

(Re)Stor(y)ing “Canadian” Histories:
Reproductive (In)Justice and Indigenous Women

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Dedication

For my daughters Nadia, Caitlin, and Rylee, and for your daughters, as well.

Abstract

This dissertation documents a doctoral study that employed Cree Knowledge, arts-based methodology, and poetic pedagogy in the form of poetic inquiry. This research engaged a Cree *Nisgaa* methodological framework that is framed by protocol, *Mamatowisin*, or engaging inner mindfulness, and reciprocity. The research question asks: *What do Indigenous women's stories reveal about public and customary practices, and policies and practices of forced sterilization?* This question was explored with twelve Indigenous women, from different First Nation communities and treaty areas across Ontario and Quebec, where sterilization was carried out in the absence of legislation. The women participated in semi-structured interviews, and in a sharing circle. Questions ranged from requesting participants to position themselves, to inviting them to share personal and ancestral stories. The shared stories included subjects such as reproductive racism, reproductive violence, and racisms experienced from health care professionals and institutions. My research indicates that intergenerational impacts and trauma from the legacy of Indian Residential Schools (IRS) continue to resonate harmfully in First Nation Communities. The women understood and agreed that their narratives and transcripts would be (re)stor(y)ed into provocative and impacting poetry using poetic inquiry. The researcher has included (re)stor(y)ed narratives and poems that chronicle her own experiences as both a daughter of Indian Residential School Survivors and a marginalized woman. From a Cree researcher's worldview, this research provided space for the dehumanizing narratives recounting reproductive violences to emerge and be heard. Key contributions of this research are practical and methodological. Practical applications include opportunities to transfer historical accuracies into school curricula. This offers both students and teachers opportunity to heal and engage in relationships that are based on ethical relationality. My pedagogical hope is that this research contributes to the ongoing collective conversation, forging a collective space where the methodology is grounded in respect, relevance, relationality and reciprocity.

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Wachiye

Words are like arrows that can be shot at the narratives of the colonial power. Word-arrows have transformative power and can help Indigenous people come home. They help to establish a new discursive space. Every time a story is told, every time one word of an Indigenous language is spoken, we are resisting the destruction of our collective memory. (McLeod, 2007, p. 67)

As peculiar as it sounds, I awoke at about three in the morning with two words swirling in my mind: forced sterilizations. I scribbled them down on the back of a receipt and went back to sleep. The next day I began reading and engaging in dialogue with those both close to me, and in the Academy. That is when I began to realize that the scope of forced or coerced sterilizations in Indigenous women is both appallingly enormous and disturbingly concealed.

I had been called by ancestors. Me.

Flagged

*My heart, flagged
For destruction
For pain
Destroyed*

*My name, flagged
For judgement
For ruin
Damnation*

*My body, flagged
For punishment
For blame
Desecrated*

*My voice, flagged
For subjugation
For conquest
Disenfranchised*

*My mind, flagged
For ambush
For subversion
Defaced
(Cheechoo, 2017)*

This is my call.

I am a Cree woman. My community is Long Lake #58 First Nation. I am daughter, mother, grandmother, sister, auntie, cousin, and niece. They are my relations, they hold my history, and are my memory anchors (Gadgil, Berkes, & Folke, 1993; and Mitchell, 2013). I am a synthesis of past, present and future. In turn, as McGuire (2010) asks, “how I understand my past and establishes what my contextual direction for the future will be” (p. 119). Being a Cree woman and daughter to parents who experienced the atrocities of the Indian Residential Schooling system and intergenerational abuse, my occupation of an academic space could be considered catalytic for other Indigenous women.

With regards to my positionality and reflexivity, I am therefore a Cree woman researching within the shadows and shades of violence. My role involves implicit self-scrutiny and a self-conscious awareness of the relationship between settler “others” and myself. In response, my research seeks to educate a Canadian public while creating a space for the long-missing historical and contemporary narratives belonging to objectified non-status, First Nation, Métis and Inuit (FNMI) women. My research

Agency

Shoved down

Apprehended

I experienced life

On society’s terms

Enforced.

Indigenous Woman

I swam beneath the surface

Of society

I spoke and my words

Evaporated.

seeks to understand how Indigenous women's health and safety are interconnected.

Throughout the thesis I am offering different modalities in which to read or be read. This thesis asks you to experience an inter-textuality as a reader, to read narratives, juxtaposed in a variety of ways. I am asking you to live *Mamatowisin* as a reader, or an inner mindfulness while reading along. Living *Mamatowisin*, for me, means that I remember to acknowledge the interconnectedness of my mind and spirit, to resonate in the relational goodness of the synergy of that interconnection. The (re)stor(y)ed narratives are meant to provoke you toward interrogating what you previously thought to be "true." Expect to be disrupted and to have to make choices that may be unsettling. Poetic métissages will appear throughout this thesis in order to perform the intergenerational racisms my community has experienced in Northern Ontario within a settler colonial health system. The (re)stor(y)ed transcripts or poems could be read on their own, or alongside a doctoral thesis text. They do offer a resounding dissonance of experiences. Or you could accept the invitation to engage in a journey through lived experiences with one participant at a

*I examined those around me
I spoke distinctly
But vacant eyes barely met mine
Eyes downcast, I stopped speaking
Muted.*

*Shuffling through existence
I swallowed discourse
Both society's and mine
My narrative left untold
Absent.*

*Watched my peers
Laugh off cruel pranks
Watched my father
Slog through life
Defeated.*

*Residential school
Devoured his self-esteem
Made him pay
For being himself
Oppressed.*

*Soundless, I noted
Despair and loss
Shadowing us, me
Wherever we went
Malignant.*

time. Their voices are crystal clear. And they should be heard. It is up to you. And so, before you move into reading any further, reader, I would like to provide a *Trigger Warning (TW)*. The Trigger Warning is critical, because the narratives shared by both the researcher and participants contain accounts of historical atrocities, violences, and traumas which may trigger psychological harms within you the reader. I have sought to incorporate protocols set out by the Ontario Federation of Indigenous Friendship Centres (OFIFC) into my research. By using the Utility, Self-voicing, Access, and Inter-relationality Research Framework (USAI), my work is trauma-informed, and in turn I hope “to facilitate the potential for relationships that recognize the impact and prevalence of historic trauma, move beyond the stigma of problematizing behavioural outcomes, and create strategies that are responsive to addressing underlying issues [...]” (p. 4).

And yet, such protocols might still not be enough. If you are Indigenous, and have been claimed by community, I would like to generate a space that “holds you up” and share good medicine with you through an image that is present throughout this thesis (Dr. Kelly, 2019). The image demonstrates a representation of my

*Until one day
I walked into a store
Heard a commotion
Firm, Female, Feminist
Voice.*

*I overheard Her
Defend Her right
To walk freely
That She was a paying customer
Censured.*

*Surprised, I heard my voice
Join hers
Righteous and resilient
Dissipating
Injustice.*

*Defiant, I strode
Into my life
Reclaimed what was mine
Advocated for the voiceless
Ally.*

*I lent my daughters
My backbone
And my shoulders
Made them strong
Women.*

ancestors who have been visiting me through dreams when writing has been most painful. The image celebrates a protected space. Grandmothers embrace me, hold me safe within a circle because I am holding space for difficult knowledges. My ancestors want you to know that we are safe there. And that you are welcome to the circle.



(Figure One: Grandmothers and Medicines)

This thesis format differs from western concepts of thesis organization. Titles have been (re)worded to reflect what the ensuing chapters contain, from a Cree point of view. This chapter is entitled “*Wachiye*” which is a Mushkego greeting. I am welcoming you, inviting you in. The next chapter, entitled “*Disruption, Silencing, and Erasure of Indigenous Women*” is a counter to a standard literature review, and

Society created monsters
Stereotypes reigned
I took my rightful place
Eyes clear and back straight
Valiant.

I stood
And I spoke
Shattered a fallacy
Me, I have agency
Emancipation.
(Cheechoo, 2017)

performs through a reclamation-of-self through an (em)body(ment) of literature. Themes explored are eugenics; connections between forced or coerced sterilization; marginalization and racism; global perspectives; Canada's sterilization policies; reconciliation as praxis; and, truth and reconciliation. The following section is "*Pimatisiwin*" which is my conceptual paradigm. Here, through an image I show the interconnectedness of "*Pimatisiwin*" or *life*, Indigenous worldview, kinship systems and relationality. The subsequent chapter, named "*Nisgaa Methodological Framework*" outlines my methodology. It is framed by protocol and includes a stylized image of a *Nisgaa* or goose. This section includes a piece of my poetry entitled "*First Flight*", which was crafted to transmit the creation of my *Nisgaa* methodology to the reader. This section also explores "*Pimatisiwin (or life) Through A/r/tography*" and includes an (em)body(ment) of "*Indigenous Métissage*" entitled "*Braid*" which showcases a weaving of three discrete voices who speak to experienced violences. Because my methodology is framed by Indigenous protocol, "*relationality, respect, relevance, and reciprocity*" are highlighted, explaining my positionality as an Iskwew and scholar

in this critical chapter. I have also explained how I have engaged “*poetry as pedagogy*” through arts-based methodology in the form of poetic inquiry. Here you will learn how the collected stories have been transformed and placed where they are throughout the thesis. And finally, in the closing chapter, I take “*My Turn in the Sharing Circle*.” I sit with you and talk through my experiences in this learning journey. I am storyteller. So I have shared what I have learned, what I hope to contribute to in terms of enacting Indigenous-Canadian relationships through (re)education, and the importance of relationship building. I share the synchronicity around the culmination of finishing my thesis on September 30th, an important date which is also recognized as “Orange Shirt Day”. In this chapter, I share how I sought to remain in a good space, surrounded by a network of family, friends, and colleagues who continue to be good medicine to me. I hope to hold up those who have been lost, lost to settler colonial policies such as Indian Residential Schools, through (inter)generational violence and harms, and through state-sanctioned genocide. And finally, in this final chapter, *I seek to hold up all of us that are still here.*

(Re)Membering Who is Missing

Before continuing, you should know that there are over 4000 missing and murdered Indigenous women in Canada (Radek, 2011). Indigenous women are often viewed through a sexualized lens, simultaneously seen as “Indian-Princess,” and/or “Sexually-Available-Squaw.” Our very existence appears to produce violence, violation, and even extermination. Here Downe (2006) reminds us, “the abuses experienced by Aboriginal girls over the past 130 years are not isolated occurrences; they are connected through a pervasive colonial ideology that sees these young women as exploitable and often dispensable” (p. 3). In turn, Leanne Simpson (2014) stresses,

white supremacy, rape culture, and the real and symbolic attack on gender and sexual identity and agency are very powerful tools of colonialism, settler colonialism, and capitalism, primarily because they work very efficiently to remove Indigenous peoples from our territories and to prevent reclamation of those territories through mobilization. (para. 9)

I Didn't Know How

*I have a medical story
I was in high school
I was seeing a dentist
Here in town*

*I wasn't
Paying attention
Or
It seemed routine*

*Check the teeth
Take X-Rays
Clean them
Fillings*

*Then I noticed
I was 16 I think
Yeah, I was 16.
That was the first time I ever noticed*

*But he had been doing that
For a little bit
Not the first couple of visits
It was the third, fourth visit he started it*

Pervasive colonial ideology (Downe, 2006) governs a deceptive entitlement to land and resources, and this is conflated with a predatory entitlement to Indigenous women's bodies.

In *The Sacred Hoop*, Gunn Allen (1986) revealed the connection between taking our land and destroying the value of women in our communities. Smith (2005) has also brought specific attention to how Indigenous women's bodies are targeted for colonial violence as a direct result of colonialism. As colonizers forcibly took the land from Indigenous Peoples, they simultaneously violently enacted sexual violence against them, "the project of colonial sexual violence establishes the ideology that Native bodies are inherently violable" (Smith, 2005, p. 12). Sexual violence was especially directed against Indigenous women. As Anderson's (2011) research makes clear, there are parallels between the settler's sense of entitlement to Indigenous land and, by extension, their sense of entitlement to Indigenous women's bodies.

The case involving accused murderer Bradley Barton and his victim Cindy Gladue has been in and out of the courts since 2011. Barton was acquitted of Gladue's death despite an eleven-centimetre wound found

*But I didn't pay attention
'Til that point.*

*Anyways, at that point
Is when I noticed it*

*He would lay his tools
That he would use
On my chest
On the bib they put on you*

*He would lay them there
And then he'd be working
And then I figured,
"Well, must be closer,"*

*'Cause he's alone
In the room too, right?
So I figure,
"he doesn't have an assistant... "*

*Well,
What got me that day
Was he would never touch the tools
He laid out on my chest*

*When he needed something
Or he was changing one of the tools
He would rub
His arm on my breast, slowly*

on the interior of her vagina. Barton continues to maintain his innocence, indicating that Gladue had consented to “rough sex.” During the trial, his lawyers argued that he had not realized that she had perished due to exsanguination during the night. The question of consent continues for Gladue. Gladue’s pelvic area had been violated further, cut from her body by a chief medical examiner prior to cremation, and without familial consent. Cindy Gladue body remains in a dehumanized state, while she and her body continue to be on display to courts/juries. Cindy’s mother, Donna McLeod continues to endure the endless heartache of her daughter’s death, and is still unable to bury her daughter. “I’ve never even put her to rest yet because they have part of her [...] a piece of her is missing, she’s not all there,” said McLeod, who has Gladue’s ashes in an urn at home (Morin, for APTN, 2017). Because Indigenous women’s bodies are intimately connected to the land, they continue to be targets by colonizers who seek to silence and erase their ties to the land, families, and culture as part of logics of settler colonialism. The relationships between Indigenous women’s bodies and land becomes apparent “[when] gender violence [is used] to remove Indigenous peoples and their descendants

*Reach for a tool
And then rub again
Coming up
And go to work*

*He changed tools often
And every time
He'd change a tool
That's what he was doing*

*After he was done that day
I went home
I was sitting there
I didn't tell my parents*

*I didn't know how
I felt embarrassed
Like, "This is a doctor, that's just a Native girl."
That's what I was already thinking by then*

*I didn't bother telling anybody
I stopped
I quit
After that one visit*

from the land, you remove agency [...] and reposition [...] “natural resources” for the use and betterment of white people” (Simpson, 2014, p. 4). Gladue is amongst the many Missing and Murdered Indigenous Women and Girls (MMIWG). The ongoing collective losses of Indigenous women are a reverberation and symptom of a relentless manifestation of settler colonialism and heteropatriarchy. Cindy Gladue was an Indigenous woman whose very existence maintained a bodily and ancestral connection to the land. *That connection vanished with her.*

An example of disruption, silencing and erasure of Indigenous women can be viewed through my epistemological lens of being a Cree woman who is always within an arm’s reach of violence. In 1994, a good friend travelled to Winnipeg to celebrate her “champagne birthday” (a champagne birthday occurs when one turns the age of their actual birthday). I saw her the day before she departed. Excited and happy for and with her, I did not think for a moment that I would never see her smiling eyes again. My friend’s body was found three months later, outside of Winnipeg, Manitoba. Erroneously stereotyped as a sex-working drug addict with no future, her slaying was blamed on her. The ensuing

When I Was 19

*We were living in Thunder Bay
I was attending the university
And I took my son to a dentist*

*It was tough to even find a dentist
Because we have a status card
But then we did find one*

*That was willing to take us
My son needed some work done
She did his first appointment*

*And she sent me to the front so that I could
pay
I went to the front and gave my status card
They apologized*

*Said that they don't take it
It was expensive and I just said,
"I can't pay for this."*

"I'm a student."

"I'm a young mom."

"Why can't I use my status card?"

Then they said,

"She doesn't think it's fair..."

"...that you guys can use a status card"

investigation into her death was as short-lived as her ancestral connection to the land.

In response to the demands for justice from families who have been disrupted by genocidal violence, and to address the many murdered and missing Indigenous women in Canada, an inquiry was called for by families and other survivors because “... [Indigenous] women find themselves at the heart of violent narratives that continue to sustain the North American colonial order” (Anderson, 2011, p. 173). The Government of Canada launched an independent national inquiry into these missing and murdered Indigenous women and girls in early 2016. The commission was tasked with examining the “practices, policies and institutions such [...] government policies/ practices or social/economic conditions ... commissioners have been mandated to examine the underlying historical, social, economic, institutional and cultural factors that contribute to the violence” (AANDC website, 2016). After much heartwork and heartache, the “Reclaiming Power and Place: The Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls” was released on June 3rd, 2019. It is both powerful and empowering in its calls to focus on rights

...and other people don't have one."

They called the dentist over there

The dentist looked at me

Made a comment

About how I was

Just another one of those moms

That don't care about their child's life

Would rather risk them

Than just pay some money

I just looked at her

And my mouth just dropped

And all I could do was walk out

I've dealt with small racism issues

But that was the first time

Where it was the professional right in my face

(Ikwe, 2019)

and relationships at every level—from the individual day-to-day encounters that feed violence and discrimination, to those larger institutional and systemic structures that need to change.

The *Final Report* is a culmination of heartwork by family members, witnesses, Elders, and Commissioners answering the 94 Calls to Action put forth by the Truth and Reconciliation Commission. The Final Report has also generated Calls to Justice and provides insight into the intersections and impacts of health, wellness and violence that First Nation, Métis, and Inuit women continue to experience. I want to make clear that though Indigenous women are inherently positioned to be a threat to settler colonialism (because our bodies create a counter-narrative to resource extraction/depletion and land possession (Anderson, 2011), we are not inherently vulnerable. Instead we are ***violently targeted!***

As Dr. Barry Lavallee explains,

Indigenous women are not vulnerable, Indigenous women are targeted in secular society for violence. There's a very big difference to [being] vulnerable. To be vulnerable in medicine means that

if I irradiate your body and you have
no cells, you are vulnerable to an
infection. But, to be vulnerable to
murder because of your colour, and
your positionality and just being
Indigenous is targeting. It is an
active form of oppression of
Indigenous women. (p. 125)

As explained by Lavallee and others,
targeted oppression takes many forms.
Research done by different organizations
and agencies over the years can formally
confirm that First Nation, Métis, and Inuit
(FNMI) Peoples receive poor care from
health care professionals.

The First Nations Information
Governance Centre (FNIGC) explains the
findings from its most recent First Nations
Regional Health Survey (2015–16),
indicating that “high rates of chronic health
conditions do not occur in isolation, rather
health inequalities are shaped by – and
rooted in – the inseparable relationship
between health and generations of racist
colonial policies” (p. 421, Final Report).
The report further explains that “the effects
of colonization have resulted in a legacy of
environmental dispossession, degradation of
the land, substandard living conditions,
inadequate access to health services, social

The Results Came Back

When you talk

About racism

In the healthcare system

And maltreatment

Our community

Is Anishinaabe speaking,

English speaking

And French as a third language

We already face

This challenge

This barrier

The minute we go

exclusion and a dislocation from community, language, land and culture” (p. 421, Final Report). It has been made clear that these policies link colonization with many adverse health consequences felt by Indigenous individuals and communities.

We are chronically underserved and underfunded, and have been for generations—and we know it. The Final Report confirms that “[...] access to health services remains a barrier to health and wellness. According to Health Canada [...] 39% of First Nations adults reported that they had less access to health services than the rest of the Canadian population” (p. 426). My own experiences with medical racism are aligned with the women who participated in my study. Our stories are similar in that racism is an underlying and common thread in our experiences. The first narrative that I would like to share with you demonstrates just how encapsulated First Nation Peoples, or in my case, women can be within different realms of medical racism. As a First Nation (Cree) woman who is a governmentally-identified Status Indian, I can access some health benefits from Canada's Non-Insured Health Benefits (NIHB) Program with my status card. The Non-Insured Health Benefits (NIHB) Program provides coverage for a specified

To a health center

Outside

Away

From the community

A hospital,

A doctor's office

Some attempt to speak English

And some do not

We have this real challenge

When women,

Babies, children

Anyone from our community

Goes out to access healthcare

Right now

In Quebec

There's a Commission of Inquiry

Going around

Speaking

To the nations

And communities

About how they've been treated

By the healthcare system,

By the police

By the courts.

range of medically necessary goods and services such as vision and dental care, mental health counselling, medical supplies and equipment, prescriptions and medical transportation. My experiences with trying to access goods and services through NIHB has often left me frustrated and feeling infantilized by health care professionals. It has also been my experience that as soon as a health care professional recognizes that I am a Status Indian, I either a) receive minimal respect, and poor care or, b) experience overkill, in that I am prescribed goods and services that I do not really require.

The following story reveals what can go wrong when a medical professional works from a racializing space and incurs patient harm. In 1993, about a year after I gave birth to my first child, I decided to visit a Thunder Bay dentist to ensure that my teeth were healthy. During the exam, I found out that I had numerous cavities—an unfortunate outcome from breastfeeding and calcium depletion. After consultation with NIHB (we are required to gain permission before receiving any care and/or treatment), and the ensuing consent, it was determined that I required fillings. Quite a few of them, actually. The dentist got to work and I went home after a few hours. I began

Because in Quebec

There's a lot of incidents

Aggression

Violence

Misuse of power

Abuse of power

A lot of stories

Are coming forward

Maybe our people

Are not getting served

Or waiting a long time

A lot of children being taken away

12 women

Came forward

To make a complaint

About the police

Non-Indigenous police officers

For the most part

About the abuse

They encountered

Like being placed in cars

While they're intoxicated

Or needing help

And driven out of the city

experiencing some odd sensations with my newly-restored teeth. One of them being pain. The other being that I could not floss properly. I revisited the dentist, but because I had used my allotment of dental funds for the year, I was not able to access any further care to resolve whatever was happening in my mouth.

Fast forward to July 2018. I had relocated to Kingston, Ontario for a year to participate in an exciting and prestigious opportunity as an Indigenous pre-doctoral fellow at Queen's University. During that busy time of transition, I chipped a tooth, so I made an appointment with a dentist in Kingston. I sat back in the chair and opened my mouth for x-rays and an examination. As the dentist stared at both the x-rays and my teeth, he became very quiet and apparently troubled. He stared at my x-rays for a long time before he began asking me questions. He wondered if I had trouble flossing in a certain area. He asked if there was sometimes pain there, as well. I was honest and told him that flossing felt impossible, but that I knew it was critical to good dental hygiene. I felt shame creeping in as he examined my teeth and continued to stare at me. He sat my chair up so that we could talk, and it was not until then that I realized what emotions the dentist was wearing. His

Dropped off

With no shoes

And no boots

Different scenarios

I think

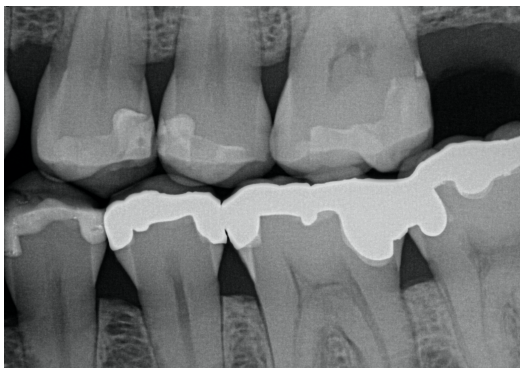
The results came back

Where no one is charged

Yeah

face was a mask of disbelief and compassion. Figure One (below) is an x-ray of the trouble(ing) area.

