Aboriginal Alcohol Addiction in Ontario Canada: A Look at the History and Current Healing Methods That Are Working In Breaking the Cycle of Abuse

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Introduction

According to Census Canada, in 2006 there were over one million individuals reporting Aboriginal identity in Canada. Of that estimate, 698,025 reported being of First Nations ancestry, 389,785 Métis, and 50,485 Inuit. In Ontario there are over 242,490 people who identify as Aboriginal (Statistics Canada, 2006). This paper will attempt to address and explain some of the traditional Aboriginal healing methods used in the treatment of alcohol abuse for Aboriginal peoples in Ontario. It is important to recognize that the information provided in this paper is only a small portion of the many and extensive Aboriginal teachings that exist. Teachings vary from First Nations to First Nations, in the various Métis and Inuit communities and from one geographic region to another. As well, Aboriginal people do not have a uniform approach to addiction program delivery; nor do they share one way of thinking. As Duran (2006) states:

“Most of the problems that have led to high rates of alcohol and substance abuse among Aboriginal people are generational; problems set in motion several generations ago and unknowingly inherited by descendants. Consequently, emotional and spiritual deprivation, violence, poverty, alcohol and drug abuse and despair became predictable outcomes to systematic, multi-generational oppression”.

Currently, more than half the Aboriginal population is under twenty-five and the overall rate of growth of Aboriginal peoples is nearly twice that of the rest of the Canadian population (Statistics Canada, 2006). These population statistics are important because by recognizing the dramatic increase in the young Aboriginal population, measures can be taken to prevent high numbers of alcohol abusers in the future. By encouraging and promoting healing methods that work for Aboriginal individuals and communities, the next generations may not have to suffer as the previous ones have.

It has only been since the late 60’s and early 70s that Aboriginal people have been able to once again (after almost a hundred years) speak freely and openly practise traditional healing methods in their communities. This situation was due to government impositions outlawing Aboriginal religious and cultural ceremonies in Canada during the 1800s (McCormick and Wong, 2005). During the 1960s, the American Indian Movement (AIM), helped to establish a new sense of “Indian Pride” in North America. Also, at this time many Aboriginal people petitioned and fought to make it legal to openly
practise religious ceremonies again. These measures created an influx of Aboriginal people who are taking part in traditional healing ceremonies and regaining pride in their heritage (Arbogast, 1995). Since the 1960s there has been a great insurgence of Aboriginal alcohol and substance abuse programs. By incorporating traditional healing methods, these programs have created communities that are 100% sober. The successfulness of these programs and their relevance in Aboriginal communities cannot be denied (Dickson-Gilmore, La Prairie, 2005).

Cultural and Historical Background

Using a Liberation Theory approach I will illustrate in the next section of this paper the history of alcoholism in Aboriginal communities in Ontario. It is important to know how and where these problems started in our communities so that we can understand and focus our thoughts and behaviours around alcoholism to assist in healing individuals and communities.

Before European people arrived in what is now known as Canada, Aboriginal peoples did not have a brewing tradition and had no experience with alcohol. As the Fur Trade developed, alcohol came to be used as a gift item as well as an item of trade at trading posts (Waldram, Herring, Young, 2000). Traders would use alcohol, especially rum and brandy to entice trappers away from rival company posts. As Hamer and Steinbring (1980) have noted, ‘Alcohol was used as an inducement to participate, as a medium of exchange, and as a standard of competitive access’.

Drinking for Aboriginal people often took the form of binging, occurring over a day or more until all the alcohol was gone. Some Aboriginal people engaged in binge drinking at the posts followed by long, even year-long periods of total abstinence. Aboriginal women also engaged in alcohol consumption and intoxication, which sometimes lead to acts of jealous violence and neglect of children. Prostitution of Aboriginal women was also a product of this alcohol problem (Waldram, et al 2000).

