Decolonizing social services through community development: an Anishinaabe experience

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Abstract

This article is a case study of a community review of an income assistance (IA) program from the perspectives of Anishinaabe First Nations communities that interact with Niigaaniin—an Indigenous-run social assistance program. Using a decolonial methodological approach, the review process revealed that the priority of achieving clients' wellbeing involves engaging in community wellness and development from an Indigenous community-scale perspective. This participatory review of the program of IA enabled a continued decolonization of social services and community development processes, re-signifying the idea of individual-based social services towards a more Indigenous community-oriented focus. This process suggests that decolonization requires that these separate fields be unified into one participatory, community-centred, and practice.

Introduction

Largely led by Indigenous scholars, there has been a recent intensification of calls to decolonize social work (Hart, 2002; Gray *et al.*, 2016; Green, 2019; Russ-Smith, 2019). Some of the mechanisms invoked include promoting cross-cultural competency, transcultural, and anti-oppressive practices (Gray *et al.*, 2008, p. 3). The exclusive use of Western methodologies has been

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criticized (Hart, 2002), fostering instead, the indigenization of social work to 'address culturally relevant and context-specific problems' for culturally diverse populations (Gray and Hetherington, 2016, p. 27), in 'non-Western countries' and 'non-Anglo-Saxon communities in Western countries' (Ling, 2004, p. 336, cited by Gray et al., 2008, p. 5). Colonialism has been largely addressed from a community development perspective within the context of international work, or from the practice of non-Indigenous social workers (Ife, 2013; Ibrahima and Mattaini, 2019). However, to our knowledge, there is a lack of empirical studies on the processes of decolonization of social work from the perspectives of Indigenous groups. Nor has there been a study that examines the relation between community development and social work when decolonial methods are used to revaluate social assistance.

In this article, using a decolonial approach, we present a case of a participatory process of designing social services from the perspective of the Anishinaabe First Nation communities that interact with the programs (including employment, financial support, and addiction services) run by Niigaaniin, the department within the North Shore Tribal Council (NSTC), that is responsible for social service delivery in the Lake Huron Region, Ontario, Canada. We argue that the use of participatory methods of consultation in an Indigenous context transforms social work into a community development intervention. Since this process enables thinking and planning from the standpoint of Indigenous knowledge and traditions, it is decolonial (Ife, 2013; Green, 2019).

We understand community development as a process of organizing the structures within a community in order to meet their human needs (Ife, 2013), 'ensuring that human beings can become agents of their own destinies' (Kenny *et al.*, 2018, p. 1). However, as Kickett-Tucker and Ife (2018, p. 319) explain, effective Indigenous community-based programs need to recognize the impact of colonization on Indigenous culture and community practices. Then, by strengthening 'Aboriginal people's connections with cultural and spiritual heritage, validating, and supporting Aboriginal ways of knowing, doing and being, and strengthening Aboriginal communities' through the reconnection to kinships, culture, and their land (Kickett-Tucker and Ife, 2018, p. 319), community development processes challenge the imposition of worldviews, ideas, and values on a community (Ife, 2013).

Critical community development practice seeks to 'address unequal relations of power' (Forde and Lynch, 2015, p. 10) by engaging people through critical 'consciousness-raising' (Freire, 2005) that is focused and purposeful (Pawar, 2019). Empowered communities define their own development and well-being bringing the views and voices of the marginalized, while challenging and changing the system of decision-making (Nelson and Wright, 1995; Kenny *et al.*, 2018). At the same time, participatory community

development processes can enable engaging with people in organizations, bureaucratic systems, and politics (Pawar, 2019), promoting inclusive participation of civil society (Lynch *et al.*, 2020, p. 251). For this reason, community development can be conceived as a 'resistant space' (Shevellar and Westoby, 2018).

Social work, much like earlier, non-critical iterations of community development, has tended to define and treat social ills from a Western, individualistic, and economistic perspective (Gray and Hetherington, 2016). This has exposed the discipline to charges of colonialism and brought forth calls to better integrate participatory community processes into social assistance design (Ibrahima and Mattaini, 2019). As we will show, the importation of participatory community consultations into social work, in fact, tends to blur the distinction between that field of practice, and community development.

