

# Colonization, Oppression and Racism: Understanding Violence against Indigenous women who are older

The information and opinions expressed here today are not necessarily those of the Government of Ontario

## Presented by:

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Six Nations of The Grand River

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Elder Abuse Ontario

October 24<sup>th</sup> 2018



# Welcome to EAO's Webinar!

- All attendees will be muted during the webinar. This session is being recorded and will be posted on EAO website.
- If you are experiencing issues, please type into the CHAT/QUESTION BOX and send message to Mary Mead/**Rochella Vassell**
- There will be 15-20 minutes allocated at the end presentation for QUESTIONS AND ANSWERS.
- You will be prompted to fill out an EVALUATION FORM once the session has ended. Please fill out the form as your feedback will guide us for our future webinars. You will also receive an email link to the evaluation after the session.
- Speaker CONTACT INFORMATION will be provided at the end of the presentation to connect directly if you have further questions.

# Aging Without Violence (AWV) Project:

January 2018 - March 2021

The **Aging With Confidence** Action Plan for Seniors includes dedicated efforts to address violence against older women, under the Strengthening Elder Abuse Prevention section.

- Funded by the government of Ontario
- Sponsored by OAITH
- Guided by an intersectoral provincial advisory
- Focused on ending violence against older women across Ontario by increasing the capacity of service providers and public awareness



Amber Wardell,  
Project  
Coordinator

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For more information, visit [www.oaith.ca](http://www.oaith.ca)

**WORD TO THE WISE**  
**Gender-neutral terms contribute to the invisibility of violence against older women**

**Why use the term "Violence Against Older Women?" rather than "Elder Abuse" or "Family Violence"?**

By using the term **Violence Against Older Women (VAOW)** in research, policy, and practice rather than the gender-neutral terms of "elder abuse" or age-neutral terms of "family violence" or "violence against women" we recognize:

- The context of **gender** when recognizing and responding to violence against older women;
- Implications of **aging** related to women's experiences of violence;
- The importance of an **Intersectional approach** which considers systemic oppression including ageism, racism and sexism.

**Types VAOW may include:** physical abuse, sexual abuse, neglect, financial abuse, spiritual abuse, psychological/emotional/verbal abuse and stalking.

**Perpetrators may include:** partner, ex-partner, family member, friend, professional service provider, neighbour, co-worker, acquaintance, stranger or anyone in a position of power and trust in her life.

**At what age does a woman become "older?"**

Although a variety of sources may identify older to include those above ages 50, 60, and 65, Aging Without Violence research indicates **55+ as the most common age** connected with the term "older!"

**What is "wisdom" anyways?** Researchers such as Dr. Deep Joshi are expanding our understanding of what it means to be "wise" through neuroscience. Dr. Joshi and his colleagues identify wisdom as a universal concept. Based on studies by other researchers, he argues that wisdom is not just about age but about experience. Some may conceptualize wisdom as the ability to make sound judgments and to have good relationships with others. In his research, Dr. Joshi also identifies the importance of having a purpose in life and the ability to have a positive outlook on life. He also discusses the importance of having a good support system and the importance of having a good understanding of the world and our role in it. He also discusses the importance of having a good understanding of the world and our role in it. He also discusses the importance of having a good understanding of the world and our role in it.

Monthly "Word to the Wise" Fact Sheets

**AGING WITHOUT VIOLENCE**

**Gap Analysis**

Strengthening Gender-Based Responses to End Violence Against Older Women in Ontario

Prepared by:  
Amber Wardell, AWV Project Coordinator, OAITH  
Nicole Beatty, Senior Consultant, Global Philanthropic