The bright-white spaces over three teeth are what had impacted the dentist. If you look closely you can see why I was unable to floss. The Thunder Bay dentist had deliberately fused those three teeth together. The Kingston dentist was appalled that another dentist c/w/ould knowingly provide such poor patient care. After a brief consultation, the Kingston dentist corrected the fused teeth, providing me the treatment I should have received long ago. (A side note: the dentist in Kingston was not the only professional who knew about the issues I was having with those teeth—I had seen plenty of Thunder Bay dentists over the years, seeking a resolution. The Kingston dentist was apparently the only one who would rely on ethical engagement and treatment.) Twenty-five years. That was



(Figure Two: X-Ray)

How Many Times Is That Happening?

*I had a mom who was working
On getting her teenage daughter
On birth control*

*She brought her to the doctor
Had the appointment
Got the prescription*

*They brought that prescription
To the pharmacy
It was not covered by Health Canada*

*It was a new birth control
That was not approved
By Health Canada*

*The pharmacist said
They'd have to pay for it
The mom didn't have the money*

*And she said,
"Can you give my child something else?"
They said, "Go back to your doctor."*

*If that happened once
How many times
Is that happening?*

how long it took for me to be seen as a human. Status Indians are lucrative. We can make medical professionals some pretty good money.

The second narrative I am sharing illustrates the breadth of Indigenous-body regulation and the superficial levels of medical “care” I was shown. This story emerges in a space of my navigation into womanhood without appropriate supports. As a young woman whose body developed early, I was often caught in terrible situations with zero assistance. I began to feel as though my body deceived me, that I had become a target for all things unsavoury. My esteem plummeted and I became despondent, until I became pregnant with my first child at eighteen. I realized that my body was a sanctuary. I held power to keep this new spirit within me protected. My agency began to sweep through all of my being, and I began to love my body in a way that created much-needed space for decolonization. Recognizing that the childhood I suffered through did not have to cycle again, I decided to become the parent I should have known. I nourished my body in ways I had never done previously. I spoke to myself with care, and fed myself nutritious foods, conscious that my wholistic health

B.O.L.O.

Colonial acronym

Authorities

Should

Be. On. The. Lookout.

Be On The Lookout

For my friends

Missing

Be On The Lookout

For my friend's

Murderer

Be On The Lookout

For my childhood

Innocence

Be On The Lookout

For consequence

Intergenerational trauma

Be On The Lookout

For my missing memories

And my perpetrators

Be On The Lookout

For my kids

Oppressors

was critical to the wee spirit developing within me. I nourished my mind with every book I could lay my hands on and was motivated by the uplifting narratives shared with me by other pregnant women. I practiced this positive body-love-autonomy throughout my pregnancy.

While in active labour, my hard-earned resiliency and autonomy vanished. My body ceased to be mine. My inherent *femaleness* was manipulated by several male doctors who took it upon themselves to invite male residents into my birthing room for research purposes. I was violated and had medical paraphernalia inserted into my body without my consent and despite repeated requests for them to stop. I was prodded, gawked at and had my most private parts on display despite my continuous requests for something to cover myself with. I was told that I was a “poor patient who had poor manners.” My body was puppeteer-ed so that men could learn how *not* to touch a woman—even though I identify as a woman. My glorious journey from oppression to emancipation had come full circle, and I was once again facing serious oppression.

Eight hours after my son was born, I checked myself out of the hospital, against medical advice. I was exhausted, sore, my

Be On The Lookout
For self-harm
Signals

Be On The Lookout
For my dad’s siblings
Indian Residential School

Be On The Lookout!
Be On The Lookout!
Be On The Lookout!
Be On The Lookout!

But that lens
That lens
Is distorted
And oh man, it’s white

When that lens
Swings my way
I become a kaleidoscope
Of every stereotype

Better Be On The Lookout

I’m manifesting
Ancestors
Brawling colonization
Together
(Cheechoo, 2019)

spirit was wounded. But, I could walk. And, so I did. I walked home with my baby in my arms. It was at home, while I was nursing my son that I felt my resiliency resurge. As I smiled into my son's dark, dark eyes, I comprehended that we would be fine despite my being reduced into a space of regulation. My body became unequivocally mine again when I began to practice reconciliation.

Genocide. When a settler colonial genocidal curriculum signposts genocide, the relentless colonization of land and resources becomes synonymous with assimilation tactics such as reproductive racisms and violences (including restrictive birth practices of Indigenous women). As Chrisjohn and Young (1997) point out, “the conceptual worldview that gave rise to the genocide of Aboriginal Peoples remains in place, unchallenged [...] unless this worldview is recognized, and the damage it has done [...] the long-term agenda of Indian Residential Schooling will succeed [...]” (p. 5). Genocide is a word fraught with tension. It encompasses the spaces where Indigenous women fight to exist. We are policed when we are carrying new ancestors, assumed to be somehow negligent with a predetermined compliance with stereotypes and stigmas dedicated to generations of Indigenous

This Is A True Story

I'm burdened

My shoulders feel heavy

But I'm walking

To Mackenzie/Rideau

I'm so deep inside my head

That I catch

Conversation

That isn't mine

And I don't understand

Or maybe I do

I'm afraid

Of what that voice is saying

It's resonating

Soaring

Sad

women. Yet, these violences that lead to our extermination is a manifestation of a settler colonial system that positions us in such a way that we are infantilized and perceived as incompetent. Incompetent and incapable of birthing our children in a good way when we have done it for a millennium. In my family, a well-known story and teaching acknowledges the many midwives who travelled from community to community to help women give birth. These stories provide a counterpoint to the cold, sterile and extractive spaces that Indigenous women are commonly placed in when they are in labour. It is not uncommon for women to be forced to disconnect and be disrupted from family and community in order to travel and give birth in a hospital miles and miles away from everything that is both familiar and ancestral.

It is also not unusual for Indigenous women to be under surveillance when they are in an urban hospital. Nurses, doctors and child protection services are complicit in the apprehension of Indigenous children. I make this statement from a space of substantiation and unswerving experience. As I have indicated previously, I am a kookum. With protocols being followed, and with explicit permission, my daughter has permitted me to share the following story with you.

Confused

“They TOOK me”

“PLEASE”

“I’m muddy and I’m freezing”

“They THREW me in THE RIVER”

And I looked up

From an ant-path

I was following

And saw

I saw her

Frantic eyes

Muddy, wet jeans

Trauma

And I stopped

Horried at her dehumanization

Horried by my own complicities

Because I lost her in the crowd

I’m choking

On indifference

Injustice drips from my pores

And I smell like sorrow

(Cheechoo, 2019)

My daughter gave birth to her child in 2011, and experienced severe complications which led to haemorrhaging close to half of her blood volume. This loss of blood coupled with the hours and hours of hard labour led to her being lethargic and unaware of her surroundings, and a requirement of staying in the hospital so that she could be monitored. Because I was working, I visited her mostly after work, bringing iron-rich foods, and sitting with my grandchild to help out as much as I could during the time she was healing. It was sheer providence that I took a day off from work and went in just before lunch to visit and help where I could. When I walked into my daughter's hospital room, I could hear her tired voice talking to someone. I walked further into the room and saw a settler woman standing over my exhausted daughter who was trying to focus her eyes in order to read a fistful of documents. She also had a pen in her hand. Alarmed, I stepped in between this woman and my daughter. Staring at the woman I asked who she was, but she declined to respond, and I turned to my daughter, requesting an explanation. My daughter explained that the woman was from Dilico, which is an Indigenous equivalent of child and family services based in Thunder Bay. I was shocked.

Why Am I So Different?

Okay.

So we went

And they checked me out.

They couldn't

Find anything wrong

It still bothered me

Why am I like this?

Why am I so different?

I used to get really sick

Like really painful

I used to throw up

Because the pain was so bad

Shocked! And furious. I became more furious as I listened to what my daughter was saying. This woman had offered my daughter a certificate for a free pizza if she agreed to sign off on some documents that defined permissions for Dilico to come in to do “home visits” throughout my grandchild’s life. *Through their entire life.* A free pizza in exchange for a lifetime of surveillance. I asked to see the documents but the woman refused to let me read them. I asked for her name and she refused to provide that. Sickened by these power dynamics, I told her to leave and never come back. Trying to follow up on this unwelcome visitor I began to dialogue with nurses who were in contact with my daughter, and I found out that a nurse had flagged my daughter for this visit. I asked why. I wanted to know just what it was that had “alerted” this nurse who took it upon herself to go ahead and bring in Dilico. And nothing. I received no answer. *But, let me tell you, that silence speaks volumes.*

As previously mentioned, the “Reclaiming Power and Place: The Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls” was released in 2019. One purpose is to disrupt “day-to-day encounters that feed violence and discrimination, to those larger

That's how bad it was.

*We did go to a specialist
And after further testing*

*They found
Part of a twin*

*In my uterus
Another girl*

*I suffered every month
I used to just hate it
(Lucille, 2019)*

institutional and systemic structures that need to change” (p. 64) like the perilous and predatory situation my daughter and he

Final Report and the *Calls for Justice* are an appeal for an end to the genocide that Indigenous Peoples here in a place that some call Canada and elsewhere continue to experience. The *Calls for Justice* document outlines a commitment to creating and holding space for an end to the complex monster that is genocide by “addressing the following four pathways: historical, multigenerational, and intergenerational trauma; social and economic marginalization; maintaining the status quo and institutional lack of will; and, ignoring the agency and expertise of Indigenous women, girls, and 2SLGBTQQIA people” (p.1, *Calls for Justice*). The *Final Report’s* resultant *Calls for Justice* provide a series of *Calls* specifically mandated to bring justice to Indigenous women and girls in a variety of ways. *Call for Justice 3.1* seeks to ensure that Indigenous women and girls have access to their rights to health and wellness, and is as follows, “We call upon all governments to ensure that the rights to health and wellness of Indigenous Peoples, and specifically of Indigenous women, girls... are recognized and protected on an

Intergenerational

grandmother
suffer *loss*
pain *endometriosis* *pain*
reproductive *racism*
granddaughter

equitable basis” (p. 9, Calls for Justice). *Call for Justice 7.6* seeks to ensure that institutions and health providers engage in ethical relationality by increasing their knowledgebase about Indigenous Peoples by building relationships. *Call for Justice 7.6* is as follow, “we call upon institutions and health service providers to ensure that all persons involved in the provision of health services to Indigenous Peoples receive ongoing training, education, and awareness” (p. 18, Calls for Justice). Focus areas include “the history of colonialism in the oppression and genocide of Inuit, Métis, and First Nations Peoples; anti-bias and anti-racism; local language and culture; and, local health and healing practices. (p. 18, Calls for Justice) Equally important is *Call for Justice 11.1* which asks educators and education authorities to increase partnerships with Indigenous Peoples to create curricula and programming through awareness that in a way that include historical and current “truths about the genocide against Indigenous Peoples through state laws, policies, and colonial practices” (p. 22, Calls for Justice). It is my hope that my work helps to respond to these important Calls for Justice.

As Indigenous women, we are conduits, connected to the land in an esoteric

way. A permanent loss of reproduction and reproduction rights directly impacts our capacity to inhabit or to disrupt attempts at land theft. As a teacher educator, I will continue to invite teacher candidates to expose these missing historical narratives across the Ontario school curriculum. In turn, as part of my commitments to reconciliation and Indigenizing the school curricula, I seek to co-create poetry which addresses these missing histories of survivors and the intergenerational and contemporary impacts of colonial violence on our Indigenous women's bodies. Because creative expression is a critical piece of sharing Indigenous knowledge, my goal is to contribute such knowledge via the modality of poetic inquiry and lyrical poetry. Here, as Smith, Ng-A-Fook, Spence, and Berry (2011) make clear, we can potentially enact change by "learning from the past in order to re-imagine our future Aboriginal-Canadian relationships while also taking up alter/native historical narratives [...]" (p. 66). Moreover, the TRC Final Report calls on us to "promote awareness and public education of Canadians about the IRS system and its impacts" is imperative (TRC: Indian Residential Schools Settlement Agreement, 2015, para. 5).

I Was 21

*I made a decision
To see my doctor
And ask for a tubal ligation*

*I based my decision
On the fact
That my mom had five children*

*We all had different fathers
I didn't want that for myself
It was all down the line*

*I told him what I wanted
And he said, "Okay, we'll schedule it."
No questions asked*

*I was 21
I didn't even go
For blood work*

*He just booked it
Right away
I got my notice of the date*

*I went to the hospital
I didn't tell too many people
Not even close friends*

This is where my research comes in.
By drawing on poetic inquiry and an
Indigenous conversational research
methodology, I address the existing and
missing histories of the dehumanizing state-
sponsored policy of forcing sterilization on
Indigenous women. This is my commitment
toward educational mandates of the *Truth
and Reconciliation Commission*, and the
Calls for Justice, which have emerged from
the *Final Report*. From a Cree scholar's lens
and perspective, I am arguing as Stote
(2012) a non-Indigenous scholar does
elsewhere,

For coercive sterilization to be
understood, not as an isolated
instance of abuse, but as one of many
policies employed to undermine
Aboriginal women, to separate
Aboriginal peoples from their lands
and resources, and to reduce the
numbers of those to whom the
federal government has obligations.
(p. 117)

Reproductive rights for Indigenous
women continue to be both controversial
and problematic. My research works to
respond to "the conflation on a symbolic
level of Canadian identity with settler access

*The morning of
I was on the table
Ready to be put to sleep*

*The anesthesiologist
Came
And talked to me*

*Tried to talk me off the table
He said,
"You're so young..."*

*Have you really thought this through?
Are you sure
You want to do this?"*

*I said, "Yes. Yes."
He said, "You know what?
You can walk away right now..."*

*... you can leave right now."
He was so upset
He was sincere*

*I had already made up my mind
Everything went fine
I didn't have any problems*

to Native women's bodies" (Anderson, 2011, p. 178). I am working to disrupt that access.

Settler colonialism remains omnipresent; seeking to invade, conquer, and claim people, time, and space. "It is," as Arvin et. al. (2013) reminds us, "a persistent social and political formation in which newcomers/colonizers/settlers come to a place, claim it as their own, and do whatever it takes to disappear the Indigenous peoples that are there" (p. 12). In response to such colonial omnipresence, I agree with Regan (2006) and contend that "[...] settlers must confront [their] own duplicity and hypocrisy ... denial and guilt about the past that is not really past, but continues to define our relationship with [I]ndigenous peoples today" (Regan, 2006, p. 3). Moreover, as Arvin, et al., (2013) confirm, "settler colonialism must be understood as a multi-fronted project of making the First Peoples of a place extinct; it is a relentless structure, not contained in a period of time" (p. 13). Our relationships with one another, especially as educators, require an ethically relational pedagogy that seeks to unmask settler colonial accounts of Canadian history. Here Tupper (2009) maintains that "if teachers are not engaging in a critique of the curriculum they are mandated to teach,

*It was a relief to me
That I wouldn't have to worry
About another life*

*That I wouldn't have
That responsibility
But looking back*

*I know
What the doctor did
Was unethical*

*I was too young to make this decision
He was just unethical
And did it
(Alice, 2019)*

but simply making choices about how to deliver content, realize objectives, and evaluate students, the reproduction of particular knowledge traditions continues” (p. 81).

Five years after the TRC put forth the 94 Calls to Action, Canada continues to fail in redressing the “problems inherent in state-dominated reconciliation forums for [I]ndigenous communities ... and fails to promote a necessary balance between restitution and reconciliation strategies” (Corntassel & Holder, 2008, p. 466). I am an instructor who teaches a foundational course on Indigenous histories and contemporary perspectives. I see teacher candidates grappling with learning the difficult truths within histories in a compressed timeframe, and this is a big piece of why I am doing what I am doing.

Although as educators and stakeholders in Canada’s educational sector continue to verbally support calls for creating ethical and relational spaces of reconciliation, we continue to fail for the most part in doing so. Critically engaging with alter/narratives instead of replicating “knowledge traditions” is, at least for Tupper (2009), a critical step toward the realization of transformative relationships within the storied narrative formation of

what we call Canada. This is my commitment toward educational mandates of the Truth and Reconciliation Commission, the Calls for Justice, and to all my relations. My research seeks to enact transformative Canadian-FNMI relationships that speak in turn to the educational and reconciliation processes of Indigenizing school curriculum (Smith et. al., 2011, p. 66).

Turning back to my research, I want to share that each part of my PhD program was guided by all my relations. Through a lot self-examination and spiritual guidance, I was able to create a personalized conceptual paradigm and methodological framework framed by protocol. Because my family has spent many years (dis)located because of colonialism, I had to intentionally (re)locate myself. I chose to (re)locate myself as an Iskwew and scholar within *Pimatisiwin*, my conceptual paradigm, and within *Nisgaa*, my Cree methodological framework. *Pimatisiwin* uses animal and land imagery to relay the importance of kinship systems. My *Nisgaa* methodological framework frames a good space where I engage protocol as an ethically responsible researcher and scholar, always attentive to the synergy of my inherent Cree worldviews and knowledges. Both ask that I engage in this heartwork in

an ethically relational way, and that I am continuously respectful and engaged in reciprocity. I did not rush forward. I took each step carefully, and with a lot of consideration and thought. As I was working through the proposal phase of my PhD, I was nervous and struck by the enormity of just what it was that I was asking Indigenous women to contribute. As I moved forward, and passed the ethics portion, I was compelled to wait until I felt propelled by my ancestors to move forward and collect stories in a good way. I only moved forward when I was provided a sign, whether through a dream, intuition or through synchronicity.

As an Iskwew who has experienced violence and trauma, and who also works every day to compartmentalize those wounded spaces (like many others), I knew that I had a momentous task ahead of me. I knew that I had a responsibility to signpost just how critical it is that present and future generations of Indigenous women experience a resurgence of Indigenous womanhood, and that we regenerate through agency and health sovereignty, which is our legacy. Taking a deep breath, I leaned into my relations and stepped into a space filled with generations of pain resulting from colonialism and invited twelve women

[from ages 20 to 75 years old] from different First Nations to share their stories of reproductive injustice and racialization. From these women I learned that intergenerational impacts and trauma from Indian Residential Schools (IRS) continue to resonate harmfully in First Nation Communities. I learned that medical racism continues to be violent, generational and ongoing. They have also indicated that reproductive racism continues and that there is a continued normalization of dehumanizing practices and policies targeting racialized and marginalized women. The womens' stories intertwined with each other, weaving a spider's web of interconnected themes such as isolation, embarrassment and shame.

I hold these twelve women up, and I remain incredibly grateful to each of these women who participated in my work by providing me with their stories, their time, and, their trust. Each selfless contribution makes space where a collective cacophony of accounts of reproductive racisms and injustices resonate, demanding to be heard. This thesis seeks to honour these twelve women.

The collected stories so graciously shared have been (re)stor(y)ed through a process of poetic inquiry. I used poetic

What The Hell's Wrong With You?

Racism in school

Yes

Dealt with that quite a bit

I just

Kinda

Looked at people

Said,

"What the hell's wrong with you?"

Kinda thing

Yeah

I used to be shy

And just let it happen.

I would never stand up to it

I was forewarned

That stuff was gonna happen

So that's something I already expected

My mom and my grandmother

They were in residential schools

(Dragonfly, 2019)

inquiry in my study because it informed the process of (re)storying and invited readers into “the research space” [Glesne, 1997, p. 356]. As Glesne explains

Poetic transcription creates a third voice that is neither the interviewee’s nor the researcher’s but is a combination of both ... This positions research poetics as an appropriate technique for [...] participatory research because it eases the divide (and hierarchy) between Researcher and researched. [...] [poetic inquiry] has also been identified as a particularly appropriate dissemination venue for marginalized populations, making its role in community-engaged and participatory methods all the more important. (p. 215)

By (re)centering voices of women who have experienced reproductive violence, racism and or injustices, it is my hope that I contribute to the destabilization of the violent, continued trope of Indigenous women and girls receiving harm and ill-treatment from health care professionals such as doctors, nurses and pharmacists based solely on their ancestry.

This dissertation will be shared with my community and other community partners, and it is my hope that women and girls will benefit from hearing narratives similar to theirs and recognize that they and their autonomous, ancestral bodies, deserve to be wholly respected. To do this, I will follow protocol and approach community-partners to ask permissions to engage a community-directed event. This event could include engaging women and girls from these communities through a poetry reading of the (re)stor(y)ed narratives because it is important to know that as decolonized Indigenous women [re]engage in regeneration, we challenge the logistics of settler colonialism. When we strengthen our bodies through the regeneration of our minds and spirits, we reconnect to the land and our ancestors

Again, I am asking you to engage *Mamatowisin*, or an inner mindfulness as you read along. Let yourself be moved to action.

Meegwetch

Disrupting, Silencing, and Erasing Indigenous Women

Reclaiming My Self and an (Em)Body(ment) of Literature

My review of literature encompasses the areas of eugenics, and forced or coerced sterilization of marginalized women, which includes First Nation, Métis, and Inuit women. The first area is the philosophy of eugenics, which is the manifestation of ‘inherent superiority’ that necessitates the dichotomy of preventing a so-called ‘inferior’ group from reproducing and therefore ceasing to exist (Ladd-Taylor, 1997; McLaren, 1990; Paul, 1995; Rafter, 1992; Reilly, 1991).

The second area is specific research regarding the forced or coerced sterilization of marginalized women both from around the globe, and First Nation, Métis and Inuit (FNMI) women residing in the nation state of Canada. The existing literature points to the higher likelihood of African American, Hispanic, and Indigenous women being victimized by state-sanctioned sterilization than their western (settler) counterparts who instead had to fight for the ability to have access to voluntary sterilization (Barker-Benfield, 1977; Carey, 1998; Cairney, 1996; Caulfield & Robertson, 1996; Grossboll, 1980; Littlewood, 1974; Ralston-Lewis, 2005).

These areas of literature helped me to conceptualize Canada’s alter/narrative regarding the racist mis/treatment of marginalized women, particularly FNMI women, first at a theoretical level as it has been historically documented in Canada, and second, how colonization continues to impact these missing histories. Racist ideologies work to deny humanity and blame marginalized peoples for their miserable living conditions, deflecting attention from oppressors. From my findings, existing literature calls for further analysis of the relationship between the philosophy of eugenics and connections with reproductive injustice, racism and FNMI women.

Eugenics

The term ‘eugenics’ was created in 1883 in Europe and it was meant to refer to “‘good breeding or being well born’” (McLaren, 1990; Paul, 1995). Social Darwinism, as an ideology, called for differentiated levels of civilization, from heathenness “savages” to the “more civilized” people from European cultures, thus perpetuating a colonialist trope that extends to the

belief that “wherever the European has trod, death seems to pursue the Aboriginal... The varieties of man seem to act on each other [...] the stronger always extirpating the weaker” (Darwin, 1989). This ideology is illustrated in the film *Rabbit Proof Fence* (2002), which is set in Western Australia.

Settlements were established to house apprehended children who were racialized and considered half-caste. These children were removed from their families and prepared for a new life in settler society. In the film, Chief Protector of Aborigines, AO Neville promotes and reinforces eugenic values.

Half-caste children have been gathered up and brought here to give them the benefit of everything our culture has to offer. For if we are to fit and train such children for the future, they cannot be left as they are, and in spite of himself, the native must be helped. (Rabbit Proof Fence, 2002)

The ideology involves governing the progress of humanity, thus guaranteeing that “proper” members of society could reproduce while “improper” members of society should not (Cairney, 1996; Caulfield & Robertson, 1996; Chapman, 1977; Christian, 1974; McLaren, 1990; Park & Radford, 1998). Building on the theme of “the survival of the fittest,” Spencer (1992) contends that disparities in class leads to differentiated but predisposed outcomes such as poverty or disease. At the turn of the 20th century, scientists in the Europe and North America dedicated their research to the field of human heredity, thus encouraging the advancement of the eugenics movement. A historical ideology amongst geneticists in the US and Canada was that a solitary gene controlled the majority of human traits, and no research was conducted as to how environment might instead affect behaviour or mannerisms (Goddard, 1921).