This article begins with an elaboration of our theoretical framework, followed by the background of Niigaaniin programing, and our methodological approach and methods. Subsequently, we discuss the main results of the participatory program review. Consistent with Indigenous relational worldviews ('all my relations'), clients favour non-material, community-embedded dimensions of wellness, and material concerns at the community level. Then, the discussions of Niigaaniin Management (NM) and the Niigaaniin Advisory Committee (NAC) draw on the use of the Medicine Wheel to guide the reform of the social assistance programming. We conclude that programming involves integrating social services with Indigenous views and community development, and close with broader implications of this study for a continued move toward decolonization in both social services and community development.

Decolonization and Indigenous social work

Multiple theoretical frameworks address Indigenous community development through social services, or, as we will refer here more broadly, social work. These frameworks include anti-oppressive practice, anti-discriminatory and anti-racist practice, decolonization theory, Indigenous research, and Indigenous standpointism (Gray *et al.*, 2016). Decoloniality is a long-term process of re-signification through strategies that promote thinking from Indigenous cosmologies and knowledges (Grosfoguel, 2009). And decolonizing social services involves the divesting of colonial power (Smith, 2012, p. 101) by Indigenizing its practices.

Within a community development perspective, the process of identifying First Nations' needs requires understanding community, defining the problems and alternative solutions, and designing social programs from within Indigenous worldviews (Eketone, 2006; Kickett-Tucker and Ife, 2018).

Similarly, Indigenous social work stresses the significance of 'culture and local knowledges in the development of relevant and authentic social work practices' (Gray et al., 2008, p. 6). The Niigaaniin programing has been defined based on Anishinaabe worldviews and values using participatory methods. As a decolonizing methodology is 'localized, critical, emancipatory, transformative, and empowering', and can promote Indigenous self-determination (Gray et al., 2016, p. 16), it converges with community development principles (Nelson and Wright, 1995; Kenny et al., 2018).

Social work, like the idea of development, is essentially 'a modernist Western invention' with a history of silencing marginal voices and importing Western thinking and values into diverse cultural contexts across the world (Gray *et al.*, 2008, p. 1). From both disciplines, community development (Kickett-Tucker and Ife, 2018) and social work (in the case of Australia) (Green, 2019; Russ-Smith, 2019), there have been calls for the need to decolonize practices.

Eurocentrism, which has been behind the process of colonizing Indigenous populations (Bird and Gray, 2008), is strongly associated with the colonial 'civilizing mission' (Gray and Hetherington, 2016, p. 31). Indigenous social work emerged, particularly in Canada, Australia, and the United States, to meet the needs of Indigenous groups in order to overcome the impact of 'assimilation, isolation, and cultural displacement perpetrated by colonizers' and establish 'a mainstream model that is effective and relevant for particular populations' (Gray and Hetherington, 2016, p. 28). Decolonizing social work requires recognizing that the legacy of such oppressive policies has resulted in 'Indigenous People remaining at the lowest rung of the socio-economic ladder' (Briskman, 2008, p. 84). In addition, Indigenous social work requires Indigenous participation and control in social program design (Bird and Gray, 2008). Precisely, effective community consultive participatory programs can be decolonizing as they are embedded in Indigenous culture, relations, and worldviews (Kickett-Tucker and Ife, 2018).

In Canada, the effects of residential schools continue to undermine family relations in many Indigenous communities (McCauley and Matheson, 2018). The legacy of such colonizing practices manifests through intergenerational trauma, and its effects are evident in higher rates of poverty, inter-personal violence, and overrepresentation on the justice system, as well as lower educational, health, and socioeconomic outcomes among Indigenous peoples (McCauley and Matheson, 2018, p. 294; Truth and Reconciliation Commission, 2015; Statistics Canada, 2017).

From Anishinaabe First Nation perspectives, the NM is addressing the Eurocentric viewpoint of mainstream social services, by grounding the review and design process of Niigaaniin programing on a thorough understanding of cultural, community, family, and individual needs. This participatory process has focused on the strengths of social service clients and communities and the use of Indigenous knowledge, including the Medicine Wheel and the idea of Nii'kinaaganaa ('all my relations'), transforming individual-based social services to a viewpoint more consistent with a community development perspective. Below we explain the background of Niigaaniin programing, followed by an outline of the decolonial process of program review that started in 2018.

