THE WINNIPEG BOLDNESS PROJECT

BOLD NESS

Hub of Strength:
Prototype Implementation and Learning

April 2019

1. Introduction

The Winnipeg Boldness Project is an Indigenous social innovation initiative working alongside the North End community to identify effective mechanisms to improve outcomes for young children in the Point Douglas area. The Project is working towards a Bold Goal:

Children and families in Point Douglas will experience dramatically improved wellbeing in all aspects of self: physical, emotional, mental, and spiritual.

Currently, about 50% of kids in the Point Douglas are doing really well in terms of early childhood development and are starting school at a point where they're ready to begin learning and take on the world. What The Winnipeg Boldness Project is aiming to do is raise that number, because we believe that every child should have the same access to opportunity.

The three core objectives that will work to not only increase school readiness but also achieve the Bold Goal include to:

1. Design a 6-year Early Childhood Development intervention strategy for future implementation that will help young children in Point Douglas develop the tools they need to succeed in life.
2. Create a strength-based narrative that highlights the positive and spirited aspects of Winnipeg's North End through community perspectives.
3. Build a child-centred model focusing on best practices for raising children through the deep community wisdom that exists within the North End.

Our starting point in the design process was to engage the Point Douglas community in defining success for their children. Residents, parents and leaders also identified many of the roadblocks to success for their children and are driving the development of solutions to these roadblocks. A large proportion of the residents, parents, and leaders we engage with are Indigenous and espouse an Indigenous worldview and value base. Therefore, Indigenous perspectives and methodologies form the foundation of our problem definition and solution finding. We believe that the solutions generated will lead to better outcomes not only for Indigenous children, but better outcomes for all children.

Boldness is Community-Driven

The Winnipeg Boldness Project operates using community development principles; the highest level of accountability is to Point Douglas community residents, families and their children. This guiding principle is understood at every level of the Project's

governance. Our community partnerships, through families, leaders, and community-based organizations are at the core of this Project. They provide knowledge and direction as well as direct hands on work to test some of the ideas that they feel could produce possibilities for success and wellbeing for children and families in the community.

Boldness is Strength-Based

The Winnipeg Boldness Project has employed a comprehensive strategy of community engagement through diverse arts based methods. These methods have allowed community to share in the design of the Project while also sharing their own experiences raising their families in the North End of Winnipeg. These arts-based methods have included a Photo Voice project and a Tile Mosaic project.

Boldness is Community Wisdom

The Winnipeg Boldness Project has been undertaking a deep community engagement and iterative knowledge mobilization process since April 2014. This process has brought together wisdom of community members and community service providers into a model titled: Ways of Knowing, Being, Feeling, and Doing: A Wholistic Early Childhood Development Model (Child Centred Model). The implementation of the Child Centre Model, combined with community defined indicators of healthy children and families will produce a bold goal: Children and families in Point Douglas will experience dramatically improved wellbeing in all aspects of physical, emotional, mental, and spiritual being.

Winnipeg Boldness & the Hub of Strength

In the Project's first year, the Point Douglas community was engaged in an extensive knowledge gathering process to generate a list of solutions and set priorities for improving outcomes for children and families. The Hub of Strength was chosen as one of the first proofs of possibilities (POPs) to be developed through a social lab process because of its potential to address several community identified solutions.

2. Opportunities for Impact

The Hub of Strength proof of possibility seeks to cultivate and support community leadership at various levels: for individual caregivers, staff and leadership at community serving organizations, within larger systems; and through appropriate program evaluation. Leadership capacity is considered from an Indigenous spiritual, cultural perspective, which recognizes both the impact of colonization as well as the power and potential of traditional Indigenous culture to promote healing and develop leadership capacity. Evaluation from an Indigenous perspective, in particular of programs and services that support Indigenous families, presents an opportunity to ensure that families receive the best service possible.

The statistics that represent the ongoing impacts of colonization on Indigenous families are stark. The disparities and inequities are well documented in research and literature (Blackstock, 2009; Sinclair, 2004). In cities such as Winnipeg, Manitoba – with the largest urban Indigenous population in Canada – systemic and individual racism and inequity are entrenched. They exist in systems such as health care, education, social services, and policing for example (Baskin & Sinclair, 2015). These inequities result in higher incidences of disease, less access to healthy food, lower graduation rates at secondary and post-secondary levels, higher representation in the child welfare system, and less access to economic resources for stable and secure housing.

> The inequalities in social, economic, cultural, and political areas are not due to a trait or gene of Indigenous peoples, but are a result of ongoing governmental and systemic structures that continue to impede Indigenous peoples. (Adelson, 2005; Baskin & Sinclair, 2015; Hill, 2009)

> Present-day social disparities, such as higher rates of poverty, likely play a role in explaining the above; however, there is increasing recognition that the mental health issues facing Aboriginal populations are rooted in intergenerational trauma from the legacy of colonization. In combining with intersecting racism and sexism, the impact of intergenerational trauma on Aboriginal women is particularly severe. (Roy, 2014, p.8)

Kirmayer, Simpson & Cargo (2003) assert that a clearly evident history of cultural oppression and marginalization continues to contribute to poor mental health outcomes experienced in most Indigenous communities across Canada. Given the social origins, strategies require both social and political solutions. Mental health promotion that supports youth and community empowerment is hypothesized to have broad positive impact on mental health and wellbeing of Indigenous peoples.

Community leadership that encapsulates Indigenous values and practices, particularly in an urban context, has been identified as a foundational element for addressing Indigenous needs and priorities. Self-determination and governance are issues that continue to be fought for in order to meet the needs and priorities of Indigenous families living in the city (Baskin & Sinclair, 2015). In Winnipeg the rise in Indigenous run organizations has meant that programs have been better able to meet the needs of families based on worldviews and beliefs that have been more aligned with Indigenous health and wellness. This allows organizations to meet their needs based on Indigenous values and principles of practice. With more funding directed towards Indigenous organizations, is the increased need for frameworks and methods to evaluate outcomes and success based on the same worldviews and values upon which the programs are based.

Given the impact of intergenerational trauma on the transmission of culture and language, researchers have begun to explore how strengthening these factors can work to counter the effects of trauma in families. Hill (2009) brings together key areas for action, highlighting Indigenous strategies to restore wellness for Indigenous peoples. In a report documenting the mental health and wellbeing of Indigenous children and youth several recommendations for action are made:
- Recognize the role that culture plays in determining health.
- Focus on implementing ecological, community level interventions.
- Promote local leadership and develop high quality training.
- Provide mentoring and support.
- Foster links between communities.
- Support on going capacity building

It is through the Hub of Strength prototype that we can provide increased opportunities to further the progress made in these areas, by implementing interventions such as the work of the Indigenous Learning Circle, culturally relevant trainings, increasing traditional Indigenous parenting skills, and the building of leadership skills within the Point Douglas community. These types of interventions have been proven through numerous research studies to have a significant positive impact on the overall health outcomes of Indigenous families and children, as well as the broader social landscape through dispelling racist and prejudicial viewpoints in the general public.

A comprehensive literature review exploring the aforementioned topic areas can be found in its entirety in appendix A.

3. Prototype Background

The Hub of Strength sought to address community identified priorities such as accessible parenting programs, peer mentorship, personal development, healing from trauma, community leadership development, access to traditional Indigenous knowledge, and cultural safety awareness and training. The Project recognized that these priorities aligned closely with those of an existing local group, the Indigenous Learning Circle (ILC), and a partnership was pursued.

The Indigenous Learning Circle (formerly Community Learning Centre for Promising Practices) began in 2007, with conversations between community leaders regarding the need for a centre that could capture the knowledge and best practices within the community in order to ensure that it is carried forward and shared with the broader community and future generations.