The settler colonial theory of a ‘solitary gene’ led to the educational inferences that persons who struggle with mental health issues are seen as being underprivileged, or that those who possess a criminal record are somehow socially and biologically inferior (Anton, 2003; Brown, 1935; Kline, 2001; Reilly, 1921). Social Darwinism consequently became a dehumanizing ideology, providing an economically feasible justification to govern and discern the ‘natural laws’ of humanity.

Much of the literature on eugenics takes place outside of Canada. And yet, the Canadian government became a major player when it came to systematically implementing a eugenic ideology to disenfranchise First Nations, Métis, and Inuit communities. In 1928, Alberta’s

Sexual Sterilization Act was passed, making Alberta the first province to adopt the policy. The Alberta Eugenics Board was comprised of four members: two medical practitioners nominated from the Senate of the University of Alberta and the Council of the College of Physicians, and two persons who were not medical practitioners, appointed by the Lieutenant Governor in Council. Between 1929 and 1972, the Eugenics Board was “presented with and passed 4,739 cases for sterilization, out of which 2,834 sterilization operations were performed” (Grekul, Krahn, & Odynak, 2004, p. 380). The Alberta Eugenics Board was reflective of the extensive recognition of eugenic theories during that time.

The philosophy of eugenics is tied up in science, as Grekul (2008) maintains, “... leading up to the passage of Alberta’s Sexual Sterilization Act “scientific” links between feeble-mindedness and social problems were being made by the experts” (p. 250). Governments (including the US government) enacted legislation sanctioning involuntary sterilization. Alberta and British Columbia were the only two provinces with this legislation in Canada, in 1929, yet British Columbia’s program appears to have been less aggressive than Alberta’s program. Grekul, Krahn, and Odynak (2004) have identified that evidence points to an overrepresentation of sterilized peoples based on biases and trends targeting marginalized groups such as Indigenous peoples, and youth. The next section draws on a eugenic lens to gaze upon the linkages between First Nation, Métis, and Inuit women, racism, and the act of forced or coerced sterilization.

Connecting Forced or Coerced Sterilization, Marginalization, and Racism

A Global Perspective

Research reveals that marginalized women across the world continue to experience reproductive violence/s and injustice/s. A commonality is that these fierce victim-survivors are in search of, and deserve, justice and redress. For example, according to the *Against Her Will: Forced and Coerced Sterilization of Women Worldwide* publication

Coerced sterilization occurs when financial or other incentives, misrepresentation, or intimidation tactics are used to persuade an individual to undergo [a tubal ligation].

Forced sterilization occurs when a person is sterilized without her knowledge or is not

given an opportunity to provide consent. Forced or coerced sterilization is a terrible phenomenon that marginalized women across the world have experienced, and continue to experience. (p. 2)

The United Nations Special Rapporteur on Violence against Women (1999) indicates that “Forced sterilization is a method of medical control of a woman’s fertility without the consent of a woman. Essentially involving the battery of a woman—violating her physical integrity and security, forced sterilization constitutes violence against women” (p. 4). Forced and coerced sterilizations can occur in different settings, but there are shared ideologies in place when this violence occurs. These shared ideologies are informed by heteronormative forms of settler colonial patriarchy, theology, racism and corruption. Such settler colonial beliefs implicate women who are from marginalized populations; hospitals or health care providers who have weak policies and procedures to protect patients; and, health care professionals are commonly not held responsible for these (un)ethical violations.

Elsewhere the creation and establishment of the “‘Czech Eugenics Society’ on May 2, 1915 marked the beginning of Czech scientific and social discourse on eugenics” (Smith, 2016). Turda and Weindling (2007) indicate

The Czech Eugenics Society provided a format for a program of eugenics, connected directly to Czech mental institutions, however World War I and the formation of Czechoslovakia in 1918 slowed the ideological spread...by 1923, after meeting with American eugenicists in New York, the Czechoslovak Institute of National Eugenics was established and, sterilization was openly discussed. (p. 186)

In its push to establish government sponsored forms of eugenics, Roma women were coercively or forcibly sterilized in the Czech Republic, Hungary, and Slovakia. Complaints by these women prompted an official inquiry into the history of forced sterilizations in the Czech Republic (Bricker, 2006; Denysenko, 2007; Otakar, 2005). Finally, in December 2005, the Czech Ombudsman investigated the reported cases and issued an extensive report, acknowledging “that illegal forced sterilizations were carried out with ‘improper motivation’ and recommend[ed] state compensation for victims” (Cahn, 2006). Groundbreaking Report by Czech Ombudsman Recognises “Problem” of Coercive Sterilisation and Calls for Far-Reaching Changes to Law, Policy and Society. According to Smith (2016), “human rights organizations, such as the Czech Helsinki Committee, continue to document cases, maintain a victim’s database, and work with

experts and policy advisers to draft legislation and secure victim compensation” (Smith, 2016). An awful truth is that such historical and contemporary policies of forced sterilization continues to be an open secret. Roma women are still awaiting official apologies.

The Constitution of Kenya [CoK] (2010), states that “every person has the right to the highest attainable standard of health, which includes the right to health care services, including reproductive health care” (Article 43. 1(a)). Similarly, Article 29 (d) states that, “every person has a right [...] not to be subjected to torture in any manner, whether physical or psychological” (Constitution of Kenya. (2019). Kenya Law Reform Commission. Retrieved from <http://www.klrc.go.ke/>). Yet, as Faith Kasiva (2012) makes clear in *Robbed of Choice: Forced and Coerced Sterilization Experiences of Women Living with HIV in Kenya*, countless women have experienced reproductive injustices, including forced or coerced sterilization. Drawing on the testimonies of survivors, she recounts:

Leaders of multiple community-based, women-led organizations in Nairobi, Kisumu and Kakamega reported that numerous members of their [Women Living with HIV] WLHIV psycho-social support groups had recently told group facilitators that they had been forced or coerced to accept unwanted sterilization procedures [...] despite the women’s consistent reporting of forced or coerced sterilization procedures to facilitators during community support group meetings for over two years, there had been no formal inquiry to attempt to determine the prevalence of forced and coerced sterilization of WLHIV in Kenya or to examine the circumstances under which it occurs. (p. viii)

Kasiva’s study has shown that “healthcare providers, both doctors and nurses in some health facilities are violating the reproductive rights of [Women Living with HIV] WLHIV by coercing or forcing them to accept unwanted surgical sterilization procedures” (p. 30). According to the publication *Failure to Deliver*, a Sunday Nation (1985) news article describes a doctor stating “that some of the women who had been sterilized after delivering [...] had returned to the hospital inquiring when they could expect their next child [...] according to the doctor, the women had never been informed that the procedure was irreversible” (p. 21). Testimonies from impacted women indicate that they are well aware of the impacts of lost generations through this form of genocide.

It is significant to note that Kenya has established “various policies, frameworks, guidelines, and action plans in relation to reproductive health and rights” (p. 85). The successful

implementation of these policies, frameworks, guidelines, and action plans remains a significant problem. Without implementation, justice remains distant, seemingly inaccessible.

For more than 20 years, thousands of Peruvian women have been seeking justice, alleging they were sterilized without consent in the 1990s under an aggressive population control campaign carried out by the government of former authoritarian president Alberto Fujimori (1990-2000) (Kovarik, 2019; Stucchi-Portocarrero, 2018; Turda & Gillette, 2014). Though estimates vary, “Peru’s Health Ministry estimates that over 200,000 Indigenous women in Peru were sterilized against their will between 1995 and 2001 as part of then-president Alberto Fujimori’s National Program for Reproductive Health and Family Planning (PNSRPF)” (Kovarik, 2019, p. 217). In 2000, because Fujimori was facing corruption scandals, he fled the country. The immense numbers of narratives from women who had been impacted by forced sterilizations were absent in Peru’s 2001 Truth and Reconciliation Commission (CVR) due to such corruption.

The injustice is similar to that experienced by other marginalized women who are Indigenous. “These women’s bodies and stories,” as Kovarik (2019) stresses, “have been used as political tools” (p. 222). It was not until November 2018 that “the women’s lawyers refiled charges, reopening the case and giving thousands of victim-survivors and activists in Peru renewed hope for justice” (Kovarik, 2019, p. 217). For Kovarik (2019)

Collecting new testimonies to add to the Ministry of Justice’s national registry—as well as providing state-sponsored medical care and legal counsel to these women and their families—is a key and unprecedented way that the Peruvian government is supporting these victim-survivors. (p. 217)

Although the Peru’s Health Ministry issued a public apology following the publication of a report that revealed that the ministry oversaw a forced sterilization program, impacted women still seek justice. The government has taken measures to support the victim-survivors. For example activists held an unprecedented three-day congress in which victim-survivors from all over the country flew to Lima to meet with various government officials [...] it was the first time they were able to freely share their concerns and demands with Ministry of Justice and Ministry of Health officials. (Kovarik, 2019, p. 222)

It is my sincere hope that women who have experienced the trauma of reproductive injustices see justice in their lifetime.

In the United States, medical superintendents, legislators, and social reformers worked together to authorize policies surrounding forced or coerced sterilization. This legislation was motivated by viewpoints that theorized a [false] legacy of traits such as criminality, feeble-mindedness, and sexual deviance. For example, Alexandra Stern, author of *Eugenic Nation: Faults and Frontiers of Better Breeding in Modern America*, indicates that between the years of 1907 and 1937, 32 states passed legislation regarding sterilization, with surgeries reaching peak numbers in the late 1930's and early 1940's (Dorr, 2011; Kluchin, 2009; Reilly, 1987; Sharp, 1907; Stern, 2016). It was not until the 1970's that state legislatures began to repeal these laws, finding them discriminatory, especially towards people with disabilities.

Stern (2016) further indicates that despite these laws being repealed, "between 2006 and 2010, 146 female inmates in two of California's women's prisons received tubal ligations that ran afoul of these criteria; at least three dozen of these unauthorized procedures directly violated the state's own informed consent process. These dehumanizing offenses were brought to light and a "bill banning sterilization in California state prisons" finally came to fruition (Stern, 2016, para. 16). Research indicates that a few states (North Carolina, Virginia, California) implicated in these horrendous acts against women have made attempts at restitution, which includes task forces, apologies and monetary reparations.

In the late-twentieth-century Native American leaders initiated record keeping within the United States to document sterilization legislation and its inherent impact upon Native American women. Ralstin-Lewis (2005) suggests that from estimates made by Indian researchers that, "from the early to mid-1960s up to 1976, between 3,400 and 70,000 Native American women were sterilized" (p. 71). Eventual increased public awareness regarding the sterilization of Native American women resulted in the U.S. Government Accounting Office conducting an inquiry into sterilization practices of the Indian Health Service. The initiation of this Native American leaders-based inquiry in the United States prompted a flipping of the lens, generating awareness of Canada's own state-sanctioned sterilization policies.

This review of global perspectives signposts a culmination of violence and atrocities that women across the world have endured and continue to endure. The violent disruption of women as creators of *pimatisiwin* or life was patterned throughout all of the readings I have done. Campaigns and policies such as forced or coerced sterilizations, policed contraception, and intimidation tactics have impacted countless untold and (now) missing generations. As evidenced

by both historical and present-day testimonies, women's bodies continue to be pushed into a space of regulated injustices with aid from policies informed by settler colonial patriarchy, theology, racism and corruption. Violence such as reproductive injustice recognizes no border, and the ideologies of eugenics and sanitization are well-travelled. Canada has implemented its own state-sponsored policies geared towards achieving a political and economic agenda, which is explained in the following section.

Flipping the Lens: Canada's Sterilization Policies

In Canada, the policy of sterilization has received some reaction, and efforts have been made in the last 70 years to document its existence. It is striking to note that although First Nation, Métis, and Inuit Peoples comprise a small percentage of Canada's population, there is an apparent overrepresentation of First Nation, Métis, and Inuit Peoples who have experienced reproductive injustices between 1929 and 1972 (Grekul, Krahn, & Odynak, 2004, p. 375). At the time, the Alberta Eugenics Board's administration of state-sanctioned sterilization was engaged to justify the colonialist policies imposed on Indigenous women because sterilization seemed to offer an easy, permanent medical solution to 'complex social problems' (Popenoe & Johnson, 1922; Goddard, 1921; Kevles, 1985). Despite the documented veracity that Indigenous Peoples experience poor health and poverty as a direct result of colonial policy, these social indicators instead were symptomatic of an inferior, racialized classification that was a measured approach to dehumanization.

With information taken from a 1936 census, Grekul et al. estimated that while Western and Eastern European patients were less likely to receive such diagnoses, 77 % of Indigenous patients presented to the Eugenics Board were given a diagnosis of being "mentally defective" (Grekul, Krahn, & Odynak, 2004, p. 375). Grekul also argues that when patients received a classification of being mentally defective (according to the Board's own criteria) the patient had no agency as to whether they would be sterilized (Grekul, Krahn, & Odynak, 2004, p. 375).

In 2012 Karen Stote published a dissertation that "provide[s] a historical and materialist critique of coercive sterilization and elucidate the political implications of this practice for Aboriginal women and their peoples" (p. ii). Conducting archival research, she came to the conclusion that

Aboriginal women have been subject to coercive policies in an attempt to control their reproduction through the provision of abusive abortion services, the indiscriminate prescription of birth control, and recommendations for involuntary sterilization. (Stote, 2012, p. ii)

Untold generations have been lost because of invasive efforts made to regulate and control Indigenous women's bodies. So many of us have been sanitized, one way or another.

Sanctioned sterilization policies fulfill[ed] a political and economic agenda for Canada from 1928 to 1972 (Stote, 2012). The policies and "legislation mandating compulsory sterilization was formally enacted in both Alberta and British Columbia" (Stote, 2012, p. 116), undercut Indigenous women's sovereign rights and loosened or severed ties to land and resources. Jan Carew (1988) writes, "racism begins with the need of one people to exploit another and the development of an ideology to justify this exploitation" (p. 16). Connection to the land and resource exploitation becomes an inevitable truth when ancestral ties are severed through state-sanctioned colonialist and assimilationist policies. Here Stote (2012) contends that from 1928 to 1972

Aboriginal women were disproportionately targeted and the number of those sterilized increased as the years passed [...] Aboriginals were overrepresented among presented cases and among those diagnosed as 'mentally defective.' Thus they seldom had a chance to say 'no' to being sterilized. (p. 120)

First Nation, Metis and Inuit (FNMI) women are continually regarded through a sexualized lens, simultaneously seen as Indian-Princess, and Sexually-Available-Squaw. Acoose-Miswonigeesikokwe (2016) confirms that the numbers of murdered and missing Indigenous women in Canada are a "disturbing reminder of connections between easy squaw/whore stereotypes and dangerous cultural attitudes that condone violence and murder" (p. 35). Acoose-Miswonigeesikokwe cites Angelika Maeser-Lemieux's (1987) essay, where Maeser-Lemieux speaks to stereotypes such as the "Indian Queen [that] was presented as a symbol of the Americas which ... became divided into the figures of Princess or Squaw" (p. 34).

Reinforcing this racist nation state ideology, in 1883 or more than a century ago, a Member of Parliament, Edward Blake, emphasized an importance of targeting and dehumanizing FNMI women when he stated

If [we] leave the young Indian girl who is to mature into a squaw to have the uncivilized habits of the tribe [...] you will[...] have to civilize the intended wives[...] I have known[...] how difficult it is to eradicate that hereditary t[r]ait. (Canada 1883:1377)

Depicting Indigenous women as inferior or unfit accomplishes the continued success of assimilationist and genocidal tactics by teaching FNMI women how to comply with Eurocentric conformity. The United Nations recognizes that the prevention of births in a targeted group as a form of genocide, which is a by-product of conquest and colonization (Office of the UN Special Adviser on the Prevention of Genocide (OSAPG) Analysis Framework). According to the Canadian Provincial Health Officer's Annual Report "... 2,800 people were sterilized between 1929 and 1972 under the authority of the province's Sexual Sterilization Act ... most noticeably over represented were Aboriginals" (p. 5). This sterilization movement was systematically calculated to reduce Canada's Indigenous population and in turn should be considered genocide.

According to Stote (2012), "...for colonization to be successful, it has been central to impose western institutions and to subjugate Aboriginal women through their separation from the land, the control of their bodies and those of their children" (p. 117). And Downe (2006) affirms that, "the abuses experienced by Aboriginal girls over the past 130 years are not isolated occurrences; they are connected through a pervasive colonial ideology that sees these young women as exploitable and often dispensable" (p. 3). In turn, Acoose-Miswonigeesikokwe (2016) indicates that "Indigenous women's freedom to exercise control over their bodies and relations with others was almost completely eradicated" which was entirely due to relentless violence/s of colonialism (p. 37).

Our very existence as Indigenous women and girls produces unrelenting violence, violation, and extermination (Acoose, 1995; Anderson, 2011; Anderson, 2011; Anderson, 2010). Here Leanne Simpson (2014) reminds us:

White supremacy, rape culture, and the real and symbolic attack on gender and sexual identity and agency are [...] tools of colonialism, settler colonialism, and capitalism [...] because they work [...] efficiently to remove Indigenous peoples from [...] territories and [...] prevent reclamation of those territories. (para. 9)

White supremacy is insidious, and present. It lives and flourishes in Thunder Bay, Ontario which is where I grew up. Generations of Indigenous Peoples continue to be impacted by violence transmitted through hate. We have been saying for years that systemic racism skulks throughout

most structures in Thunder Bay, that bigotry is alive, flourishing. The following story illustrates one of many familiarities with such bigotry. My brother is an unfortunate recipient of a “starlight tour”. A starlight tour involves police officers stopping you on the street, and deciding to apprehend you. My brother was walking home in the late Fall and was apprehended. He was guilty of nothing, beyond being brown. At home, we were worried, waiting for him to arrive, but it was not until the next day that he appeared. He was frazzled, shivering, furious. He relayed his story, of walking home, of being stopped and then apprehended. Of being dropped off on some train tracks near the outskirts of Thunder Bay. Of having to walk home in the dark, in the cold. This story is not one that is contained to my family. I have other family members who report similar mistreatment from Thunder Bay’s “authority figures.” I have extended kin and friends, and friends of friends who report similar harms from Thunder Bay Police. The commonality is injustice. You cannot make this stuff up. Circumstances are so bad in Thunder Bay that in 2018, The Office of the Independent Police Review Director (OIPRD) released a systemic review report on the relationship between the Thunder Bay Police Service (TBPS) and Indigenous communities. The report addresses systemic racism, implicating Thunder Bay Police Services, finding that systemic racism exists at an institutional level. Authority figures, police officers, who have the duty of providing impartiality, watchfulness, and justice are also the offenders. The people we depend on to protect us are our perpetrators.

Comparable institutional and systemic racism can be seen embedded in historical ideologies through the policies enacted in Alberta. The Alberta Eugenics Board regularly scrutinized women’s familial history and looked for “sexual misbehavior, alcoholism, poor performance in school, unemployment status, distant relatives’ escapades” in the 1930s (Grekul, 2008, p. 257), and whatever else could provide substantiation for sterilization (Kelm, 1998; Lux, 2001).

The Indian Residential Schooling state sponsored system produced a perfect storm of dysfunction and intergenerational trauma, creating a wounded space for the Eugenics Board to conflate Indigenous women’s bodies with the colonially constructed indicators of social sickness (TRC, 2015). Existing research illustrates that reproductive rights for First Nation, Métis and Inuit women remain controversial or problematic because “their ability to reproduce continues to stand in the way of the continuing conquest of Native lands, endangering the continued success of colonization” (Smith, 2005, p. 79). Despite the racialized lens that showcases First Nation,

Métis and Inuit women as depraved or immoral, and thus in need of having their reproductive systems and rights policed or sabotaged, it is thought-provoking that correlations *were not made* between the Indian Residential Schooling system, the fallout from these experiences and being (re)marginalized and (re)targeted (Anton, 2003; August, 2004; Barker-Benfield, 1977; Black, 2003; Caulfield & Robertson, 1996; Davis, 2007).

Despite focused lenses of reconciliation such as the United Nations Declaration on the Rights of Indigenous People (UNDRIP), the Royal Commission on Aboriginal Peoples (RCAP), the Truth and Reconciliation Commission of Canada (TRC), and the 94 Calls to Action, contemporary literature indicates that First Nation, Métis and Inuit women are still being negatively targeted as creators of *pimatisiwin*, or life. The United Nations Declaration on the Rights of Indigenous People (UNDRIP) specifies our inherent rights to a well-being that encompasses us holistically. Article 21.1 of the UNDRIP (2008) indicates that “Indigenous peoples have the right, without discrimination, to the improvement of their economic and social conditions, including, inter alia, in the areas of education, employment, vocational training and retraining, housing, sanitation, health and social security” (p. 9). In addition, Article 24 states that:

1. Indigenous peoples have the right to their traditional medicines and to maintain their health practices, including the conservation of their vital medicinal plants, animals and minerals. Indigenous individuals also have the right to access, without any discrimination, to all social and health services.
2. Indigenous individuals have an equal right to the enjoyment of the highest attainable standard of physical and mental health. States shall take the necessary steps with a view to achieving progressively the full realization of this right.

In response, my research is situated in a way that unmasking assimilationist policies upheld and maintained by the Canadian government, and by building on existing scholarship, offers linkages between colonialism, the continued oppression of FNMI women, and their missing histories. Moreover, recent research indicates that as of December 2018, over one hundred Indigenous women in Saskatchewan have come forward with complaints of forced or coerced sterilization. The most recent case occurred in 2017 (Kirkup, 2018).

A class-action suit has been launched against involved physicians, the Saskatchewan Health Authority, the province of Saskatchewan, and the Government of Canada (Moran et al. 2018). Alisa Lombard is representing these Indigenous women and maintains

The “primary injury” with the doctors unethical coerced sterilizations is “sterility”, and sterility can mean different things to each individual (Moran et al. 2018). In M.L.R.P.’s [unnamed victim] experience, her sterility meant “patience, pain, suffering and misery” and for other women it means “decades of repressed feelings of inadequacy, deceit and fear of authority.” (Lombard, p. 11)

A report was also generated by the Saskatoon Health Region (SHR) to examine the claims of women who had been coerced into having a tubal ligation immediately after childbirth in a Saskatoon Health Region hospital. The “External Review: Tubal Ligation in the Saskatchewan Health Region: The Lived Experience of Aboriginal Women” was authored and published by Boyer and Bartlett in 2017. Dr. Yvonne Boyer holds a Doctorate in Law (U of Ottawa) and is the Canada Research Chair in Aboriginal Health and Wellness at Brandon University. She is a member of the Métis Nation of Ontario and a member of the Law Society of Upper Canada and Law Society of Saskatchewan. With a background in nursing, she has over 20 years of experience practicing law and publishing extensively on the topics of Indigenous health and how Indigenous and treaty rights intersects on the health of First Nations, Métis and Inuit. Dr. Judith Bartlett, a Métis physician raised in northern Manitoba, has 30 years of experience working with Indigenous Peoples, in Canada and Internationally. Her expertise includes health services research, community-based research, and health administration.

The review began in January 2017 and concluded that July. It investigated the healthcare system by interviewing Indigenous women from Saskatoon (and surrounding areas) who had reported their experiences with forced sterilization (Boyer and Bartlett, 2017). The “overall aim of this review is to examine the issues and provide recommendations or ‘Calls to Action’ to the Saskatoon Health Region to prevent the coercion of Aboriginal women into tubal ligation” (p. 2). This report confirms that “pervasive systematic racism” is existent within the health care system.