Background

The need of social assistance for First Nation communities in Canada is linked to the history of the fur trade in the sixteenth century and subsequent land dispossession (Shewell and Spagnut, 1994). The administration of Indigenous social assistance initially aimed to prepare Indians for entering into liberal society, and focused on the logic of assimilation to the Canadian state (Tobias, 1976; Shewell, 2004, p. 22; Shewell and Spagnut, 1994, p. 2). After the Second World War, the welfare system put emphasis on the integration into the labour force (Papillon, 2015, p. 335; Shewell, 2004, p. 22). However, despite the expansion of the welfare system (Shewell and Spagnut, 1994; Schaan, 1994, p. 115), the services and the objectives of social assistance for Indigenous peoples have remained unchanged since the mid-1960s (Papillon, 2015, p. 329), grounded on individual rights and personal autonomy, contrary to the First Nation worldviews (Shewell, 2004).

According to internal Niigaaniin documents, the seven member First Nations of the NSTC in the province of Ontario have delivered the provincial General Welfare Assistance program to their members since the 1960s or 1970s, following provincial legislation and regulations and pursuant to the terms of the 1965 'Agreement Respecting Welfare Programs for Indians'. The seven First Nations involved are Batchewana, Garden River, Thessalon, Serpent River, Mississauga, Sagamok, and Atikameksheng. The program was conceived to provide last resort financial assistance to Indigenous members in need.

However, First Nations have never been satisfied with the provincial social assistance program, in particular its tendency to generate and perpetuate dependency, understood as the reliance on 'passive welfare'—government-funded social assistance that displaces responsibility from the recipients, individuals, families, and communities to the deliverers (Cape York Institute for Policy and Leadership, 2007). NSTC First Nations aimed to help recipients of financial assistance become more employable and self-supporting through employment or self-employment. This idea eventually became the cornerstone of thinking about social assistance reform in provincial government circles in the late 1980s.

In 1997, the Harris provincial government (Conservative party, of political right wing leaning) introduced Ontario Works which included some steps towards making the social assistance program more active and helping clients become more self-sufficient. However, after considerable analysis and discussion, the NSTC First Nations considered that the reforms were insufficient in relation to the socio-economic circumstances of many if not all First Nations. They rejected the employment assistance component of that program, as they considered it overtly restrictive. Thus, in the early 2000s, the NSTC initiated the design of a social assistance program that would be more responsive to the unique needs of First Nations communities.

In 2003, the Chiefs in Council formed a working group—consisting of the social assistance administrators and other appointees from each First Nation—to assess the impact of the provincial social assistance program on their people and communities and to develop their own social assistance program of 'active measures'—Niigaaniin. The working group anticipated that this new program would be much more effective in the cultural, social, and economic context of the First Nations communities. Following a participatory approach, they established that to design any new community-based social service program it was necessary to have a thorough understanding of the community, family, and individual needs in each First Nation and to leave all options open in redesigning and redefining social services.

The working group initiated the program development process by talking first to interested members of each NSTC First Nation, including the chiefs and councillors, as well as the managers and staff of other community-based social and health service programs. They asked the social service administrators in each First Nation to review their caseload, assess, and provide an overview of the service needs and barriers to self-sufficiency that are being experienced by those requiring financial assistance and their adult dependents.

Based on the consultation input, the working group developed a general framework of the Niigaaniin model. They considered that programming needed to be culturally appropriate, reflecting traditional concepts of effective caring and sharing. These principles would guide the design and organization of the program and the delivery of assistance. In addition, an adequate program should encourage and assist each individual to develop their capabilities to the fullest extent possible—for their own and for their First Nation's benefit. Although transformative, these efforts were not rigorously decolonial since the consultation process did not include the direct input from clients, and the desired 'output' of social services was framed as an employed, self-reliant, individual in the Western tradition.

To remedy this, during the years 2018 and 2019, Niiganiin and the NSTC developed a proposal to look specifically at income assistance (IA) through

the lens of the First Nation communities that interact with Niigaaniin programming. The Income Assistance Project aimed to capture the NSTC community members' experience with social assistance programs and their vision for a healthy and thriving future for themselves and their communities. Below, we describe the participatory processes carried out to review the Niigaaniin program.