A vast community consultation process was undertaken and from it, three priorities were created to guide the work of the Indigenous Learning Circle:

> 1. Community based **succession planning** that will assist younger people within the Indigenous community to develop management skills so they can manage non-profit organizations
> 2. **Cultural proficiency**-based training for human service providers to further develop their capacities to enhance programs and services for Aboriginal people in existing public and private organizations through **knowledge transfer and exchange**
> 3. Assisting both private and public human service organizations to develop programs and delivery models based on the **best practices** of Aboriginal worldviews and experiences

Throughout this process a Steering Committee was formed that would help to provide strategic leadership to the centre following the consultation process. Active members of the Steering Committee (at the time of this report) are:

> Astrid MacNeill – Consultant
> Debra DiUbaldo – University of Manitoba Inner City Social Work Program
> Diane Roussin – The Winnipeg Boldness Project
> Heather Leeman – The Laurel Centre
> Helen Settee-Robinson – Province of Manitoba Aboriginal Education Directorate
> Dana Riccio-Arabe – Wahbung Abinoonjiiag
> Tom Simms – Community Education Development Association

In September 2015, a Memorandum of Understanding (MoU) with Wahbung Abinoonjiiag, ILC's administrative host, was signed to establish a partnership to work on three activities streams:

1. **Community Leadership Training** - This training is in line with the wholistic vision of community that supports strong and healthy families, community, services, institutions, and systems required to provide a nurturing environment in which children can thrive. The training is intended to build Indigenous and community leadership at all levels. Within the manual are components that could be delivered individually to systems and institutions to increase cultural competency and promote the values and best practices from an Indigenous perspective.
2. **Early Childhood Development (ECD) Training** – Training that focuses on wholistic child development and includes both mainstream and traditional Indigenous knowledges. It is intended to be delivered to caregivers and parents with the potential to become a peer-led curriculum.
3. **Evaluation Framework** – A framework that is developed in cooperation with the community, and that outlines the principles and methods to guide evaluation efforts that are culturally appropriate and customized to an organization.

The MOU and related amendments ended in March 2017, which is the period covered by this report. The Winnipeg Boldness Project has continued to collaborate with and support The Indigenous Learning Circle beyond the scope of this report.

The goal of prototyping activity is to generate learning and test the feasibility of a solution at a low cost within a short time frame. Prototypes can generate some evidence about the potential impact that an intervention could have if scaled, but themselves are only able to impact a small number of families. Each of the Hub of Strength prototypes ran with between 6 and 12 participants. While these small numbers may seem small, they allowed for rich in-depth feedback and learning.

4. Community Leadership Training

4.1 Prototype Design & Implementation

In September 2015, Astrid MacNeill drafted a 13-week Community Leadership Training (CLT) curriculum, which was based on previously developed manuals: *Promising Practices Derived from Indigenous Worldviews*; and *Next Up!* The CLT manual was based on the life skills coaching model (Allen, Mehal, Palmateer, & Sluser 1995), with emphasis on process over content, toward balanced self-determined behaviour. These are seen to

be congruent with the Medicine Wheel Teachings that embodies Indigenous principles of the interconnectedness of body, mind, feelings and spirit. Indigenous community leadership is about building strong relationships.

The CLT manual includes 13 sessions:

1. Orientation for Community Leadership Training – This session creates understanding of the goals, design and delivery methods of the Community Leadership Training, and invites full participation throughout the series.
2. Cultural Safety -Participants learn about the stages and journey toward cultural safety practice; how imbalance of power in relationships is a barrier to cultural safety; and what may occur when organizations are challenged to offer culturally safe services.
3. Stories are our Medicine, Symbol-making Part 1 – Participants learn about the significance of storytelling in Indigenous culture; build a collage to respond, in visual language, to the four essential questions: Who am I? Where did I come from? Where am I going? What is my purpose?
4. Stories are our Medicine, Symbol-making Part 2 – Participants present their collage in the group and articulate the meaning of symbols they've selected
5. Mapping our Journey Toward Self-determination - Participants learn about the stages of healing and recovery as integral components of community capacity building and community leadership.
6. Attributes for Community Leadership – This session reviews leadership qualities required to serve a diverse community and encourages participants to explore their own leadership potential.
7. Indigenous Views of Leadership – Participants learn about community leadership drawn from Indigenous world views, cultural and spiritual values; styles of communication used by traditional leaders; and creating their own Bundles for leadership.
8. Promising Practices Derived from Indigenous Worldviews - This session helps participants to: define "promising practices" that are derived from Indigenous worldviews; develop a system of gathering and documenting this knowledge from the community; and develop a system of sharing this knowledge with other service providers.
9. Communication Based on the Seven Sacred Teachings – This session examines how the Seven Teachings may be applied in communication with families, communities, other nations and their work.
10. Peace Keeping Ways of our Ancestors – Participants learn about ancient traditions of peace keeping, how they are still applicable today, and how to implement them in community organizations, in our communities and in relationships with the broader non-Aboriginal community.
11. Mentoring for Community Leadership – In this session participants reflect on how their own wisdom, knowledge and experience was enhanced by mentors throughout their careers, or personal development; and learn how the

mentorship model can be implemented to build a pool of talent for community leadership.

12. Creating a Teaching Quilt, our Medicine Bundle - In this session, participants create a teaching quilt that expresses their collective vision for community capacity building toward "Pimatisiwin", the fullness of life, for the families and community they work for.

13. Cultural Retreat - Participants are asked to attend a retreat that includes a sweat lodge ceremony, which is optional. Those not wishing to enter the lodge may sit outside in prayer or meditation and provide support to those who enter the sweat lodge. Following the sweat lodge ceremony, everyone shares a meal together.

The Community Leadership Training (CLT) manual was developed originally for emerging leaders, from various organizations, however, it was decided that the group of "seasoned" leaders would go through the process firstly, leading by example. The prototype ran from January to March 2016 with 10 participants, the ILC coordinator, facilitator and Elder.

4.2. Evaluating the Prototype

4.2.1 Methods and Data Gathering

Feedback from participants in the Community Leadership Training sessions was gathered through written evaluation questionnaire submissions throughout the training, and a group discussion held on April 12, 2016.

4.2.2 Evaluation Observations and Reflections

The following is the summary analysis of participant feedback as provided by the Indigenous Learning Circle coordinator, Astrid MacNeill.

Affirmations:
This collective journey affirmed much of what this exceptional group of "seasoned" leaders already knew, hence, the focus changed to accommodate group needs and aspirations, as well as the facilitator's and Elder's gifts: deep sharing from community wisdom, knowledge and experience, complemented by personal reflections and life experiences, as related to many years invested in community service and leadership, combined with the freshness of younger, aspiring leaders.

Validation of the efficacy of the talking/sharing circle as a means to share deeply, from individual perspectives, and from our collective wisdom, knowledge and experience, was enhanced by the culturally safe environment and the Medicine Wheel framework:

Spiritual
- Learning and sharing as ceremony
- Elders to inspire discussions and teach, drawing from their wisdom
- Affirming presence of the Medicines, Water and Fire
- Invitation for individual Bundles to be placed at the centre that acknowledge individual gifts for the collective whole!
- Opening smudge and prayers, closing prayers at every Circle
- Time for reflection and time for each person to speak
- Respectful listening
- Singing, drumming, and invitation to explore the Seven Sacred Teachings in the Anishinaabe language
- Validity of individual stories and metaphors as sacred gifts
- Acknowledging the Seventh Generation before and ahead of us in all that we do
- Honouring the child at the Centre of all we do
- Planning a community quilt, a Medicine Bundle, to mark our journey

Emotional
- Cultural safety to speak our own truths without fear of judgment
- deep reflection
- drawing from our life experiences and many years of community service
- respectful listening
- open hearts and minds
- caring and trust
- building a sense of community
- belonging and common vision and purpose in our work
- group cohesion, and
- humour

Physical
- Presence of the Medicines
- Grounding at the centre by the buffalo hide over the seven-pointed star
- Meeting space - Circular room of wooden panels, natural light, chairs surrounding centre star and buffalo hide, quilted wall hangings from other groups' visionary sharing
- learning from the sacred story presented by Helen Settee of how this building came to be (Murdo Scribe legacy)
- Presence of fire (candles in Four Directions), water bowl, talking stick, smudge bowl, eagle feather, individual Bundles
- Symbols (shields from session X), sacred life stories, the value of arts as a sacred expression of the soul

Mental
Although the Community Leadership Training manual content was not the focus of the Circles, the process was seen as "marking the trail" for successive groups to take the training. It will determine the next group composite (audience) to offer a series of Community Learning Circles, or as Community Learning Circles offered community-wide throughout the year, or in response to specific requests from agencies providing services

to Indigenous people as part of human resource development, or as presentations at conferences on promising practices derived from Indigenous world views, spiritual and cultural values.