It is important to stress that many Aboriginal people abstained from alcohol consumption altogether and recognized the social problems caused by it. Some trading captains requested that the traders not make alcohol available to band members. Some captains went as far as to restrain individuals who had consumed alcohol or hide their weapons (Dailey, 1968).

In 1821, when the Hudson’s Bay Company and the North West Company amalgamated there was no longer a need to use alcohol to propagate trade with Aboriginal people (Fleming, 1940). Consequently, over the last part of the 19th century, alcohol supplies were harder to come by for Aboriginal people. This situation was due in part also to an Indian Act clause, which prohibited registered Indians from having alcohol in their possession. This law did not change until 1963. This situation caused many communities to make home brew, often referred to as ‘white lightening’ or ‘moose milk’. Supplies to make this home brew were readily available from local traders (Price, 1975).

According to Price, prohibition created a new class of legal offences, stimulated conflict with the police, led to financial exploitation by middlemen and ‘bootleggers,’ reinforced the pattern of binge drinking, and prevented the development of internal social controls.

By the mid-1700’s, the Fur Trade had declined to a point where Aboriginal people were no longer pivotal to the economic and physical (food and medicine) survival of European settlers. From the time of European arrival diseases such as smallpox and whooping cough had slowly spread among First
Nations communities. At different periods of time epidemics caused massive losses, in some cases up to three quarters of community populations in a short period of time (Wright, 1992).

While colonial governments were seizing land and resources, First Nations were undergoing profound internal turmoil from forced removals and relocations to reserves, the Indian Act and Residential Schools (McCormick and Wong, 2005). The effect was to ultimately create social disruption, which has persisted to this day in many communities. Of course there is much more to this story but because of the length of this paper I will not go into detail about the political atrocities regarding land, treaties, etc. that occurred between First Nations and the colonial government. In early 1960s, on many reserves, alcohol was legalized again by the province of Ontario, after being outlawed for many years after the Fur Trade. Alcohol played havoc in many Aboriginal communities.

For many who had experienced the atrocities of residential schools, alcohol was a temporary escape from their painful existence. Due to the brainwashing in the Residential schools, which taught that Aboriginal culture was immoral, Elders were no longer sought for advice and healing as they once had been by the previous generations. Many Elders unable to cope with the new loneliness and uselessness of their existence, also turned to alcohol (Wright, 1992).

During the 1960s, in order to survive, many Aboriginal women in Ontario were forced to seek full-time employment in low-paying positions, often as domestic servants in White homes. They often came home exhausted only to have to complete their own domestic duties, which gave them little time or energy to care for and show affection to their children. Due to assimilation policies and alleged abuse, during the 1960s many children were stolen from their family homes and forced into foster homes. This era became known as the “60’s Scoop” (Aboriginal and Indigenous Social Work, 2003).

The phenomenon, called the "60's Scoop", is so named because the highest numbers of adoptions took place in the decade of the 1960s and because, in many instances, children were literally scooped from their homes and communities without the knowledge or consent of families and bands. Many First Nations charged that in many cases where consent was not given, that government authorities and social workers acted under the racist assumption that Aboriginal people were culturally inferior and unable to adequately provide for the needs of the children. This situation was due to the wide held belief among those of European descent that their beliefs and values were right and therefore superior to those of Aboriginal peoples. Many First Nations people believe that the forced removal of the children was a deliberate act of genocide (Kimelman, Judge,1985).

Statistics from the Department of Indian Affairs estimate that 11,132 status Indian children were adopted between the years of 1960 and 1990. However, it is believed by many Aboriginal peoples, that the numbers of children stolen from their families and communities are much higher (RCAP, 1996). Of these children who were adopted, 70% were placed in non-native homes. A substantial portion of these adoptees face cultural and identity confusion issues as the result of having been socialized and acculturated into a Euro-Canadian middle-class society (Hall, 1995).