Decolonizing methodologies

Understanding First Nation social services requires participatory and collaborative methodologies (Nicholls, 2009). Under an Indigenous paradigm, we consider knowledge as relational, thus, as researchers, we remain accountable and responsible to Indigenous needs, aspirations, and concerns (Wilson, 2001, p. 177; Dé Ishtar, 2005; Nicholls, 2009). In cross-cultural settings, a self-reflexive practice means being aware not only of the context of power but also of our assumptions and disciplinary biases (Nicholls, 2009). Thus, decolonizing research involves unsettling Eurocentric thought and epistemologies, while creating space for Indigenous perspectives (Kovach, 2009, p. 85). We follow Hart's (2010, pp. 9-10) adaptation of Wilson's (2001) principles for Indigenous research. These include Indigenous control over research, respect, reciprocity and responsibility, self-awareness, and nonintrusive observation, without impeding community processes. Engaging with Indigenous ontologies, we step 'beyond the position of "expert" in order to also be a witness or listener' (Hunt, 2014, p. 31). Thus, Niigaaniin itself lead research design for this project, whereas non-Indigenous members of the research team worked closely and collaboratively under this Niigaaniin lead.

Niigaaniin methodology

The purpose of the social service program review was to evaluate IA and find ways to make it more effective and appropriate for clients, considering them as people embedded in history and community. The project involved a series of focus group sessions with Niigaaniin clients, community staff and senior management, the general community, and community leadership in the seven First Nations of the North Shore of Lake Huron from December 2018 through to March 2019. A total of 292 social services clients took part in focus group (roundtable) sessions and an associated participatory budgeting exercise. The NM prioritized documenting the clients' experiences, voices, opinions, and struggles. As the community set up the process and defined their own development and wellbeing, the process followed a participatory approach (Ife, 2013, p. 162; Nelson and Wright, 1995).

Regional NSTC sessions were also held to include the perspectives of the regional staff and administrators that deliver programs in the communities and work towards advancing their service mandates with various levels of government. The project also held two urban Indigenous sessions with the Sault Ste. Marie Indigenous Friendship Centre and N'Swakamok Native Friendship Centre in Sudbury. In total, 768 people participated in these broad community and client consultations by taking part both in guided *roundtable discussions* and in a participatory community budgeting exercise.

Roundtable discussions

Participants were broken into focus groups of five to eight members to address questions that focussed on individual and community needs and strengths. The purpose of these sessions was to collect the stories of people's current experiences in the community and their general vision for the future, as well as to identify barriers and what is required to forge a path forward. Once narratives from focus groups were collected, they were coded and interpreted according to a logic established in meetings between Niigaaniin and non-Indigenous researchers. Graphical summaries and narrative examples were then compiled in an internal report entitled Beyond Income Assistance: Anishinabek Perspectives on Social Assistance and Community Development, which also included the results of the community budgeting exercise.

Participatory community budgeting exercise

Each participant was given \$100,000 in mock-money and asked to distribute it in any of the ten boxes representing each a potential budget priority area (see below), according to their assessment of the most crucial investment needed in their community. After the exercise, a discussion of results followed.

- Employment creating projects
- 2. Education opportunities
- 3. Housing
- 4. Cultural revitalization
- 5. Psychological and addictions services
- 6. Spiritual counselling
- 7. Local, healthy food
- 8. Direct cash paid to individuals
- 9. Political advocacy and leadership
- 10. Other.

Main lessons from clients

The outcomes of the program review show that personal and community problems and their solutions are interwoven. Despite differences in priorities between First Nations, clients favoured community-level employment creation and, overall, a community-wide focus on wellness programs, cultural revitalization, and cooperative community interaction. Nevertheless, several client participants explained that providing for their necessities was 'a struggle' while on social assistance. About a third of comments expressed difficulties related to not having enough money to pay for necessities or to invest in employment, education, or life improving measures. Below we expand on these issues.

Access to enough healthy food

A great majority of participants were facing issues accessing enough, accessible, and healthy food. Participants mentioned that the decline of local gardening, harvesting, and sharing has contributed to chronic hunger and unhealthy eating. Most suggestions for food provision involved community action, as opposed to individual or business-based solutions. Beyond addressing high prices, several participants mentioned local food production and harvesting, as well as collective distribution and community gardening among alternatives to tackle food security. Appeals to Indigenous ecological knowledge and traditional relations with nature also linked food security to cultural revitalization and Indigenous education.