Published July 2018

Research & Reports

**AGING WITHOUT VIOLENCE**

**Western**  
Centre for Research & Education on Violence Against Women & Children

**Domestic Homicides with Older Women: Lessons Learned from Tragedies**

Peter Jaffe PhD, Academic Director, CREVAWC, Western University

OAITH Aging Without Violence Conference: March 21, 2018

**Dr. Peter Jaffe**  
Academic Director of CREVAWC  
Western University

*Chelsea Hotel*

*Agging Without Violence Forum, March 20th - 21st 2018*

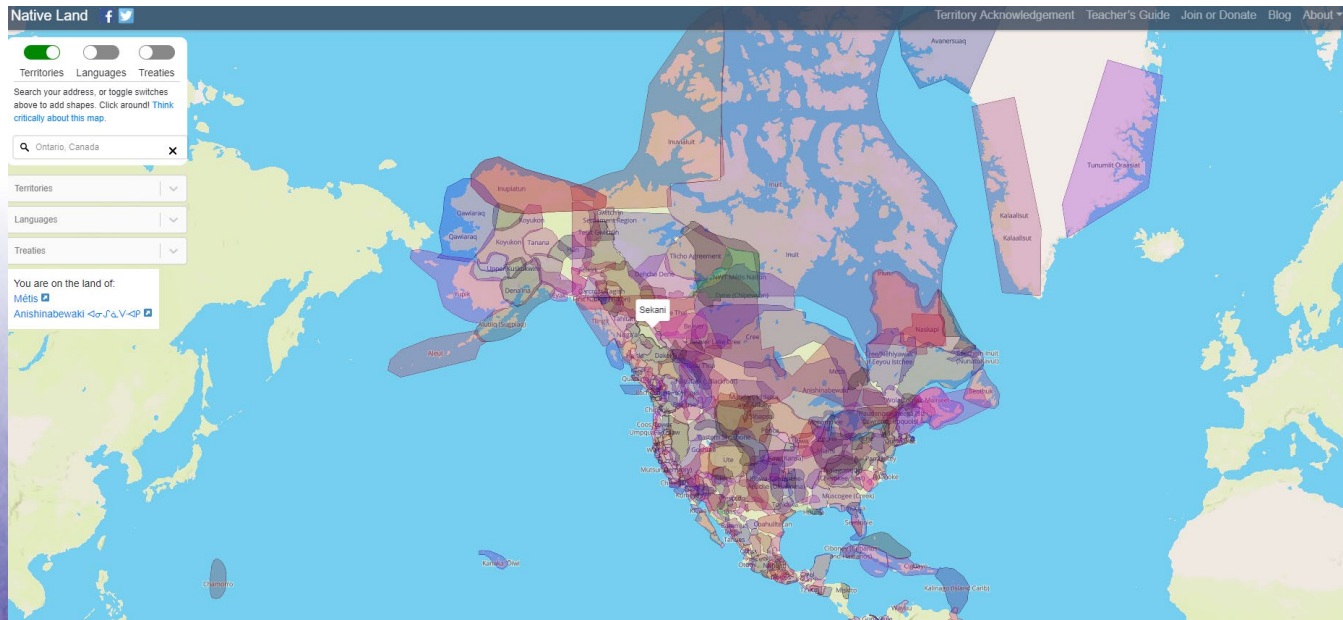
Presentations, trainings, tools, and resources

# Land Acknowledgement

In the spirit of Truth and Reconciliation, we would like to acknowledge the many territories of Turtle Island (Canada) on which we work and reside.

These territories, ceded and unceded, are home to many Indigenous peoples who have lived here for tens of thousands of years and continue to live here.

As settlers, immigrants and descendants, and as visitors, we honour and respect the many Indigenous peoples of this land and territory and hope for a more just future together as treaty people.



Learn more: <https://native-land.ca/>

# Elder Abuse Ontario (EAO)

- ✓ Not-for-profit charitable organization
- ✓ Established in 1990
- ✓ Funded by the Province of Ontario, governed by the Ministry of Seniors and Accessibility

Mission: Create an Ontario where all seniors are free from abuse through awareness, education, training, collaboration, service co-ordination and advocacy.

