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Culturally Responsive Social Work Methods for use with Indigenous Peoples

Introduction

The legacy of social work with Indigenous people in the land currently called America mirrors that of the greater colonial project - violence, coercion, and cultural erasure. The profession of social work in America has a long history of participation in the greater project of settler colonialism - non-Indigenous social workers and policy makers attempted to apply middle class European values to Indigenous communities and people, on a background of total ignorance about the colonial forces and historical traumas that have shaped modern Indigenous worlds. This lack of cultural understanding was and is devastating to the Indigenous people and cultures impacted, allowing significant harm to be done to Indigenous people by social workers ostensibly trying to improve lives.

Starting in the late 1800s, Indigenous families were forced by social workers and others to send their children to distant boarding schools, where the children were systematically stripped of cultural signifiers such as hair, clothing, and language. Unwilling parents were sometimes threatened by social workers with the removal of benefits if they failed to send their children. Abuse and neglect were rampant, and mortality rates for Indigenous students were six and a half times higher than in the general population, due to a combination of malnutrition, overcrowding, poor sanitary conditions, and overwork. Another vector of state sanctioned violence has been the child welfare system, long used to undermine tribal sovereignty, erase tribal cultural knowledge, and to force assimilation of Indigenous people (Geary 2010). Ongoing generational trauma contributed to high levels of substance abuse, domestic violence, and attempted suicide amongst Indigenous people, and these factors combined with others to leave multiple generations of Indigenous people dramatically under resourced to raise children to be

healthy members of their tribal communities. Some social workers used coercive means such as threatening parents with termination of welfare payments to remove Indigenous children from their families. Approximately 12,000 Indigenous children were adopted out of their tribal nations between 1961 and 1975, contributing to enormous cultural loss and intergenerational trauma.

To respond to this devastation, the practice of social work with Indigenous people must evolve, and this evolution must be centered on methods for doing social work created by Indigenous people, for use with Indigenous people, which respond to the trauma of colonialism. How can non-Indigenous social workers build a helping practice that does not further the intergenerational trauma experienced by many Indigenous people? How can non-Indigenous social workers approach work with Indigenous clients using methods that center Indigenous ontology, epistemology, and spirituality? How can we continue to move towards strengths based approaches, with a particular focus on methods that center Indigenous models of health and wellbeing?

In this paper, I will survey a few of the answers to these questions. I'll describe the notion of Cultural Competence and what that means in the context of Indigenous people in the US. I'll survey various methods for doing social work that have been created by Indigenous people and models for social welfare that center Indigenous strengths and spirituality. I'll talk about some of the legal issues impacting Indigenous people involved with the child welfare system, the progress made in recent decades, and provide a Canadian example of response to that crisis. Lastly, I'll interrogate these methods through a critical lens, and reflect on the role of non-Indigenous social workers in this process.

Culturally Competent Social Work, Strengths Based Well-being Indicators

Increasingly, social workers are striving for ‘Cultural Competence’ - defined as the ability to integrate cultural knowledge and skills for a more culturally appropriate helping practice. As the profession of social work is rooted in European history and eurocentric values, social workers have historically situated middle class norms as non-optional standards for clients. In non-Indigenous professionals and policy makers, cultural knowledge outside of these norms was often lacking, causing significant harm. The idea of Cultural Competence directly responds to that legacy of harm by challenging professionals to decenter their own experiences and to learn from the clients they are working with to serve them in culturally appropriate and useful ways.

In “Indigenous People and the Social Work Profession: Defining Culturally Competent Services” (Weaver 1999), Weaver discusses best practices for working towards Cultural Competence. She lists three overall categories: Knowledge, Skills, and Values. Under Knowledge, she stresses that providers must be aware of the history of Indigenous life on this continent - treaties, sovereign status of various nations, federal Indian policy (both historical and current), the laws related to such and how those laws have fostered a climate of dependence. Also important are knowledge of Indigenous family structures, communication patterns, worldviews and belief systems, and identity systems. She suggests familiarity with the general concepts of oppression, colonialism (both historical and ongoing), and racism as it applies to Indigenous people. She stresses that providers must understand the loss that all Native people have experienced on some level.