This training was recognized by group participants as having the potential for community-based leadership capacity building, human resource development for agencies or organizations offering programs and services offered to Indigenous peoples, or for individuals aspiring to work effectively with Indigenous people as a personal goal, or for academic institutions that want to include, as part of culturally proficient training for students in various fields (Justice, Police, Health, Social Work, Child and Family Services, Education, etc.). The training manual is a living document, evolving and flexible, to suit group needs.

5. Traditional Indigenous Parenting

5.1 Prototype Design & Implementation

The curriculum/facilitator manual was developed and written by Astrid MacNeill who was hired as the Indigenous Learning Circle coordinator during the first prototype and was a facilitator for both iterations of the prototype. The manual was developed based on community wisdom, knowledge, and experience. Elders, linguists, The Winnipeg Boldness Traditional Knowledge Keepers, Community Leadership and Parent Guide Groups contributed to the final version. It also includes adapted portions from the facilitator's guide of, *Bringing Tradition Home* (B.C. Aboriginal Child Care Society, 2010) and *The New Dynamics of Life Skills Coaching* (YWCA Toronto, 1995).

The first prototype ran between March and June 2016 with six members of The Winnipeg Boldness Project's Parent Guide Group, who named the manual: *Traditional Indigenous Parenting in Today's World* (TIPIW). The second prototype ran between February and April 2017 with six parents referred from various community-based organization partners.

The revised manual includes the follow sessions:

1. Orientation – Participants begin building relationships with one another, are introduced to the goals, design and delivery methods of the program and create a Code of Honour for their collective learning journey.
2. Orientation continued.
3. Stories are our medicine: Symbol-making part 1 – Participants learn about the significance of storytelling in Indigenous culture; build a collage to respond, in visual language, to the four essential questions: Who am I? Where did I come from? Where am I going? What is my purpose?
4. Stories are our medicine, Symbol-making part 2 – Participants present their collage in the group and articulate the meaning of symbols they've selected.

5. Truth: The impact of colonization on parenting – Participants learn about the continuing impact of colonial history on Indigenous communities, methods of anger-management, importance of boundaries and self-care.
6. Honesty: Indigenous people and resilience – The session explores protective factors that lead to increased resiliency, the connection between strong cultural attachment and resiliency, and the role of advocacy in protecting children's rights.
7. Courage: Stages of child development – Participants learn about healthy child development, the impact of verbal and non-verbal messages in their interactions with children, and Indigenous ways to celebrate the milestones of a child's development.
8. Love: Safety in secure attachment and bonding – This session focuses on the importance of child attachment, child safety issues, various child rearing styles including traditional Indigenous child rearing practices.
9. Humility: Encouraging desired behaviours with our children – Participants learn about some Indigenous traditional ways of encouraging desired behaviours with children, how parents as role models impact their children, and the importance of learning from, and playing with children.
10. Wisdom: All my Relations – This session reviews the significance of the phrase *all my relations*, the importance of cultural connectedness in helping Indigenous children feel a secure sense of belonging, and how parents from other cultures support their children's cultural identities and ways of being.
11. Respect: Traditional Indigenous values as a basis of parenting – This session compares and contrasts Indigenous and western ways of being, knowing, doing, feeling. It explores the importance of Indigenous values as foundation for parenting, the tradition of respect in Indigenous child rearing, and the role of respect for self, for family, for community, for all Four Nations.
12. Giving back to community – Participants prepare presentations that reflect the learning experience as a way of "giving back to community".
13. Honour Ceremony – participants celebrate and feast their learning journey with their friends and families.

5.2. Evaluating the Prototype

5.2.1 Methods and Data Gathering

Participant feedback was gathered through sharing circles documented and summarized by the coordinator and Winnipeg Boldness Project staff.

Facilitators and coordinators provided feedback through written reports following the prototype sessions.

5.2.2 Evaluation Observations and Reflections

Participant feedback from first prototype (April – June 2016)

1.) What sessions do you feel impacted you the most? Why?

- Symbol-making: I opened myself to the group and shared

- Elder's teachings about pregnancy, having a ceremony just before giving birth

- Wisdom: that is part of my spirit name, and I learned I search for wisdom, new knowledge; I want to learn more. Learning more isn't a selfish thing as I'd thought (previously).

- Symbol-making: strengthened my identity, enjoyed the creation story, about the renewal of life. I am more at ease with traditional Indigenous beliefs and ways, understanding that we are all praying to Creator. I've observed those who follow traditional ways have quit drinking and so I see many benefits for them.

- Symbol-making: it's important to remember who you are, to take time for yourself, to reflect on my life, and create time for myself, not just always be serving others

- Love: Elder Mae Louise taught the importance of loving yourself, and then you can love others, extend yourself to others in a better way

2.) What did you learn throughout this process that was important for your relationships to your child(ren) or partner?

- Self-care is important, putting your children first is good, but you also need to create time for your partner as well

- Patience is needed for myself and my husband

- Set firm expectations beforehand (ie, homework, clean room, chores before you can go out to play), then things become routine, everyone gets to have free time after their work is all done

- Children need structure and predictability

- Self-time is important, trying to understand the needs of my daughter too

- Patience for myself and for my children

- Learning to set boundaries with people, I am learning to do this, and it feels good!

3.) Has participating in the training changed the way you see yourself as a parent? If yes, how so?

- Yes, I learned although I make mistakes, I can always come back from them (rebound after making mistakes)

- No one is perfect, we all make mistakes; the important thing is to learn from them and move on

- We have all learned from one another in this group, there is trust here, we are together as parents (support in a non-judgement circle)

4.) Do you know of any existing resources that parents who take this training would find useful?

- Andrew St. Family Centre

- You can't Spoil a Baby (waiting list is about 4-6 months)

- Access Elder Mae Louise Campbell's teachings and ceremonies (parents were given suggestion to attend ceremonies hosted by UM Inner City Social Work Program)

5.) As a result of participating in this group have you built any new relationships or friendships?

- This group already knew each other prior. So that helped with trust and sharing openly with confidentiality respected

- Facilitator were respectful and trustworthy

- We wish these sessions were ongoing

6.) For you, what was the most important session, or topic you covered in the training? Why was this the most important?

- The Seven Teachings; these are good values

- There should be TIPI Teachings also, and a Sweat Lodge ceremony

- The training should be for a longer time, and continuous

- We wanted to have more time with the Grandmothers from other nations; it was interesting to hear their stories and experiences

- Train the trainer for these sessions is needed; I would be interested in taking it if they were offered

- Would I be able to use the handouts for a parenting program I am conducting now? (Note: The Traditional Indigenous Parenting in Today's World, when ready, could be used community-wide?)

- The facility hosting these sessions should be on a main bus route for accessibility

- Bus fare should be given to participants for future training sessions also

- Evening sessions are best for parents who are working

- There should be more sessions, maybe another hour longer, or whole day sessions if possible, throughout the year

- What about having babies in the sessions? There is no problem for the mothers or other participants. With toddlers, that a different thing because they'd get restless.

- These sessions are really about giving time for parents to enjoy getting out and learning with a group of other parents

- Small groups are preferable. They are more intimate. Also we all know one another. With a larger group, where people don't know each other, it would take time to feel trust and open up to share

- Younger parents have different needs, are less likely to share right away, or have input to the discussions. Grandmothers can be part of the circle too.