As a result of confusion and loss of identity, many Aboriginal people who were part of the 60's Scoop have turned to alcohol to help ease the pain of these issues. Understandably, many of the parents whose children were stolen from their lives also turned to alcohol abuse to deal with the anguish, pain and devastation of this horrible situation (Hall, 1995).
Institutionalized Racism

In this section I will discuss the topic of Institutionalized Racism in the context of the educational system in Canada. Historically, the education system has been used as a tool of assimilation by the government in regards to Aboriginal peoples in Canada. High drop-out rates in High School and a lack of Post-secondary graduates are a common occurrence in many Aboriginal communities. The lack of educational achievement of Aboriginal children in the Canadian school system is well documented (Stonechild, 2006).

Curriculum has been used in mainstream schools to describe what the students learn from the educational program, which is quickly forgotten within a short time after it is learned. However, this is only a small part of what children learn. The “hidden curriculum”, which consists of what children learn about their own identity and role in society; the identity and roles of others in the program; how others treat each other and their environment; and the attitudes, values and feelings that are encountered, these are not forgotten (Four Worlds Development Project, 1984).

The hidden curriculum is learned in the classroom, on the playground, and in the hallways. It is learned in how the teachers manage the student’s behaviour and from by the way the desks are arranged. It is learned from the attitudes of the parents and the other community members. These are the things that influence a person’s identity, sense of worth and view of the world. When a child is treated negatively in the public school system this treatment can lead to students dropping out or turning to alcohol or other substances to cope with this negative treatment and negative environment.

In the Canadian Penitentiary System, Aboriginal people make up a disproportionate percentage of people in Canadian prisons. A large percentage of Aboriginal people in prisons are there because of alcohol. Jim Mason, is an Aboriginal Elder in Toronto, Ontario, who has worked with many inmates over the years and has heard many tragic stories. He recounts the following:

They all say it is because of the booze why they’re here. Some recall waking up one morning and not knowing where they are, all they see is bars and the guard going by. They think they’re in there for a drunk and then they learn they wasted someone the night before. All the toughness goes out of them and they just sit on the bed and bawl.

Jim Mason attributes the reason that many Aboriginal people abuse alcohol to the destruction of families and the removal of children from their own cultural environment. Many people who abuse alcohol remember being frightened, abused and made to feel worthless because they were Aboriginal as children. These experiences happened in both residential schools and foster care (Gajic, 1997).

Bob Crawford, a former Police Officer and Director of Spirit of the People an organization he formed in Toronto saw the connection to alcohol and loss of culture. He formed Spirit of the People to help Aboriginal ex-offenders renew their lives when they leave prison. The organization uses traditional Aboriginal healing methods to help Aboriginal people heal from the effects of alcohol and drugs. He attributes the success of Spirit of the People to emphasis on Native family values, culture, traditions and language in helping Aboriginal ex-offenders overcome addictions and establish new lives after prison (Gajic, 1997).
There is considerable evidence that traditional healing practices have profound effects on the healing of Aboriginal peoples. For example, in a study of traditional healing with Aboriginal sex offenders in the prison system, therapists identified traditional practices as beneficial and noted changes in those who participated in them. "Among the key areas of change that therapists saw were a general increase in openness to treatment, a greater ability to accept feedback, an enhanced level of self-disclosure (general and offence-specific), a decrease in hostility and resentment, the development of trust and empathy and a greater sense of grounding or stability" (Solicitor General Canada, 1998).

I have demonstrated in this section that the educational system, effects Aboriginal people in their youth and has had a long history of oppression and abuse in Aboriginal communities. The prison system, has also had a long history of oppression towards Aboriginal people in Canada.

**Traditional Aboriginal Healing Methods**

In treatment programs where they have control, Aboriginal people in Canada are increasingly introducing a variety of spiritual and healing practices, asserting that embracing their culture assists in achieving sobriety. These programs assert Aboriginal identity, and stress traditional cultural beliefs and practices as a form of treatment in themselves (Brady, 1995).