**EAO oversees the Implementation of the Ontario Strategy to combat Elder Abuse**

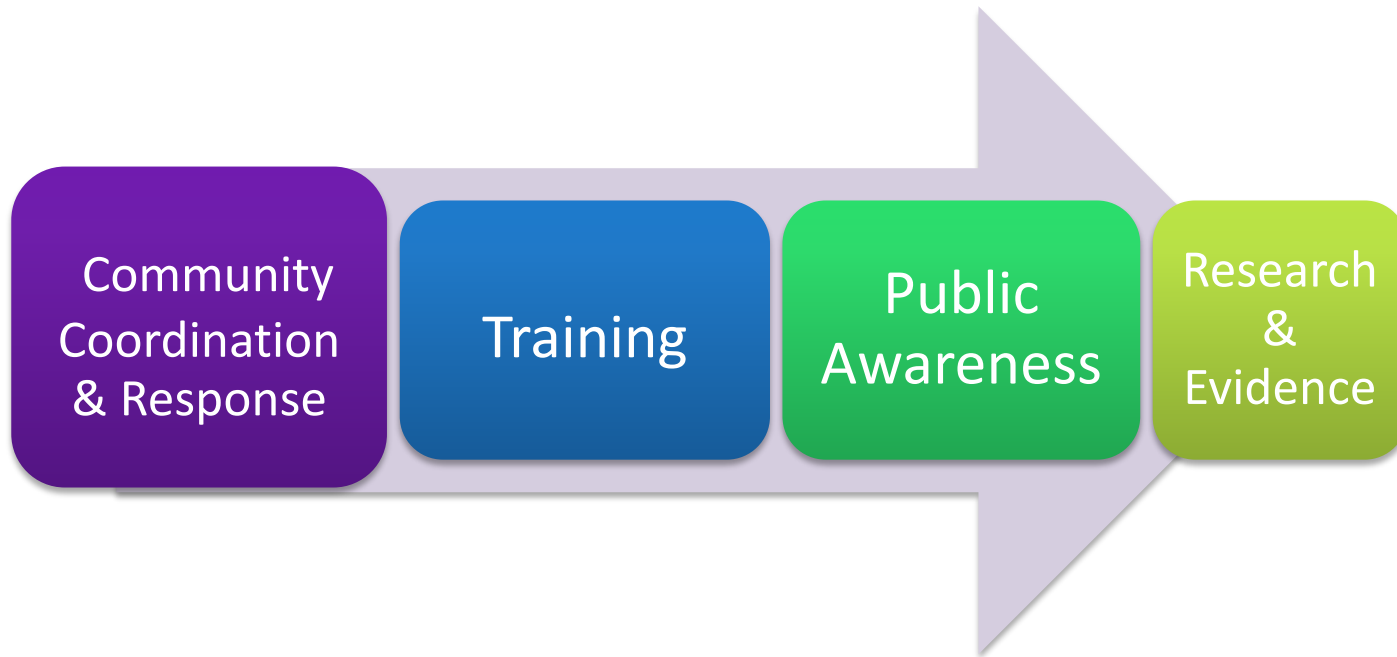


Elder Abuse Ontario  
Stop Abuse - Restore Respect



# Ontario's Strategy to Combat Elder Abuse

## Comprised of 4 Major Priorities



# Elder Abuse Ontario (EAO)

- **7 Regional Consultants in Ontario** (Thunder Bay, Sudbury, Woodstock, Toronto, Peterborough, and Ottawa)
- Key resources for providing consultation on elder abuse cases to review options and resources for intervention.
- Consultants DO NOT act as case managers for cases of abuse.
- Support over 40 local Elder Abuse Committees/Networks
- Strengthen partnerships between these committees and other health/social service agencies to enhance the response to elder abuse.
- Develop and implement training materials, tools and resources for elder abuse prevention and intervention.






# Speaker: Amber Skye, MPH, PhD (C)



Amber is a Kanien'kehaka of the Wolf Clan from Six Nations. Amber has an MPH and is a Public Health Doctoral Candidate at the University School of Public Health. Amber is engaged in a number of community based projects that work towards the harmonization of Indigenous and western medicine and health practice. Both a researcher and community worker, Amber's research similarly focuses on establishing the linkages between culture-based practices to improve health among the Hodinohshoni and developing health services that integrates the use of Indigenous knowledge and health practices. In her work she is dedicated to critically analyzing and addressing the role of colonization and trauma on the health of Indigenous communities.