Under Skills, Weaver stresses ‘containment skills’ - primarily those of active listening, of tolerating silence, and of decentering one’s own world view and the need to draw conclusions.

Attention to the post-traumatic stress disorders that many Indigenous people suffer from, as well as attention to the increased risk for suicide and alcohol dependency and the overall reasons driving these issues are important. Also crucial are a familiarity with tribal politics, Indigenous organizations, structures of reservations and of urban Indigenous communities. An ability to navigate Federal trust responsibilities and agencies such as the Indian Health Service and the Bureau of Indian Affairs will be useful. Finally, familiarity with the Indian Child Welfare act, how it applies to various groups, and the trauma historically experienced by Indigenous children is crucial.

For Values, Weaver suggests several things. Helper wellness is key - she suggests that a helping professional must be grounded in their own community and value system to be of any use to the Indigenous community. She feels strongly that respect, open mindedness, and a general willingness to decenter one's self are imperative to the process of striving for Cultural Competence. Also crucial is the struggle for social justice and active decolonization, for clients and for the greater Indigenous population.

The Relational Worldview Model and Strengths Based Well-being Indicators

One useful tool for working with Indigenous clients in a Cultural Competence framework is the Relational Worldview model (Rountree, 2016). In this model, a four quadrant circle represents four major forces or sets of factors that must come into balance for ideal mind/body health. The four quadrants are context, mind, body and spirit. Each of these quadrants represents a unique facet of an individual's health, and their interconnections and intersections must be considered when working with Indigenous people. The spiritual quadrant, for example, is

frequently ignored by non-Indigenous Social Workers. As Indigenous cultures traditionally include the spiritual as a key aspect of health, this is a crucial consideration. Balance between these four quadrants should be a goal. The four quadrants of the wheel in the Relational Worldview model reflect values commonly shared across Indigenous cultures.

The **Context** quadrant includes family, community, and the land. It also includes the larger socioeconomic and political climate, both historical and ongoing. Meaningful indicators for Context are healthy relationships, positive community relationships and contributions, connections with resources, kinship and family connections, and cultural knowledge and traditional practices.

The **Mind** quadrant encompasses the internal processes that orient the individual towards health and healing, and the mental and emotional capacity to thrive. Indicators for Mind are a sense of belonging and active participation. Ethnic pride (specifically language and cultural practices), and a cultural identity and sense of belonging to one's cultural group.

The **Body** quadrant encompasses the physical and economic building blocks that support well-being. Primary Indicators for Body are financial security, stability, and income, and access to healthcare. Finally, the **Spirit** quadrant encompasses spiritual forces and beliefs that promote well-being and are maintained through practice and ceremonies. The primary indicator here is spiritual practice, knowledge, and ceremony.

In "Strength-Based Well-Being Indicators for Indigenous Children and Families: A Literature Review of Indigenous Communities' Identified Well-Being Indicators" (Roundtree, 2016), Jennifer Roundtree describes well-being indicators as they are commonly used in social services to evaluate the physical, social and economic health of a family or child. However,

commonly used indicators of child and family well-being typically reflect western framework of illness and disease - the 'deficit' model, and fail to reflect Indigenous knowledge about health and well-being. The use of these methods are especially problematic in communities facing social inequities as a result of historical and ongoing colonization - as the settler state social welfare model does not always acknowledge that well-being is a product of these forces. When evaluating Indigenous people with these standard indicators, social workers are missing much of the greater picture.

Indigenous worldviews call for a description of health and well-being based on strength, reflecting the interconnectedness of child, family, and community with cultural and spiritual practices. When working with Indigenous people, well-being indicators that reflect these Indigenous perspectives could be used. The Relational Worldview model is an ideal framework for evaluating Indigenous well-being through the use of these indicators. It stresses a strengths based approach, focused on bringing an individual or system (family, community, organization) into balance.