- It would be good to have the flip chart lessons and discussions on the wall throughout the whole training for easy reference and reminders of discussions, learnings and journey

- I will miss getting together for discussions; I have enjoyed the sessions very much

Participant feedback from second prototype (February – April 2017)

Out of the six participants in the circle, four said that they we referred by a community-based organization. One of these mentioned that they only attended because of the trust they had with the referring staff. Three of the six participants mentioned that they were involved with CFS and thought this course might satisfy requirements for their case plans. Two of the participants were specifically interested in the traditional aspects of the course. All the participants expressed an interest in building their parenting skills and continuing their healing journey to benefit their children.

> *I never really had the Indigenous parenting, although I'm from Indigenous background, from an abusive background, and I as well have CFS involvement now in my life. Never dreamed they would be, but they have been. And also I do hope that this course will be a tick, a check mark for them, they seem to be interested in check marks, and not in progress, actual progress, I'm sorry to say but it seems to be a reality I had no idea that this is how its been until I've been involved in it. So I'm checking off the box, but also learning, sharing and learning a lot from the other ladies here.*

> *I heard about this program… and I said, no, I'm not gonna do no more parenting or anything, cause I've been through 3 years of programs and I kind of, you know, fell off the wagon or whatever, but I was like, you know what? I need to do this cause, [organization staff member] phoned me, well, messaged me and asked if I wanted to take it and I said "I think I need to take it," because I need to get my schedule going, I need structure…*

Each of the six participants had taken at least one other parenting course previously; five of the six had taken two or more and had both positive and negative experiences. Those with negative experiences sited lack of participant engagement in the material and poor facilitation. Opportunities for peer connections and activities such as role play were elements of courses that received positive feedback.

I'm continuously taking parenting programs. And I liked the ones where they get you involved, like, yeah, with the role play and to talk and to, its like you're helping one another learn from each other. And like the ones I didn't like is when they sit there, you just have to sit there and listen to what everything they have to say, and like, they don't get your feedback, they just, you know, you're there for attendance, exactly, they don't ask you questions, they just make you sit there and listen,

…the facilitators were great in some instances, and then others I felt that there could have been, that there ought to have been better control of the classroom and that people… were getting checkmarks for CFS, they were coming there just for their checkmark, not participating, there were a couple of people that [were very disruptive and] allowed to stay in the classroom, I was really upset by it…

Two of the participants said it was easy for them to share and be comfortable in a group setting, while four said they had trust issues. Many of the participants knew each other through the host organization who provides ongoing programming through which people can build relationships and trust over time. Factors such as being assured of confidentiality, and access to their own records were cited as important for building trust. Each of the participants said they felt comfortable in the prototype sessions and felt free to share as much or as little they wanted. This was especially important for those who were not familiar with others in the group. The participants expressed that sharing circles and programming at the host organization had helped them build peer connections, and that they regularly communicated with one another outside of programming.

The participants expressed that they found learning from and sharing their stories with the other women very helpful. This was a source of connection and learning among the peers who were of various ages. The younger participants expressed gratitude at being able to learn from the other women, Elder and facilitator. The traditional Indigenous teachings and the incorporation of cultural practices such as prayer and smudging were also appreciated by the group.

The participants all provided positive feedback about the facilitators and guest speakers and in general found the sessions engaging.

…the lesson planning I found engaging; The guest speakers - like the last guest speaker - it was kind of cool to be able to ask a question that I've always wanted to know for like 10 years, so that was great. And the facilitators as well, getting to know, like, the residential schools and understand my roots as well was kind of, humbling at times…

The facilitator asked the group what they thought about having healing circles as a kind of prerequisite for the parenting curriculum. While all the participants felt that their

own healing was one of the most important elements for them to improve as parents, some felt that it was important that healing and parenting happen concurrently. A few felt that people can become parents regardless of where they are in their healing journey so the two ought not be separated. Others agreed that having different kinds of sessions depending on the different stages of healing would be more beneficial for participants.

Coordinator/facilitator feedback

Recommendations for Future Offerings Submitted by Astrid MacNeill

Participants need time to process, get comfortable, create an agreement, share apprehensions, be assured of cultural safety, and build trust

There may need to be additional circles at the start, to deal with the pain and hurt of colonial histories, before the parents are launched into this learning journey. Although the journey itself is an act of liberation, of healing and restoring balance, the weight of colonial history still plagues us. This may be done with the help of trusted Elders, counsellors, traditional healing ways and ceremonies. Trust must be built for this, and commitment to holistic models and traditional Indigenous ways of knowing, being, doing and feeling.

While portions of the "Bringing Tradition Home" (BC Aboriginal Child Care Society) were useful, there was still too much of western paradigms embedded in the context throughout, and too much squeezed into one session, and for our cultural ways, asking Elders to speak for 20 minutes on specific values simply doesn't work, nor is it considered respectful.

The manual was developed in the life skills coaching format, which provides more time for process, and less emphasis on content. This approach has been most meaningful for this audience, of parents who may not have had opportunity to share deeply within culturally safe circles. The science of early childhood development (stages, brain development, etc.) were of less interest to the parents. This information could be given as hand-outs or through referrals to community health facilities. Depending on the needs of the group, some sessions could include presentation from a community nurse or doctor.

It might be wise to provide complementary cultural teachings alongside the learning circles, in alternative weeks. This would allow sufficient time and flexibility required to respect cultural protocols and still address the content of the curriculum.

Consideration must be given for train the trainer initiatives so that parents can deliver these learning circles to peers, and/or younger parents. In this group, one parent is delivering parenting sessions already. She has indicated she will use what she learned in

TIPITW. She would welcome ongoing guidance and support but is well on her way to using the manual.

The grandmothers from other nations have expressed great interest in an ongoing exchange with the parents and have suggested we have circles with grandmothers across generations and from all Four Nations. Given the brief time together, the parents were fascinated to hear how other nations face challenges of raising children to know their original cultures, and how to support them to know who they are and how to conduct themselves in the world of today.

It would be helpful to have a PowerPoint developed. While flexibility to meet each group's needs is important, a presentation would save time the facilitators and coordinators time. Flip chart notes can be used to highlight discussions and make further adjustments to content, if need be.

Written evaluations from parents have been sporadic (lack of time). The overall evaluation, in circle with the whole group, is likely the best way to get input and feedback from participants. As well, a helper attending all circles, could note recommendations as they are voiced throughout the training, and complied into the final reports.

We have been fortunate to have one meeting place where we could store our materials and supplies throughout. The parents knew where to come each time, in a predictable safe place, in a sacred round room, where we could smudge and freely express ourselves. Considerations for appropriate space:
• accessibility to parents who use public transportation and bring their infants
• accessibility for food delivery
• safety
• allows smudging, drumming, ceremonial aspects of programming
• after work hours (5:00 - 8:00 p.m.) seemed to work well for parents, facilitators
• use of bathroom, kitchen facilities
• preferably no rent to pay
• preferably within the North Point Douglas community
• a comfortable, welcoming place

A coordinator must be able to take initiative to step in, wherever help is required. This means: rolling up sleeves to do the "grunge" work (clean up, wash dishes, go shopping for materials, etc.), having the physical strength to carry loads, attending all the learning circles, supporting needs of Elders, calling to remind participants, assisting with teachings, and being ready to deliver sessions if need be.

Recommendations for Future Offerings Submitted by Debra DiUbaldo.

I agree with the recommendations that Astrid McNeil has previously submitted, however I would also add the following recommendations:

A Power Point or DVD could be developed to enhance presentations. Access to audio/visual equipment would be important to consider (projector, laptop, speakers, etc.), which would allow us to insert music, audio clips and video clips into sessions.

Depending on the group, some parents may value on-site child-care to allow them better focus on the sessions.

It would be good to laminate some of the art work presented at sessions to use at other times. It is helpful for participants to see their work/learnings on an ongoing basis. Having a place where flipcharts/ posters could be exhibited can help remind participants of what was learned and decided from week to week. Participants can also reflect on what they learned in past weeks and begin to synergize important concepts and theories to new learnings. Visiting group norms each week can also be helpful in re-establishing respectful behaviors each week.

