

## Article

# Healing and Rebalancing in the Aftermath of Colonial Violence: An Indigenous-Informed, Response-Based Approach

Catherine Kinewesquao Richardson <sup>1</sup>, Kenna Aviles-Betel <sup>2,\*</sup>, Zeina Ismail-Allouche <sup>2</sup> and Véronique Picard <sup>2</sup>

<sup>1</sup> Department of First Peoples Studies, Concordia University, Montréal, QC H3G 1M8, Canada; catherine.richardson@concordia.ca

<sup>2</sup> Concordia University, Montréal, QC H3G 1M8, Canada; zeinaallouche@gmail.com (Z.I.-A.); vpicard90@gmail.com (V.P.)

\* Correspondence: kennaavilesbetel@gmail.com

**Abstract:** What is understood as “healing” is often culturally and socially embedded. One’s culture helps to define what it means to be well or unwell, and what it means to heal or recover. Sometimes, one’s culture sits in contrast to the mainstream, western scientific approach to health, often seen as the freedom from illness. A Métis worldview is holistic in itself, and it incorporates notions and practices of well-being that go beyond just being “illness or problem free”. Wellbeing is often directly linked to our relationship with the food that sustains us, to the various animal and plant worlds, to the elements, and to being in “right relationship” to the world and others. Dr. Catherine Richardson Kinewesquao presents an approach to healing which she refers to as transformative, energetic and spiritual. She draws from Cree teachings related to “*mamatowisowin*”, the life force inherent in all beings and the act of calling forth this energy into the healing process. This life force is connected to dignity, justice and care. Metaphorically, it can be talked about as being released or made available when an individual opens to discussing/facing fears and sorrows, distressing events and losses, and to finding a way to integrate them into their whole being. It is a form of energy transmutation, of becoming more emotionally fluid and liberated from the negativity of what is “acting upon them”. When energy is unblocked or released, particularly in the presence of a compassionate listener, the person may then have more energy for their chosen life projects. By using a response-based approach in the aftermath of violence and degradation, and by contextualizing events through exploratory conversations, one may transform stress into productive energy to fuel life, growth and action. Kinewesquao articulates the use of cultural processes for stress management and working with the natural world to enhance well-being. Ultimately, she makes a case that “positive social responses” (e.g., love, care, compassionate listening, support and cultural rituals) to one’s suffering can be some of the best healing medicines.

**Keywords:** Indigenous; Métis; healer; integration; response-based practice; emotional processing; crying; positive social responses



**Citation:** Richardson, Catherine Kinewesquao, Kenna Aviles-Betel, Zeina Ismail-Allouche, and Véronique Picard. 2021. Healing and Rebalancing in the Aftermath of Colonial Violence: An Indigenous-Informed, Response-Based Approach. *Genealogy* 5: 69. <https://doi.org/10.3390/genealogy5030069>

Received: 1 March 2021

Accepted: 20 July 2021

Published: 29 July 2021

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## 1. Introduction

### 1.1. Acknowledging the Land

This paper was written on the traditional lands of the Kanien’kehá:ka in Tiohtia:ke, and the Anishinaabe, Haudenosaunee, Huron-wendat (Wyandot) and Mississaugas of the New Credit territory in Toronto. The authors are grateful for the opportunity to live and work upon these lands, as visitors, and pay their respects to the ancestors and to Mother Earth. Acknowledging the land means being aware of ongoing colonization and structural violence while committing to social justice and restoring lands to the traditional Indigenous caretakers whenever possible. This paper was written in the hopes that it will help bring healing, comfort and hope to those experiencing pain and harm on the lands of Turtle Island and beyond.

### 1.2. Self-Location and Introduction

This paper outlines the approach of Métis therapist and co-developer of response-based practice, educator Catherine Richardson Kinewesquao. As an Indigenous practitioner and social work educator, Catherine received training in western approaches to psychology and psychotherapy. However, her work embodies an eco-systemic and cultural approach to working with individuals and families. This includes being informed by Indigenous praxis, an anti-colonial and gender-based analysis of power, including the acknowledgement of gender fluidity and non-binary identification. Much of her work is organized around creating safety and upholding dignity for people who have been harmed, particularly those who are most marginalized.