Some of the information gathered during the External Review was so incredibly problematic and violent that I transformed a paragraph from page 27, using a Documentational Poetry method. This method involves pulling words and phrases from a document for maximum

impact and to provide a different lens in which to (re)view information. The Documentational Poem is found below.

Spectrum/Continuum of Ignorance, Bias, Racism & Discrimination

Health providers indicated
they see coercion-conversation

One health provider indicated
‘this person had so many children
she’s not taking care of them;
shouldn’t we tell her stop?’

One health provider
complained to the charge nurses
[about] bias [toward “Aboriginal” women]

Another health provider
Related
‘It’s a constant struggle...’
nurses ask
‘Aren’t you apprehending that baby?’

Health provider comments reflect
systemic discrimination
towards Aboriginal populations.

One provider stated
‘what has been happening with apprehensions
is similar to residential schools’

A health provider indicated
'It's a fight
to convince people that this stuff
[tubal ligation]
is wrong
... yet we have to conduct our ways
where we try not to
make white people feel uncomfortable'

Interviews reveal
covert and overt
racism in the hospital environment.

This health provider stated
'...the nurses in our hospital
are all races
I don't think
racism is involved'

One resident on labour/delivery
Said
'I f...g hate you people
more than any other race
on this entire earth'

Another provider
attempting to understand
Aboriginal women
indicated
'...and so when you talk to them
[about tubal ligation]

I'm sure they're not attentive ...'

An Indigenous woman
survivor
of coerced sterilization
was quoted as saying
'the doctor took away my gift.'

Another devastating settler colonial intergenerational consequence of the maltreatment by health professionals is an inherent fear of authority. Lombard (2017) indicates that these women are contending with trauma such as “deceit and fear of medical authority [...] these women [do] not seek medical care, which makes them vulnerable to life-threatening risks of preventable and treatable illnesses” (p. 11). Though this is being reported now, these inherent fears are generational. Grandmothers continue to pass on stories of mistreatment to their daughters and granddaughters.

Good opportunities to engage relationality have emerged from the External Review. These opportunities include taking the truths and testimonies of affected women to heart, and to engage in a reciprocity that is based in responsibility. The Calls to Action that were made hold promise to improve the treatment of Indigenous women—but only if they are taken up in a good way. An “Action Area” that resonates with me and what I am working to do involves education and training, and a regeneration in these spaces. Interviews with the health care providers offer insight into different spaces that require healing, an example is: “One provider felt it is ‘important to teach healthcare professionals about institutionalized racism’” (p. 38). Another healthcare provider indicates that a lot of work needs to be done in changing curriculum’ including the “need to ensure [Aboriginal] students feel listened to, safe and value, the need for reconciliation within the curriculum in nursing, medicine and social services, and the need for mandated specialty training in Aboriginal women’s health for obstetrics” (p. 38). These are measurable steps, and they can and should be integrated to implement a better outcome for everyone.

Other positive outcomes emergent from the External Review speak to recognizing the importance of education, and ensuring that those who are already marginalized or are oppressed

are not re-victimized, citing that “[tubal ligation] has to be discussed before vulnerability occurs” (p. 38). In order to achieve that level of ethical engagement, the Review cites a Call to Education in the form of cultural competency which is critical to relationship building, because “it is imperative that the people who chose health care professions have the opportunity to learn and understand the Aboriginal people they serve” (pp. 39-40).

In 2017, the Saskatoon Health Region apologized to Indigenous women who felt they had been coerced into having tubal ligation procedures which had resulted in their sterilization. Speaking to the results of the report, health region vice-president Jackie Mann choked back tears, and indicated that “No woman should ever be treated the way you were treated [...] this report states that racism exists within our health-care system and we as leaders acknowledge this” (Globe and Mail, 2017).

The literature illustrating the atrocities occurred against First Nation, Métis and Inuit women feels almost cyclical. Similar stories are emerging, and they are analogous to historical narratives outlining reproductive injustices and medical racisms. It remains my hope that my research provides a space for healing, and that generations of Indigenous women and girls begin to see and feel justice from the many wrongs that have been committed against them.

The Truth About “Truth” and “Reconciliation”: A Right to Truth

Merriam-Webster defines truth as being “the body of real things, events, and facts” (<https://www.merriam-webster.com/dictionary/truth>). Often truth is not called into question unless a binary has been created. The binary could consist of good and bad, rights and wrongs, justices and injustices. As people, we have an inherent right to life without the violence of dehumanization. Unfortunately, dehumanization does occur and oftentimes we are called in a space where we have a right to the truth.

Truth as an archetype is both concrete and abstract, a binary “[that] seems to be a transparent notion, clear to all who are involved or interested in redressing past abuses, but “truth,” like “justice” and “reconciliation,” is an elusive concept that defies rigid definitions” (Parleviit, 1998). Accessing and assessing truth is a whole other matter. Truth is regulated. This is where truth commissions come in. Truth commissions are often tasked with being a physical embodiment of truth, a means to a social justice end (Bassiouni, 2002; Karstedt, 2009; Rotberg

and Thompson, 2000; Parlevliet, 1998; Chapman and Ball, 2001; Hayner, 2001). These commissions are asked to go on a truth-telling journey where the equilibrium of peace and restoration can be considered major goals. According to Hayner,

The many objectives of truth commissions often include promoting truth-telling and reconciliation, psychological healing for victims, establishing an accurate historical record, recommending reparations for victims, ensuring minimal accountability, restoring dignity to victims, making recommendations for institutional reform, as well as preventing violence and repetition of abuses. (pp. 2265-66)

The goals of truth commissions are critical to upholding the rigour of transmitting truth. Without the scope of “[...] establishing an accurate historical record, recommending reparations for victims, ensuring minimal accountability, restoring dignity to victims [...]” a truth commission could fall flat and do additional harm to those seeking justice (pp. 2265-66).

So, what constitutes “truth?” Who decides “truth?” What is included—and what is left out of such settler colonial constitutions of truth? Recognizing the essential task ascribed to truth commissions, it becomes relevant to consider the “quality” of truth that truth commissions are required to unearth (Borer, 2006; Freeman, 2006; Nesiah, 2006; Peterson, 2005; United Nations, 2006). Because most truth commissions rely on the testimony of victims, commissioners have to consider that

Memory is inherently subjective and open to change over time; this is especially true for memories related to traumatic experiences and public events. Public memories are likely to be influenced by a variety of interpretative factors, including community, cultural, or traditional myths and personal fantasies. (Chapman, p. 6)

Victimized populations often place their trust in commissions because they seek justice, a relief from dehumanizing situations and historical atrocities. Knowing this, distinguishing memory through truth commissions “might be described more accurately as acknowledging the truth rather than finding the truth” (Chapman, p. 3). Yet, truth is subjective. Because “deception is so central to the abuses” (p. 2269), “critical evidence and records are likely to be missing or destroyed” (Chapman, p. 3). Truth will always be open to interpretation and manipulation. There are a lot of considerations and consensus when it comes to the politicization of “truth.” Whose or Who’s truth? And how do we reconcile when “truth” should be brought forward?

Reconciliation as Praxis

What is it
that makes
some memories unbearable?
Which knowledges are
too difficult,
too awkward,
and too dangerous
to know, to teach
and to
learn?
Is good pedagogy
... only that
which consoles
– not that which provokes?
(McConaghy, 2003, p.11)

According to Verdeja (2004), reconciliation is intended to promote peace by overcoming the repetition of violence. Reconciliation is a buzzword. It is *everywhere*. Reconciliation can be seen as denoting a

Complex set of ethico-political projects such as “truth telling”, forms of remembrance and memorialization, education programs in civil society, and legal processes inflected by notions of restorative justice, reparations and apology to counter cycles of persecution, incrimination and confrontation. (Hattam et al., 2005, p. 2)

Reconciliation is also liminal. It takes on different shadows of meaning, shifting to become what is required to survive in different spaces. Eppert (2003) suggests that “reconciliation as a word, moreover, seems to gravitate towards normalizations, closure and potentially narrow happy endings/forgettings. In so doing, it is in danger of erasing alterity” (p. 88). Reconciliation is positioned as a need to elaborate how we might learn to live together in societies of ever-increasing cultural complexity (Torres, 1998). Reconciliation-based restorative practices can

potentially be informed into action by “focusing attention on aspects of pedagogy such as dialogue, possibility, remembering and witnessing, and the affective dimensions of difficult, contested knowledges” (Hattam et al., 2005, p. 26). Research into literature with a lens focused on reconciliation finds that reconciliation functions as a modality or as a site for learning, and becomes a pedagogical space (Shor, 1992). Ethical relationality is also positioned as fundamental to the success of reconciliation. This ethical space grounded in respect is especially critical as reconciliation denotes a context of national (re)construction. National reconciliation projects can be seen as endeavoring to develop a public pedagogy (Giroux, 2004) that intentionally (re)produces and (re)circulates ideologies about reconciliation. (Re)Negotiating public memory in its most minimal essence, it is an act of complicity. It remains critical to note that an important facet to (re)navigating public memory is public buy-in. Reconciliation means many things across the territories we call Canada, and it comes down to whether or not an individual is implicated in moving along an agenda grounded in culpability and restorative practices. Christie (2012) confirms that

It is not helpful to assume that national reconciliation entails personal or interpersonal reconciliation (or vice versa), or to assume that all people are reconciled if a national process is successful. Nor [...] can reconciliation be assumed to be enduring, achieved once and for all. (p. 32)

Reconciliation might rest, but it remains a moving target. There is no one and done deal where we forget what we have forgiven. Reconciliation can and should remain on our collective radars for years to come.

Some literature based on giving unprecedented attention to practices and sites of commemoration perform superficially with concepts of active remembering and forgetting/forgiving (Eppert, 2003, p. 65). If you are an invested or impacted party, you may consider that there is no forgiving and forgetting. Forgiving and forgetting is luxuriously perilous. As an ideology, it provides liminal, shadowy spaces from which to emerge, urging us to forget collective pain as time marches us forward. One might consider that if we create a site for commemoration or activate acknowledgment, our complicities have ended. Yet, should we even consider that forgetting and/or forgiving is better for anyone impacted by appalling truths?

Thankfully, the complexities of relationships, relationship-building and maintenance comes into play. These complexities subvert superficiality and instead seek to implicate and

tease out context that demonstrates authenticity. Though problematic, Amstutz (2005) asks us to reconsider forgiveness

...as a means of confronting and overcoming past wrongdoing, reconciliation through forgiveness is possible only through the prism of memory – that is by recalling and redeeming the past. But if memory is necessary for the healing of past injustices ... it can also serve ... as the basis for continuing resentment, anger, and vengeance ... The role of memory is thus ambiguous, providing a redemptive foundation for renewal and reconciliation, as well as a basis for lingering anger, hatred, and retribution. (p. 45)

An example of “confronting and overcoming past wrongdoing” Amstutz (2005) could (and should) include teaching your family and friends why an annual (September 30) event like Orange Shirt Day is important. The education of the horrors that is Indian Residential Schools should not rest on oppressed shoulders. This is where relationship-building and maintenance comes in. Here Ora Avni reminds us,

Yes, we want to ‘heal.’ Society wants to heal. But no, a simple ‘life goes on’, ‘tell your story,’ ‘come to terms with your pain,’ or ‘sort out your ghosts’ will not do. It will not do because the problem lies not in the individual – survivor or not – but in his or her interactions with society, and more precisely, in his or her relationship to the narratives and values by which this community defines and represents itself. (p. 216)

Definition and representation are important pieces of reconciliation, yet it is difficult to find books and articles written solely about reconciliation, as a stand-alone subject. Moreover, some of the literature about reconciliation reveals that it be considered “...a vexed and complex concept ... whose materiality is honed through philosophical, cultural, social, political and economic questions of rights and responsibilities, atonement and reparation... the need for social justice and a ...path out of enduring and deep divisions (Crowley, 2012, p. 97). Reconciliation represents an element of justice, and this justice is defined by how we may or may not be complicit in any of the harms that have transpired. Reconciliation can also be about bureaucracy, politics, and activism. Ultimately however, reconciliation is about lived experience and trauma.

Truth and Reconciliation

I would like to begin this section by indicating that it remains my opinion that First Nation, Métis and Inuit Peoples (FNMI) have nothing to reconcile. We have done nothing wrong. We are not responsible for violent assimilationist and genocidal policies enacted upon us. Having said this, I would like to remind the reader that any participation from FNMI Peoples in any facet of reconciliation is solely at the discretion of these individuals. I recognize that there is a lot of resistance to reconciliation from both FNMI Peoples and settlers, for a variety of reasons. My own positionality as daughter to parents who have experienced the atrocities of Indian Residential Schools predicates my participation in reconciliation. I became resistant to involving myself in reconciliation, particularly after the horrific murders, and the incredible injustice enacted upon Fontaine and Bushie. A visit from my ancestors through a dream provided a good healing space for me to (re)emerge and (re)position myself as a Cree educator who was willing to engage ethical relationality and participate in reconciliation. I participate because of the many survivors who were tasked with sharing their spirits and their horrific and (re)triggering testimonies of time spent in Indian Residential Schools. I participate because “stories found in memory help people find their way out of colonialism” (McLeod, 2007, p. 9). I participate because of my father and my grandson. I am doing this hard work to create a better future for all students.

I would like to share how truth and reconciliation connects with the work I am engaged in. Truth is the space I work within, more so than reconciliation. A large part of truth-telling is engaging peoples, collecting their shared narratives, and engaging in presenting truths through storytelling. I am presenting narratives that provide insight to governmental state sanctions and policies meant to result in deliberately disappearing Indigenous Peoples.

Research into truth and reconciliation yields many articles and books, and a lot of information. There appears to be a binary of settlers and FNMI Peoples who are writing about the same subject, but of course, from different lenses. It is fair to say that though we are all working from different positionalities, the majority of scholars, researchers and educators are collectively seeking to transform Canadian histories through the inclusion of accurate history and anti-racism.

For the sake of context, Canada sanctioned the apprehension and assimilation of First Nation, Métis, and Inuit children, collecting and “housing” the children. Hundreds of thousands of children have been impacted by Indian Residential Schools (IRS)

Conditions in the schools were often sub-standard, leading to disproportionately high rates of disease, malnutrition, and death among the students. Many students complained that the psychological effects of the residential schools were a primary cause of subsequent alcoholism, domestic, and other intra-community violence, and lasting damage to their own ability to function in a healthy family environment. In all, it was an experience that caused great suffering among students who attended the schools, but also significant intergenerational harms. (Coyle, 2017, p. 769)

Those who survived Indian Residential Schools lost their languages, familial connections and ways of knowing. Some survivors lived what they knew and (re)produced children who continue to carry the impacts of intergenerational traumas and/or negative coping strategies. In response, the Truth and Reconciliation Commission of Canada (TRC) was initiated to address the historical and contemporary injustices and impacts of Indian Residential Schools. In 2015, the Truth and Reconciliation Commission of Canada generated 94 Calls to Action in order to reconcile Canada with itself. As indicated previously, literature engaging truth through reconciliation suggests both discrete and grouped efforts to engage Canadians with authentic histories.

Corntassel and Holder (2008) indicate that truth commissions are “intended to represent a step forward in inter-group relations by marking an end-point to a history of wrongdoing and allowing political and social relations to start anew” (p. 1). Corntassel and Holder also speak to the complexities of truth commissions and the differing opinions that can emerge. There seems to be a consensus in the literature both nationally and internationally that the different parts of a truth commission impact people in a number of ways. Some settlers feel implicated, reactive and resistant (James, 2010; LaPlante, 2013; Snyder, 2010; Tully, 2008) while generating articles and books about truth commissions being performative and mostly impractical. It is somewhat surprising to see how many articles and books are aligned with this sort of violent thinking. Colonialism, classism, racism, and many other *isms* are a root cause of this resistance.

Consequently, as Coyle (2017) makes clear,

[...] it follows that any review of the possible impact of the TRC process on reconciliation between the Canadian state and Indigenous peoples in the wake of the residential schools experience must necessarily examine the extent to which the TRC's final report attends to and highlights the underlying framework that made possible the subordination of Indigenous autonomy to the unilateral exercise of state power over Indigenous lives. (p. 778)

On the flipside, it is fortifying to know that there are educators and scholars who are strident in their decision to teach accurate Canadian histories. Miles (2018), notes that “relatively few studies exist on history teaching as a reconciliatory or reparative act in ongoing settler colonial states such as Canada” (p. 304). Miles also makes reference to some noteworthy exceptions, which include Dion, 2007; Donald, 2009; Ng-A-Fook & Milne, 2014; and Tupper, 2014. These scholars and educators see the necessity of increasing reconciliatory and reparative spaces within teacher education programs.

Dion (2007) writes about the “Indians we have in mind” (p. 330), referring to the necessity of disrupting dominant ideologies that pre-service and in-service teachers may hold. Dion has worked for over a decade to “investigate, understand, and work toward transforming the representation of Aboriginal people in the school curriculum” (p. 330). Dion uses an assignment to challenge her students to participate in a process to (re)view their positionalities with themselves, with Indigenous Peoples, and finally their own positionality within what they know of past and present constructed histories as a “critical pedagogy of remembrance” (p. 334). Using an “act of remembrance assignment” (p. 340) involves collecting artifacts and investigating who pre-service and in-service teachers are in relation to these artifacts. This assignment raises “awareness of the ways in which the identities of both Aboriginal and non-Aboriginal people in Canada have been shaped by the colonial encounter and its aftermath” (p. 340). This assignment teaches through the “construction of this ethical [...] to transform relationships between Aboriginal and non-Aboriginal people in Canada” (p. 329). Dion reinforces the ideology of ethical relationality and relationship-building with pre-service and in-service teachers to emphasize the necessity of antiracism teacher education.

Donald problematizes curriculum studies in Canada. He suggests that while building relationships should be at the forefront of creating community, these relationships must be grounded in the past. Indigenous worldview predicates an acceptance that active

interconnectivity with past, present and future is ongoing. Indigenous worldview conflicts with Canadian historical narratives because it disrupts long-held notions of ownership and settlement. Donald contends that Canada's creation story "continues to haunt our contemporary Canadian society by defining the terms according to which Aboriginal peoples and Canadians speak to each other about history, memory, place, and the land" (p. 40). Using the "pedagogy of the fort" (Donald, 2009), Donald explains that the binary of inside and outside comes into play. Those that inside are considered safe, good, industrious. Those on the outside are considered otherwise, and that "outsiders must be either incorporated, or excluded, in order for development to occur in the desired ways" (p. 44). Donald contends that curricula "enforce[s] epistemological and social conformity to Euro-Western standards established and presumably held in common by insiders" (p. 44). Donald also asserts that "Outsiders and their knowledges have been actively excluded from meaningful participation in Canadian public institutions like schools and universities" (p. 44). To bridge these spaces Donald suggests entering an ethical space that encompasses entities that are "Aboriginal and Canadian (p. 44). It is only at this point of affirming difference that authentic ethical space can emerge. This brings us back to relationship-building in a space that is "across frontiers of difference" (p. 44). This relationality envisions an ethical space for "historicized and decolonial reframing of Aboriginal-Canadian relations" (p. 44) that would usher in meaningful dialogue about curricular sustainability. A modality that could assist with this meaningful dialogue is *Indigenous Métissage*. Donald (2009) describes *Indigenous Métissage* as a "curriculum sensibility" that involves "purposeful juxtaposition" to "reread and reframe historical understanding in ways that cause readers to question their own assumptions and prejudices as limited and limiting [...]" (p. 5). I have used the concept of "curriculum sensibility" to engage ethical relationality in a poem entitled *Braid* (p. 5). By drawing on ethical relationality, and Indigenous Métissage, the collective voices in my study are woven and juxtaposed in ways that perform and illustrate the concept of a curricular sensibility toward our relations with each other and among the different stories shared in this thesis

Ng-A-Fook & Milne (2014) provoke us to critically examine our "individual and collective memories within and beyond the boundaries of the existing narratives that constitute Canadian history" (p. 90). After consideration of pedagogical angles, Ng-A-Fook & Milne chose to write through *currere*, or life writing, which permits them to enter a space "as a practice of unsettling the present, toward reimagining more hopeful future relations between Aboriginal and

non-Aboriginal communities across the territories we now call Canada” (p. 88). Ng-A-Fook & Milne concentrated on creating a space where historical narratives could be read through different lenses. In their multi-tiered project, they offered teacher candidates various opportunities to examine processes for doing oral history research. In doing this the “teacher candidates had the chance to partake in the pedagogical processes of rereading and rewriting the [...] impacts of settler colonialism with First Nation [E]lders” (p. 91). While documenting trauma is difficult, Ng-A-Fook & Milne remind us, that it is necessary that we do not inject our own interpretations to any shared narratives, that the stories are valid without needing validation. They prompt us to embrace “pedagogical openness” (p. 103), to challenge the violent legacy of colonial history. Ng-A-Fook hopes that we, the readers, take away the memory of those who both perished and survived the legacy that is Indian Residential Schools as an act of resistance against the violence of a settler colonial historical consciousness and its respective curriculum of forgetfulness.

Tupper (2014) “explores the ways in which treaty education in Saskatchewan attempts to counteract colonial thinking in prescribed and lived curricula” in her article (p. 470). She engages a recognition of displacement as she describes an uncomfortable realization that the land she grew up on came at the expense of Indigenous Peoples. At Donald’s (2009, p. 9) urging, she reread her settler colonial life history to disrupt her teaching pedagogy. Tupper maintains that rethinking colonialism through treaty education has the “potential to disturb dominant national narratives in classrooms, and to invite students to think differently about the history of Canada as it seeks to acknowledge and challenge epistemologies of ignorance” (p. 469). Offering different entry points helped teacher candidates. One such curricular and pedagogical point of entry is [Project of Heart](#), a project founded by Sylvia Smith. Project of Heart “opens a space to think together about the historical and contemporary significance of residential schools as a part of the larger colonial project” (p. 478). The teacher candidates expressed a familiar and frustrating regret: that their education up to this point did not include any tangible knowledges about the Indian Residential Schooling system. Tupper concludes by indicating that active decolonization is mandatory for her as she continues to teach peace through treaty education. I remain grateful to and for these Indigenous and non-Indigenous scholars and educators as they work within their expertise to de/re/construct Canadian context and histories to impart authentic knowledges to students of all ages in Canada. Perhaps such curricular and pedagogical work may contribute to

future non-violent settler colonial relations between Indigenous and non-Indigenous Canadian. Such presence of this hopeful future, for me at this point in time, has yet to be seen.

My doctoral work consisting of (re)stor(y)ed narratives adds to a collective voice, because “stories act as the vehicles of cultural transmission by linking one generation to the next” (McLeod, 2007, p. 68). I am seeking to make a major contribution to the fields of curriculum studies, the history of education, and Indigenous studies.

Not to obliterate the past but to radically reconfigure the relationship between the past and present. This meant challenging the existing modes of inheritance of our views of ourselves, others and our environment with new patterns and forms of presentation, representation and association. (Simon, 1992, p.140)

This is where my research can live, working with/in truths to implicate and interrogate Canada’s grand narrative of nationalism and nation building through Indigenous Knowledge, Indigenous epistemologies and ways of knowing.

From my own experiences as a part-time professor of a foundational course in Indigenous Education, I saw many differences in learning and resistance to learning. To provide context, the course introduces concepts, narratives, curriculum policies and pedagogies that address some First Nation, Métis and Inuit historical experiences and contemporary perspectives, and works to engage one another in ethically relational discussions about possibilities and limitations of reconciliation. Essentially, I was instructing teacher candidates who could be potential teachers in FNMI communities. The teacher candidates I have interacted with are asked to re-imagine education. They are tasked with learning about how to teach without contravening boundaries. Canada needs future teachers to be in a good space where they can teach accurate historical narratives, while reconciling their own discomfort with the things they read, watch or hear. It can be difficult for them because they are decolonizing while they are learning, and they are being asked to do it in a compressed timeframe.