Participants expressed the value of ceremony on several occasions. Smudging Ceremony is conducted at the open of each session and an Elder blessing closes the sessions. It may be good to plan other ceremony throughout the program like: Sweat Lodge Ceremony, Full Moon Ceremony & its counterpart for men, and Solstice Ceremony. Adjustments will have to made to accommodate the academic needs of the group. Some participants may be more comfortable with reading & writing assignments than others. Some groups may need more time for processing, feeling and healing.

It is helpful to have a counselor/ Elder on hand to help participants deal with sensitive issues and personal triggers. Some participants may want access to an Elder and traditional Indigenous way of healing, while others may opt for other ways, like counseling.

Acceptance of all ways of being, doing and feeling are paramount to build the group's sense of belonging and safety.

Confidentiality, knowing that what is said in the Circle stays in the Circle, is key to building trust and relationship. It became one of the most important factors of the group.

6. Indigenous Evaluation Framework

6.1 Prototype Design & Implementation

The development of this **prototype**[*] began with community conversations, which included Indigenous Learning Circle (ILC) members, predating The Winnipeg Boldness Project. The partnership between ILC and Boldness was an opportunity to build upon

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[*] **Please note the Indigenous Evaluation Framework is itself the prototype, not the evaluation of the preceding prototypes.**

this community wisdom that recognizes the important role evaluation plays in the ecosystem of supports and services to children and families.

In March 2015, the Indigenous Learning Circle, through Wahbung Abinoonjiiag Inc., received funding, in part, from the Canadian Centre for Policy Alternatives Manitoba (CCPA) to develop and test an Indigenous Evaluation Framework. Additional funding to support the development of the framework was provided by The Winnipeg Boldness Project, and Community Education Development Association contributed funds to support the testing and validation of the framework. The framework was named in traditional ceremony and is now called Na-gah mo Waabishkizi Ojijaak Bimise Keetwaatino: Singing White Crane Flying North - *Gathering a bundle for Indigenous Evaluation.*

An article on the development and testing of the framework was published in March 2018 by the CCPA. The landing page describes the report:

> *In Winnipeg, a city with a high population of Indigenous peoples, incorporating Indigenous ways of practice into helping programs and organizations makes sense, as organizations work to support community. However, funding expectations and evaluation metrics have not shifted to meet the needs of Indigenous grounded practices.*
>
> *This new report details how to conduct an Indigenous-grounded evaluation process. While not a comprehensive guide to complete an evaluation, the Bundle builds upon what is understood about evaluation and provide a guide that can be used in planning, designing, implementing and reporting based upon Indigenous values and principles. The Bundle provides a common understanding of the purpose of evaluation; how it can be beneficial for community; and Indigenous principles, values, considerations, and methods that could be used in the design and implementation of evaluation. It can be used by community organizations and staff to understand evaluation and increase community members' capacity to actively participate in evaluation efforts in their programs and organizations.*

The full report includes an evaluation of the framework. For more details see the full report at:
https://www.policyalternatives.ca/publications/reports/na-gah-mo-waasbishkizi-ojijaak-bimise-keetwaatino-singing-white-crane-flying

7. Alignment with the Child Centred Model

7.1 Child Centred Model Summary

The foundation of the work developed through the Winnipeg Boldness Project relies on the wisdom and direction of community leaders who have, from the beginning, informed a way of working in the North End of Winnipeg, Manitoba that promotes success for families. This way of working has been documented in Ways of Knowing, Being, Doing and Feeling: A Wholistic Early Childhood Development Model (Child Centred Model) as a promising practice. Each of the prototypes designed and implemented by community partners with the support of the Project are demonstrations of the core values and attributes of promising practice of the Child Centred Model.

The Child Centred Model is a way of working with families that honours the strengths, knowledge, passion, and commitment that families bring to raising their children; and advocates for opportunities to learn, build, grow, experience, and belong to a community. The underlying belief within the Child Centred Model is that children are at the centre of a community: members, organizations, structures, and policies that are a part of that community are in interrelated and interdependent relationships with children and families. These relationships are important and need to be led by families and those who are in their close circles of support.

5.1.1 Implications for Designing and Implementing based on the Child Centred Model

1. Early childhood development initiatives will need to see sacredness of the whole child, within the context of history, culture, family, community, their full human potential, and right to the fullness of life.

2. Supports to parents must include teachings that affirm sacredness, dignity, value and worth, healing from trauma, and hope. Keeping families together must be priority. A variety of learning experiences must be accessible, affordable, culturally safe, and drawn from strength-based perspectives, with opportunity to spend some time on the land.

3. Healing strategies and modes of healing must integrate trauma counselling and restoration of balance in healing relationships between professionals and ones seeking help. The help of Elders, medicine people, sweat lodge ceremonies, healing circles, should be offered as an integral part of healing when the need is expressed.

4. Community Learning Circles should be implemented to share knowledges, wisdom and worldviews of the community.

5. The community has its own answers. Service providers can only be facilitators in the process of building strong, vibrant communities. The community is enriched with wisdom, knowledge and experience that can be drawn from in future initiatives.

6. Human resource development strategies must include multicultural proficiency education and training.

7. The whole community of service providers, everything that touches the lives of our children, must be fully engaged with, and invested in the early childhood development initiatives.

The Hub of Strength prototype is a demonstration of the values and promising practices of the Child Centred Model.

Each of the activity areas within the Hub of Strength address numerous Core Values and Attributes of Promising Practice outlined in the Child Centred Model:

Children are sacred: Sacredness is especially observed in children, who are closest to Creator. Babies are a gift and a responsibility.

> *The programs and evaluation activities are designed to provide a strong foundation for parent, children, youth, community leaders and service providers to understand their cultural backgrounds, to build awareness about themselves and their responsibilities in relation to children.*

> *The Leadership Training was designed to provide community helpers and leaders with skills to support families in their communities. A portion of the training assists the participant to explore teachings that strengthen their understandings of relationships, responsibilities, and roles – each of which adds to this core value.*

> *The Traditional Indigenous Parenting prototype was designed to connect parents to traditional teachings that they can use to raise their children with a strong foundation of values and supports. It builds on the understanding that children are sacred and each person has a role and responsibilities to ensure the success of that child in understanding their gifts and fulfilling their own roles in their*

community. The prototype provides teachings that connect the parents to each other and to their children and families, hopefully building on and expending their circles of care.

The evaluation bundle was designed to support programs and organizations working with Indigenous peoples and using Indigenous methods to measure and share outcomes. A program designed with an understanding of and activities that support the sacredness of a child will be able to use the bundle to share their stories.

Self-determination: "We are put here by the creator to care for each other and for mother earth. We should therefore be responsible for ourselves, for our families, for the next generation, and for our community."[1] Having voice and volition to make choices to attend to individual needs leads to recognition of the responsibilities to family and community.

Both the training curriculums and the evaluation framework stemmed from the expression of interest from and wisdom of the community. They are each designed to be adapted according to those they are intended to benefit and include methods for community to voice their needs and honour their strengths.

The evaluation bundle was developed in response to a clearly articulated need for organizations to be able to share learning, successes, and challenges. The bundle supports organizations to design evaluations that address their priorities and ways of working with individuals and families. By sharing these types of stories through evaluations, organizations are better able to assert their priorities and funding needs.

Person Centred: Services are responsive in considering people as wholistic beings who have competing needs and differing priorities; therefore, services are flexible.

Each of the groups that participated in the prototypes were unique and at different stages in their life learning journeys. The manuals are guidelines upon which to customize the prototypes according to the needs and priorities of each group. Facilitators added to the manuals and ensured they remained flexible to meet the needs of each group. For example, location, time, and resources needed

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[1] *KSCS (Kahnawake Shakotiia'Takehnhas Community Services). Aboriginal values and social services: The Kahnawake experience. (Ottawa: Canadian Council on Social Development) 1994 at 22.*

for each group will be important to assess. Identifying barriers to participation may mean that child-minding is provided in a variety of ways (i.e. on-site, off-site, babies attend with parents).