Catherine's work with Indigenous communities, coupled with her own Métis cultural values, compelled Catherine to develop an Indigenous-centered approach to healing and well-being. This includes an analysis of the ways in which Indigenous people are harmed by government violence, and of how to work with the reality of these socio-political considerations. In this chapter, a framework is offered to assist in the deconstruction of colonial, socio-political narratives and discourses, particularly the language used to conceal state and perpetrator violence while blaming individual victims for their suffering. The second part of the article introduces Catherine's approach to healing and identity revitalization through a response-based approach with the aim of understanding the situation and context while promoting social justice. Her approach is based upon holistic Métis conceptualizations of healing, involving processes of identity strengthening and integration, which Catherine describes as alchemical and transformative.

## 2. The Importance of Accurate and Contextualizing Descriptions

Most mainstream approaches to counselling do not incorporate an analysis of context, the social world and the various forms of violence. Violence is often recast as individualized trauma (e.g., brain changes) and excludes an analysis of social interaction, social responses and the influence of the perpetrator. Mainstream mental health services often organize their work around Cognitive Behavioural Therapy (Beck 2011) and/or Attachment Theory models, even when the underlying assumptions do not apply to Indigenous contexts and worldviews (Carriere and Richardson 2009; Neckowaya et al. 2007). While approaches such as CBT may be helpful for singly-focused behaviour changes, such as refraining from a negative habit, they overlook important contextual details. Richardson believes that these approaches do not offer enough depth and richness for longer term systemic violence and issues such as genocide, kidnapping, forced internment and the consequences of land theft. For example, Canada's Indian Act fosters impoverization, an ever-diminished land base, reduced access to country food and the eradication of Indigenous identity through assimilationist policies.

In the recent past, the Canadian state facilitated the forced kidnapping and internment of Indigenous children in the so-called residential schools, the survivors of which today comprise a population of the adults and Elders in Indigenous communities. The relevant context for therapy includes the ongoing state invasion of lands, e.g., the intrusion by Quebecois communities such as Chateauguay and Oka into Mohawk lands, with ongoing pressure for condo and golf course development on Indigenous graveyards and tribal lands. The heavy and uneven policing (and violation by police) of Indigenous people creates great stress, while the dangers for Indigenous-appearing people of attending Quebec hospitals—after the death of Joyce Echaquan and other Indigenous and racialized people—are all contextual factors that cannot and must not be invisibilized in the therapy process.

Examples of decontextualized, individual-focused work include cognitive-behavioural therapy and solution-focused therapy. Narrative therapy is one approach which does acknowledge context and resistance to oppression (White and Epstein) and seeks to elicit stories of resistance both to oppression and to the internalized negative stories that may develop after years of being seen as disposable by society. Indigenous scholar Gregory Cajete sees Indigenous people as part of the population that is often sacrificed for the greater good

of the settler state (Podcast, Deep Dialogues, 26 March 2021). Cajete points to this “disposability” as the rationale for situating nuclear armaments and nuclear waste on Indigenous lands without care for the Native American population (Cajete 2021). Richardson’s work examines the targeted individual/community’s response to the adverse situation, not merely what was done to them or how they were affected by it.

