Family violence remains part of a disturbing continuum of violence and violations Native families and communities struggle with throughout Canada. In his book, Fear and Temptation: The Image of the Indigen in Canadian, Australian, and New Zealand Literatures, Terry Goldie suggests physical violence is interwoven with the violation of physical space as part of a historical process between white and indigen people. He sees the violence as a response to the “malaise of their depressed society.” I raise this point in this examination of family violence in Native families and communities because I believe we must look beyond the incidental aspects of the violence and seek answers to how the state of violence transfers from society to the individual.

Last summers’ events at Kahnawake and Kanesatake clearly shook Canadians’ naiveté with respect to the dangerous levels of anger and frustration within Native communities. A growing awareness of the grievances as well as aspirations of Native people hopefully will facilitate the understanding of the roots of chronic social problems including family violence. We are only beginning to acknowledge and accept the irreparable damage to Native culture by residential schools, the child welfare system and the justice system. Social work in Canada has its own history of violation with Native people and communities. The discipline unwittingly served as a “carrier” of prejudicial and racist governmental policies that to this day continues to nurture hopelessness, helplessness and despair. Alice Miller titled her book, For Your Own Good: Hidden Cruelty in Child Rearing and the Roots of Violence. I find her work valuable in helping to understand why Native people are six times more likely to die violently than other Canadians. Coercion and mean-spirited community work has historically been part of Canada’s attempts to civilize “its” aboriginal populations, “for their own good.”

The Native Community Crisis Team is a unique mental health service where Native counselors with the clinical backup of an on-site psychologist and the Toronto East General Hospital Crisis Intervention Unit provide counseling within the community as an alternative to a traditional hospital setting. It represents a model of community-based mental health services designed to make mental health counseling more accessible to a population recognized as under-served by existing programs. Our growing caseloads and wide range of presenting problems confirm the growing numbers of Native people engaged in a healing process. The growing need to share “collective pasts” makes Native counselors a valuable and rare commodity as they play a very necessary role in offering guidance and direction as people move back to their cultural traditions. Healing circles, teaching circles with elders, as well as individual counseling are part of the therapeutic strategies we promote at the Native Community Crisis Team. This certainly complements the growing self-help movement and I strongly believe that a great deal can be learned from Native Culture in helping individuals in a healing and rebuilding process.

Family violence is part of a painful legacy of Canada’s history. Toronto’s social workers can help release Native people from its damaging effects by supporting calls for provincial and national inquiries that will serve to define the roots of violence and facilitate a mourning and grieving process necessary to move beyond that legacy. That would be our gift to future generations.

Steve Koptie is a Métis counsellor with the Native Community Crisis Team, an outreach program of the Toronto East General Hospital’s Crisis Intervention Unit.

This article was previously published in the Ontario Association of Professional Social Workers (Metro Branch) METRO NEWS, April 1991.

Are Shelters Obsolete?

By Lee Gold

In considering the question “Are shelters obsolete?” I have wondered what would happen if we closed all the shelters and said to the powers that be and the community at large: “You make this world safe for women and children.” Shelters were established as a temporary, band-aid solution to a serious social ill. Founded as feminist institutions, they challenged the status quo not only by what they did but also by how they did it. But shelters have not been able to end wife assault any more than food banks have been able to eliminate hunger and poverty.

Violence continues to define one gender in relation to the other. Until society decides that violence against women is unacceptable and takes action to end it, shelters will continue to provide an essential service to abused women in this, a sick society. But since at least one out of 10 adult women in Canada suffers abuse, shelters cannot possibly offer refuge to all those in need.

The founding of shelters by feminists who listened to and believed women, represented a radical, political statement to the mainstream medical, religious, psychiatric, legal and social service establishment which had ignored, ridiculed or blamed women for the abuse. Professions which denied the reality of women’s roles have begun to learn from and listen to women. Although shelters are a solution born of desperation, they have become accepted institutions, part of the modern social fabric. But their very success in providing temporary safety in secret to a handful of abused women and children may have lulled the public into thinking that the problem of wife assault has been solved.

Perhaps the question should not be “Are shelters obsolete?” but “How do we as a society make women safe?” Second only to motor vehicle accidents as a cause of injury and death among women, this immense social ill deserves a mobilization of resources and effort which have been totally lacking to date. How do we effect radical social change? Nothing else will eliminate...