Non-material needs

Despite the acknowledgment of needs for material improvements, non-material needs were extremely prominent. Figure 1 shows a graphical representation of results from the participatory budgeting exercise.

As the figure shows, spiritual counselling, cultural revitalization, as well as psychological and addiction counselling services were important priorities for clients and community members, accounting for a third of the total budget allocation in the budgeting exercise. Participants expressed their concerns that community development be achieved via the (re)building of social support, Indigenous institutions, language, identity, and knowledge within the community. Since feelings of identity, meaning, and belonging are strongly correlated with mental health outcomes and addiction prevalence, these three categories can be considered interwoven, mutually reinforcing, and vital policy priorities (Hagerty *et al.*, 1992; McCormick, 2000; Hill, 2006). Approaching psychological and addiction issues along with spiritual, cultural revitalization, and Indigenous education, entails understanding the nature of Indigenous healing (Briskman, 2008, p. 91).

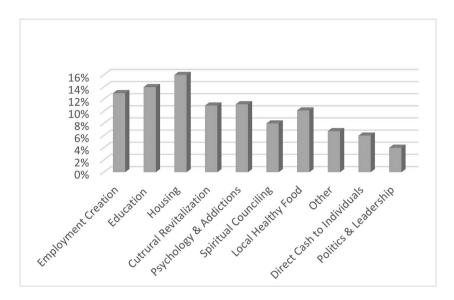


Figure 1 Participatory budgeting investment priorities

Education and employment needs

Clients put emphasis on 'on the job training', employment placing, licensing, and more education in life skills. Calls for indigenous education to revitalize traditional knowledge and culture were equally strong, however. Clients expressed a desire for 'hand-ups' programs instead of dependency-creating 'hand-outs'. Access to more money—either via jobs or social security payments—was considered an important personal and familial goal. Access to financial resources in the communities was an additional concern.

Clients were also concerned about not having enough information regarding existing social service programs that were available to them. They expressed the need for more comprehensive service provision and linkage to multiple available services through a central hub.

Social and cultural concerns

Participants chose to allocate money to investments in community programs for employment creation, education, housing, local healthy food, and cultural revitalization. Direct cash paid to individuals, however, had a notably lower priority (see Figure 1). In focus groups, calls for material infrastructure tended to advocate the construction of community spaces, such as elder's complexes, community centres, youth centres, and healing lodges. Medical facilities, houses, schools, playgrounds, and grocery stores were often mentioned as well.

Social and cultural concerns were also linked to political issues, which encompass calls for 'decolonization', 'freedom from the Indian Act', as well as complaints about policies of local chiefs and council, and favouritism in hiring. These concerns include the healing of intergenerational trauma at the community level, the reduction of stigma attached to receipt of social services, and increasing access to recreational and interactive social spaces.

Political concerns

Political and social/cultural issues were seen as the most common barriers to achieve community goals. Some mentioned the unfairness of the Canadian justice system, bureaucracy and too much control from Indigenous Services Canada, and lack of federal and provincial adherence to established treaties. Some participants cited continued 'colonialism' as a general political ill. The Indian Act was often mentioned as a roadblock, as was general 'dependency' on the Federal and Provincial government. Overall, clients expressed the need of a more holistic initiative that integrates these multiple interrelated personal problems and community issues.

Decolonizing social services from Anishinaabe perspectives

After the participatory process to review the Niigaaniin program, NM, and the NAC formed workgroup discussions to discuss over a total of 4 days the results of the community consultation, collected through focus groups and the participatory budgeting exercise.

As part of a continuing process of decolonization, the NAC meetings began with a smudge ceremony. The ceremony was meant to mark the anniversary of the signing of the Robinson Huron Treaty (RHT) on Whitefish Island near Sault Saint Maria in 1850. In order to root the meeting in an Anishinaabe worldview, the morning was dedicated to presentation on, and discussion of, local Indigenous culture, particularly around the Medicine Wheel.¹

Material needs

Participants in both meetings were aware that the monthly assistance of \$780 provided to clients is insufficient to cover their costs of living. Niigaaniin managers and NAC members were initially disappointed by the results regarding demands for more programs. It was pointed out that negative client perceptions revolved around the perception of insufficient Niigaaniin

I Medicine Wheels represent interaction of the physical, emotional, mental, and spiritual aspects of one's being for Anishinaabe First Nations' cultures.

services, rather than the quality of existing services. Discussion then turned toward a need to have more culturally appropriate services, to do more community-integrated outreach, and to inform people of the multiple existing opportunities.