For the evaluation bundle a person centred approach includes being flexible to the needs of the participants, program, and organization. Taking the time to get to know the needs and priorities to ensure participation of various voices in the design of the evaluation. This included supporting participants in building capacity and taking leadership roles depending on organizational priorities.

Relationships/Trust: Time and care is taken to develop relationships and build trust with individuals and families; it is the essential foundation required to be effective and respectful in dealing with all people.

Both training manuals dedicated significant time to develop relationship and build trust within groups through various activities such as developing codes of honour and sharing stories. In fact, each of the Community Leadership and the Traditional Parenting groups identified relationships and trust as key to their positive experiences participating in the prototypes.
For the Indigenous evaluation bundle, relationship and trust are a key component. Enacting these principles allowed for the design and testing of the bundle. Key to the use of the bundle are questions for the evaluator and the organization to reflect on the development of relationships and trust with participants.

Peer-to-peer learning: Services provide opportunities for community members to build their capacity to become mentors for their peers; this respects the diverse gifts of peoples' experiences and provides meaningful support.

Both of the training curricula are designed so that participants can both share their wisdom and experience as well as benefit from that of other in the group, rather that solely from facilitator and/or guest speakers. In many cases, participants had already or went on to develop supporting relationships with one another beyond the training sessions.

The community leadership training supports the development of peer networks, which are important for mentorship and supporting future leaders to work from a culturally strong foundation. The traditional parenting groups brought

community members together in a process that fostered relationship building and connected participants. The curriculum encouraged peers to recognize and build on their gifts, sharing knowledge and skills to form a community of care.

The evaluation bundle actively promotes opportunities to involve program participants, staff, and organizations in the design and implementation of evaluations. This can build and strengthen skills and knowledge for research and evaluation capacity.

Cultural safety: Beyond professional cultural competency, the recipient's point of view is the essential factor. The power to determine if a situation or interaction is culturally safe lies with the recipient of services.

Each of the activities worked to establish a culturally safe space for participants, who were encouraged to share feedback and concerns at any time throughout the processes. Consistent and meaningful dialogue and time for reflection was built into the structures of the community leadership and traditional parenting prototypes. The ability for participants to feel safe to share experiences and concerns means that they can be addressed, and groups can better meet the needs of participants. Cultural safety is an ongoing commitment to action and must be built on trust to ensure open communication. Power is a critical component of these interactions. This was addressed in the prototypes through employing trusted community leaders as group facilitators and making time for process.

Belonging and Identity: "Belonging means we feel connected, important, valued, part of the group. It feels good to know that others want to have us around."[2] Identity is being able to answer four questions: Who am I? Where do I come from? Where am I going? What is my purpose? Services actively promote and incorporate these principles in dealing with all people.

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[2] The Circle of Courage and Meeting the Needs of Youth Abridged Version
http://www.extension.iastate.edu/sites/www.extension.iastate.edu/files/scott/CircleOfCourageMeetingNeeds.pdf

Each of the prototypes included values and activities encompassing the principles of belonging and identity. The prototypes facilitated processes of self-exploration and learning about self and self-in-relationship to family and community. This allowed participants to express their answers to the four questions above.

The evaluation bundle incorporated activities that assist program participants to explore these questions in relationship to the programs that they are involved in. Methods rooted in Indigenous ways of knowing, being, feeling, and doing can assist organizations in understanding the impact of their programming on development of belonging and identity.

Equity: Certain individuals or groups face more challenges than others and therefore require more support. Specialized services, increased opportunities, and support is available to those who have greater need.

Each of the curricula were designed with the need for flexibility in mind. Time was allotted for getting to know the groups and their unique strengths, challenges, and priorities. By taking the time to build this understanding facilitators are better able to seek equitable solutions for each groups' priorities. This can mean that the leadership or parenting prototypes are implemented in different ways depending on the audience. More time, increased budgets for supports, specialized facilitators and resources are all considerations for equitable design.

The Child Centred Model is based on the work of leaders in the North End of Winnipeg. Using the model in conjunction with their work with families, organizations have seen tangible and meaningful successes for families. The application of this model is evident in the design and implementation of the Hub of Strength activities and will positively impact the sense of identity and belonging, understanding of roles and responsibilities, and connection to future generations.

8. What Did We Learn

Community leaders at all levels need support of various kinds and to different degrees. The Community Leadership manual is likely more appropriate for frontline and emerging leaders with less experience, while seasoned leaders could benefit from less formal sharing circles to connect with their peers and focus on self-care.

Caregivers at different points in their life journeys have different needs. The current traditional parenting manual is best suited to those caregivers that have made some progress in healing from any trauma; while those who are still struggling may benefit from a different kind of support. It may be beneficial to include a process to ensure participants are in learning groups with those who have similar needs.

Customization according to needs of group should always be prioritized over adherence to a training curriculum or program guide.

Making time and space and providing resources that support traditional Indigenous ways are responsive to the needs of the Point Douglas community, and has contributed to a share sense of **identity and belonging**.

Evaluation practices of service providers that **include and reflect the community they serve** provide meaningful feedback which in turn result in better programs and services.

Community leadership is not a hierarchy of progress, but an **interconnected and ongoing journey** of healing, learning and giving back.

Facilitators and service providers that acknowledge and **build on the strengths of the families** they serve are better able to build trust and respond meaningfully to the needs of the community, which results in better programs and outcomes for children and families.

9. Efforts Toward Scaling

The Project's partnership with the Indigenous Learning Circle (ILC) has been ongoing since the completion of the prototypes. The ILC has been receiving requests for facilitation and training support over the years, and even more so since the publication of the evaluation framework. The ILC has been exploring the possibility of developing a sustainable business model to respond to the demand. In September 2018, ILC received funding from Social Enterprise Manitoba to access a business planning coach and is aiming to complete the modules and have a comprehensive business plan by mid 2019.

Literature Review

The Hub of Strength proof of possibility seeks to cultivate and support community leadership at various levels: for individual caregivers, staff and leadership at community serving organizations, within larger systems; and through appropriate program evaluation. Leadership capacity is considered from an Indigenous spiritual, cultural perspective, which recognizes both the impact of colonization as well as the power and potential of traditional Indigenous culture to promote healing and develop leadership capacity.

The statistics that represent the ongoing impacts of colonization on upon Indigenous families are stark. The disparities and inequities are well documented in research and literature (Blackstock, 2009; Sinclair, 2004). In cities such as Winnipeg, Manitoba – with the largest urban Indigenous population in Canada – systemic and individual racism and inequity are entrenched. They exist in systems such as health care, education, social services, and policing for example (Baskin & Sinclair, 2015). These inequities result in higher incidences of disease, less access to healthy food, lower graduation rates at secondary and post-secondary levels, higher representation in the child welfare system, and less access to economic resources for stable and secure housing.

> The inequalities in social, economic, cultural, and political areas are not due to a trait or gene of Indigenous peoples, but are a result of ongoing governmental and systemic structures that continue to impede Indigenous peoples. (Adelson, 2005; Baskin & Sinclair, 2015; Hill, 2009)

> Present-day social disparities, such as higher rates of poverty, likely play a role in explaining the above; however, there is increasing recognition that the mental health issues facing Aboriginal populations are rooted in intergenerational trauma from the legacy of colonization. In combining with intersecting racism and sexism, the impact of intergenerational trauma on Aboriginal women is particularly severe. (Roy, 2014, p.8)

Kirmayer, Simpson & Cargo (2003) assert that a clearly evident history of cultural oppression and marginalization continues to contribute to poor mental health outcomes experienced in most Indigenous communities across Canada. Given the social origins, strategies require both social and political solutions. Mental health promotion that supports youth and community empowerment is hypothesized to have broad positive impact on mental health and wellbeing of Indigenous peoples.

Community leadership that encapsulates Indigenous values and practices, particularly in an urban context, has been identified as a foundational element for addressing Indigenous needs and priorities. Self-determination and governance are issues that continue to be fought for in order to meet the needs and priorities of Indigenous families living in the city (Baskin & Sinclair, 2015). In Winnipeg the rise in Indigenous run organizations has meant that programs have been better able to meet the needs of families based on worldviews and beliefs that have been more aligned with Indigenous health and wellness. This allows organizations to meet their needs based on Indigenous values and principles of practice. With more funding directed towards Indigenous organizations, is the increased need for frameworks and methods to evaluate outcomes and success based on the same worldviews and values upon which the programs are based.