# Colonization, Oppression and Racism: Understanding Violence against Indigenous women who are older

AMBER SKYE, MPH, PHD (C)  
MOTHER, RESEARCHER  
SIX NATIONS OF THE GRAND RIVER  
OCTOBER 24, 2018

# Objectives

- ▶ 1. To develop a greater awareness of the root causes of violence against older Indigenous women, including the impacts of colonization and socio-economic inequalities.
- ▶ 2. To raise awareness and educate service providers about violence in Indigenous communities, the causes of violence against older Indigenous women and how to respond to it.
- ▶ 3. To understand appropriate responses that empower Indigenous women who are older who have experienced violence to facilitate and support the healing process.

# Cultural Safety

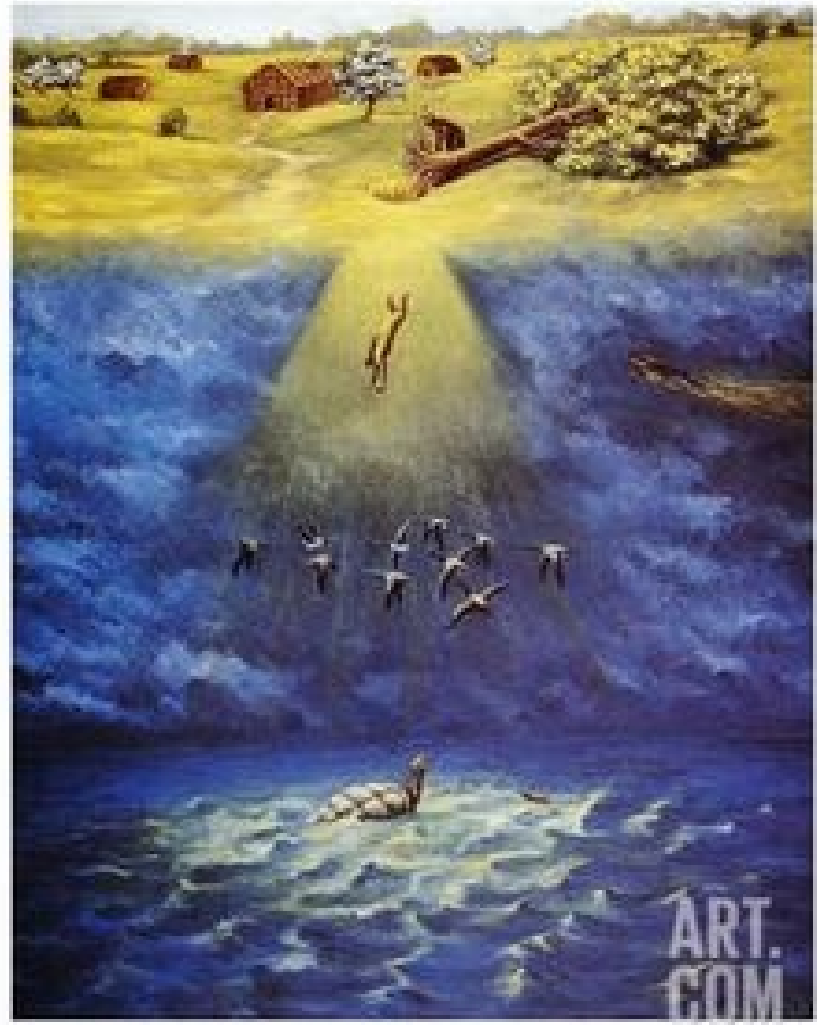
- ◉ Cultural safety moves beyond notions of cultural sensitivity to an analysis of power imbalances, institutional discrimination and a history of colonization (Browne et al., 2001).
- ◉ Cultural safety is the outcome of culturally competent care (NAHO, 2008).
- ◉ What do I need to know and understand to be a competent care provider for older Indigenous women?

# From the Beginning

THE HAUDENOSAUNEE  
(IROQUOIS) PEOPLE  
HOLD A WORLDVIEW  
THAT DERIVES FROM A  
CREATION STORY  
WHERE A PREGNANT  
WOMAN INITIATED  
CREATION OF EARTH.