Community wellness and individual non-material needs

Building on the findings of the community consultation, participants discussed the implications for community and individual well-being with respect to the Medicine Wheel. Indigenous versus Western cultural differences were discussed in detail. NM participants expressed that values rooted in Indigenous culture must be practiced, learned, and understood internally to the NSTC and Niigaaniin before integrated into community wellness or development plans or models.

Regarding mental health and addictions, various participants at NM and NAC groups stressed a social/cultural approach rather than merely the specialized Western medical model. Some noted that if the Medicine Wheel is tilted to one side, it is out of balance, suggesting a holistic focus on individual and community wellbeing. Effective improvement of mental health calls for development interventions at the community level, rather than merely that of the individual—as noted by Guerin and Guerin (2012, p. 567) in the case of Indigenous Australians. It was suggested that 'healing', which can be hard and painful, needs to be rooted in Indigenous culture. Participants also remarked upon the importance of mental health services and the need to engage community members via extended families to tackle addiction and depression issues. Consistent with a decolonizing approach to community development, some suggested the need to change the language to focus on 'wellness instead of problems', and that frontline workers need to be listeners that allow clients time, voice, and assistance to come up with solutions, instead of imposing ideas. For some participants 'if the people hadn't lost their culture and spirituality, a lot of the current challenges could have been avoided'. Land-based learning was suggested as a way to promote engagement with culture and spirituality. The therapeutic benefits of the connection to the land were also remarked.

Participants considered that Indigenous culture and spirituality need to be integrated into social service delivery and/or community development-related activities. One NAC meeting participant defined community development as 'planned evolution of all aspects of community well-being' (with a focus on primary prevention, beginning during maternity) should be presented as a life wheel and/or medicine wheel. A model, it was suggested, should be based on the determinants of well-being, and a healing continuum model, while involving the promotion of stability, sustainability, and balance.

Being integrated into the community would allow for more effective outreach. 'All my relations', a participant reminded, 'means all of the community and the land as well'. 'We are the Creator's children – that's what we are'. Thus, self-care was extended to the community and territory (on the term Nii'kinaaganaa or 'all my relations', see Shawanda, 2020).

Participants posited that under an Indigenous governance model, a community-based social service can be improved, but First Nations need control over the form of that model. Only with accountability, through Anishinaabe culture, to the Creator, will governance be able to be appropriately focused on full-life and full-community well-being. Neither community development nor social service outcomes are currently reported through an Indigenous lens. Participants noted that reports required as part of federal and provincial funding systems, for example, are quantitative, individualistic, and Western formats.

Food security and sovereignty

Many noted that logging, mining, and spraying activities have made traditional harvesting and hunting lifestyles difficult in the area. As did the clients, NM and NAC participants lamented the loss of gardening knowledge, and suggested ways of increasing food production on the First Nations. As an example, it was noted that a well-developed idea of a 'food cupboard' would be a worthy and viable solution that would meet community integration, development, and food security goals simultaneously. Previous research conducted by the NSTC suggested that with the total amount currently distributed through vouchers and other supports, the NSTC area could be made virtually self-sustaining via land purchase or farming initiatives and bulk buying and distribution.

Social and cultural development

Both NM and NAC groups had extensive conversations around the topic of education. Participants stressed tensions that come from 'living in two worlds' – the 'modern' and the 'Anishinaabe'. Many dilemmas were apparent as people tried to balance a desire to revitalize Indigenous ways of knowing, land-based learning, and spirituality with the educational certification needs of the modern economy. Participants mentioned examples within the community itself, such as land-based learning, which are being used to engage individual on mathematical and spiritual concepts simultaneously.

To address clients' barriers to employment, some participants suggested to implement a better facilitation of networking among community members and more integration of workers in the community. The 'grandmothers and aunties' model was mentioned as an example. The process of decolonization involves recognizing the existence of 'formal and informal

systems of support, welfare and helping', developed and maintained by different peoples, nations, tribes, clans, or societies (Bird and Gray, 2008, p. 62), both before and after colonization (Briskman, 2008, p. 90). Thus, decolonization enables shifting from individual-centred social services to community development.

