of children, coupled with other devastating losses, may take more than a single lifetime to recover. Research on intergenerational transmission of trauma makes it clear that individuals who have suffered the effects of traumatic stress pass it on to those close to them and generate vulnerability in their children. The children in turn experience their own trauma. An emerging theory on historic trauma argues that repeated trauma over generations lays down layer upon layer of pain and vulnerability that need to be treated layer by layer.

The AHF has funded healing activities that are meeting the needs of Survivors. This process has also contributed to community development, governance and the social economy.
A continuum of care must be maintained for those who are already on their healing journey. The same opportunity must be available to those who become ready to pursue their healing in their own time.

Healing is central to Aboriginal peoples’ ability to address other pressing social issues, and reconciliation is critical to our collective ability to move to a better relationship.

Maggie Hodgson, a residential school Survivor who was consulted on Mapping the Healing Journey, spoke about the time frame of community healing at a hearing of the Royal Commission on Aboriginal Peoples in 1993:

“At one time I used to believe the myth that if our people sobered up, our problems would be solved. Now I know that all [it] does is take one layer off the onion ...
We are dealing with a number of different issues ... related to our people's experience over the last 80 or 90 years ... I believe that the whole issue of residential school [and its effects] is an issue that's going to take at least a minimum of 20 years [to work through]."

The Aboriginal Healing Foundation hopes that, pending the approval of the federal government's agreement in principle, Survivors and those who have been intergenerationally impacted by the legacy of abuse in residential schools will have the opportunity to continue their healing.

Note: Citations of primary and secondary sources used in preparation of this document are available by request from the Aboriginal Healing Foundation. See back inside cover for contact information.
SHINGWAUK HALL

Shingwauk Hall was erected in 1935 to house a residential training school established in 1873 by the Reverend Edward F. Wilson. Under this Anglican missionary's tutelage the institution, named after the well-known Ojibway Chief Augustin Shingwauk (Little Pine), provided Indian children with religious instruction, occupational training and homemaking skills. The first frame structure, located at the nearby Garden River Reserve, was destroyed by fire within six days of its completion, and the foundation stone for a new three-storey stone building was laid here in 1874 by the Earl of Dufferin, the Governor-General of Canada. Other buildings were added, but of these the Bishop Fauquier Chapel, completed in 1883, is the sole remaining structure.

Erected by the Ontario Heritage Foundation.
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Helping Aboriginal people heal themselves

Aboriginal Healing Foundation