The Indian Child Welfare Act, Culturally Centered Child Welfare

The Indian Child Welfare Act of 1978 (ICWA) was created in response to the excessive number of Indigenous children who were removed from their homes in the 1950s and 1960s. These children were typically adopted into non-Indigenous homes, losing their culture and extended tribal family in the process. The rash of removals were due to various factors, including poverty, substance abuse and child abuse - each factor a direct result of ongoing colonial violence. Social workers were rarely competent in Indigenous cultural practices, and lacked the

ability to accurately assess the child rearing skills of Indigenous families. Care for children by extended family members, considered culturally appropriate in many Indigenous groups, was viewed as abandonment. Social and economic conditions on tribal lands reflected the lack of economic opportunity created by a century of fostered dependence, and substance abuse was rampant due to historical trauma. Generations of children reared in boarding schools had grown up without learning what it meant to be in a healthy family, and as adults, often lacked parenting skills. Lastly, economic and religious motives favored adoption out of Indigenous groups, and into settler culture.

The Indian Child Welfare Act was created in an attempt to end these abuses and to provide a legal basis for preserving tribal membership for children who fall under the purview of the settler state social welfare system. ICWA covers foster care placements, terminations of parental rights, and adoption proceedings, and gives tribal governments jurisdiction over children who reside or who are domiciled within tribal land. In some cases, jurisdiction may be shared with state court systems. The provisions of ICWA first attempt to use 'Active Efforts' to keep Indigenous families together, and failing that, attempts to keep Indigenous children as members within any tribal nation, preferably their own.

While the Indian Child Welfare act improved the situation somewhat for Indigenous children and families, the situation is not dramatically different than it was pre-implementation. Indigenous children are still 3 times more likely to be removed from their homes than non-Indigenous children (Setting the Record Straight, 1). Social welfare generally remains under the control of the settler colonial state, and non-Indigenous social workers are still frequently unfamiliar with Indigenous culture and cultural norms. Poverty, substance abuse, and

generational trauma abound on tribal lands, and all of these lead to an increase in the factors that lead to child removal. While ICWA mandates ‘active efforts’ to keep Indigenous children in their homes, social welfare agencies are rarely empowered or funded enough to actually make this happen. ICWA only applies to registered tribal nations and the legally defined members of such, and as many tribes were disenfranchised under termination policies, many Indigenous people are not covered by it.

Implementation of ICWA is imperfect, as well. Social welfare agencies do not always train their workers, and overworked workers are not always able to follow all of the provisions of the law. Tribal nations do not always have the funding to pursue each ICWA eligible case and may cede authority solely on that basis. Supreme Court cases such as “In Re Adoption of Baby Boy L”, attempted to limit ICWA’s reach, and the ‘Existing Indian Family’ exception was created, limiting the reach of ICWA in some cases. Improvements have been proposed - in 2016, the Bureau of Indian Affairs released new, voluntary guidelines for implementing and interpreting ICWA regulations. These new guidelines are helpful, but they are unlikely to drastically change the outsize proportion of Indigenous children being removed from their homes and families.

Real change would take a significant improvement in the provisioning of social welfare in the American settler colonial state. A good starting place would be to return jurisdiction for social welfare to tribal nations (who are far better prepared to deliver these services in a culturally competent manner), and to ensure that each nation had the funding required to provide those services. Another start would be to implement legal improvements and culturally appropriate methods to address the historical trauma and disconnect from cultural parenting

knowledge caused by generations of children reared in abusive boarding schools and other forms of colonial violence. Addressing these issues would go a long way towards returning this aspect of tribal sovereignty to Indigenous people.

Weechi-it-te-win Family Services

Weechi-it-te-win Family Services (WFS) was established in 1987 in the Anishinaabe Nation to provide child protective services and family support based on ideas of cultural competency and Culturally Restorative Child Welfare practices. WFS strives to provide these services in ways that promote the preservation of Anishinaabe culture and identity, strengthen Anishinaabe families and communities and foster the growth and development of Anishinaabe children within Anishinaabe families and communities. This program was developed in response to the abuses of the '60s Scoop' and boarding school eras, as well as to the social work practices of those eras which lacked an understanding of Indigenous culture or historical trauma.