# Haudenosaunee Worldview

- Like most indigenous nations, the Haudenosaunee have a unique worldview that shapes how they understand the world.
- *Sky woman fell to earth and was placed on a turtles back. She brought with her dirt and seeds that would foster the growth of turtle island.*



# Women are Creation

## ▶ **Women's Roles**

- ▶ **Women bring life**
- ▶ **Givers of life “mother rule” (Wagner, 2001)**
- ▶ **Keepers of Culture** responsible for defining the social, spiritual, and economic norms of the nation
- ▶ **Matrilineal society** – name, clan, social organization
- ▶ Women are to be held in high regard from the time they are born
- ▶ Treated with utmost respect
- ▶ Many social liberties were held by Indigenous women

# Political Power

- ▶ Women responsible for choosing and removing Chiefs.
- ▶ Clan Mothers could select and remove a Chief.
  - ▶ She selects the Chiefs “good men”
- ▶ This power extended to issues of war and peace.
  - ▶ If warrior wanted to go to war they needed the consent of the women.
  - ▶ Haudenosaunee Women also had political power in early treaties and negotiations for sale of land
    - ▶ (Wagner, 2001).



# Gender Balance

- ▶ Concepts of gender and roles were based on balance not equality.
- ▶ Fire (equated with male) and water (equated with female) are critical to survival and balance between them must be respected (Anderson, 2000).
- ▶ Each gender engaged in gender roles that were seen as different but no less important.
- ▶ Working together was essential to maintenance of community cohesion and Creation.
- ▶ Men very often did ceremonies and singing to be able to develop connection – for women this was innate.

# Colonization

## ▶ Colonization

- ▶ Historical burdens resonate in the present-day experiences of Indigenous people.
- ▶ Disrupted social, economic, political and cultural structures.
- ▶ Oppression of Indigenous societal structures persists.
- ▶ Devaluing and loss of traditional health and wellness modalities.
  - ▶ (Wesley-Esquimaux & Smolewski, 2004)

# Colonialization: Three phases of colonization

- ▶ Phase 1: Demographic Collapse
- ▶ Phase 2: – Cultural Dispossession, Social Impact, Missionisation and Assimilation
- ▶ Phase 3: Late period - Cultural Oppression and Psychological Impact

▶ (Wesley-Esquimaux & Smolewski, 2004)

# Damage to Indigenous Women

- ▶ Colonization worked to destroy the previously healthy gender balance of the Iroquois (Wagner, 2001).
- ▶ “Missionaries insisted that women’s proper sphere was in the home, and that Indian men should take up farming. When accomplished, this change not only would take away women’s economic independence, leaving them as dependent as a white women; it also tore at the very fabric of Native society, which held that women, producers of life, were the only appropriate group to bring life from the soil” (Wagner 2001).
- ▶ Traditional governments were replaced and changed to disenfranchise women
  - ▶ This disrupted traditional economic relationship to land.

# Colonial Governance

- ▶ Displaced our governance – kinship structures
- ▶ Indian Act 1873 stipulated that elections were to be held every three years “unless deposed by the Governor for dishonesty, intemperance, or immorality” [3], only males over the age of 23 were allowed to vote, and the chiefs were granted little in the way of bylaw powers.
- ▶ This system rejected the traditional roles of women as Clan Mothers.
- ▶ The political and social power of women was diminished.
- ▶ Six Nations resisted the Indian Act and remained with their traditional governance system until 1924 when the RCMP removed them along with their wampum belts.

# Residential Schools

- ◉ In 1884, the Indian Act made it compulsory for Indigenous children under 16 to attend residential school.
- ◉ The schools practiced severe assimilation tactics – mental, physical and emotional abuse.
- ◉ **Greatest assimilation tool (Milloy, 1999).**
- ◉ Significant damage to Indigenous societies and cultures.
- ◉ Took the roles of women as mothers away from Indigenous women.
  - ◉ Loss of parenting skills
  - ◉ Loss of love and affection

# Mohawk Institute



# Cultural Oppression and Violence

- Internalized oppression
- Lateral Violence
  - Fragmentation of families and communities due to oppression leads to internal conflict, community distress and expression of violence towards each other rather than the oppressor
  - (Esquimaux & Smolewski,2004).