Part of the healing/strengthening process post-violence involves experiencing one’s agency, actions and resistance in the face of the state and industry-perpetrated violence and the structures that support these injustices. Furthermore, Richardson believes that activism is an important path to dignity and empowerment, particularly when the oppressors have no intention of “removing their foot off of our neck” (Bader-Ginsberg). Resistance to mistreatment and the restoration of dignity and cultural pride are major themes in the work of post-colonial psychological, Black and feminist scholars and activists such as Franz Fanon, WEB Du Bois, bell hooks, Bonnie Burstow, Rigoberta Menchu, Nelson Mandela, Rebecca Solnit and Gloria Steinem, and response-based theorists such as Allan Wade, Linda Coates, Nick Todd and Shelly Dean. Response-based practice involves critiquing power abuses and decontextualized approaches that tend to benefit perpetrators and harm victims. By individualizing the problem and taking it out of its “in situ” reality, victims tend to be cast as unreasonable, deficient and at least partially responsible for their own predicament. Richardson believes that the helping profession should assist those who have been harmed, not further destabilize them. For example, healing and soothing for the family of George Floyd, an American Black man murdered by a police officer in the US, is more possible now that officer Chauvin was found guilty and sentenced for this murder. Typically, acts of systemic violence by police are committed with impunity. Justice opens up possibilities to heal and rethink new structures that make well-being possible for the collective (Barbot 2020).

The process of healing unfolds uniquely from person to person, and is culturally and socially embedded (Richardson 2021). It is necessary to acknowledge both personal and collective healing when considering what it means to “recover” from, or to become strong in the face of, colonial oppression (Million et al. 2013; Reynolds 2019; Richardson 2021). Certainly, global histories of resistance movements empowered and invigorated populations who were aligned with self-governance and justice. Catherine draws from the work of community counsellor and activist Vikki Reynolds (2019, 2020) to advance the position that counselling must join with activism to eradicate the violence and situations that cause suffering for the population (Richardson and Reynolds 2014). It is important for Indigenous people, professionals included, to have committed allies, and accomplices, for the purposes of advancing the voices and centering of Indigenous people in mainstream spaces.

To begin the discussion on healing as it relates to the Métis and other Indigenous peoples across colonized lands, a political history of empire, of colonialism and of the Indian Act is necessary. Without accurate information, citizens cannot make accurate and informed decisions. State discourse often hides or distorts the truth in ways that Malcolm X identified as duping the population. This requires the examination of the intersection of (powerful) language and (mis)representation. Violence, racism and marginalisation have many faces. Catherine argues that these discourses must be acknowledged in relation to the context in which they exist, and the ways in which suffering continues to be perpetuated. As her colleagues Allan Wade and Linda Coates said, “we must fit words to deeds”. We begin by identifying the discourse around tactical language which promotes suffering through the decontextualization of experience.

The fabric of Canadian society is based on the history of the erasure and assimilation of Indigenous peoples. Richardson (2021) argues that the Canadian government has supported land dispossession since the first contact with European settlers (Richardson 2021; Harris 2006). Canada constructed a narrative of nation-building upon the destruction of Indigenous land and the invisibility of Indigenous people, whilst casting Indigenous peoples as obstacles to the creation of the settler-state. Coates and Wade (2007) write:

In colonial discourse, for example, European atrocities against Aboriginal peoples were justified on the basis of the presumed natural deficiencies of the Aboriginals and the God given superiorities of Europeans. The atrocities were concealed to the maximum extent possible in accounts of civilization and progress that valorised the pioneer-missionary and omitted mention of genocide, ethnocide, and administrative abuses by successive governments and church hierarchies. Perhaps the defining characteristic of colonial discourse, and the point at which its influence in the human service professions is most apparent, is the elaborate network of discursive practices used to misrepresent “others” as deficient and therefore in need of assistance from proficient authorities. (p. 513)

In this text, the authors connect “the power of rhetoric” (Coates and Wade 2007, p. 513) to misrepresentation, which helps illustrate the ways in which power relations determine who gets to speak, what we understand as “truthful”, and how knowledge is framed. For Catherine, this historical backdrop provides insight into the way that language frames suffering for Indigenous peoples today. She argues that suffering is amplified when harmful events are removed from their context. Richardson (2021) writes that “Researchers describe me as ‘vulnerable’, not as [‘targeted’, ‘attacked’], ‘vulnerabilized’ or made vulnerable by political and social forces” (p. 8). Language, which is used to identify and characterize, casts Indigenous peoples as “... passive people affected by events” (Coates and Wade 2007), rather than responding agents who possess power. This portrayal is subversive in that it disregards acts of resistance which Indigenous peoples have maintained since colonialism began (ibid.). Todd et al. (2004) note:

In professional, academic, and public discourse language is frequently used in a manner that (a) conceals violence, (b) obscures and mitigates perpetrators responsibility, (c) conceals victims’ resistance, and (d) blames or pathologizes victims. (p. 146)

This is what a response-based practice calls “the negative social response” (Richardson and Wade 2008).

Thus, contextualizing harm for Indigenous peoples involves an understanding of the socio-political environment which perpetuates oppression. Dian Million et al. (2013), in her book *Therapeutic Nations: Healing in an Age of Indigenous Human Rights*, problematizes the way in which the “colonized subject became a victim of historical trauma” (pp. 5–6, emphasis added). Million argues against language that places colonized people as merely subjects, particularly in the name of the *Truth and Reconciliation Commission 2008*, and she asserts that: “... Truth and Reconciliation reaffirms the people’s systemic inequality and endemic social suffering as pathology, a wound that is solely an outcome of past colonial policies” (Million et al. 2013, p. 6). Such formulations ignore the present-day realities of racism and ongoing colonialism, such as the unwillingness of the state to adequately fund health for Indigenous communities (Blackstock and Trocmé 2005). Ongoing “negative social responses” to mistreatment, including inadequate responses from authorities, such as police and social services, tend to amplify the suffering of Indigenous people and heighten their mistrust towards the state. To use the response-based understanding that “... whenever people are mistreated, they resist in some way” (Coates and Wade 2007), the narrative shifts to one in which victims of violence obtain power through the affirmation of their resistance, thus overcoming the notion that they are acquiescent subjects. The value here lies in our consideration of power and position, and the discursive forces of language. By acknowledging acts of resistance, we focus on preserving dignity and seeking justice, which are inherent to healing processes. By utilizing a response-based framework analysis, one can accurately depict violence and mistreatment, which can have a transformational effect on the process of healing.

### 3. Conceptualizing Harm and Suffering: A Response-Based Approach

#### 3.1. *Healing in the Shadow of Colonialism*

In her book *Facing the Mountain; Indigenous Healing in the Shadow of Colonialism* (Richardson 2021), Catherine illustrates her perspective on healing and wellness, and advocates for more holistic interpretations of healing processes. She criticizes the dominant portrayals of wellness that often perpetuate suffering for Indigenous peoples, noting that narratives surrounding wellness frequently fail to notice oppression by disregarding the experience of Indigenous peoples (Richardson 2015). Implementing language which furthers acts of resistance is essential to Catherine's approach to healing/well-being. She asks, "in which pamphlets does it state that having one's land stolen is bad for the health!" (Richardson 2021, personal communication).

Considering representation, Catherine conceptualizes harm as an oppressive force that "acts upon" the individual, without consent, ultimately limiting agency. This narrative of being "acted upon" privileges the perpetrator and focuses on the victim's deficits. Wade (1997) suggests that: "alongside each history of violence and oppression, there runs a parallel history of prudent, creative, and determined resistance" (p. 11). Incumbent to healing is both the shifting the focus of the individual from merely a "victim" to a "responding agent" (Wade 1997), and shifting the language from effects (that is being acted upon) to response, granting the necessary agency to recognize "pre-existing ability" (Todd et al. 2004). Thus, Catherine proposes that "Response-based understandings of human behaviour offer important insights into the social and interactive processes of Métis identity creation in a climate of social oppression and violence" (Richardson 2021, p. 20; 2015).