To this end, they have pioneered the Rainy Lake Community Care program, a culturally competent, Indigenous centered model of child welfare designed to preserve and to grow Indigenous culture and to protect Indigenous children. This model is centered around 6 principles: family focused, respectful, community oriented, community based, Native staffed, and community directed. Weechi-it-te-win Family Services focuses on Culturally Restorative Child Welfare - the idea that the Anishinaabe nation can be rebuilt and continually strengthened through the use of Cultural Attachment Theory, which seeks to preserve the Anishinaabe family while providing for child welfare and safety.

Weechi-it-te-win Family Services provides an example of an Indigenous nation providing necessary services with culturally appropriate tools and knowledge. As these methods speak to the history of collective trauma that so many Indigenous nations face, they represent a powerful method of returning tribal sovereignty to the process of child welfare.

Historical Trauma and Unresolved Grief, Return to the Sacred Path

In “The Historical Trauma Response Among Natives and Its Relationship with Substance Abuse: A Lakota Illustration” (Brave Heart, 2003), Maria Yellow Horse Brave Heart describes Historical Trauma Theory- the emotional and psychological wounding that accumulates over the lifespan and across generations after significantly traumatic group experiences. This theory expands on the limited diagnosis of PTSD, which fails to accurately describe the generational experience of Indigenous trauma related to colonial violence. The historical trauma response is the various psychological and physiological features caused by this trauma, as well as the physical embodiment of trauma. High mortality rates from substance abuse, alcoholism, homicide, and preventable health conditions all point to significant historical trauma related mental health needs in most tribal communities. These frequent deaths, along with general oppression and low socioeconomic expose the surviving community to extreme stress and repeated grieving. These traumas combine with historical and ongoing colonial violence to form a constellation of historical, intergenerational trauma and unresolved grief.

Historically, grief resolution in Lakota communities involved a ‘wiping of the tears’ ceremony. This ceremony (and others) was outlawed by the United States in 1881, preventing many Lakota from their traditional forms of mourning and resolution. This furthered Indigenous

loss and unresolved grief in these communities. One method for addressing the historical trauma of ongoing grief is the Historical Trauma and Unresolved Grief Intervention (HTUG). This model focuses on reducing the negative responses to historical trauma through intensive psychoeducational group experiences. HTUG groups are held in a traditional Indigenous setting, fostering a sense of safety and community. Participants are exposed to audiovisual materials to stimulate historically accurate traumatic memories in order to provide opportunities for cognitive integration of the trauma and cathartic working through required for healing. Traditional prayer and ceremony are incorporated throughout to increase connection to Indigenous values and culture.

In “The Return to the Sacred Path: Healing the Historical Trauma and Historical Unresolved Grief Response Among the Lakota Through a Psychoeducational Group Intervention” (Brave Heart, 2010), Brave Heart describes an HTUG group intervention method for use with the Lakota people. The Lakota face significant ongoing generational trauma, which is expressed as embodied trauma, leading to drastically increased rates of depression, suicide and attempted suicide, alcohol and drug dependence, and other negative health factors. Brave Heart’s interventional method starts with education about historical trauma experienced by the Lakota people, intended to elicit a grief response. Next, participants diagrammed a lifeline of their own traumatic experiences, which is then shared with other Lakota in traditional context in an attempt to provide cathartic relief. The intervention ended with the oinikage/inipi (Lakota purification) ceremony and a traditional Wiping of the Tears ceremony. The intent of this intervention was to provide decathexis of death and victim identities, along with cathexis to traditional Lakota

philosophy and values. It also aimed to facilitate the integration of Lakota identity through the incorporation of traditional Lakota culture, language, and ritual.

This intervention method was highly successful - post intervention, a majority of participants reported feeling more positive about both being Lakota and about themselves. Participants generally reported fewer feelings of shame, helplessness, guilt, and hopelessness. Participants also reported an increase in feelings of personal pride. Ideally, this method serves as a protective factor against ongoing historical trauma response by fostering reattachment to traditional Indigenous culture and spirituality. This method highlights the importance of collectively grieving historical trauma - while making it highly culturally specific. As Brave Heart notes, incorporating traditional Lakota spirituality was crucial to the method's success, and as such, attempts to adapt this method for use with other Indigenous groups should be undertaken only by members of those groups.