The Aboriginal way of treating alcohol and substance abuse encompasses more than the biological and experiential explanation provided by mainstream medicine. Traditional healers perceive alcohol as a spirit that has been destructive to Aboriginal ways of life. It is believed that the alcohol “spirits” continually wage war within the spiritual arena and this is where the healing needs to start (Duran, 2006). Most Elders and Healers would agree that reconnecting to culture, community and spirituality is the way for Aboriginal people to heal. Because alcohol and drug abuse conflicts with the traditional cultural beliefs about courage, humility, generosity, and family honour, cultural involvement and practices can serve as both a preventative and curing agent in alcohol and drug abuse treatment (Brady, 1995).

**The Sweat Lodge**

Most Aboriginal people would agree that the purpose of the Sweat Lodge ceremony is to purify the body, mind and spirit so that a new sense of self may be present. The Sweat Lodge ceremony is the most widely used ceremony of Aboriginal alcohol and drug treatment programs that focus on traditional Aboriginal healing methods.

While the Sweat Lodge itself is simple to describe, it is beyond this writer’s ability to adequately convey the ultimate culmination of spiritual, mystical and psychic expression of the Sweat Lodge ceremony. Sweat Lodge ceremonies can be a beneficial aid to alcohol and substance abuse treatments for Aboriginal people for four reasons. First the Sweat Lodge ceremony gives individuals a sense of who they are even if they no longer speak an Aboriginal language or are the products of years of residential schooling and Christian proselytizing, since Sweat Lodges are a symbol and cultural marker of being “Aboriginal”. Secondly, the physical sensation of undergoing a sweat is of detoxification and cleansing, which gives the participant a psychological and spiritual association with purification,
renewal and a fresh start. Thirdly, participating in a Sweat Lodge ceremony is a tangible and decisive act, which requires mental and physical strength. When one emerges from the ceremony they may feel a sense of accomplishment, in this way the ceremony provides an atmosphere in which it may be easier for an addicted person to moderate or abstain from alcohol or drugs. Lastly, many people who conduct the Sweat Lodge ceremonies are also ex-drinkers and drug users and they provide alternate role models to the stereotype of the “drunken Indian” (Hall, 1986).

**Combining Aboriginal Healing Methods with Mainstream Methods**

Western medicine and Traditional Healing methods can work together in Aboriginal communities to combat addictions (Duran, 2006). By reclaiming their identity through Traditional Healing methods, many Aboriginal people have overcome alcoholism and have found serenity. By learning about their culture and being proud of whom they are, recovering addicts and alcoholics are much more able to resist the temptation of giving into their old habits. It is important for Aboriginal people to learn and understand that the primary reason Aboriginal people are so afflicted with addictions, poverty, abuse, etc. is that the traditional way of life was taken from them. This experience instills a sense of hopelessness, and loss which leads to grieving (Arbogast, 1995).

“So many of us were the victims of those who wanted to destroy that identity by starving it of nourishment. That seed is the truth of our existence. It validates my Indian-ness. Indian forever. They couldn’t destroy my Indian-ness no matter what they did. It’s like that little seed is my spirit. You can trounce on it, starve it, beat it, humiliate it, degrade it, abuse it but you will never kill it or extinguish it. Even when I tried to stamp it out myself, it manifested itself as anxiety, panic attacks, depression, and alcoholism and drug addiction” (Arbogast, 1995).

If people in mainstream society really want to help Aboriginal people overcome their addictions, they have to learn about Aboriginal culture, and do things on Aboriginal peoples’ terms. One cannot learn about Aboriginal people or any group of people from a book, culture must be experienced and appreciated if one really wants to understand it.

Western medicine addresses the physiology of disease whereas Aboriginal Traditional Healing methods address the psyche, relating to the disease and disease touching the spirit and releasing the psychosocial hurts that chemical dependent environments produce (Arbogast, 1995).