# Historical trauma

- ▶ Entire populations of Indigenous people experienced post-traumatic stress disorder compounded by **recurrent** stressors.
- ▶ Social narrative
- ▶ Inter-generation expressions of trauma and violence.
  - (Esquimaux & Smolewski, 2004).
  - Vital to understand historical and social political context

# Expressions of Trauma

- ▶ Symptoms include: elevated suicide rates, depression, self-destructive behaviour, substance abuse, identification with the pain ancestors endured, fixation to trauma, intense fear, dissociation, somatic symptoms that do not have a medical reason, anxiety, guilt, anger, and chronic grief (YellowHorse Braveheart & De Bruyn, L., 1998).

# Violence

- ▶ The normalization of violence in Aboriginal populations.
  - ▶ **Power, control and coercion**
  - ▶ **Disempowered people experience more violence**
  - ▶ Systemic violence
  - ▶ Domestic violence
  - ▶ Sexual violence
  - ▶ Psychological violence
  - ▶ Emotional violence
  - ▶ Lateral violence

# Violence

- ▶ Those who lack power in society are the most likely victims of violence; they are vulnerable because they lack the means to resist violence, to escape from dangerous situations and to gain protection from society. Those who lack power may in turn lash out at those even less able to resist, and a cycle of violence is created (Scott, 1995:9).

# Gendered Violence

- ▶ Intergenerational trauma and colonization place Indigenous women at a greater risk for both systemic and interpersonal violence.
- ▶ Rates of violence vary from 3-8 times higher than among non-Indigenous women in Canada.
  - ▶ Brownridge (2008) found rates of violence against Indigenous women to be much higher in community based studies: from 48% of women in a reserve-based sample in rural southern Ontario, to 80% of 104 women in north-western Ontario, to 70 to 100% of Mi'kmaq women living on-reserve in Nova Scotia.
- ▶ Indigenous women are also 5 times more likely than non-indigenous women to die as a result of violence (Amnesty International Canada 2004).

# Elders

- ▶ Role models and knowledge holders
- ▶ Teachers and transmitter of culture and knowledge
- ▶ Respected roles – mediators, decision makers, leaders
- ▶ Typically responsible for conducting maintaining traditional practices, language, and ceremonies.
- ▶ Not all older people are seen as Elders but all older people are respected for their life long learning – stage of life.
- ▶ Health Canada considers Indigenous elders to be those over 55, given the shorter life expectancy of Indigenous people.

# Elder Abuse

- ▶ Gendered violence and loss of roles and responsibilities has lead to Indigenous older women carrying a lifetime of trauma and abuse.
- ▶ Factors such as overall poor health status, loss of traditional role and respect in the immediate and extended family structures and lack of community elder-specific health and social services, Indigenous elders may be more susceptible to becoming victims of elder abuse (Swanson, 1999).
- ▶ Aboriginal elders are also nearly two times as likely (16% versus 7%) to be living with extended family members compared to the mainstream population (Dumont-Smith, 2002).

# Elder Abuse

- ▶ While data is lacking, some a study by Dumont-Smith (1997) has shown that:
  - ▶ over half of Aboriginal female elders had been or were victims of more than one type of abuse in 1997
- ▶ Noted causes were: alcohol abuse, power and control, intergenerational violence, low self-esteem on the part of the perpetrator, inability to cope with stress and loss of traditional role and values.



# Spiritual Abuse

- ▶ “mistreatment of a person who is need of help, support, or greater spiritual empowerment, with the result of weakening, undermining, or decreasing the person’s spiritual empowerment” (Johnson & VanVonderen, 1991, p. 20).
- ▶ Such as isolation from a spiritual community, denying access to religious activities, and manipulation of religious messages (Bent-Goodley & Fowler, 2006).
- ▶ Abuses strip victims of a supportive community and negate the positive spiritual messages (Bent-Goodley & Fowler, 2006).