Conclusions

The story of European contact with the Indigenous people of this continent is comprised mainly of genocidal violence and cultural obliteration, and Indigenous people today are left to grapple with this legacy. The profession of social work was and is too frequently a vector for this violence and for the overall project of cultural erasure. Relocation and termination, boarding schools, forced sterilizations, child removal and adoption outside of tribal nations - social workers were often the ones tasked with carrying out these violent acts of cultural erasure. Though these actions were generally performed from a position of caring and well meaning on the part of the social workers involved, they occurred on the background of a near total

ignorance of Indigenous culture and values. This ignorance led to the positioning of European values as mandatory, serving to further the colonial project.

With approaching work with Indigenous people, we have to ask - is this method helpful, in a way that genuinely centers Indigenous people and their specific needs, in response to ongoing colonial genocide? Is social work in general the appropriate response in this situation? Is this method something that Indigenous people are asking for, and if not, what (if any) method would be more responsive to their stated needs? Does this method decenter Eurocentric values and worldviews, and the personal views of the worker? Does it challenge colonialism, capitalism, and/or the default assumption of legitimacy of the settler state? Can it be used to advance the project of decolonization? For social workers who want to approach their work through an anti-colonial lens, these questions must be of paramount importance. If the profession of social work wants to avoid the kinds of harm that it historically participated in, it needs to approach work with Indigenous people through a critical lens, aware of the history of Indigenous life on this continent. Each of the methods and legal improvements I have surveyed here begins to do this work, through the efforts of Indigenous scholars, social workers, politicians, and lawyers.

The methods that I have summarized here exist in conversation with history, and each of these methods specifically respond to the trauma subjected on Indigenous people. This trauma reflects the active violence done to Indigenous people in the course of taking this land for Europeans, the legal forms of violence involved in removing and restricting tribal sovereignty, the spiritual forms of violence involved in criminalizing Indigenous spirituality, and the various forms of economic violence inflicted through enforced capitalism. The legacy of these and other

traumas plays out in outsized rates of substance use, suicide and suicide attempts, gender violence, and high poverty rates. These traumas are just some of the current manifestations of colonial genocide, and professionals working with Indigenous people must have a clear analysis and understanding of this history.

Methods of social caring for use with Indigenous people must respond to this violent legacy, while centering the strengths and power of Indigenous cultures and modes of spirituality. Using anti-colonial social work methods in this way can be considered a direct response to modern social work and mental health care systems designed for use with European and European descended people. To do so, these methods must be trauma informed, and they must be historically aware, recognizing that while Indigenous people have seen their world nearly destroyed, they have survived, maintaining culture, language, and people - in the midst of 400 years of attempts to destroy them. Social work methods designed for use with Indigenous people must center a deep understanding of their cultural strength.

The work I have surveyed here is about survivance (Vizenor, 39) for Indigenous people, and it is about sovereignty for tribal nations. Each of these methods aims to help Indigenous people not just to survive in colonized North America, but to actively ground healing from generational trauma in the process of inheriting and transmitting their culture. These methods (and the many others like them) are merely a starting point - the active project of returning the work of social caring for Indigenous people to tribal nations is enormous. First, tribal nations need jurisdiction fully returned to them for crimes and legal/social welfare matters that occur on their lands, and they need the financial resources to make use of that jurisdiction. Next, social work and mental health care methods based in Indigenous culture and spirituality (with specific

knowledge of the history of Indigenous people on this continent) need to continue to be developed and expanded, and their practice and use must be led by Indigenous people and adopted by non-Indigenous. Lastly, the economic and social conditions that continue to oppress Indigenous people must be corrected by any means necessary.

These things are possible, and social workers have a role to play. By applying a decolonizing framework to the methods and practice of social caring, the state sponsored upheaval of Indigenous lifeways can continue to be undone, and the process of affirming and respecting the sovereignty of Indigenous nations can go on. With careful attention to generational trauma and Indigenous strengths, a centering of Indigenous knowledge, and a specific decentering of Eurocentric culture, the social work profession can be a tool for radical change.

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