I have taught this course a few times now. In the first year, I was naively set on creating community in the classroom, and really worked at creating pockets of “safe spaces,” a strategy that totally blew up in my face. I was met with violence and resistance. I had a student who expressed that if the space was authentically safe, then the door should be open widely enough for them to speak freely, thus enabling them to bring hate speech into our shared space. This was incredibly disconcerting to me not only as an educator, but also as a marginalized woman. Many

of the teacher candidates did not want to be in this class because they could not link Indigenous perspectives with their own teaching philosophies. In some instances, there was stark refusal on their part to engage with course texts or class discussions, which sometimes became combative.

I taught the course again, but completely revamped it. I used my initial experiences as a teachable moment for myself. I have come to think that safe spaces cannot really exist. After some discussion with colleagues and friends, I learned more about ethical spaces and ethical relationality. From my understanding, Dwayne Donald (2009) says that ethical space is a space of possibility that can only be created when we are dealing with two different worldviews, or knowledge systems. Ethical relationality does not deny difference, but instead seeks to more deeply understand how our different histories and experiences position us in relation to each other. In other words, engaging in ethical relationality means recognizing that you are in a space with people who are unlike you, and respecting those dissimilarities enough to meet halfway, and learn from each other in the space where you meet. During my first class with that year's cohort, we spoke openly about safe spaces, and then about ethical relationality. We agreed to be responsible for the different energies we bring into the classroom, and to maintain a level of respect that maintained all of our dignity. The teacher candidates were able to think critically about what they were learning, reading and hearing. It is heartening to hear that instead of reproducing the superficial or false knowledge they had previously learned about First Nation, Métis, and Inuit Peoples, they will instead consciously consider using ethical relationality to make choices about how they will deliver content in their own future classrooms. I remain grateful to the many scholars who work diligently to create a better future for all students.

Meegwetch to you all.

Pimatisiwin

A Conceptual Paradigm

My deep-rootedness inside
Indigenous epistemology bifurcates from my
being a reluctant research subject by a
Settler researcher (Garrouette, 2003). I call
this story “The Bad Researcher”. It holds a
space from my early life where I toil with
past experiences with extractive data
collection in order to emerge as an
Indigenous (Cree) scholar:

My brother and I (myself) have been
adopted from different places. With our
adoptions came a researcher who followed
us our entire lives, shadowing and
subjecting us to frequent intrusive
interviews. I remember sitting and
reluctantly answering the same questions
year after year. As adults, my brother and I
have questioned who the researcher is and
what the research was about. I contacted the
Children’s Aid Society to learn more about
us as this “project”. I was told that a project
was existent and had been suspended due to
the projects’ unwilling participants. I was
denied any additional information about the
project and to this day, we have/had *never*
received any authentic information as to

Ceremony

*My husband was sick
about five years ago
He had cancer*

*He wasn't doing good
I asked somebody
To help us*

*And this guy was sent
That I had never ever met before
In my entire life*

*He was from the flatlands
A healer
Conducts ceremony*

*He was sent to us
Just after my husband
Wasn't doing very good*

*I wasn't doing very good either
Really not in a good frame of mind
'Cause I was worried about him*

*They did ceremony for him
And the next day
When this healer came back*

*To talk to me
About my husband
He started talking about miscarriages*

*Which was a really weird
He sat down
And we started talking*

*He started talking
About women that have lost babies*

why data was being extracted from us. My parents do not know (not surprising, the Indian Residential School System taught my parents to never question what they call “white authority”). Despite my best efforts, I had no real knowledge about the researcher, or even *myself* in relation to this experiment I had become.

It is a brutal narrative—but for me, it forges a critical place to comprehend rationale regarding Indigenous research methodologies, in order to appreciate their principles. Battiste (2009) expressed three essential values of an Indigenous research methodology: (re)emergence, political sovereignty by Indigenous peoples and (self)determination. Battiste emphasized,

The task for Indigenous scholars and educators has been to affirm and activate holistic paradigms of Indigenous knowledge to reveal the wealth and richness of Indigenous languages, worldviews, teachings, and experiences, all of which have been systematically excluded from history. (p. 5)

Here Battiste (2000) explains that (re)emergence as surfacing from the shape

While they were pregnant

*I was like, "Why is he talking about this
When he's supposed to be talking
About my husband?"*

*He was telling me
They conducted
Ceremony*

*There was a young man
In his early 20s
And a young woman*

*A little bit younger than him
They were there
Crying for their mother*

*I remember him telling me that
They were crying like,
"Niimama, Niimama,"*

*Through the whole ceremony,
They could hear these two kids
Young people crying*

*He asked me
The question
"Have you ever miscarried babies?"*

*And I was like,
"Yeah, twice."
He told me*

*The two that were in ceremony
That night
Were my children*

shifting effects of colonization to foster the usage of ancestral knowledge to contribute to research. Political sovereignty positions Indigenous scholars to research. Lastly, (self)determination is enacted by Indigenous scholars conducting research by and for themselves (Dei, 2011), assuring transparency and accountability to their communities. Though the following is a lengthy quote, its inclusion is essential to distinguish Indigenous ways of knowing

Indigenous epistemologies tend to be holistic rather than analytic; are context-sensitive and responsive to lived experiences and the social reality of Indigenous authenticity and voice; view knowledge as ecologically situated and unique to specific settings; employ physical geography as a foundation stone of Indigenous knowledge building; make room for the sacred, as opposed to only the mundane; consider certain animals and plants as stewards to certain doors of knowledge; regard, not just individuals, but whole communities as “epistemological agents”; and, consequently, view true knowledge as the result of a process that can

*And that's why they were crying
Because I was still hurting
Over losing them*

*That they were telling me
In ceremony
They were okay*

*They're with me
They'll always be with me
They'll always be my babies*

*It was really powerful for me
It was something
I didn't talk, didn't think about.*

*It wasn't until five years ago
That I really dealt with that
I guess*

*When I talked to this Elder
And he brought this up
And yeah*

*Everything happens for a reason I guess
This guy was brought into my life
For a reason*

*That's a time he helped me
To let go
And be okay
(Lisa Neilson, 2019)*

only be validated by cultural groups.
(Chandler, 2010, para. 6)

Earlier in this chapter, I provided an account of an incident with a Settler researcher that negatively impacted me. That narrative illustrated extractive and violent research enacted upon me with, what I can only guess would be a research paradigm created from within colonized frameworks. As a Cree woman, this created a space for me from which I developed a tailored Indigenous research methodology. A methodology which allows me to [re]focus the lenses of decolonization and renewal, and [re]emerge within academia with a sense of political sovereignty and [self]determination.

Regeneration through stories or teachings is an essential principle of an Indigenous research methodology (Kovach, 2009; Loppie, 2007). It is necessary to understand how colonization has affected the researcher before they can engage in any study that will benefit one's community. Similarly, to engage in Indigenous research one must radiate a "strong connection between self, community, memory, reciprocity, and research [which] makes the research strong from day one" (Kovach,

By Myself

*Yeah
my background
of being mixed
ancestry
I didn't have an easy time
I had to prove Indianness
if I cried in these beatings
I took a lot of beatings
I wanted to be an Indian
so I didn't cry
I didn't cry
Until later
in the bush
by myself
(Alice, 2019)*

2009, p. 115). Because I am obligated to engage in ethical relationality and accountability “it is essential that [...] [I] decolonize [...] by reclaiming [...] histories, values, languages and traditions.” (Absolon, 2010, p. 55). As daughter to an Indian Residential School survivor this means many things. There are many facets that I have had to contend with. How do I (re)claim the “histories, values, languages and traditions” that are rightfully mine but were forcibly and effectively removed from my father and my mother? I have no choice but to understand just how impacted I am as an Iskwew, mother, daughter, kookum, sister, auntie, niece and cousin. I recognized early on that in order to research from a good space, I had to engage learning, trust, and healing. The process is ongoing because I will always be learning, and I continue to heal because colonialism is one tenacious beast.

I really did begin at square one in learning about my positionality as an emergent Cree scholar and researcher. Some of the spaces I engaged in came naturally, such as speaking to other Indigenous scholars, and learning how they situated themselves in their work. Some of the harder pieces included being tasked with working

Being Mixed

I think for me

Being mixed

I feel like I got racism from both sides

It was one of those things

Where you were too light

For some of the native kids

But then you were too dark

When you were with non-native kids.

(Ikwe, 2019)

through stereotypes and stigmas about Indigenous Peoples that had been passed down to me from my parents. My father would call me an “apple” now and then, and it was not until I was a young adult that I understood what the term (red on the outside, and white on the inside) meant. Being an “apple” was not a good thing.

I have never lived in my community. My father never lived there again once he aged out of Residential School. Having said that, my brother and I were forced to endure summer visits in my community. I am purposefully using words like forced and endure, because that is what our visits were comprised of. We did not have agency and were sent yearly to live with people we barely knew, in a still-wounded space. Effects from colonialism, such as violence and rampant negative coping strategies were on display every day. Because my brother and myself did not live in our community full-time, we were seen as “apples”. Bullied constantly, we endured lateral violence because we were “from the city” and were Othered because of purely demographic details. Living “in the city” meant the polar opposite of the glamorous lifestyle our peers in our community imagined we lived.

Womanhood, Life And A Spirit

Do I want to?

Do I want to?

I have one other story

In 2002, 2003

I was living

In southern Ontario

I would experience

Cramping

Really bad cramping

I was experiencing

Cramping again

And on that day

I felt something

I went to the kitchen

And got a container

I felt something move.

I thought, "Holy shit.

Something is coming out."

We live(d) in a racialized space, controlled by dominant ideologies, and we felt the sting of racism daily. We were caught in the middle, in this awful space that was derived completely from our skin-tone. Raised away from the community, we were shunned by our own community members for not being *brown enough*. Raised in an urban space, we were shunned because we were *too brown*. It was a confusing space to be pushed into, but we did our best to exist, as most racialized peoples do.

It was not until a few years ago when I really began to unpack my identity and situate myself as an academic that I truly understood what occurred when my father would call me names like “apple” or “Indian”. I realized that he was transferring knowledge but that it was a skewed and wounded knowledge. He parented through the lens he grew up in, which was in a violent and wildly assimilationist space. He passed on internalized racism and a deep-seated shame of being First Nation to my brother and myself. We were a manifestation of his own failings of being *too brown* to avoid Residential Schools. As I grew into myself as an emergent Cree scholar, I realized that as Battiste indicated, (re)emergence, political

*I went to the bathroom
And
Something fell out*

*I caught it in the container
And I remember
I was looking at it*

*I'm thinking what is this?
It was like nothing
I'd ever seen before*

*I booked
A doctor's appointment
I went to the doctor*

*I told her what happened
She said
"You probably had an ectopic pregnancy."*

*I never even told my husband
I never told anybody
What happened and then yeah*

*I just kind of
...yeah
My family tells me I'm secretive*

*As I reflect back
I probably shouldn't
Have had that procedure done*

sovereignty by Indigenous peoples and (self) determination were critical and so I adjusted my own lenses. My personalized decolonization is mandatory. It became critical to unlearn many hurtful parenting attempts, to abandon any racialized ideology I held of myself, and to work to learn what relationality and reciprocity truly meant as an Iskwew, community member and scholar. This process had to occur before I could participate in research in any kind of meaningful way. This process is still ongoing, and I am grateful for my deeply upheld responsibilities to remain engaged in my personalized decolonization.

Researching Indigenous research methodologies led me to understand relational accountability to all of my past, present and future relations. According to Absolon (2010), this reminder of accountability encompasses “time and pace: the past, present, future; directions and doorways of life; the ecology of creation such as earth, sun, water and air and all their occupants; and values that retain the balance and harmony of all of the above” (p. 74).

By operating through an Indigenous research methodology, I can connect to the world around myself as an Indigenous

*Because somehow
I had wrapped a part of my own identity
Into my mother's*

*Which is just natural
Because that's my mother
Right?*

*I didn't want to be a certain way
Because I grew up
With that confusion*

*I let so much influence me
I was so affected
By what people did and said
(Alice, 2019)*

researcher. Indigenous research paradigms focus on Indigenous knowledge as a moral compass. Paradigms and methodologies are extremely complex. Before I could move forward with my proposed research, I had incredible amounts of difficult work to do. I remain grateful for my committee and post-secondary institution—while there were some barriers to pushing through some policies, they were minimal and I felt confident as I moved forward with my Cree paradigm and framework. I recognize that I could have sidestepped the heartwork I am engaged in, in favour of a colonized, straightforward framework that is potentially incentivized by an internal oppression and a push to *just produce*. If I had chosen a standardized framework from which to work, everything I am and bring as an Iskwew would be muffled, muted. I know in my spirit that my ancestors, past, present, and future are counting on me. They are counting on me to work in a good way. To engage in ethical relationality, to be accountable.

Smith (1999) confirmed that moving forward to regenerate Indigenous identity through knowledge systems is one way to recover from this ongoing colonial experience. She asserts

You Know

*I can't remember
how old I was
12 or 13?
somebody yelling
"You dirty Indians"
"Why am I dirty?"
I just took a shower.
and I take a shower every day."
when we got older
we went to high school
we were always picked on
white guys
wanting to pick us up
because we were all easy
you know
(Ihow, 2019)*

The reach of imperialism into 'our heads' challenges those who belong to colonized communities to understand how this occurs, partly because we perceive a need to decolonize our minds, to recover ourselves, to claim a space in which to develop a sense of authentic humanity. (p. 23)

Wilson (2008) reminds us that it is critical that as Indigenous researchers, we realize that the inquiry we are involved in stretches into and intertwines with our core beings:

[...] if you live your life within the circle and utilize your business as a circle, it affects you, so you start to make your life circular as well. You internalize the circle [...] you internalize it and you act it out through being nurturing, courteous, respectful, these sort of things. Within the circle you are measured by who you are, you are recognized by your deeds within the Indigenous world. Not by what you say on paper: what you have done. (p. 91)

My research paradigm is circular, cyclical, and living. I have provided a visual

Front Line Workers

They're front line workers

The doctors

They were surprised

That I was even having a baby

Because I had problems

With my reproductive organs

They were gonna tie my tubes

And they said

It's gonna be your life or the baby's life

You can't have another baby

At that time

My dad was in the hospital with me

He refused to have me

Have my tubes tied

Even when I was told to make my own decision

They wanted to tie my tubes

And my dad

Said no

I think they would have

Tried to persuade me to

Yeah

representation of my research paradigm to assist in its understanding. Wilson (2008) also confirmed that the “entire circle is an Indigenous paradigm. Its entities are inseparable and blend from one to the next. The whole of the paradigm is greater than the sum of its parts” (p. 70). Figure 1 is representative of my Indigenous research paradigm; it refers to the cycles of life and the "infinite unfoldings of circular possibilities" (Leggo, 2005, p. 5).

*They would have
Kinda been trying
To convince me*

*But I said no
I didn't want to do anything like that
Because I didn't understand what it was all
about*

*Then I met my late husband
They told my late husband
“She won't be able to have any more kids.”*

*Because she won't make it
I was kind of old anyway
So then they tied my tubes
(LaughingTurtle, 2019)*



Figure Three:

Pimatisiwin, an Indigenous Paradigm

The image that is centrally located within my Indigenous research paradigm is entitled “*Pimatisiwin*” (Life). To provide context regarding “*Pimatisiwin*”, I use Simpson’s (2000) seven principles of Indigenous worldviews. They fit with the image in the following ways:

First, knowledge is holistic, cyclic, and dependent upon relationships and connections to living and non-living beings and entities. Second, there are many truths, and these truths are dependent upon individual experiences. Third, everything is alive. Fourth, all things are equal. Fifth, the land is sacred. Sixth, the relationship between people and the spiritual world is important. Seventh, human beings are least important in the world. (p. 3)

Every being in my paradigm holding space, reliant on the water, the air, the earth. No entity is more important than the next, we/they are all equal.

Identifying with “location” (Absolon, 2005), I realize that it is linked into Indigenous research methodology and Indigenous knowledge(s). Therefore, I

They Thought She Was Drunk

*A friend of mine
Was driving from town
She started getting chest pains*

*We had a little building here
That holds the ambulance
And the ambulance drivers.*

*So she stopped there
She knew she had to get to the hospital
And she couldn't drive anymore*

*She stopped there
And just bending over
And holding her chest*

*She went to the door
She pressed the button
The ringer*

*And then they seen all right, and then ...
Her hair was hanging down
They thought she was drunk*

*She was suffering
A big blockage in her heart
She ended up having a big heart operation*

intentionally choose to “locate” myself, as least in this present moment, in this image. Absolon cautions that “the only voice I can represent is my own and this is where I place myself” (p. 99). I am connected to my paradigm in an intrinsic, spiritual way. And I “remember” who I am when I look into the image

Locating ourselves is a remembering process. The word “remember” can have two different meanings: (1) to recall from memory or (2) to reconnect. Location establishes connection through memory. When we locate, we search through our memory banks and retrieve information about who we are, where we come from, and our roots [...] for Aboriginal Canadian peoples, locating re-members us with our ancestors and with our Nations. (Absolon, 2005, p. 115)

The word *pimatiswin* refers to the ideology of life, the synergy of living. My paradigm informs me by em(body)ing active remembering, re-locating me into the spirit and earth realms.

*Finally they decided,
"No, this woman's gotta go
To the hospital"*

*Instead of opening the door
Right away,
"How can we help you?"*

*And all that
Nope
They just assumed she was drunk

They didn't want to deal with her
So they put her on the ambulance
And brought her to the hospital
(Sharing Circle, 2019)*

My family has spent many years
(dis)located because of colonialism, and
every day the best that I can do is to strive to
remember and (re)locate myself. The self
that was lost to assimilation and crushed
with oppression. My paradigm grounds my
spirit in a good way. Battiste (2000) writes

Indigenous people's epistemology is
derived from the immediate ecology;
from peoples' experiences,
perceptions, thoughts, and memory,
including experiences shared with
others; and from the spiritual world
discovered in dreams, visions,
inspirations, and signs interpreted
with the guidance of healers and
elders. (p. 499)

Pimatisiwin, my conceptual paradigm,
proves the synergy of life. It informs my
ways of knowing by reminding me through
dreams and intuitive signs that I am a
spiritually-grounded Iskwew.

When I feel crushed by systemic or
institutional racism, or feel anxious,
distracted or worried, I recognize my
responsibility. I take it upon myself to lean
on my ancestors and use their medicines. I
burn sage, and smudge myself and feel less

A Good Stereotype

from the first time
I got my period
I was 12
then when I was 16,
I went to the hospital
with my parents
I had such horrible pain
we wanted
answers
that doctor
refused to believe
I was anything but pregnant
It was a good stereotype
native girls get pregnant
she put me in a box
(PR, 2019)

polluted by colonialism and become
[re]invigorated. Reaching out, locating and
re-membling informs my beliefs about my
existence.

As an emergent Iskwew (woman)
scholar, I find it critical that my
epistemology be grounded in *knowing*.
Indigenous epistemology often emerges
from pieces of stories, or personal
narratives. I am determined to become
competent in *Mamatowisin*, an inner
mindfulness, to appreciate “the capacity to
tap the creative life forces of the inner space
by the use of all the faculties that constitute
our being—it is to exercise inwardness”
(Ermine, 1995, p. 104). Kovach (2009)
positioned epistemology “as knowledge
nested within the social relations of
knowledge production. It has been a term
used by Indigenous researchers to express
Indigenous worldview or philosophy
(Ermine, 1995; Meyer, 2001; Wilson, 2008).
By “exercising inwardness,” I [re]focus the
lens of decolonization, and navigate the
necessary knowledge (epistemology) that
informs my space in this world (Ermine,
1995, p. 107). As an Indigenous researcher,
my responsibilities are two-fold. I must
continue to decolonize myself as I embody
Mamatowisin, or inner mindfulness.

They Would Say No

*My dad's family
Was a huge part
Of residential school*

*My dad's mom
She had 10 kids
My aunties*

*They're twins
One of the things with them
Happened with the sixties scoop*

Indigenous methodology is critical to disrupting colonial ideologies embedded within Indigenous peoples because

Historically, research produced knowledge about Indigenous peoples, it shaped popular perceptions of them, fed racist ideologies and stereotypes and created distorted images that were fed back to Indigenous people defining for them who they were and what attributes they should possess in order to be Indigenous. (Smith, 1999, pp.1-3)

When we work within Indigenous methodologies, we dismantle the racist burdens of history.

[Re]emergence onto the flip side of the lens can be realized by using an Indigenous conversational method. Kovach (2009) reminds us that we can (re)connect to our ancestral ways of knowing if our paradigms and methodologies “[are] linked to tribal epistemology; [are] relational; [are] purposeful (most often involving a decolonizing aim); involves protocol as determined by the epistemology and/or place; involves an informality and flexibility; [are] collaborative and dialogic;

*They had told her
She was signing just birth papers
She was actually signing adoption papers*

*She lost the twins
I don't think they found them
Until they were close to 20*

*I know there was things with my dad
I remember this happening
When I was young.*

*My mom is not dark skinned
Like
How my dad is*

*My dad
Would go into a hotel
And ask for a room*

*They would say no
It's full
We're fully booked*

*Then my mom
Would go in 10 minutes later
And they would give her a room
(Ikwe, 2019)*

and [are] reflexive” (2010, p. 43). As an Iskwew and researcher I am invested in all of these. I am now in the role of researcher, and this is the space that Indigenous epistemology links with my storied life because as Loppie (2007) contended, “within most Indigenous paradigms, knowledge is shared through stories that are intended to teach” (p. 281). Regeneration through stories or teachings is an essential principle of an Indigenous research methodology (Kovach, 2009; Loppie, 2007). I have come full circle.

It is necessary to understand how colonization has affected the researcher before they can engage in any study that will benefit one’s community. Similarly, to engage in Indigenous research one must radiate a “strong connection between self, community, memory, reciprocity, and research [which] makes the research strong from day one” (Kovach, 2009, p. 115). Because I am called upon to engage in relational accountability—a necessary feature of an Indigenous research methodology—, “it is essential that [...] [I] de-colonize [...] by reclaiming [...] histories, values, languages and traditions” (Absolon, 2010, p. 55). According to Absolon (2010), this reminder of accountability encompasses

Left Me There

*Me and two or three nurses, I think
I remember*

Because it was a long labor

I went in at night

The baby came the next day

They just let me rip

Had a hundred stitches

I had a hundred stitches.

I was in a Catholic hospital

And I was an unwed mother

I was becoming an unwed mother here

I was thinking about it

*I thought, "OK, well that's probably why
they didn't wanna really do anything."*

I don't remember getting any painkillers

They just kind of left me there

Waited for me to give birth

(Gertrude, 2019)

Time and space: the past, present,
future; directions and doorways of
life; the ecology of creation such as
earth, sun, water and air and all their
occupants; and values that retain the
balance and harmony of all of the
above. (p. 74)

By operating through an Indigenous
paradigm and research methodology, I
connect to the world around myself as a
Cree researcher.

Nisgaa Methodological Framework

The ability to craft our own research stories, in our own voice, has the best chance of engaging others. One strategy is to integrate into our research findings the stories that paint the context of our research. (Kovach, 2009, p. 60)

First Flight

I felt/heard

Feathered wings

Whiffle through my mind

And I felt/saw

That eye

Focus, and see

Engaging

Inwardness

Mindfulness

Turned inward

Inherited lens

Seeing me

I saw the nest

In my dreams

Carrying relations

They Broke His Nose

I was breastfeeding my son

When I went into a restaurant

I was told to go sit in a corner

Breastfeed my son

Go into the bathroom

My son got sick

I took him to the hospital

And the police showed up

They thought I was beating my son

Because he was blue

He was born a blue baby

Like that bruise-looking blue

You know?