Morelli & Mataira (2010) identify a considerable challenge for Indigenous organizations and evaluators: regulations about *who* can evaluate, *what* they must evaluate, and *how* they can evaluate. Performance goals must often be expressed as objective, quantifiable, and measurable - clearly leaning towards a Western understanding of knowledge and expression of meaningful experiences that does not align with Indigenous understandings. In addition, evaluators must demonstrate considerable training and experience in western scientific research methodology to be awarded the corresponding evaluation contracts. This provides a clear pathway, "Learn to conceptualize and operationalize indigenous practices within the context of western scientific measurement and chances for perceived legitimacy and financial support are increased" (Morelli & Mataira, 2010, p. 2). The need for Indigenous evaluation mechanisms has been identified frequently and building a local framework that could be adapted was a priority. Alongside the need to be able to evaluate based on the principles and values upon which programs are based is the complementary need to provide funding with the flexibility and acknowledgement of differing needs.

Studies in other populations and cultures have shown that the transmission of trauma from parents to their offspring occurs similarly to transmission of culture and language. The impact of this transmission has included vulnerability to posttraumatic stress disorder (PTSD) (Yehuda, Halligan & Grossman, 2001), general psychological distress (Kellerman, 2001a), difficulties in coping with stressful experiences (Baider et al., 2000), and poor attachment styles (Lyons-Ruth, Yellin, Melnick, & Atwood, 2005). "The generational interchange, specifically from parent to child, often termed intergenerational, multigenerational and transgenerational effects, like the immediate outcomes associated with a stressor, depend on a variety of psychosocial and socioeconomic factors," (Bombay et al, 2014, P. 15).

Early childhood researchers have found that a mother's unresolved trauma and experience of insecure attachment made them more likely to have babies who were

insecurely attached. Conversely mothers who were reorganizing towards secure attachment influenced the attachment of their babies, resulting in secure attachment (Iyengar, Martinez, Fonagy & Strathearn, 2014). Unresolved trauma may interfere with a mother's ability to sensitively respond, impacting attachment and potential intergenerational transmission of trauma (Sun & Chilton, 2017). The compounding of existing intergenerational trauma through altered parenting then impacts coping styles of subsequent children, increasing vulnerability to development of outcomes such as anxiety, depression, or PTSD (Bombay, Matheson, & Anisman, 2009) as well as psychological and physiological stress reactivity (Bombay et al, 2014). Intergenerational trauma

Given the impact of intergenerational trauma on the transmission of culture and language, researchers have begun to explore how strengthening these factors can work to counter the effects of trauma in families. Hill (2009) brings together key areas for action, highlighting Indigenous strategies to restore wellness for Indigenous peoples. In a report documenting the mental health and wellbeing of Indigenous children and youth several recommendations for action are made:
- Recognize the role that culture plays in determining health.
- Focus on implementing ecological, community level interventions.
- Promote local leadership and develop high quality training.
- Provide mentoring and support.
- Foster links between communities.
- Support on going capacity building

These actions are built on the principles of relationship building, personal and community development, and prevention. Based on her own research (Stewart, 2007) suggests that approaches to engage individuals and families in helping and healing must include traditional ways of learning. This includes storytelling, advise from Elders, interconnectedness with family and community, healing circles, and ceremony. Further, this action must occur with the involvement and leadership of local communities, Elders, and traditional knowledge keepers.

A culturally strategic approach to address health and wellness can include a focus on prevention over intervention, cultural care that include traditional practices, wholistic collective care, development of programming for the whole family, and capacity building, recruitment and retention of Indigenous health and social service providers (Warry, 2000). Above all these strategies must be well resourced with leaders trained to include traditional medicine, healing, and Indigenous knowledges in their work. Traditional medicine is defined by the World Health Organization (WHO)as the sum total of knowledge, skills, and practices based on the theories, beliefs, and experiences Indigenous to different cultures, whether explicable or not, used in the maintenance of health as well as in the prevention, diagnosis, improvement of treatment of physical and

mental illness. Healing work must be aligned with and based upon ongoing meaningful relationships with Elders, cultural leaders, and ceremonies and protocols that support personal development (Lane, Bopp, Bopp & Norris, 2002).

In a study with pregnant and parenting Indigenous people, it was found that participants desired health care that was "respectful, strength-based, client-directed, holistic, that permits healing and trust, is culturally appropriate, and that addresses the mind, body, and soul," (Smith, et al, p. E39). In a qualitative evaluation of an intervention that was delivered to by Lakota facilitators to Lakota parents on a Lakota reservation the curriculum was found to be effective due to the focus on historical trauma and a reconnection with traditional Lakota values and beliefs (Brave Heart, 1999).

In their seminal study on the role of culture in First Nation communities in British Columbia with lower rates of suicide, Chandler & Lalonde (1998) described the experience of cultural continuity. Markers for cultural continuity included: community involvement in land claims, evidence of self-government, existence of health and social services, and existence of cultural facilities. Broadening the explanation of cultural continuity, Kirmayer et al (2000) suggest that this indicates factors such as community participation, capacity, and engagement with traditional culture and Indigenous identity also play a factor in countering historical and ongoing experiences of trauma. Control over land, resources, governance, and redistribution of power hold the key to a healthy community (Kirmayer et al, 2000).

A participatory action research project based out of the University of Victoria states that healing circles, traditional foods, cultural ceremonies, drumming and dancing groups, and athletics are important aspects of culture that have a "powerful positive and transformative impact on the individuals who engage in these activities" (Riecken et al., 2006, p. 278), as cited in (McIvor, Napoleon & Dickie, 2009, p. 11)

Language and culture have been shown in other research to be protective factors in health. Protective factors are understood as conditions that build resilience and act as a buffer to other factors that act as risks and at times can prevent the impact of risk factors completely (Helping America's Youth, 2008; University of Wyoming, 2008). Land, traditional medicine, spirituality, traditional activities, and traditional foods have each been identified as protective factors through a variety of studies with Indigenous peoples in Canada and the United States (Garroutte et al, 2003; LaFromboise, Hoyt, Oliver & Whitbeck, 2006; Waldram, 2000; Waldram, Herring & Young, 2006; Wilson, 2003; Wolsko, Lardon, Hopkins & Ruppert, 2006; Wilson & Rosenburg, 2002). Participation in traditional activities also serve as protective factors against depression, substance abuse, and other health conditions (LaFromboise, Hoyt, Oliver & Whitbeck, 2006).

In the field of social work, it is critical that non-Indigenous organizations provide leadership to ensure that the colonial foundation of the profession does not continue to harm Indigenous peoples. It is time to take responsibility to work from an anti-colonial perspective and to ensure that more space is made for organizations being led by Indigenous peoples, with Indigenous peoples, for Indigenous peoples. Hart & Rowe (2014) have provided guidance on both individual and organizational responsibilities for helping professions:

1. Educating self about oppression in general and colonial oppression specifically;
2. Learning about the untaught First Nations history;
3. Developing critical reflexive skills, as well as critical analysis skills;
4. Honestly looking at one's unconscious participation and erroneously informed participation in the oppression;
5. Educating others on oppression through social action informal dialogues, and sharing of information;
6. Developing an understanding of First Nations Peoples, cultures, perspectives, and experiences;
7. Creating space for First Nations contributions and developments which requires encouragement, acceptance of differences, and concrete support;
8. Challenging the profession of its privilege, whether those privileges stem from the types of practices that are utilized, the theoretical perspectives that are taught and learned, or the values and belief system that is followed;
9. Supporting the continuing development of Indigenous social work practice, perspectives, and theories; and
10. Making space for Indigenous participation in all segments of the profession (p.36)

Privileging Indigenous voices in combination with funding increases and increased opportunity for self-governance ensures that the narrative of Indigenous peoples as problems becomes one centered from a strength-based perspective (Baskin & Sinclair, 2015). While space, funding, and self-governance is important, so too is having enough people to fill the leadership roles in communities and organizations. Elders, traditional knowledge keepers, and medicine people each have important roles in Indigenous leadership development. However, who is "qualified" to fill funded roles in organizations to train leaders does not match with an Indigenous perspective. Traditional knowledge keepers are revered and respected – however funders and policy makers often do not acknowledge this and organizations then are unable to pay them for services that are needed by the communities (Baskin & Sinclair, 2015).