Aboriginal models of AA, such as that offered at Toronto Council Fire Native Cultural Centre, usually incorporate elements of the medicine wheel, sweat lodge ceremony, and sacred pipe as healing methods. This form of AA healing takes on the values of the harmony ethos as opposed to the mainstream AA values, rooted in the protestant ethic.

<table>
<thead>
<tr>
<th>Aboriginal AA Model</th>
<th>Traditional Western AA Model</th>
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<tr>
<td>Uncritical attitude</td>
<td>Critical attitude</td>
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<td>Cooperation</td>
<td>Competition</td>
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<td>Sharing</td>
<td>Ownership</td>
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<td>Humble presentation</td>
<td>Outgoing/Self-righteous</td>
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<td>Happiness</td>
<td>Success</td>
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<td>Honour Elders</td>
<td>Honour self</td>
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Silence  Verbalism
Tribal values  Individualism
Simplicity  Complexity
Tradition  Innovation
Spiritual values  Material values
Learning from Elders  Formal education
Few rules  Many rules
Mysticism  Empiricism
Smallness  Bigness
Natural Medicine  Synthetic drugs
Unity with nature  Separateness with nature
Accept others as they are  Change others

For Traditional Aboriginal Healing methods and Western approaches to work together to help people overcome alcohol and substance abuse addictions, both systems must be respected as separate entities each having viable approaches. Where the two overlap is where there is room for co-operation and co-existence.

**Conclusion**

For hundreds of years Canadian Aboriginal communities have experienced the abuse of Western imposition. Today, this abuse is still felt in many Aboriginal communities. The result of this abuse is a wide range of personal and social dysfunctions for many Aboriginal individuals and communities. Since the 1960s, Aboriginal communities have been struggling with the challenge of healing. As a result, Aboriginal healing programs sprang up across the country addressing such issues as addictions, sexual abuse, parenting, family violence, depression, suicide, anger and rage and eventually the residential school syndrome (Aboriginal Healing Foundation, 2002).

Strategies to promote "healing," such as residential treatment programs (based on a variety of treatment models), one-on-one therapeutic counselling programs, personal growth workshops, retreats and traditional ceremonies such as Sweat Lodges, healing ceremonies, fasting, prayers and the application of traditional teachings are used in treatment programs.

Although there are various programs and styles among various First Nations, Métis and Inuit communities, there seems to be an agreement that healing comes from within and the principle that the healing of individuals and the healing of communities must go hand-in-hand. Also, that healing means moving beyond hurt, pain, disease and dysfunction to establishing new patterns of living that produces sustainable well-being.

Two strong themes have emerged from my study of Aboriginal Healing Methods which involves both individuals and communities: 1) is healing as recovery, which involves moving away from the pain and suffering experienced by an individual or community in crisis and 2) healing as wellness, moving towards and maintaining healthy patterns of life.
The way that Traditional Healing methods work for Aboriginal people who are overcoming addictions is by guiding the patient to an honest and truthful self-discovery. This self-discovery is required for the initiation and continuation of self-healing, for it is only through self-healing – in contrast to "curing" – that patients can experience both permanent recovery and spiritual growth. The goals of Traditional Healing methods are the elimination of delusion and self-pity and the helping of patients to prioritize and focus their lives so that they can grow. It is the truth that heals. True healing goes deeper than symptoms. It involves getting clear about your real identity and purpose in life (Upledger, 1990).

The healing journey for Aboriginal people and communities in Ontario may take generations, which is understandable when you consider it took generations to internalize the pain and trauma. There is hope and healing is possible. By implementing these programs extensively now this will enable people to heal from their pain and suffering and learn skills for healthy living. Focus must be put on addressing the aftermath of residential schools, the 60s scoop, various forms of abuse and years of colonialism, which require intensive healing work. Hopefully, in time, the healing work can shift from recovery to rebuilding and sustaining new patterns of healthy lifestyles. Isn’t this ultimately what we all want?

References


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