So they thought

I was beating him up

I just felt that they rushed his birth

Because it was five o'clock in the morning

And everybody didn't want to be there

I felt like the doctor had to be on call

Had to be called in for delivery

I felt that

He didn't want to be there

So he rushed it

He used forceps on my son

And they broke his nose

And I use
Ancestral aptitude
To share

Share my gift
Share my words
Share my spirit

I watched
My *Nisgaa* fly
Into all the spaces

Wings spread
Eyes clear
Clean heart

Nisgaa framework
Resisting colonialism
First Flight, resurgence
(Cheechoo, K., 2019)

Throughout academia, I had been made familiar with standard Western paradigms and framework designs. As discussed in Chapter Three, my early life (which consisted of being raised by parents who had either attended or experienced intergenerational impacts of Indian

*My mother had to fix my son's nose
It took her almost six months
To make sure
The nose
Was gonna grow properly*

*A nurse said,
"Well,
I guess
He'll just have a crooked nose."
That's what the nurse said*

*They told me
I had to get sterilized
After I had my first baby
They said that I could
Not have any more babies*

*Which I went along with
Because I thought,
"You know, it's a doctor saying this, right?"
But I think I probably could have had more
babies
But they tied my tubes*

*They told me
That because my son was born early
That I wouldn't
probably
Be able to carry another child*

Residential Schools) trained me to be complicit in upholding Western ideologies and constructs. Coursework early in my PhD program did not provide spaces for Indigenous worldviews or ways of knowing, and this propelled me into that very much needed space of personalized decolonization. I began to resist standardized theories, formats, and ideologies. Instead, I began choosing to subvert what I was learning, pushing back against what I was being taught. In assignments, I worked to provide well-thought out views about Indigenous Knowledges, specifically my Cree Indigenous Knowledge, and how it c/w/ould exist analogously with various Western points of view. My coursework year left me satisfied in knowing that I had attained what I had set out to do. I wanted to resist and subvert Western expectations of an Indigenous scholar, while also excelling in that space. My professors and colleagues were on this wild roller coaster ride with me—and sometimes that roller coaster threw us some very unexpected dips, flips, and curves! In the end, I experienced tremendous growth as an emergent Cree scholar, as well as making community and sustainable relationships within my cohort and post-secondary institution.

*That's why this doctor
Thought
I wouldn't
Be able
To have any more kids

I was supposed to have my birth
With this other doctor
He was very upset with me
I told him that they tied up my tubes,
He said that probably wouldn't have been
necessary
(Rose, 2019)*

I recognized early on that I needed an Indigenized and personalized methodological framework in order for my research to properly resonate with my Indigenous Knowledge, and my Cree epistemological stance and/or worldviews. My Cree *Nisgaa* Methodological Framework emerged from a really good space. I immersed myself in texts written by Indigenous authors that were incredibly revitalizing, I chatted with Elders and other Indigenous scholars about doing things in a good way, and honestly, I just really followed my spirit and the whispers of my ancestors.

After examining several Indigenous frameworks, I began to consider what my own framework could look like. I wanted to be representative of my ancestry, cognizant of my responsibilities, and to be creative because this is also a very large part of my spirit. Because I am a Cree Iskwew who is familiar with *Nisgaa*, or geese, I recognized that a stylized image of a *Nisgaa* could provide a good way to relate my framework. After thinking about the many features that make up a *Nisgaa*, and with sketches in hand, I approached my husband who happens to be a very talented lifelong artist. After much consultation, including several

You Should Know

I remember

My cousin saying

They were experimenting on her,

I'm not even sure

She had her baby in Moose Factory

Then she couldn't get pregnant after that

She went to the doctors and they told her

"You should know that your tubes were tied."

She got married

Was going to try to get pregnant

With her husband

And she never could

I mean,

You know

They were using the Native people

To do that.

(Ihow 2019)

drafts and revisions, together we came up with my Cree *Nisgaa* Methodological Framework, which is depicted in Figure One.

I will tell you why I chose a goose to portray my methodological framework. It has to do with the fact that I am an active fan of geese, and have been studying them over the past fifteen or so years. They offer so many different ways to learn. For instance, think about the goose that performs as a guard when others in the flock are eating, you will know who the guard is immediately. It is the lone goose standing up, alert to the surroundings and to any threat. For me though, it is early to late autumn that best offers learning opportunities. I love to watch young geese learning to fly in formation. You can easily tell which ones they are. They are rarely in the proper “V” formation, and they kind of flounder up there in the sky. The best part for me though is the constant reminder that patience and compassion are key. Geese are the embodiment of really terrific teachers or instructors. The older, more experienced geese honk to prompt the young geese to get in formation *if they can*. And if they cannot? Then they will *all land together* and will practice flying again and again *until they are*

A Margarine Container

The second one was ...

I miscarried at home

Actually

I was getting a lot of pains

And then

I miscarried at home.

My birth plan

Was to go give birth in St. Boniface

Then when I ended up miscarrying

When I called my doctor's nurse,

We told her that I had passed something

In the toilet

She asked my then husband

To take it out of the toilet

And put it in a container

Like a plastic container

A margarine container

And bring it to them

I know

I understand that was

Maybe part of their research or whatever

all successful. This is the goal of my work.
We need to lean into each other until we all
discern how our successes look. We can be
each other's balance.

*But still it bothered my husband a lot
I think it really affected him
And it affected me too*

*Because ... I don't know
Anytime I look at a
Margarine container now*

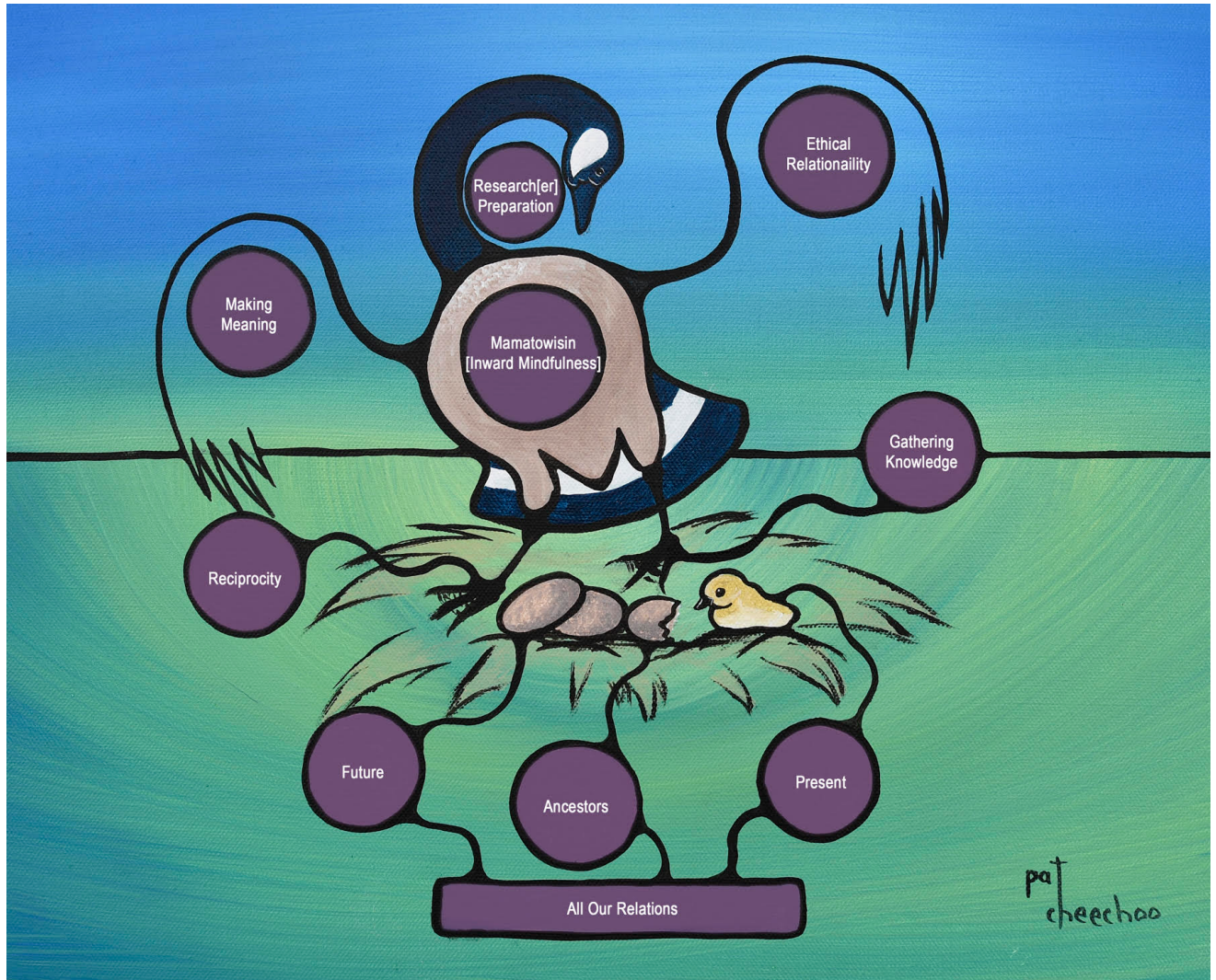
*I'm brought back to that time
Which is messed up
'Cause that was over 20 years ago now*

*That was my second miscarriage
I think I was about four months along
Four and half months*

*They kept it and everything
Then the following spring
We actually did have a burial ceremony*

*I had gotten a little bit of closure from that
They gave us time and everything
And they talked to us*

(Lisa Neilson, 2019)



(Figure Four: Cree Nisgaa Methodological Framework)

Kovach (2009) describes the purpose of Indigenous frameworks as “...illustrating the unification... influencing the process and content of the research journey” (p. 42). Indigenous frameworks should be grounded in relationality, and goodness. They should be reflective of our responsibilities as past, present, and future ancestors.

As previously indicated, I created my methodological framework from a space of spiritual *Pimatisowin* (goodness). Looking at the image with a logic-governed eye, you see the *Nisgaa*, or goose. You see that the wings are extended, that it is standing inside of a nest, and you see wee beings within the nest. Maybe you notice that there are a series of arranged circles in the image.

Now, allow me to reveal what perhaps your eye does not register. The *Nisgaa*’s head is pointed downwards, towards its chest. Here, *Mamatowisin*, an inner mindfulness, or awareness is continuously being engaged. The head and the spirit are connected, always acknowledging the many responsibilities and protocols of being an Indigenous researcher. The *Nisgaa*’s powerful wings are extended, engaging in making and holding space immediately around and beneath it,

That's The Thing

I think we become

Numb

To all of these stories

'Cause when you watch APTN

Or you go to a conference

Or Facebook or whatever

People have so many stories

About all these abuses that we face

Little or big

That we're just sitting

You're numb to it

Almost

We're like, "Okay,

There it goes again.

How do I handle this?

How do I get through today

And process this?"

That's the thing

providing an ongoing synergy of respect and reciprocity. The *Nisgaa*'s webbed feet are firmly planted, are pointed in the same direction, and are attending to both the physical and spiritual environments. The *Nisgaa*'s large nest offers enough space to embrace all of our relations, keeping these past, present, and future ancestors safely ensconced within this space. Notice what you thought originally were circles. Look again, and see that they are spheres. These spheres are alive and in perpetual motion, transmitting the critical information they contain. The spheres are in a sharing circle with one another, demonstrating spiritual integrity in the space they hold. And finally, the spirit lines. Had you noticed them? These black spirit lines anchor critical pieces of the framework to the *Nisgaa*, creating permanent spiritual connections.

Framework

I sit patiently
Knowing
Words are being (re)birthed

Surfacing
Ancestors' blood memory
Past, present and future

It's Not Right

I don't know
You know all the guys in town
They all had that mentality
That Native women were easy

I remember going to university
When I went to Lakehead
I remember walking
With my friends

There was a bunch of white guys
Sitting there
They were making funny noises
"Oh wa wa, here comes the Indians"

They were just young kids
That's what I look at
"These are young kids,
They don't know any better."

Every time
I've encountered anything like that
I always thought that
They don't know any better

Guiding

Me

My journey

I am listening

With all my spirit

For the correct words

And I feel

A familiar *b l o o m*

Warmth, a knowing

In my chest

In my heart

In my blood

And the words

Spill

A comforting cadence

Cathartic

I am in the right

Space

I am grounded

Practicing heart-work

Pimatisowin (Goodness)

(Cheechoo, K., 2019)

I try to make excuses for them

I guess

I know

It's not right

(Ihow, 2019)

Engaging the synergy involved in
my framework is critical to me. I am trying

to relay my personalized Indigenous Knowledge through my personal lens in a way that provokes the reader to engage with what they see. I am asking you to (re)focus your own lenses. Weber (2012) says that “images encourage embodied knowledge” (p. 7) and that is what I hope is occurring when my framework is read through our bodies

Visual methods help researchers keep their own bodies and the bodies of those they study in mind [...] people are not ideas, but flesh and blood beings learning through their senses and responding to images through their embodied experiences [...] the visual disarms or bypasses the purely intellectual, leading to a more authentic and complete glimpse of what a particular experience is like or of what people think and feel. (Knowles & Cole, 2008, p. 46)

Em(body)ing the sharing circle of my *Nisgaa* methodology provides a space to be read through. The *Nisgaa* asks you to *shift* your own lenses, to engage your responsibilities with the corporeality of decolonization.

To Be Seen But Not Heard

*I have the six children
Five are with the Native man
And my new baby*

*After having kids
And being older
I start to realize*

*You learn more
About the water teaching
Stress*

*Not to have stress
On the baby
'Cause it's more lethal than drugs*

*So with this pregnancy
I've tried my best
To not have stress*

*So I breastfed this baby
But he had tongue tie problems
So we had to fix that.*

*In order to do that
You need a referral
From the family doctor*

After a lot of thought on how to explain the *process and movement* of personalized decolonization I am able to share an analogy that I came up with. Most people have experience with visiting an eye doctor, or optometrist. I explain that for me, engaging personalized decolonization is similar to sitting in an optometrist's chair. A machine with many, many lenses is usually placed in front of your face, concentrating on your eyes. In this focused space, you become responsible for communicating which lenses you can effectively see through. Some lenses distort your view, skewing your perception of even the most familiar objects. Some lenses feel almost all right, but again, the onus is on you to effectively communicate your view. Moving the analogy along, if we can envision that colonialism, class, privilege, or entitlement occupy some of our lenses, it becomes our responsibility to recognize this, and to adjust our lenses. We need to adjust as many times as necessary to have clear vision. With a goal of personalized decolonization, this becomes a lifelong process. The work is difficult but the resulting (in)sight is beautiful.

*I got the referral
From the family doctor.
I was sent to Doctor ******

*A pediatrician
To fix
The tongue tie*

*So I was there
With my children
As well*

*My two other children
Came with me
'Cause it was over the summer*

*The nurse took the baby
To the doctor
To correct the tongue tie*

*When the baby came back to me
They circumcised him
Without my consent and my knowledge*

*They fixed his tongue tie
And
He was circumcised*

Pimatisiwin Through A/r/tography

My approach to this em(body)ment of Indigenous art/o/graphy is through sharing a relational circle as an artist, researcher and teacher. I use an arts-based research methodology in the form of poetic inquiry. The art in both my paradigm and framework move my process of poetic inquiry along by forging a space of ethical relationality to write through the co-creators' shared stories of violence, betrayal, survival, love, hope and hopelessness. Their stories resist a settler colonial grammar of sterilization. For me then, poetic inquiry provides a space where both the researcher and participant can meet, and it is my hope that my ethical engagement with the stories shared with me is apparent throughout this dissertation.

Engaging Western theory and Indigenous theory provides a good space for A/r/tography to emerge. My Cree *Nisgaa* framework works to engage these different pieces, inviting to be read with *Mamatowisin* (an inner mindfulness) in order to “become” (Irwin, 2013, p. 207). A/r/tography travels in the spaces in-between, creating *pimatisiwin (life)* within

*When they brought back the baby
I noticed there was a different diaper
I opened up the diaper*

*There was a big band aid on it
Gauze
A lot of blood*

*I just started freaking out.
I was sweating
I ran out to tell a doctor*

*She circumcised my baby,
She came in my room
Asked if I was Muslim*

*I told her no, I'm not Muslim
My kids were there
They didn't know anything about
circumcision*

*They thought she cut his penis off
My daughter felt like puking
My other son had a headache*

*Then she wanted to stitch the baby.
Said I would normally stitch the baby
She kept repeating that*

the complexities of the palpable and impalpable. A/r/tography transforms the traditional relationship between theory and practice by recognizing

The movement found within [...]
Theorizing rather than theory, and practicing rather than practice, transforms the intention of theory and practice from stable abstract systems to spaces of exchange, reflexivity, and relationality found in a continuous state of movement (Irwin & Springgay, 2008; O'Sullivan 2007; Triggs, 2012; Triggs, Irwin, Beer, Springgay, Grauer, SXiong, 2011).

“Becoming” (Irwin, 2013) speaks to the “in-between spaces of becoming prompt disruption of duelling binaries, conceptions of identities and the rush to certainty” (Irwin, 2013, p. 200). I have been “becoming” all my life. Caught in-between the constructs of past and present, or ancestral and modern, I had unknowingly been in the process of “becoming” for most of my life.

Having written poetry from childhood, I am comfortable with it as a

*I said no
You're not going to touch the baby
I'm gonna take him to the family doctor*

*I took him to the family doctor
The family doctor said I did the right thing
He doesn't need stitches*

*It impacted my life
Sometimes it's hard to identify
Some feelings...*

*I have nightmares of the doctor
When I see the doctor in my dream
I am paralyzed*

*I complained to the College of Physicians
It took me a long time
To actually talk about it and do it*

*At the time, the doctor ...
After she realized she did the mistake
She gave him extra freezing gel on his penis*

*So that's my concern
The other concern is the baby
Had too much procedures*

medium. For my Master of Arts final project, I framed my journey from being an oppressed, subjugated child to a woman who moves with knowledges and agency through the use of provocative and impacting lyrical poetry. When I was ruminating about some of the ways to best share results, or the meaning-making process of my research I chose to bring poetry back in the form of arts-based inquiry. Poetry as pedagogy has the means to reach into liminal spaces, and places a finger on the pulse of words we encounter along our journeys

As a form of performance pedagogy, arts-based inquiry can be used to advance a subversive political agenda that addresses issues of social inequity. Such work exposes oppression, targets sites of resistance, and outlines possibilities for transformative praxis. (Finley, 2012, p. 2)

As I was dreaming, envisioning, and writing my dissertation, I realized that women have participated and have contributed in my study in a way that I can see, from a Cree lens, as being relational. They have shared their narratives with me. But if I look at grouped participant contributions through an

*They shouldn't have
Did the two procedures
At the same time*

*So now I try so much
To not have stress on the baby
That was too much stress on the baby*

*Like for thirty minutes
Crying straight
I wasn't allowed in his room*

*My kids look at him differently now
Because I have four other boys
They're not circumcised*

*They make little comments
Like they cut off his thing
Or it looks funny*

*I don't know what kind of effects
They have or
If they see him differently*

*To me, it's child abuse
It took me about two weeks
To calm down*

Braid

from the first time	<i>Yeah</i>	<u>I can't remember</u>
<u>how old I was</u>	I got my period	<i>my background</i>
<i>of being mixed</i>	<u>12 or 13?</u>	I was 12
then when I was 16	<i>ancestry</i>	<u>somebody yelling</u>
<u>"You dirty Indians"</u>	I went to the hospital	<i>I didn't have an easy time</i>
<i>I had to prove Indianness</i>	<u>"Why am I dirty?"</u>	with my parents
I had such horrible pain	<i>if I cried in these beatings</i>	<u>I just took a shower</u>
<u>and I shower every day</u>	we wanted	<i>I wasn't an Indian</i>
<i>I took a lot of beatings</i>	<u>when we got older</u>	answers
that doctor	<i>I wanted to be an Indian</i>	<u>we went to high school</u>
<u>we were always picked on</u>	refused to believe	<i>so I didn't cry</i>
<i>I didn't cry</i>	<u>white guys</u>	I was anything but pregnant
it was a good stereotype	<i>until later</i>	<u>wanting to pick us up</u>
<u>because we were all easy</u>	native girls get pregnant	<i>in the bush</i>
<i>by myself</i>	<u>you know</u>	she put me in a box

academic lens I can see that métissage becomes evident.

Métissage involves “mixed and multiple identities” within the spaces of “messy threads of relatedness and belonging” (Hasebe-Ludt, Chambers, & Leggo, 2009). The poem *Braid* is a compilation of participant stories. It is a métissage of voice. There are three distinct lived experiences interwoven together in a shared space. The stories are violent, recounting experiences of displacement, despondency and disbelief at the mistreatment from people in different spaces. The narratives can be read as stand-alone pieces, or seen as a represented account of immeasurable dehumanization. Grouping them together in a métissage creates a space “through which researchers and writers can reformulate understandings of self and other in ways that are meaningful and appropriate [...]” (Lionnet, 1998; 2001). I remain grateful for the implicit trust afforded to me by the participants in my study. With their stories, I am able to create a surfacing space to (re)weave Canada’s grand narrative, engaging a métissage forged from relationality and respect.

*It shocked my life
Misplaced my life
My life is misplaced after that*

*Also for my husband
He never woke up
Happy since that*

*He also is mad at me
For allowing them
To take the baby*

*But I felt like okay
It's Canada
It's the Canada system*

*I forgot the mention this
She tried to take the baby back
Into the operating room with her*

*I went right to the doctor
I stood my ground
She tried to pick the baby up*

*She picked up the baby
She said, "I'll be back,"
And she stepped out*

*And I said,
"No, you're not taking my baby without me.
I'm coming."*

***Relationality, Respect, Relevance and
Reciprocity***

I was looking for answers. For the women in my life, my daughters and granddaughter, my relations, for me. I wanted to bring forward narratives that work to disrupt the performative policies of genocide. My research question asked: *What do Indigenous women's stories reveal about public and customary practices, and policies and practices of forced sterilization?*

Because I was planning on interviewing peoples from marginalized communities, I followed and was grateful for the intensive rigour of the ethics application (specifically the Tri-Council Policy) to ensure that I met all criteria and followed all protocols. Being a Cree Iskwew, my responsibilities did not end there. I hold responsibilities to my relations, past, present and future. It is my responsibility to ensure that my study was not extractive, and that I give back, or engage reciprocity with whomever I work with. I was seeking permissions to enter communities and conduct both sharing circles and one-on-one interviews. In November 2018, I was certified with the First Nation Information Governance Centre

*Then she refused
To allow me in this room
I said I want to see what's in this room*

*I opened the door myself
There was blood
It was like a slaughterhouse*

*I'm serious
There was blood
And she's like*

*That's why I didn't want you
In this room. I just did a procedure*

*And I said,
"You don't want me in this room,
You want to take my baby in this room?"*

*So now
I have
The voice*

*My grandmother
Didn't have
Residential School*

*To be seen but not heard
I got to use my voice
To protect my baby
(Noodin, 2019)*

The First Nations principles of OCAP are a set of standards that establish how First Nations data should be collected, protected, used, or shared. They are the de facto standard for how to conduct research with First Nations. Standing for

ownership, control, access and possession, OCAP asserts that First Nations have control over data collection processes in their communities, and that they own and control how this information can be used. (FNIGC website, 2019)

The training and resultant certification indicates that I recognize the importance of protocols and that First Nations should retain stewardship of data collected within their communities.