#### 3.2. *Social Responses in the Process of Identity Creation/Healing*

One reflection of state violence and colonial policy is the ongoing institutionalized racism and marginalisation (Richardson 2002) that position Indigenous people at the periphery of society (Richardson 2006). Namely, Catherine argues that "... due to invisibility, Métis individuals and families do not always receive the care and attention they deserve in the social service sector" (Richardson 2015, p. 140). Narrowly defined spaces that ostracize Métis peoples disregard personal and cultural safety, which are central to the process of healing, as outlined by Catherine. It is critical for Indigenous peoples to be able to ground personal experiences in connection to larger socio-political themes in order to feel acknowledged and safe. As such, decontextualization is harmful because it indicates a fragmented picture of the holistic truth/reality. Without self-awareness and cultural sensitivity, social work professionals cannot provide proper support to Métis individuals (Richardson 2015, p. 139). Therefore, embedding Métis worldviews in the practice of psychology, counselling and social work is crucial. As Catherine highlights:

... because the key element of a Métis worldview is understanding that all things are connected and that harm is done when action, words or truths are taken out of context, adequate care for Métis people should include centering practices of love, respect, interaction, relationship, community and spirituality. (Richardson 2015, p. 140)

This involves positive social responses which work to reframe and culturally reposition individuals by asking questions and providing support in ways which preserve dignity (Richardson 2015). By shifting the healing framework to center dignity, the process prioritizes integrity and agency, which ultimately help to promote Indigenous well-being (Richardson 2015). Doing so, Catherine suggests, contributes to an:

... anti-oppressive agenda [...] which is connected to the issues of Indigenous sovereignty, decolonization, and social justice. This social and political agenda for social services should be aimed at reducing the numbers of Métis/Indigenous individuals that are being removed from their families [and offer] justice and support, [while working to strengthen] family units. (Richardson 2015, p. 141)

#### 4. Becoming ‘Unstuck’—Transcending Western Frameworks of Healing through Indigenous and Decolonial Approaches

What it means to ‘heal’ is not all encompassing. Based on epistemology, experience, culture, context and relationality, healing is understood and practiced differently (Richardson 2020, p. 1). Catherine proposes that:

The term ‘healing’ is vague. [ . . . ] I believe this term can transcend medical and psychiatric model discourses in order to evoke and embrace a holistic and Indigenous sense of what it means to become restored after living through challenging and often negative situations that have been wounding. On a spiritual level, I see healing as alchemical in that it transforms the person who once was into a stronger and deeper version of themselves, after having processed and integrated difficult life experiences. (Richardson 2021, p. 7)

In Catherine’s view, our psyches/identities become fragmented when we experience harm. Whether physical, emotional, or psychological, many detach from pain as a form of self-protection. For some, this is called “dissociation” (Richardson 2020). Through conscious or unconscious dissociation, one enters a state of disconnection from oneself and from others. Although this state exists in our bodies, it is hard to conceptualize and face pain when we attempt to be distinct from it.

Catherine suggests that the process of healing involves taking a negative experience that is lodged in our psyche, that causes us to feel pain and suffering, and changing that experience into something else. Thus, she characterizes this process as alchemical, in that it is inherently transformative. Catherine argues that when we experience pain, we embody a state of feeling “stuck”, and it is in this state that we are fragmented (Richardson 2020, p. 1). Hence, it is through a process of weaving the various fragments of ourselves back together that we become more whole. At the heart of this integration process is the reconceptualization of our pain and distress, which cause us to feel static, into “. . . fluid energy that moves through us” (Richardson 2020, p. 1). There are many ways in which one can transform this energy, namely through the expression of the emotions which carry these states through our bodies.

This process of energy transformation closely relates to the essence of shamanic healing. Catherine describes shamanic teaching in the following manner: our bodies are made up of numerous spirits that make us whole (Richardson 2020). She parallels the experience of “dissociation” to the shamanic belief that “. . . there are various times in our life when part of our spirit leaves our body” (Richardson 2020, p. 1). Accordingly, the shamanic ritual involves a shaman visiting the spirit world and gathering the parts of one’s spirit that have left the human body and guiding the process of reintegration. This process seeks to restore wholeness and balance by recalling parts of our spirit that have departed or have been severed.