Another challenge is that in the literature on capacity building the constructs that signify success are largely based on western values. For Indigenous people, building capacity

must come from a foundation that are congruent with Indigenous values and principles. In public health, there is a clear assertion for Indigenous peoples to define and develop health care services based on Indigenous frameworks and theories of change. This requires the development of leadership that have the skills and resources to advocate for this shift in their communities (Chino & DeBryun, 2006). Literature has identified the importance of participation, leadership, social supports, sense of community, access to resources and skills in developing in community development (Chino & DeBryun, 2006).

Building capacity and Indigenous leadership development is a shift in the power that has typically been in place in the training and education of health, social services, and community leaders. It requires a connection to traditional knowledges, modes of self-governance, and control over health and education systems, as outlined in the work of Chandler & Lalonde (1998).

For Indigenous peoples and organizations evaluation is not a field to take lightly. Similar to their history with research, evaluation of programs, policies, and organizations working with a target audience of Indigenous peoples has long left a gap while at times being extractive and predatorial to the experiences of Indigenous peoples (Smith, 1999). The need for evaluations that reflect the values and principles of Indigenous peoples and upon which increasingly the programs have been designed is critical. Research continues to show that in order to provide meaning and assist in success social services and health programs must include opportunities for connecting with traditional knowledge and ways of doing. However, guidelines for funding - which within themselves hold specific measure of success, reporting, and evaluation expectations do not align with the models upon which the programs are developed. The ways of working that could provide insight into successful outcomes are being lost due to this incongruence (Morelli & Mataira, 2010).

In the field of evaluation there has been recognition of a misalignment in general with relation to cultural groups other than those seen as mainstream dating back to the 1970s (Hurworth & Harvey, 2012). Terms such as cross-cultural awareness brought forward the recognition that evaluators were largely the "other" or cultural outsiders to groups with which the field work was being conducted. Even with this recognition they noted that this was a challenge to place into practice (Westwood & Brouse, 1993). Even while conversations about cross cultural awareness and evaluation practice were beginning to occur many Western trained evaluators remained unaware at the need to address issues being raised by Linda Tuhiwai Smith (1999). These issues include a long and challenging history of Indigenous peoples being objects of research whereby information was extracted for benefit of others.

In the late 1990s the idea of evaluations and evaluators who were culturally relevant called upon:

- Recognising and understanding the cultural dynamics of the situation
- Determining the commitment of the Indigenous community and its leaders to evaluation
- Ensuring that there is a common understanding of the different requirements from within the Indigenous community from those imposed externally (Barrados, 1999, p. 36).

In the early to mid-2000's a shift occurred to cultural competency, directed at non-Indigenous evaluators, with many challenges that remained. Evaluation was still being done *on* Indigenous peoples by non-Indigenous peoples was beginning to build within the field of evaluation - even though the voices of Indigenous peoples themselves had been stating this adamantly for decades. In Australia an Indigenous Community Capacity Building Roundtable (2000) developed eight principles to guide evaluations with Indigenous families and communities:

- encouraging partnerships between government and Indigenous people in program design and implementation
- identifying positive role models and successful approaches
- empowering Indigenous people through developing leadership and managerial competence
- targeting youth and children in regard to leadership development, esteem building, etc.
- building on the strengths, assets and capacities of Indigenous families and communities
- empowering Indigenous people to develop their own issues
- giving priority to initiative that encourage self-reliance and sustainability
- fostering projects that consider Indigenous culture and spirituality (Scougall 2008, p. 4).

With this assertion a movement to design evaluations that were more collaborative and participatory gained support. Participatory evaluation includes stakeholder and evaluator collaboration with the goal of an evaluation that provides useful information for the program in conjunction with providing opportunities for empowerment for the stakeholders (Grover, 2010; Patton, 2003). In order to work within this evaluation framework, it requires a high level of participation, community involvement, and trust between the evaluator and community. This can take a great deal of time and often is not reflected in organizational budgets.

Simultaneously in the early 2000s, Indigenous led evaluation practices were being discussed. During the AES International Conference in Auckland Russell Taylor gave a keynote, *An Indigenous Perspective on the Inter-Cultural Context*. Hurwoth & Harvey (2012) note that this is the first time that an Indigenous person spoke from centre stage about Indigenous evaluation. During the same event discussions also included the

development of a Kaupapa Māori evaluation framework, seminal work in the field of Indigenous evaluations.

Indigenous communities, organizations, and researchers advocating for the right to design and evaluate community grounded solutions for their own people is not new. The education of evaluators and the practice of evaluation as a discipline is beginning to make space, however there remains little expertise being utilized in institutions that train evaluators.

> Indigenous, culturally based, non-profit programs devote their limited resources to the delivery of services to under-served, low-income and special needs populations. Theirs is a constant battle to continue operating while persistently seeking financial support through either grant proposals, contributions, income development or other means. An equally critical need of these programs is dedicated infrastructure for program development and evaluation, without which best practices of these innovative community programs remain obscure and unsubstantiated (Morelli & Mataira, 2010, p. 1).

Another challenge is that most often grant evaluation requirements do not take the need for Indigenous evaluation frameworks, methods, and evaluators into account. Grover (2010) works to share learning about how Indigenous evaluators can implement culturally competent models in First Nations communities while ensuring that government grant evaluation requirements are met.

> Grant requirements through mainstream agencies provide both opportunities and challenges for indigenous communities. Evaluators can be equally challenged when required to implement certain evaluation strategies while trying to stay true to what experience has shown to be effective and meaningful evaluation approaches in indigenous communities (Grover, 2010, p. 34).

This leads to evaluations that do not meet the underlying needs of the program or the mechanisms through which change typically occurs based on these models:

> Their concern is with evaluation methods that do not adequately describe or make the case for indigenous programs' strengths, and as a result, do not justly evaluate outcomes. The frustration lies with standard evaluation findings that: 1) are limited by quantitatively focused results, 2) present a narrow view of the program's dynamics, the importance of relational processes and the context and meaning of culture-based practices; and 3) overlook the holistic connections between people, values-based practices and life-sustaining earth ('aina) which impact long-term outcomes, enduring value and sustaining well-being within communities (Morelli & Mataira, 2010, p. 2).

Meaningful community involvement in the design of Indigenous evaluation must occur at the beginning, must be fully supported with resources, and must be given the time and space to build capacity (Grover, 2010, Grover, Cram & Bowman, 2007; LaFrance, 2004). This follows the learning from the development of public health program in general:

> Public health programs have increasingly developed models that apply effective collaboration between researchers and community coalitions to change community norms around health and primary prevention programs (Smylie, Kaplan-Myrth, & McShane, 2008). Research findings suggest developing participatory and empowerment models that allow meaningful input from the community and involve community members in decision-making, planning, and needs assessment are most effective in getting community buy-in for primary prevention programs—an essential prerequisite for effective program implementation and successful outcomes (Grover, 2010, p. 36).

Indigenous program developers understand that establishing what works best for Indigenous families, communities, and organizations requires a commitment to program monitoring and meaningful data collection (Morelli & Mataira, 2010). An ongoing frustration is the push to fit values-based programming into predefined measures of success that are not congruent with Indigenous values and principles. Given the research that confirms the necessity of culturally based programming to counter the impacts of intergenerational trauma in families it is logical for the field of evaluation to provide strong frameworks based on these ways of working. This requires Indigenous evaluators to be trained in methods that are congruent with these frameworks and resources for these evaluations to be completed.

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