My research also adheres to the Utility Self-Voicing Access Inter-Relationality (USAI) Research Framework's Principles of Ethics. These ethics were created in 2012 by the Ontario Federation of Indigenous Friendship Centres (OFIFC). The USAI Research Framework's Principles of Ethics involves the

Recognition and acknowledgement that Indigenous people have been,

and remain, disfranchised, disadvantaged, and dispossessed, are essential to understand that only through full control over generation and dissemination of knowledge, can urban Indigenous communities make decisions about their lives, assert their rights to execute plans, goals and priorities, and own their cultural, socio-economic, and political reality. (2012, p. 5)

The Research Framework “is designed to ensure research integrity from the perspective of Knowledge Authors and Knowledge Keepers” (2012, p. 4). The OFIFC is informed by the following four ethics (2012, p. 5): Utility, or research needs are based on community priorities; Self-voicing, or research, knowledge, and practice are authored by communities that are fully recognized as knowledge Creators and Knowledge Keepers; Access, or research fully recognizes all local knowledge, practice, and experience in all their cultural manifestations as accessible by all research authors and Knowledge Keepers; and, Inter-relationality, or research is historically-situated, geo-politically positioned, relational, and explicit about the

Little Things With Sugar Sometimes

*We were at McDonalds
There was about six kids
My own kids and my nieces*

*They were eating
And they went to play
In that play area*

*My niece comes running
And she said
"There's a girl in there calling us 'asswipe'."*

*"Why is she calling us that,
We're not even doing anything?"
She says*

*And I went
"Show me who it is"
She pointed it out*

*I called the manager
And the manager
Was talking to me*

*I wanted everybody to hear me
"This little girl
Is calling my nieces asswipe."*

perspective from which knowledge is generated.

I have aligned the process of my study with the objectives and knowledges of the USAI ethics principles, working to create community through “trust, friendship, and mutual respect” (212, p. 5). Because “trauma-informed approaches do not problematize the specific coping mechanisms but instead, recognize the impacts of unresolved historic and systemic violence” (2012, p. 5), it is critical that I mindfully engage with ethical relationality, respect, relevance and reciprocity. According to the Ontario Federation of Indigenous Friendship Centres (OFIFC)

Trauma-informed approaches in Indigenous research are a critical component of community-driven praxis and a central feature of USAI. Trauma-informed approaches recognize the impact of historic systemic violence and prioritize the creation of safe, culturally competent relationships throughout the research process. (2016, p. 4)

These trauma-informed approaches ground my research in a good way that

*I said "I paid the same thing here
And I expect the same treatment
As anybody else*

*I don't want anybody calling my nieces
names.*

And who are the parents?

Who's supervising you?

You know?

And the gent

Was sitting right there

*And I said "Is this what you teach your kids
To call names?*

*How do they know to call other people
asswipe?"*

*"I'm paying the same darn thing here
And I expect fair treatment."
I was very angry*

*I was really mad
And I said "Aren't they the same?"
But I used nice words*

*Yeah,
Little things
With sugar sometimes
(LaughingTurtle, 2019)*

recognizes the effects of historical violence and intergenerational impact and traumas.

Because of my own previously mentioned past experiences with an extractive and violent researcher, it was incredibly important that I work from a good space. Admittedly, I was nervous because I was asking women to share difficult pieces of their lived experiences. I was worried that sharing stories would be a trigger and potentially catapult participants into a wounded space. Knowing that I have no training as a counsellor, and wanting to ensure that I showed respect and engaged relationality, I provided information on how to contact Talk4Healing. Talk4Healing is a “culturally grounded, fully confidential helpline for Indigenous women available in 14 languages all across Ontario” (Talk4Healing website, 2012). I provided information on Talk4Healing on the interview consent form, sharing circle consent form, and once again when interviews began.

In September 2018, I approached several First Nation communities. I did not receive any response from one community, and I respect/ed that space of agency. I moved forward, and contacted Long Lake First Nation (my own community),

Constance Lake First Nation and Kitigan Zibi First Nation. I followed protocols, ensuring that I respected the spaces I was seeking to enter. I contacted the Chiefs of these communities initially, seeking permission to speak with them about my proposed study. Once that permission was provided, I sent a detailed letter describing what my study was about, what I would like to do, and how I was going to do what was outlined. After the letters were received and I was provided with permissions, I was invited into the communities to speak face to face with Chiefs, Councils and key community members. I also spoke with Elders. I was seeking knowledge and expertise with regards to my proposed research idea, and interview questions. It was necessary that I worked from a good space and with a good spirit. Following protocol, I provided tobacco to thank each person for their time, and I remain grateful for them sharing themselves and their inherent knowledges and worldviews with me.

When I was provided permissions to recruit participants for both the sharing circles and interviews, I provided different peoples in the communities with digital copies of the recruitment posters. These

This Is All You Get

I do know

When I had my tubes done

They did keep trying

To push on the prescriptions

And I refused

I absolutely refused

To have a prescription,

Any type of pain meds

I would rather deal

With the pain side of it

Than be on something

That didn't let me take care of my kids

I didn't want the pain meds

Because

I knew that they were

The oxys or the percs

And I knew

That there were other options

They weren't willing

To offer the other options

posters were displayed on social media. Two of the communities have “groups” on Facebook that provides a gathering space in which to relay information about community events. Copies of the recruitment poster were also posted up at the band office, and handed out during other events. I am very grateful for the various peoples who took on the responsibilities of helping me recruit community members for my study.

The recruitment poster asked for participants, women who were eighteen years of age or older. I highlighted what would take place for either the sharing circle or the semi-structured interviews. I indicated that both would be recorded and later transcribed with an eventual (re)storying of participant transcripts. I provided my mobile phone number and email address as a means of contacting me to set up a date and time for the interviews to take place. I offered different mediums in which to do the interviews, including Skype (or something similar), telephone or in-person. With regards to the sharing circles, I set up times to meet within the communities, heavily circulating the time and place where these sharing circles would take place. During the times that I travelled to two of three of the communities to facilitate the sharing circles,

*It was like,
"Well, you could take this or you could take this."*

*But I knew
That they were addicting options*

*But I also knew
There were other pain medications
That didn't have that high risk
Of addiction put in it*

*Yeah, yeah, yeah,
It would come with a pretty high price tag
There was no way
That they were willing to help.*

*It was basically,
Well ...
If you're using a status card
This is all you get.
(Ikwe, 2019)*

I was a little alarmed that no participants showed up. It was later in conversation with Elders that I learned that some women felt some trepidation about sharing their stories. Because Indian Residential Schools are residually violent, community members continue to experience intergenerational impacts. These impacts resonate today. Healing is still taking place, there is no linear path, and it may take many generations before a shift is palpable. It is because of these impacts that some potential participants felt that narratives outlining their lived experiences would be shared outside of the circle, and that they could be pushed into a potentially unsafe space. Respecting the participants, I dropped the sharing circle piece and instead shifted into semi-structured interviews.

I guided twelve semi-structured interviews. The interviews typically varied from about twenty to fifty minutes each. Most occurred over the phone and a few were face-to-face. The interviews were transcribed, and the participants were provided with the opportunity to go through their transcripts and declare if they were satisfied or if the transcripts required some changes. All participants were satisfied with their transcripts, and I did not have to

Oh, Go Back To Class

*Nurses at the schools
They treated me like
You're just pretending*

*They used to say,
"You're just doing that
So you can get to go home."*

*I thought,
Why are you saying that?
Like I'm not putting this on*

*You're ... a woman.
Why are you saying
that to me?*

*That must have been part of,
You know,
Because I was aboriginal*

*She'd say,
"Oh, go back to class.
You don't need anything."*

change anything. A resounding perception from many of the participants was that holding the narratives about their experiences with reproductive or medical racisms within themselves was one thing—it was quite another when they began talking. The stories awaken and they are painful in their rebirth. After the twelve participant interviews were transcribed, I used NVivo software. I hypothesized that a majority of the participants had endured racisms, particularly medical violence and racisms. Sixteen nodes, or themes emerged from coding references during NVivo analysis. These nodes include: academic or epistemological violence; community (First Nation); dysfunction; Elder or Ancestral support; generational traumas; Indian Residential Schools (IRS); loss, medical racisms; Post-Traumatic Stress Disorder (PTSD); racisms; religion; reproduction; reproductive violence; resilience; sexualized racism; and, violence. Medical violence and racisms should be considered an umbrella term, in that the plethora of lived experiences stemmed from maltreatment at the hands of so-called “professionals”.

Poetry as Pedagogy

Over thirty poems emerged from participant transcripts. The poems *as a*

*She wouldn't give me no aspirin
Or nothing.
That was in high school, yeah.*

*They wouldn't even
Give me extra pads for
Feminine hygiene*

*They'd say,
"Oh, well, we're short"
or "We don't have any left"
(Lucille, 2019)*

collective provide the reader an opportunity to see for themselves the dark spaces of oppression. Participants have shared the hardest spaces in themselves. They are allowing us a glimpse into their lives, and for this I am forever grateful.

Themes such as academic or epistemological violence; community; dysfunction; Elder or Ancestral support; (inter)generational traumas; Indian Residential Schools (IRS); loss; medical racisms; Post-Traumatic Stress Disorder (PTSD); racisms; religion; reproduction; reproductive violence; resilience; sexualized racism; and, violence were emergent. The experiences of the participants often pulled from many themes at once. Women are not experiencing these themes in isolation. They are experiencing them in an interconnected way. Colonialism has been ugly to us, and our stories reflect that.

In analyzing transcripts, I pulled impacting fragments forward. I was looking within myself, seeking an intuition that the placement and movement of the words was correct. I worked to make sure that the participants were not re-victimized through this (re)stor(y)ing process. Some of the poems have been (re)stor(y)ed into strands.

Swimming

I was walking

I was reeling

Ethnostress

Has its foot on my throat

Women and girls

Treading

Found water

In Thunder Bay

My daughters

Walking targets there

Drowning

In racism

And it weighs

It weighs on my spirit

Hopelessness

And my throat closes

(Cheechoo, 2019)

These strands have been woven together into a métissage. The voices communicate strongly, articulating experiences of displacement, despondency and disbelief. My dissertation will be shared with my community, and other community partners. It is my hope that women and girls will benefit from reading and hearing narratives similar to theirs, and recognize that they, and their autonomous bodies, deserve to be wholly respected.

My Turn in the Sharing Circle

Systemic Squaw

Eternally bronze
Exotic cheekbones
Bursting lips
Opaque eyes

Western eyes
Mold us
Molest us
We're fetishized

Western hands
Crave our hair
Touching it
Petting us

Western ears
Ignore our dialogue
Pleas
To just stop

Please, just stop
Your excuses
Stereotypes
Phony ideologies

*What is this collection of poems
but a Sharing Circle?*

Just stop
Your righteousness
Privileged
Entitled-ness

Halt.
Your denials
Pernicious
Deprivation

Cease.
Your altruism
Third world
Exists here

Desist.
Your attempts
Extermination
Genocide
(Cheechoo, 2017)

As I sit here in this circle, I am
ruminating about the final words of my
dissertation. I fully realize that the
culmination of writing up my thesis has
landed squarely on an important date.
September 30th is recognized as “Orange
Shirt Day.” Yes, a day. A movement. One
that formally began in 2013, but one that can
trace its historical roots/routes to 1973. Yes,
the year that Phyllis Webstad entered the

They Just Look At Your History

*Once, I was at the hospital
I had a real sore back
I could hardly walk*

*I have degenerative disk disease
Have a hard time walking
And the doctor comes in*

*She's just a young woman
And the first thing she says,
"Are you trying to commit suicide?"*

*What?
I told her get outta here
I tried to stab myself in the back?*

*I just told her fuck off
And she took off
Another doctor came*

Indian Residential Schooling system. She was only six years old. She wore a brand-new orange shirt for her first day of school but quickly encountered systemic violence as Mission Oblates stripped her orange shirt, her Indigenous materiality, her spirituality, her relationality to her grandmother, her community, replacing it instead with the cold state sponsored settler colonial uniform and religion of institutionalized systemic racism.

This date is mean-ing-full, full of mean/ings to me. I have been thinking about the Indian Residential Schooling (IRS) system off and on all day (as I do mostly every day), and my various positionalities in relation to the material and psychological violence(s) of settler colonial genocide. As mentioned previously, my parents are survivors of Indian Residential Schools. I am a survivor of intergenerational impacts and trauma. I think about my childhood which feels scattered, missing. What I do remember about my past is violent and sad. I am thinking about my dad who does not really mention his experiences, except for the times when memories escape, freed, at last. He is quick to veer and shift from those spaces, but the ethnostress is evident. Ethnostress is the build-up of the effects of

I was so mad

At her

You know?

It might be in my history

That

I tried that

But that's not to say I'm trying

To commit suicide

Because I'm having a sore back

You know?

They just look at your history

And think that you do this all the time.

(Ihow 2019)

oppression and violence that has been distributed by settler colonial culture.

I continue to experience ethnostress. I think we all do. I know that some of us are being held captive by negative coping strategies. By memories that resist healing and insist at staying front and center. The intergenerational effects, and affects, of the Indian Residential Schooling system are still far-reaching and insidious. And not just for Indigenous Peoples. The school curriculum, popular culture, and the media have taught a Canadian public that Indigenous Peoples are Other, repellent, nonhuman. Living both inside and outside of Thunder Bay, I have been dehumanized at the hands of non-Indigenous people and their systems my entire life.

I have been groped by police officers, told that even if I “said anything,” nobody would believe me. I have had my long hair stroked by settler women, their hands sliding down my back despite me telling them that no, they could not touch me. I have endured hate through having countless pejoratives hurled at me. I have heard “squaw” too many times, from children and adults alike. I have been bullied by school administration, asked to leave high school in Grade 12 because I was a) pregnant, and b) a “bad influence.” Such “influential” settler

colonial perspectives, their violent impact, their hurt, stays with me. In several of my classes there was a settler student who was also pregnant. When I was being shamed for being pregnant and asked to leave, I asked if my pregnant peer was also being asked to leave. At the time, I remember thinking that we could potentially form an alliance and fight to continue our education together, in spite of the system. I was told to mind my own business. And, I witnessed her go on to graduate with no restrictions within the settler colonial system. That is not to say, that she did not also suffer the societal shame and systemic challenges of teen pregnancy.

Before I continue, I want to talk about the poem at the beginning of this final shared space. I wrote the poem *Systemic Squaw* from a hurt and angry space. It emerged from all of those pieces of me that had no choice but to endure systemic violence. I want you to know that I have reclaimed that ugly word “squaw.” I use it in my writing, and it serves as a tool to demonstrate how hate speech operates, *but it is not okay for just anyone to say or use*. There are protocols surrounding this and reclaiming the violence of words, and it is critical that those protocols are implemented and respected.

He Moved

I think

When I was first pregnant

I was belittled

Because I was young

I think I was just 16

They told me

I was too young

That I should abort the baby

But then

My mom was there

And my mom told the doctor,

"no, we don't believe in abortion,"

And that,

"She's gonna move back home...

She's gonna raise the baby at home

In the community."

There was another

That they wanted me to abort

I was having so much bleeding

And he was on my tube

When I began this poetic inquiry, I endeavoured to address the policy of forcing sterilization on Indigenous women. The goal was to share narratives and stories that illuminate missing histories and intergenerational and contemporary impacts of colonial violence on Indigenous women's bodies. Now that I am done, I found that this final story took its time, and its toll, as it birthed its painful words through me. I was and am submersed in violence. And so too, my children and grandchildren! We are unable to disengage from this violence because it is always present, tracing its finger down the genealogical spines of inter-generations. Stark statistics remind me that Indigenous women and girls have one in five chances of going missing or being murdered. I have three daughters and one granddaughter. Does the meaning of those horrific statistics shift, become more meaningful because together we are five Indigenous women and girls? Now that I have articulated that *awfulness* outside of my mind, I am moved to tears and I have to close my mind and heart to those contemplations because the implications sicken me, frighten me. And, as I was writing this, I learned that one of my adult children had been assaulted by a Thunder Bay taxi driver. By a person that was hired

*When we were supposed to go
And abort him
We went
To go see the specialist

I think I was
Maybe two and a half months?
I already had
Four ultrasounds with him

But his heart rate
Was still there
And everything
They showed him sitting on my tube.

"Okay, you have to do it."
But we said, "No,"
Then they said, "Well you have to
Because it's gonna kill you,"

So we went
Friends and family prayed
They had to do another ultrasound
And I guess he must have moved

He was right in the uterus
He moved
They wanted to continue to abort
They tried to convince us
(Dragonfly, 2019)*

specifically to deliver them home safely. It is maddening that I am unable to keep my children and grandchildren safe. Yet, I am required to share that despite these harrowing, hateful experiences, I continue to experience peace through my dreams. My ancestors have been visiting me. They embrace me, holding me safe in a circle because I am holding space for difficult knowledges. The final image in this story celebrates that protected space. Welcome to the circle. My ancestors want you to know that we are safe there.

But, first, let me circle back one more time.

The Indian Residential Schooling system is in of itself an enormous Canadian travesty, but it is just one of assimilationist policies (amongst many) enacted upon and against Indigenous Peoples in Canada. Another piece of hidden Canadian history has been exposed. Mind you, although this travesty has been here for generations, it has finally been dragged from the shadows of settler colonialism into the light. Canada as a nation-state, its politicians and its citizens are finally being implicated for their complicity in the violence enacted upon Indigenous women. I want to step back, share that I entirely credit my ancestors for

We Just Accepted Them

*My husband and I
Went for further testing
We both found out
That I couldn't have children*

*We said, "Okay,
Well I guess this
Is what the Creator
Has given us for this life."*

*My husband thought after
He says, "Maybe we're meant
To adopt kids that nobody wanted"
(Lucille, 2019)*

my presence here in this circle. It was their collective voices that I heard years ago, prompting me to step into this circle, to research the violent practices of legislating reproductive injustices on First Nation, Métis, and Inuit (FNMI) women.

My research revealed and reveals that assimilationist policies are upheld and maintained by the Canadian government and in turn relations among settler colonialism, the continued oppression of FNMI women, and their missing histories. Additionally, recent research indicates that as of December 2018, over one hundred Indigenous women in Saskatchewan have come forward with complaints of forced or coerced sterilization. My research invited us to reconsider the following question: *What do Indigenous women's stories reveal about public and customary practices, and policies and practices of forced sterilization?* I wanted to know why our bodies produce so much desire for regulation. Why was it so important that our genocide be endorsed, and then enforced? Why have our generations been interrupted? Why has a settler colonial government attempted to silence our historical past? What might we learn from those who have survived? I wanted to know how this was being accomplished. Because, if we know how and

why and when, then we can begin to counter this violence. To resurge. Regroup. Re-emerge as sovereign Peoples whose bodies are ancestral, intact.

So, this journey was not an easy one for me. I grew up in a space that was constructed and informed by Western epistemologies and political ideologies. My father taught what he knew. So I became educated in internalized racism and how to hate the colour of my skin. My ancestors asked me to step out of that space of pain, to reclaim who I am as an *Iskwew*. I had to learn how to unlearn deeply embedded racisms and stereotypes...the grammar of settler colonialism, and how one learns to read one's self. I had to embrace compassion, offering it to myself just as often as anyone I encountered along this journey. I had to take my pain and restore it toward something useful that I could use in my teachings. I knew it was imperative that I "stay the course" despite the continued violences enacted against the women in and around my life. I reeled in horror and despair when I learned that an Indigenous woman in Thunder Bay had been viciously assaulted with a car hitch just because she was seen as "less than." To her murderer(s), her life was reduced to a mere joke. I was so distressed when that hateful attack resulted

Raising As Community

*When my mother had me
She wasn't quite 18
She had me in April
She was turning 18 in May*

*So, she was in the hospital
And when she was ready
To come home
With me*

*The nurses told her
"You can't go home with your baby."
She's like, "Why?"
"Well you don't have a father listed.
There's no father,"*

*'Cause she left it unknown,
At the time,
'Cause she wasn't in a relationship
They were gonna keep me*

*They told her,
"You can come back in a month."
My grandmother knew
What was going on*

in her death. And I remain distraught by the non-Indigenous on Indigenous violence entrenched so deeply in Thunder Bay. Ethnostress echoes through and from me. I barely have time to catch my breath before the next wave hits. Racism does not afford one downtime. But, I have to try to interrupt it. For me, for you, for all of us.

Staying the course means that I surrounded myself with good medicine. My partner. My children. My grandchildren. It meant immersing myself in the literature of Indigenous scholars who came before me, who felt similarly but stayed the course in order to scaffold a way forward. I used the medicines available to me, to cleanse myself and my space when things became too polluted. And through all of this, I learned. I learned who I am, and who I am not. I am not a subjugated by-product of Indian Residential Schools. I am a powerful Iskwew who has the resilience of her ancestors behind her.

It was that ancestral strength that provided the space for *Pimatiswin*, my Indigenous conceptual paradigm and for my *Nisgaa* methodological framework to emerge. I had to realize what the teachings were in my experiences with “The Bad Researcher.” “The Bad Researcher” is a

*But my mom says
With the sixties scoop going on
She told the nurse,
"I'm taking her home"*

*They probably assumed,
"Okay,
Someone 17-years-old
Can't take care of a baby."*

*"There's no dad,
There's no other person around,"
Or so they thought and,
"Probably the baby's better off without her."*

*But it's like
They didn't understand
And still don't
Understand*

*That single moms will get help
From grandma or grandpa
Or auntie or uncle
Or a cousin, or a neighbor, somebody.*

*That happens
Still happens
That's okay
That's the way we work.*

brutal story—but it brought critical teachings forward regarding Indigenous paradigms and research methodologies. I had to both (un)learn and appreciate the inherent principles of Indigenous research methodologies. By connecting teachings collected from my own lived experiences, and by learning from established Indigenous scholars, I feel that this body of work aligns with a “paradigmatic approach to research” (Kovach, 2010, p. 41). Using a conversational research methodology grounded in relationality was important to me because as Kovach noted elsewhere, “it is a method of gathering knowledge based on oral story telling tradition [...] it involves a dialogic participation that holds a deep purpose of sharing story as a means to assist others. It is relational at its core” (p. 40). Both my paradigm and methodological framework are relational and interconnected, the knowledges that they are holding space for are reliant on one another. My paradigm, *Pimatiswin*, is a whirlwind of spirits, colour and beings. Everything in the image is relational, dependent on each other, depicting a circling of life. This is how I relate to my worldview, it is about living, goodness, being respectful for every being, material or non-material. It is about interconnectivity to all of my relations.

That's the way we've always been
It's not just the nuclear family raising their
two children
It's the extended family
It's the Anishinaabe way of raising as
community

While my Iskwew-specific *Nisgaa* methodology is literally and figuratively grounded in a nest, Kovach (2010) in her theorizing about Indigenous research methodologies, so too envisioned “a paradigm [...] similar to a nest holding chicks/hatchlings within it” (p. 41). It was while I was undertaking my own “research quest” (Bell, 2013, p. 40) that my *Nisgaa Methodological Framework* emerged. Because I am an Iskwew familiar with *Nisgaa*, or geese, I realized that a stylized image of a *Nisgaa* provided a good way to teach through my methodological framework. The framework in itself is a sharing circle. The *Nisgaa*’s head is directed towards its chest, illustrating that *Mamatowisin*, an inner mindfulness, or awareness is endlessly engaged. The head and the spirit are connected, acknowledging the many responsibilities and protocols of being an Indigenous researcher. The *Nisgaa*’s powerful wings are extended, engaging in making and holding space immediately around and beneath it. They provide ongoing synergy based in respect and reciprocity. The *Nisgaa*’s webbed feet are firmly planted and are attending to both physical and spiritual environments. The *Nisgaa*’s large nest offers enough space to embrace all of our relations, holding space

for past, present, and future ancestors. The spheres are alive. They hold the space for voices as they travel around the sharing circle. The spirit lines anchor critical pieces of the framework to the *Nisgaa*, generating permanent spiritual connections. Connecting us.