In Catherine’s view, a similar process is mirrored through psychotherapy and counselling. Through conversation, we are able to recognize and affirm our feelings, and place them into a broader context. Through this discovery, we go into places of dissociation, things we have cut off or left behind, and bring them to light, integrating them back into who we are (in the present) instead of distancing ourselves from them. We become more whole through this alchemical process of (re)integration.

#### 5. Healing with Others and Healing with Ourselves

In this section, we explain two tenets of Catherine’s application of healing. The former requires community, reciprocity and relationality, where we highlight the importance of balance with others in the process of becoming whole. The latter speaks to the importance of healing with ourselves. Catherine refers to this as “. . . being our own medicine person” (Richardson 2021, personal communication).

### 5.1. Healing Is a Relational Process

Catherine describes healing as relational. It is not something that is experienced or discovered in solitude, but rather as a result of one's connections (Richardson 2021). As healing denotes a process of becoming whole or seeking to restore balance, Catherine encourages the importance of acknowledging this as being both relational and in flux, primarily moving in a circular direction. Because we are relational beings living amongst other living beings in the natural world, there is continuous interaction and growth with/alongside others (Wilson 2008). Thus, Catherine argues that being in motion means we will repeatedly confront new pains that will need tending to (Richardson 2021); she writes: "... Part of the [healing] process is meaning-making of these experiences and then letting them become a part of us, in the light, so they do not remain part of our shadow and unseen sorrow" (Richardson 2021, p. 12). The circularity here lies in the process of becoming whole: through nurturing in relation, then progression, the circle continues.

Catherine utilizes the framework of the medicine wheel in the illustration of the notion of balance and interconnection involved in healing processes. The structure of the medicine wheel has four distinct parts that exist shoulder to shoulder to make up a circle. In the Plains Cree worldview, Catherine describes that human beings inhabit four parts of the self: there is the physical self, emotional self, spiritual self and intellectual self (Richardson 2021). These four aspects are all interwoven to make up the whole, and although these parts of ourselves are distinct, each quadrant feeds into the next. Catherine characterizes the process of balancing these parts of ourselves as a lifelong journey. She writes that "... the restorative power of 'medicine' offered by the two-legged, the four-legged, the winged ones, the elements, the trees and waters ..." (Richardson 2021, p. 11) are part of well-being. That is, living and learning in relationship to the land, animals, community and oneself (Richardson 2021, p. 11).

Richardson (2021) draws upon Plains Cree scholar Willie Ermine (1995) in expressing another valuable aspect of healing. Ermine presents the concept of *mamatowisowin* in *néhiyawéwin* (the Cree language) as "The capacity to connect to the life force that makes anything and everything possible" (p. 110); furthermore, he depicts this concept as: "... [the] capacity to tap the creative force of the inner space by the use of all the faculties that constitute our being—it is to exercise inwardness" (Ermine 1995, p. 104). *Mamatowisowin* is then both the understanding of the connection to that which is outside of us—spirit and ancestry—that which lays in our relationality, and then the recognition of ourselves. Catherine demonstrates this Cree concept, stating that: "... we are microcosms of creator and creation, the life force [*mamatowisowin*], fuels our movement and creative energy" (Richardson 2021, p. 13). She believes that life force possesses an energy that can be released and harnessed for other life projects, such as restoring balance or contributing to service or helpful engagement with the world.