# Racism

- ▶ Racism in health and social systems is pervasive – both systemic and interpersonal.
- ▶ Systemic -social exclusion and isolation that limits or prevents political, social, and economic participation, or access to and participation in other social systems such as education and health. Unfair policies and restrictions.
- ▶ Racism commonly manifests in the form of erroneous assumptions (based on negative stereotypes) regarding a patient (Allan & Smylie, 2015).
  - ▶ Alcoholism
  - ▶ Laziness
  - ▶ Uneducated
- ▶ Results in poor care, poor outcomes and poor health.
- ▶ Can be seen as a form of violence

# Cultural Identity



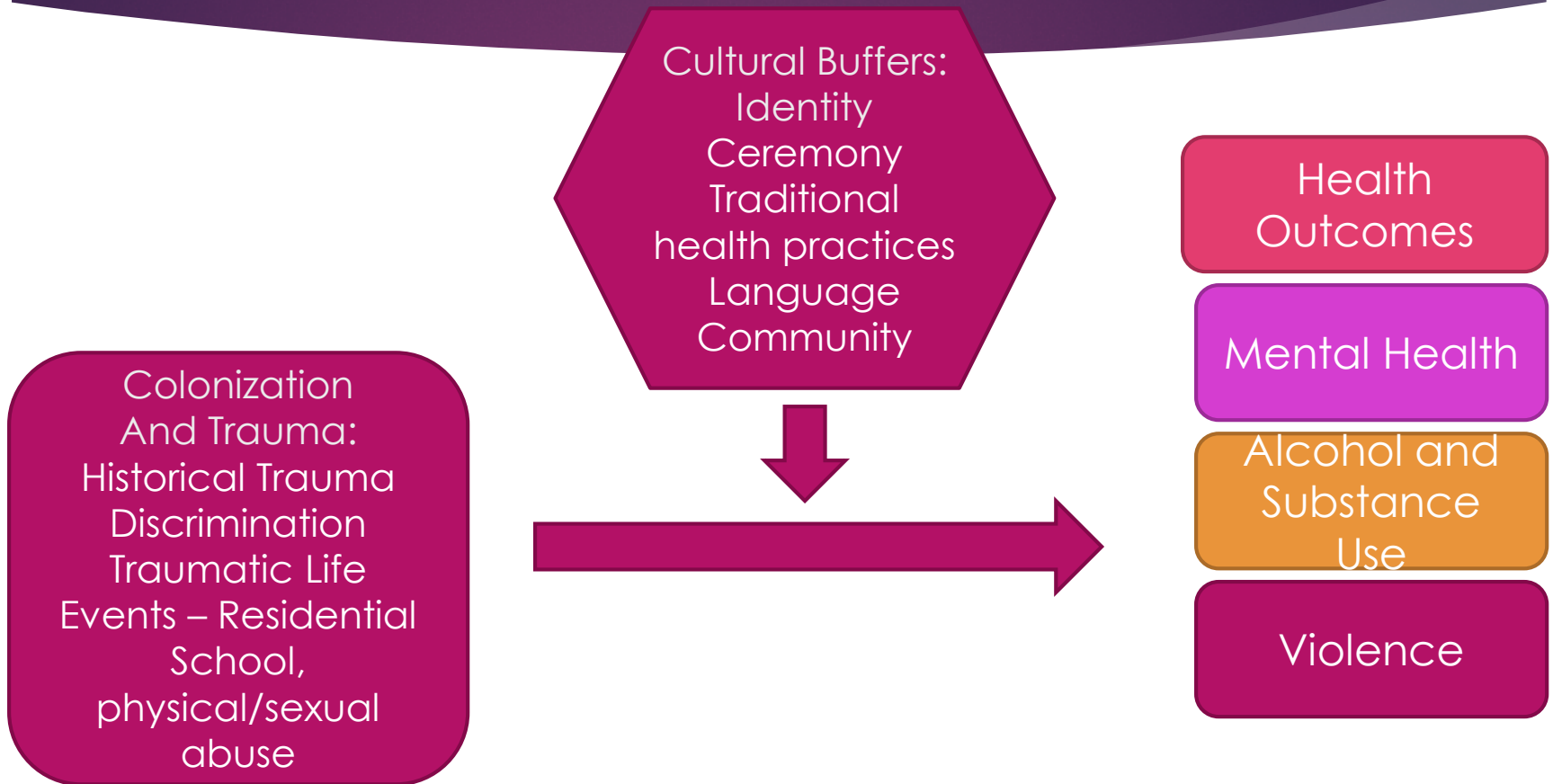
# Disconnection

- ▶ Chronic disconnection is the “primary source of human suffering, resulting in paralyzing psychological isolation and impaired relational functioning” (Walker, 2004, p. 6).
- ▶ Encourage & support their interpersonal & social relationships
  - ▶ Support healthy relationship with self, family, community, and the universe
  - ▶ **Connecting** is key (Graham, 2016).