Political concerns

Most of the political issues described by clients were related to nepotism or colonialism. At the NAC meeting, a lengthy discussion took place around why clients would feel this way. Some suggested that recent failsafe procedures have been put in place to make access to employment in the public sector a fair process. It was suggested that clients and community members are not aware about such changes. Therefore, continual re-evaluation and transparency programs should accompany efforts toward community involvement in decision-making.

Assuring equal access to opportunity and education was also discussed. It was suggested that members of the educated families tend to be successful applicants for more senior positions in communities, which may be perceived as nepotism. For the NM and NAC groups, this reaffirms a need to promote access to, and equality in, education in the community in general.

Employment and re-signifying labour

Reflecting on the budgeting exercise, participants noted that employment creation projects were more prominent than cash payments to individuals. However, clients had stressed the lack of employment opportunities and feeling in a 'cycle of dependence'. Thus, there was a suggestion that employment-creation should focus on entrepreneurial training and/or encouraging clients to engage in activities that serve other priority areas, such as spiritual counselling, psychological and addictions services, or cultural revitalization.

It was suggested that what a community needs may not be necessarily served by jobs provided by markets, since communities need things that are not easily valued monetarily or exchanged physically things such as role-models, community farmers, and caregivers may be voluntary positions but are important for community development. A need to redefine 'what work is, and what it should be about', was also expressed. Subsequently, a largescale labour market and skills study called 'Mii Maampii Gikendaas' (This is Where I Have Knowledge) was initiated by Niigaaniin in 2020.

Designing Niigaaniin programs

It was generally agreed that it was worth trying to create a social service model that was inspired by the Medicine Wheel and recognized the different

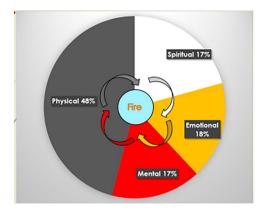


Figure 2 Community medicine wheel. Regional wellness and development priorities

life stages. Figure 2 shows the wellness and development priorities using the Medicine Wheel, based on areas of need articulated in the community consultation. Here, community's priority areas for improvement, expressed in percentages, are mapped on top of the traditional quadrants of the Medicine Wheel. Members of both NM and NAC meetings noted that the Medicine Wheel looks unbalanced. Participants explained that the community itself is out of balance, and that the inequality between the quadrants indicated a direction for effort. Mental, emotional, and spiritual needs remained at least as important as physical needs—stressing the holistic and non-material aspect of the Anishinaabe views on community development.

The NM and NAC discussions called for programming that integrates social services with Indigenous views and community development. Based on the current Niigaaniin social service case management model, the 'output' is an individual who is 'self-sustaining' and has a job. It was apparent to many at both meetings that this individualistic, input/output model does not match well with Indigenous spirituality, culture, or needs, as articulated in community and client focus groups. In contrast with Western ideas, for Niigaaniin managers and NAC members, according to Anishinaabe culture, a successful client is not only employed and goal-oriented, but is also self-sufficient, mentally, physically, spiritually, and emotionally healthy, and community-embedded.

Following the discussion, the participants in the NAC meeting began to brainstorm on the design of an Indigenous services model. The goal was to not feature the client as an input or output, but rather as the centre of the process of social services. The line between social services and community development as a 'planned evolution of community well-being' was blurred in this design. Balance within the community, family, and individual was

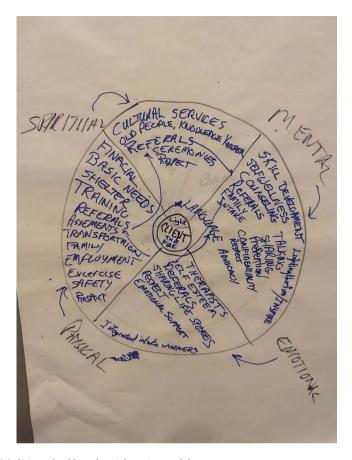


Figure 3 Medicine wheel based social service model

emphasized. The client in the middle was the 'fire²' and the place of balance (see Figure 2).