### 5.2. Being One's Own Medicine

Healing the body, mind, spirit and one's emotional life is possible. The fact that many Indigenous people have done it, at least to a certain point, is reassuring. In this article, Catherine Richardson's approach is laid out, reminding the reader that healing is relational, justice-related and social. We do not live alone in the world and social interaction is required for healing, with other humans as well as with the natural world. Catherine considers the importance of utilizing our bodies, and the nurturing aspects of our environment, in ways to sooth pain. Although Catherine describes many of the forces acting against the individual, including patriarchal and colonial forces, humans do possess agency over how they will act within these confines. That is where the human spirit can be found, that is where a person's resistance (against oppressive forces) helps keep one's dignity alive. We exist in the vessel of our bodies, and thus we have some agency over how we use and direct our energy. As highlighted above, when one feels distress, discomfort or pain, we can be our own "medicine person" (Richardson 2020). Being emotive is a way of expressing and re-balancing ourselves.

The act of crying/shedding tears as a form of release which moves the water through the waterways of the body (Richardson 2020). This shifts energy and tends to make us feel better, particularly when we are not isolated and have a compassionate witness/listener. This process is alchemical, and can result in a physical, emotional and mental transformation. Laughing, sweating, dancing and using rhythm as mirroring similar processes of energy transmutation and transformation. These forms of expression come naturally, as part of being human.

It is important to acknowledge that little babies come into the world crying, they already have this built-in repair kit. So, they scream and when they scream, they shake. After a good yell or cry, they are back in balance and they fall asleep and are ready to go. (Richardson 2020, p. 1)

Expressing emotions is a form of relief. It is a process of working out and working through our pain. In Catherine's view, restoring balance lies at the heart of being or becoming whole. It is a process that we can look to others to help with, and it is also one in which we can look inside ourselves. She notes that:

... there is a collective healing effort to restore culture and to mentor other people. We are all somewhere in that chain or that line up. We are all together holding hands and at a different place. We have the responsibility to help people who have not come as far and to turn to those who know more than us for mentorship and help. (Richardson 2020, p. 5)

## 6. Conclusions

This article identifies Catherine/Kinewesquao's approach to healing and becoming whole after colonial disruption. Catherine articulates the importance of social justice in the process of healing, which she refers to as healing medicine. Based on her Métis worldviews and her work as a counsellor focusing on social justice therapy, she constructs the case that positive social responses promote dignity and healing. It is with a context of the various guises of colonialism that one can better understand suffering for Indigenous peoples. The colonial agenda of land dispossession and land-based threats is detrimental to health and healing. State violence and being attacked, either by brute force or by the hands of social workers, child-protection services, or the police can have detrimental consequences which create fear and suffering for years to come. Catherine reasons that we can work with the natural world, the elements and energetic processes—including ritual and ceremony—to move energy, release pain and experience more psychological freedom. Well-being is connected to our relationships, i.e., those we have with others, land, water, animals, food and ourselves.

**Author Contributions:** C.K.R. contributed to the conceptualization of the article, the methodology, the writing and original draft preparation. This article is based on her practice over the past twenty-five years as a counsellor/therapist in the Indigenous community in Canada. K.A.-B. contributed to the methodology, the formal analysis of transcripts, writing and original draft preparation. She has contributed to the editing process of this article. V.P. interviewed C.K.R. for the Indigenous Healing Knowledges research project. Z.I.-A. transcribed this interview for the Indigenous Healing Knowledges research project. She also held a major role in securing the funding and preparing the ethics statement at Concordia University. All authors have read and agreed to the published version of the manuscript.

**Funding:** This research received external funding from the Canadian Social Sciences and Humanities Research Council, a Connections grant numbered 30013765.

**Institutional Review Board Statement:** Not applicable.

**Informed Consent Statement:** Informed consent was obtained from all subjects involved in the study.

**Data Availability Statement:** Not applicable.

**Acknowledgments:** The authors acknowledge that everyone makes understandable decisions, given the context. People resist mistreatment and aim to preserve dignity, even sometimes before safety. We would like to acknowledge all of the victims of colonial and other forms of violence, and know that there is healing through justice.

**Conflicts of Interest:** The authors declare no conflict of interest. The funders had no role in the design of the study; in the collection, analyses, or interpretation of data; in the writing of the manuscript, or in the decision to publish the results.

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