# Responses

- ▶ Mainstream approaches to addressing abuse often fail within indigenous populations because they neglect the historical and cultural roots of violence and abuse.
- ▶ Often violence is systematic – paternalistic and gendered
- ▶ Support for many Indigenous people requires healing.
- ▶ Traditional healing
  - ▶ Connection, healing circles, restorative justice, counselling, family, on-going support, culturally-specific activities etc.
  - ▶ For women especially, this requires recognition of their roles and responsibilities, connections to land, family and spirituality.

# Conceptual Model of Indigenous Health and Well-being



Adapted from Walters & Simoni, 2002.

# Cultural foundations

- ▶ Indigenous knowledge
- ▶ Ceremonies and medicines
- ▶ Song and dance
- ▶ Language
- ▶ Social support/networks
- ▶ Family, relationships
- ▶ Traditional roles and responsibilities
- ▶ Land, water, natural environment

# Universal Response

- ▶ Recognize how common trauma is, and to understand that when working with Indigenous women the likelihood of historical trauma and current stressors is great.
- ▶ Therefore, we should just assume that they may have this history, and act accordingly with compassion and empathy.
  - ▶ Create relationships, take the time – this is highly valued to Indigenous people.
  - ▶ Explain why we're asking sensitive questions.
  - ▶ Be flexible and responsive with your approach.
  - ▶ Be open and compassionate.



# Strategies

- ▶ Education - awareness and understanding
- ▶ Critical reflexivity
  - ▶ Acknowledging power imbalances
- ▶ Systems change – address systems barriers
- ▶ Develop trust – relationship building
  - ▶ Respect
  - ▶ Listening
- ▶ Developing a shared understanding of problems
  - ▶ Don't be dismissive of an alternative worldview – cultural violence and oppression
- ▶ Cultural resources – draw on local Indigenous communities and helpers.

# Contact:

- ▶ Amber Skye
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7 days a week



**Elder Abuse Ontario**

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## Questions



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# New Resource on Your Legal Rights


[www.elderabuseontario.com](http://www.elderabuseontario.com)

The image displays the cover and two pages of a booklet. The cover features the ACE logo (Advocacy Centre for the Elderly) and a photograph of an elderly couple. The title 'ELDER ABUSE AND KNOWING YOUR LEGAL RIGHTS' is prominently displayed in white text on an orange background. The booklet is published by Elder Abuse Ontario (Ontario Elder Abuse Society) and is available in both English and French.

**Page 2:** This booklet, "Elder Abuse and Knowing Your Legal Rights" contains legal information presented in plain language, about some of the tools available to deal with situations of elder abuse:

- Revoking a Continuing Power of Attorney for Property
- Reporting Elder Abuse to the Police
- Guardianship Investigations
- Statutory Guardianships
- Court Appointed Guardians
- Representatives Appointed by the Consent and Capacity Board
- Civil Actions for the Recovery of Property
- Important Provincial Resources

*This booklet contains legal information for educational purposes only and is not to be construed as legal advice. For legal advice, speak with a lawyer/legal professional.*

**Page 3:**  **WHAT IS ELDER ABUSE?**

**Financial abuse** is defined as any improper conduct, done with or without the informed consent of the senior that results in a monetary or personal gain to the abuser and/or a monetary or personal loss to the senior.

**Neglect** is not meeting the basic needs of the older person.

**Active (intentional) neglect** is the deliberate withholding of care or the basic necessities of life.

**Passive (intentional) neglect** is the failure to provide proper care to an older adult, usually due to the lack of knowledge and/or experience.

**Emotional or Psychological abuse** is any action, verbal or non-verbal, that lessens a person's sense of identity, dignity and self-worth.

**Sexual abuse** includes any unwanted sexual touching, remarks or coercing a person through force, trickery or threats into sexual activity without their consent. Sexual abuse includes inducing sexual activity with a person who is not mentally capable of giving active informed consent throughout the entire duration of the sexual activity.

**Physical abuse** is any act of violence or rough handling that may or may not result in physical injury but causes physical discomfort or pain.



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