A list was drawn-up simultaneously with the understanding that the items could be incorporated into a Medicine-Wheel-based social services model (see Figure 4). It was argued that the current 'siloing' of different organizations hinders integration, affecting service effectiveness (i.e. each corporation signs a separate government agreement, and reports separately).

Together, Figures 2–4 are meant to be a beginning from which an Anishinaabe Social Services model can be developed. The resultant model, depicted in Figure 5, integrates the insights from the broad community

² Participants discussed Fire (roughly understood as 'will')—the central element of the Medicine Wheel, required for a transformation toward wellness.

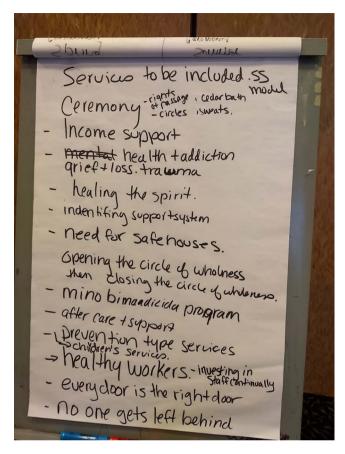


Figure 4 List of services to include in the model

consultation as they were interpreted and incorporated via the NAC and NM working groups. The Client-Community Care Model emerged from participatory research within the Anishinabek context. It dissolves the idea of individualistic social services into a community development model, placing these within the interconnected regions of an Anishinaabe medicine wheel. This broad depiction has now begun to be used to guide social service provision in the North Shore Treaty Area. The results from these initiatives, and the model, are being presented back to the community where they are being once again transformed as part of a continuous process. In addition, as opposed to standard client surveys at the point of intake and output, a survey that integrates the themes in the Client-Community Care Model has been designed and is being now used to follow clients throughout their lives as they integrate with community and evolve in an ongoing relationship with Niigaaniin.

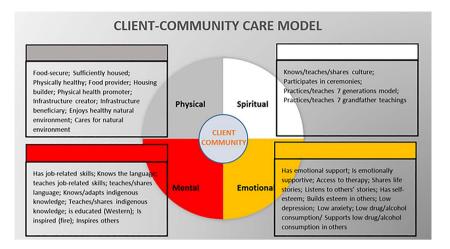


Figure 5 Client-community care model

Conclusions

In this article, we argue that the use of participatory methods in the review of social service programs can foster the decolonization of social work, while blurring its distinction from community development processes. Throughout the process of program review, and guided by the Medicine Wheel, NM is recentring on clients' needs and strengths and their embeddedness in community—as opposed to in individual inputs and outputs. Anishinaabe people envision First Nation social assistance as 'moving from administering poverty to administering wealth', that is, valuing 'Indigenous intelligence', grounded on a solid relationship with all of Creation. Indigenous knowledge is shaped by the land and the teachings of their Elders, in connection with Anishinaabe history.

Implementing such vision of holistic programming leads to new challenges, due to the persistence of funding structures that regulate Indigenous institutions and keep them compliant to federal and provincial government dictates, which reinforces dependence. The NSTC working group on social welfare reform has started a discussion on RHT monies (proceeds from the ongoing annuity case) through the lens of wealth. This view is connected to the people, land, resources, and stewardship, based on the relationship with all of Creation since time immemorial. Irrespective of treaty-case outcomes, the iterative process described here continually unsettles Western individual/community binaries and assumptions about expertise and knowledge. It is therefore a decolonial expression that dissolves the distinction between social service client care and community development.

This study points to a need to rethink both community development and social work regarding decolonial work with Indigenous peoples in general. Given Indigenous relational worldviews, decolonizing community-based social services requires a dissipation of the individual/community conceptual divide. For social work, this requires incorporating participatory methods from community development theory. For community development practitioners and theorists, this involves engagement with social workers and social service agents to ensure that the predominant system of individualistic Western-centric social work is not undermining community-focused solutions. Fundamentally, this calls for social services and community development be unified into one decolonial practice.

Conflict of Interest

The first author in this submission is an indigenous organization that represents 7 First Nations in Ontario, Canada. This study was carried out as a self evaluation of its own programs by the first author. Therefore, there is potential for bias - although the findings as they are could conceivably impact the organization either positively or negatively. To mitigate potential for bias, the second and third author, who are not affiliated with the organization or part of the ethnic group being studied, were brought in to assist research design and to be solely responsible for analysis.

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