Art/o/graphy, as Irwin (2013) makes clear elsewhere, is a “form of practice-based research [...] a creative practice, and a performative pedagogy [...]” (p. 198). Stepping into a space centered in “practice-based research” (Irwin, 2013), I craft and hold space for Indigenous voice. Similar to Leggo (2013), I know that “my way of finding a place in the world is to write one” (p. 233). So through a relational sharing circle as an Iskwew artist, researcher, and teacher, I am situated in this space as an emergent Indigenous art/o/grapher. My work contributes to interrupting long-held colonialist practices of violence through silence in such a way that holds up the inherent resilience of Indigenous women and girls.

Like Kovach, I practiced *Mamatowisin*, and was “mindful of the responsibility inherent in research and the reciprocity it entails” (p. 46) because I too realized that having stories shared with me was a gift. In this body of work, I used an

Not Just With Me

When I was 18

I was referred to an obstetrician

For my first daughter

In the second pregnancy,

Things didn't go right

I had Placenta Previa

Prior to being scheduled

For my induction

The doctor

Was physically

Tugging at my insides

With his hand

When I left

I never stopped bleeding

I never stopped bleeding

I was scheduled for an induction

Because it was convenient

For him

The nurses

Measured me

And said,

arts-based research methodology in the form of poetic inquiry. The art in both my paradigm and framework moved my process of poetic inquiry along by forging a space of ethical relationality to write through the co-creators' shared stories of violence, betrayal, survival, love, hope and hopelessness. Using poetic inquiry, I am consciously transmitting this shared Indigenous knowledge through modes of (re)membering and (re)stor(y)ing in a way that Indigenous researchers from across the globe can identify with (Kovach, 2010). For me then, poetic inquiry provides a space where both the researcher and participant can meet, and it is my hope that my ethical engagement with the stories shared with me is apparent throughout this dissertation. It is through the commissioned art of my paradigm and framework that (re)stor(y)ed voices rise in a cacophony of (in)justice. Together their stories resist a settler colonial grammar of sterilization. Have you heard their voices? They are, as Miller (2005) writes elsewhere, *the sounds of silence breaking*.

When my paradigm and framework were proposed and accepted, and after I had passed ethics, I moved forward. I observed protocol when I approached several First Nation communities. I reached out, connecting to Chiefs, Councils, Elders, and

*"I don't know why he has you here.
Be prepared for your baby
To be in here for a good month."*

*I delivered her
And he looked
At the coating on her body*

*He said,
"You were only
37 weeks along."*

*The doctor
I ended up having
He's deceased*

*I went back to see him in 2003
There was a nurse
That had to be present in the room*

*He was under
Restrictions
Through the college of physicians and
surgeons*

*He had done things
That were unethical
Not just with me
(Alice, 2019)*

key members within the communities. I sought permissions to come in and chat about what I was proposing to do, and to ask if they felt I was doing it correctly. I followed the same protocols with my own community. I was welcomed into three communities and I always offered tobacco. While there, I met with different individuals. I asked Elders to read through my questions, to let me know if I was on the right track with this research. My recruitment letters and questions were brought forward to Chief and Council/s. Some offered great advice on how to make the questions clearer. Each community was on board, and I remain so grateful for their generosity.

My goal was to collect narratives from women who had experienced reproductive injustice or medical violence(s) centered in racism. I was requesting to do two things: I hoped to organize sharing circles and semi-structured interviews. With the help of community members, I arranged a date and time for a sharing circle, heavily circulating information about the circle on social media and within the community itself. I did this twice with the same result: nobody showed up! I learned later from Elders that while women were interested, they were worried that their stories would travel beyond the circle. The Elders taught

me that this was a part of the intergenerational fallout from Indian Residential Schooling system. I moved into offering one on one interviews, proposing video chats, face to face meetings, or phone interviews. I ended up doing a mix of phone interviews and face to face interviews with twelve women. Their ages span across generations, some holding space and stories for years and years. The stories shared with me were raw, painful and multi-generational. I learned that grandmas and moms taught their daughters and granddaughters to anticipate mistreatment at the hands of healthcare professionals. Violence is normalized when it is all you know. That is why I feel this research is so important, we need to disrupt this belief. We deserve more. Our granddaughters, and theirs, deserve better.

I transcribed the interviews [which ranged from about twenty minutes to about fifty minutes] and sent them back to the women they emerged from. Each of the women were fine with their transcripts and I began (re)stor(y)ing them. Over thirty poems surfaced from the (re)stor(y)ed transcripts. The poems have been placed throughout this thesis in a manner that is both deliberate and intuitive. Formatting sometimes demanded that placement be

Just Be Patient

One nurse

Was really cranky

I was trying to tell her

I was in labor

And she goes,

"Okay, you'll be a long time anyway

I told her this was my third one

She just kinda brushed me off

They told me

I had to wait, I kept asking,

"How much longer?"

I'm gonna go home,"

She was still being rude

Told me to wait

Just be patient

There's more sick people than me

I asked for another nurse

Took me to a different room,

Four hours later

I had the baby

(Dragonfly, 2019)

more rigid, but my ancestors also revealed where the poems would encourage medicine through teaching. The poems themselves detail horrific, normalized behavior from the people who were entrusted with ancestral bodies. Women experienced coerced or forced sterilization for no reasons beyond hunches that they *may not* be able to have children in the future. Some women were infantilized by doctors, forced to undergo pregnancy testing despite repeatedly indicating that they had never been sexually active. Another was so mistreated by nurses that she was encouraged to accept her own dehumanization as she picked up both her pride and her baby from off of the floor. A few of the women were brusquely told that it was because they were governmentally identifiable Status Indians that they deserved substandard care. That, because the doctor or dentist *hated* that Indigenous Peoples had access to Status Cards, they would not be prescribed non-addictive medications or be able to use a Status Card to pay for services rendered because in their eyes, *they did not deserve it*.

As mentioned elsewhere in this thesis, I am seeking to make a major contribution to the fields of curriculum studies, the history of education, and Indigenous studies. Though non-Indigenous

The Waiting Room

I had that experience.

It was kind of an injustice

I lived in Winnipeg at the time

*And I knew that something just wasn't right
with my body*

I don't know what they thought of me

*If they thought I was a drunk or a druggie,
or ...*

And I kept telling them

I was bleeding and everything.

I ended up miscarrying

In a wheelchair

And there was blood everywhere

And the nurse

*Was scolding me
for making a mess.*

And I felt like

*If I could have helped that,
I would have*

Because that was my baby, right?

(Lisa Neilson 2019)

scholars such as Stote (2015; 2012), Grekul (2011; 2008; 2004; 2002), and others have contributed valuable research on Canadian historical atrocities such as policy, forced or coerced sterilization, and Indigenous women, I believe that my doctoral work is both innovative and current. My positionality as an Iskwew scholar makes space for me to situate my work in such a way that together, we are implicated in (re)membering the power of relationality, community and the resilience of Indigenous womanhood. I hope that this dissertation contributes to the destabilization of continued violent tropes about First Nation, Métis, and Inuit women. I am also hopeful that women and girls benefit from reading and hearing narratives similar to theirs, and recognize that they, and their autonomous, ancestral bodies deserve respect. I am defending this dissertation in and with community. I am engaging reciprocity and breaking down barriers. I want to normalize Indigenous success, demonstrating just how accessible it is. And I want to demonstrate just how grateful I am to my community for their investment in me, throughout the years. I encourage Canadian citizens to engage with the difficult work of personal decolonization. That they take up the hard work and teach each other. That they finally

see that getting caught up in minutiae costs Indigenous lives.

It remains my opinion that First Nation, Métis and Inuit Peoples (FNMI) have nothing to reconcile. We have done nothing wrong. We are not responsible for violent assimilationist and genocidal policies enacted upon us. Having said this, I would like to remind the reader that any participation from FNMI Peoples in any facet of reconciliation is solely at the discretion of these individuals.

My work contributes to poetic pedagogy and/or reconciliation in such a way that Indigenous voice is *privileged*, while synchronously *resisting* absorption within academia by making and holding space for doing qualitative research in a diverse, new way. I want to disrupt ideologies about the “Indians we have in mind” (Dion, 2007, p. 330), and instead emphasize the necessity of antiracism teacher education. My research can fill gaps in knowledge by working with/in truths to implicate and interrogate Canada’s grand narrative of nationalism and nation building through Indigenous Knowledge, Indigenous epistemologies and ways of knowing.

I have been exploring ideas as I move forward, seeking to extend my

research in new directions. I remain compelled by the sheer magnitude and power of engaging relationality, especially because these new ideas extend into ideologies surrounding MMIWG, Indian Residential Schools, and other significant violent state-sponsored policies. Ripples from all of these assimilative affects continue to resonate, especially with the unrelenting losses of moms, grandmas, nieces, daughters, and cousins. Our generations are so incredibly impacted when kinship ties are severed. Sometimes we are so impacted by the trauma and pain of these losses that we fall into negative coping strategies and make decisions that we would not ordinarily make because our healing networks have been disrupted, and we no longer have access to these critical spaces of matrilineal advocacy and care. Following protocols, and with community-driven ideas and input, I would like to build relationships with currently and formerly incarcerated Indigenous women. I am considering spaces of (re)formative reconcila(c)tion which could include collecting narratives from these women. I would use art/o/graphy in modes such story-telling through theatre, photo voice and film to share their collective stories. There is potential here to form a partnership with Indigenous film studios,

and work with students and faculty there to create something artistic that could help to weave another thread of missing history into Canada's grand narrative.

Another tenet of (re)weaving Canada's extensive tapestry of historical inaccuracies includes my continuing efforts as an Assistant Professor is the (re)education of both teacher candidates and others students that I am fortunate enough to cross paths with. Finding merit in the Dean's Accord on Indigenous Education, I endeavor to foster teacher candidates' commitment to Indigenous education. I ask them to engage ethical relationality, to mindfully consider committing to the Vision of the Association of Canadian Deans of Education or ACDE, which conceptualizes that Indigenous identities, cultures, languages, values, ways of knowing, and knowledge systems will flourish in all Canadian learning settings. Encouraging *Mamatowisin* or mindfulness, in all facets of our daily lives as educators reminds us to acknowledge our inherent positionality (and privileges) as we navigate the interconnectedness of both mind and spirit, to resonate in the synergy of that connection. As educators, we often do not realize that we are fortunate to have a student who identifies as First Nation, Inuit, or Métis in our class(es). If taken up in a

Grade 11 Indigenous literature course, this body of work will not only contribute to a deeper understanding of the many stigmas surrounding Indigenous Peoples, generating and demonstrating compassion through *Mamatowisin*, but will also provide an enduring space for First Nation, Métis, Inuit or students *to see and be seen*.

As I sit back and reflect, a small part of me wonders why I thought I could make change. I am an emergent scholar, but I am still brown. I still experience racialization and its respective exclusions. For every day that I have been writing this dissertation, scores of Indigenous Sisters have gone missing or have been murdered. Carrying that knowledge is difficult, heavy. Some days I become really disheartened and wanted to disengage with this painful heartwork. But then I am reminded that I have a role. I think about my father. My father who did nothing wrong. He was violently forced into assimilation. I think about him, and the thousands and thousands of other children who went to Indian Residential Schools. I think about those who never made it home. I look at my own children, and think about the parents who lost their power, lost their children, and then lost their minds. I think about the hundreds of dialects and languages lost because we

are Other. I think about the generations that ended abruptly in the name of Jesus, and at the hands of predatory nuns or priests. I think about the future generations. I think about the Residential School Survivors who were forced to recount their horrific abuses in order to “be found viable” during the Truth and Reconciliation Commission. I think about those whose stories still move inside of them, haunting them. I think about how easy it is to ignore or mistreat a being when you are taught that Other is repellent. I consider those of us who are still here. And I realize that I must continue. It was never up to me.

Meegwetch for listening

September 30

*I dreamed I was
Lying beside a tree
Curled up
Embracing exposed roots*

*Chilled
I wasn't dressed
Warmly
I stared into the leaves*

*I watched
Them swaying
The wind
Danced its way through*

*I stood up
Smoothed my shirt
Orange
Autumn colour*

*Summer is gone
And the sun
Kissed me
Goodbye
(Cheechoo, 2019)*



Medicine Break

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Appendix A



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Consent Form: Interviews

Title of the study: (Re)Storying Canadian Histories: Reproductive (In)Justice and Indigenous Women

Researcher:

Keri-Lynn Cheechoo, Faculty of Education, University of Ottawa

Supervisor:

Dr. Nicholas Ng-A-Fook, Faculty of Education, University of Ottawa.

Tel: 613-562-5800 Email: nngafook@uOttawa.ca

Invitation to Participate: I _____ am invited to participate in this research study that seeks to investigate storied histories of First Nation women experiencing forced sterilization. This research study is conducted by Keri-Lynn Cheechoo (Researcher), with supervision by Dr. Nicholas Ng-A-Fook (Thesis Supervisor) from the University of Ottawa and is funded by the Social Sciences and Humanities Research Council of Canada.

Purpose of The Study: The purpose of this study is to conduct research with First Nation women to investigate their knowledge about and experiences of forced sterilization. Because First Nation women uphold ancestral or current stories of women who have undergone a procedure that prevents reproduction, sharing these stories can provide valuable knowledge by sharing experiences, perceptions, and stories.

Participation: Participation will include one semi-structured interview (via Skype, phone call, or in person) that will last approximately 60 to 90 minutes. The time commitment related to the interview will likely not exceed 3 hours in total, including the time taken to review the transcripts. After the interview has been transcribed, the researcher will send me the transcribed interview in a password-protected email, or by hard copy. If changes are made, I will have two weeks to send the revised document via password protected email, or in a self-addressed stamped envelope that the researcher will provide. Transcripts that are not reviewed and returned within two weeks will be deemed as acceptable and will be used in the study.

Risks: My participation in this study will entail providing information on ancestral stories or intergenerational experiences, which may cause me to feel emotional discomfort. I have received assurance from the researcher that every effort will be made to minimize these risks. I can refuse to answer any question that makes me uncomfortable. I may choose to cease participation in the study at any time for any reason and in such case any information that I have provided in the interview will be destroyed.

Benefits: My participation in this study provides me with an opportunity to share my voice, experiences, and recommendations on historical accounts of forced sterilization or reproductive injustice, which may help the broader Canadian public to gain a deeper understanding as to how they can better engage in reconciliation with Indigenous Peoples.

Confidentiality and anonymity: I understand that the contents will be used only for the completion of the researcher's PhD dissertation thesis and future publications, and that my confidentiality will be protected through the use of pseudonyms and my interview will be stored in locked and secured cabinet and computer. The researcher is a Cree researcher; she will enact a process of relational accountability to the First Nation participants and the ancestral or intergenerational stories they will share. The researcher has a responsibility to share my stories with accuracy and will practice mindfulness of respecting Indigenous knowledge. The researcher does not own these stories but is an interpreter of what is shared. The researcher recognizes the importance of acknowledging sources of Indigenous knowledge. If I would like to be credited by name for my contributions, the researcher will ensure that will be done.

Conservation of data: The data collected (e.g., audio recording from interview and hard copy transcripts) will be kept in a secure manner. The researcher will personally store all research data in a secure location in the Thesis Supervisor's locked office. All hard copies of documents will be stored in a locked filing cabinet and all digital information will be stored in a password protected folder on the hard drive of a password protected computer. All back up files will be stored on an external password protected hard drive which will be stored in a locked filing cabinet. Only the researcher and her Thesis Supervisor will have access to the data. The data will be stored for five years after which paper records will be shredded and digital files will be deleted and electronically shredded using security software.

Acceptance: I, _____ agree to participate in the above research study conducted by Keri-Lynn Cheechoo of the Faculty of Education in the University of Ottawa, whom is under the supervision of Dr. Nicholas Ng-A-Fook.

If I have any questions about the study, I may contact the researcher, Keri-Lynn Cheechoo, Faculty of Education, University of Ottawa, Lamoreux Hall, 145 Jean-Jacques-Lussier Private, Ottawa, ON, Canada, K1N 6R5, or her supervisor, Dr. Nicholas Ng-A-Fook (nngafook@uOttawa.ca) Faculty of Education, University of Ottawa, Lamoreux Hall, 145 Jean-Jacques-Lussier Private, Ottawa, ON, Canada, K1N 6R5, 613-562-5800.

If I have any questions regarding the ethical conduct of this study, I may contact the Protocol Officer for Ethics in Research, University of Ottawa, Tabaret Hall, 550 Cumberland Street, Room 154, Ottawa, ON K1N 6N5 Tel.: (613) 562-5387 Email: ethics@uottawa.ca.

There are two copies of the consent form, one of which is mine to keep.

Participant's signature: *(Signature)* Date: *(Date)*

Researcher's signature: *(Signature)* Date: *(Date)*

Appendix B

Interview Protocol and Questions_Cheechoo

1. Identify self and participant, date and time:
 - a. Read consent form together
 - b. Indicate that I can switch off the recorder at any time if participant wants to share something with only me
 - c. Pseudonym?
 - d. Before we begin, do you have any questions or comments?
 - e. Engage conversation about Talk4Healing: information emailed to supplied address.
2. Can we begin by you telling me a little about yourself? Family history?
3. What impacting memorable life experiences would you like to talk about? Where are you from?
4. Have you experienced direct violence (provide examples if necessary) with regards to reproduction or racism while you were pregnant, during birth, or after birth
5. Do you have any stories from family members about reproduction or racism while you were pregnant, during birth, or after birth?
6. Do you have any significant stories that stick out in your mind regarding institutions like school or accessing health services?
7. Can I contact you again if I have further questions?
8. Can you share my contact information if you know of any others who may want to share their stories?

Appendix C



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Consent Form: Sharing Circle

Title of the study: (Re)Storying Canadian Histories: Reproductive (In)Justice and Indigenous Women

Researcher:

Keri-Lynn Cheechoo, Faculty of Education, University of Ottawa

Supervisor:

Dr. Nicholas Ng-A-Fook, Faculty of Education, University of Ottawa.

Tel: 613-562-5800 Email: nngafook@uOttawa.ca

Invitation to Participate: I _____ am invited to participate in this research study that seeks to investigate storied histories of First Nation women who have experienced forced sterilization. This research study is conducted by Keri-Lynn Cheechoo (Researcher), with supervision by Dr. Nicholas Ng-A-Fook (Thesis Supervisor) from the University of Ottawa and is funded by the Social Sciences and Humanities Research Council of Canada.

Purpose of The Study: The purpose of this study is to conduct research with First Nation women to investigate their knowledge about and experiences of forced sterilization. Because First Nation women uphold ancestral or current stories of women who have undergone a procedure that prevents reproduction, sharing these stories can provide valuable knowledge by sharing experiences, perceptions, and stories.

Participation: I have been assured that appropriate protocols will be used to ensure a culturally sensitive and responsive atmosphere. Participation will include a sharing circle that will last approximately 1 to 3 hours. During the sharing circle, I will be asked to share personal experiences or intergenerational narratives of reproductive injustice or forced sterilization. The sharing circle day, time, and place will be decided through discussion with participants. The sharing circle will be digitally-recorded to ensure that none of the stories will be missed. Once the sharing circle is completed and transcribed, the researcher will send me a copy of the transcribed session in a password-protected email, or by hard copy. I may revise my parts of the transcript. If I want to make changes, I will have two weeks to send the revised document via password protected email or in a self-addressed stamped envelope that will be provided by the researcher.

Risks: My participation in this study will entail providing information on ancestral stories or intergenerational experiences, which may cause me to feel emotional discomfort. I have received assurance from the researcher that every effort will be made to minimize these risks. I can refuse to answer any question that makes me uncomfortable. I may choose to cease participation in the study at any time for any reason. In such cases, since this is a group sharing circle, while all attempts will be made to delete what I have shared, it may not be possible to delete all specific information.

Confidentiality and anonymity: I understand that the contents will be used only for the completion of the researcher's PhD dissertation thesis and future publications, and that my confidentiality will be protected through the use of pseudonyms and audio and digital records of the sharing circle will be stored in locked and secured cabinet and computer. The researcher is a Cree researcher; she will enact a process of relational accountability to the First Nation participants and the ancestral or intergenerational stories they will share. The researcher has a responsibility to share my stories with accuracy and will practice mindfulness of respecting Indigenous knowledge. The researcher does not own these stories but is an interpreter of what is shared. The researcher recognizes the importance of acknowledging sources of Indigenous knowledge. If I would like to be credited by name for my contributions, the researcher will ensure that will be done.

Acceptance: I, _____ agree to participate in the above research study conducted by Keri-Lynn Cheechoo of the Faculty of Education in the University of Ottawa, whom is under the supervision of Dr. Nicholas Ng-A-Fook.

If I have any questions regarding the ethical conduct of this study, I may contact the Protocol Officer for Ethics in Research, University of Ottawa, Tabaret Hall, 550 Cumberland Street, Room 154, Ottawa, ON K1N 6N5 Tel.: (613) 562-5387 Email: ethics@uottawa.ca.

I wish to remain anonymous (*circle one*): YES NO

Researcher's signature: _____ Date: _____
(Signature) (Date)

Appendix D

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Indigenous Women Needed for Research Study

Title of the study: (Re)Storying Canadian Histories: Reproductive (In)Justice and Indigenous Women

Criteria:

- Indigenous women aged 18 years and older
- Willing to share any personal or (inter)generational stories on topics such as reproductive injustice in the form of forced sterilization, and/or racism directly related to these themes

Participation:

You will be asked to participate in one semi-structured interview (via Skype, phone call, or in person). The time commitment related to the interview will likely not exceed 3 hours in total, including the review process. You will also be asked to participate in a sharing circle, which will last approximately 1 to 3 hours.

Other details:

This study will be conducted solely in English; however, an interpreter can be made available if/when required.

To register, please contact Keri-Lynn Cheechoo, the researcher at [REDACTED] or by email at [REDACTED]

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Appendix E

13/07/2018

Université d'Ottawa

Bureau d'éthique et d'intégrité de la recherche

University of Ottawa

Office of Research Ethics and Integrity

CERTIFICAT D'APPROBATION ÉTHIQUE | CERTIFICATE OF ETHICS APPROVAL

Numéro du dossier / Ethics File Number	S-06-18-586
Titre du projet / Project Title	(Re)Storying Canadian Histories: Reproductive (In)Justice and Indigenous Women
Type de projet / Project Type	Thèse de doctorat / Doctoral thesis
Statut du projet / Project Status	Approuvé / Approved
Date d'approbation (jj/mm/aaaa) / Approval Date (dd/mm/yyyy)	13/07/2018
Date d'expiration (jj/mm/aaaa) / Expiry Date (dd/mm/yyyy)	12/07/2019

Équipe de recherche / Research Team

Chercheur / Researcher	Affiliation	Role
Keri-Lynn CHEECHOO	Faculté d'éducation / Faculty of Education	Chercheur Principal / Principal Investigator
Nicholas NG-A-FOOK	Faculté d'éducation / Faculty of Education	Superviseur / Supervisor

Conditions spéciales ou commentaires / Special conditions or comments

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