

WORKING AS A SERVICE PROVIDER IN MOOSONEE AND MOOSE FACTORY

HERE TO STAY, GONE TOMORROW:
WORKING AS A SERVICE PROVIDER IN MOOSONEE AND MOOSE FACTORY

By

JENNIFER MARIE DAWSON, B.A.

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AUTHOR: Jennifer Marie Dawson, B.A. (McMaster University)

SUPERVISOR: Professor Wayne Warry

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ABSTRACT

The experience of a service provider living and working in Moosonee and Moose Factory is largely determined by whether the individual is Cree and from these communities, or is non-Native and from "the south". This study examines these experiences in terms of stress and coping, loosely adopting and occasionally critiquing Lazarus and Folkman's (1984) definitions of these concepts. The cultural and historical factors which influence stress and coping are emphasized without denying the importance of contemporary circumstances in these politically and socially turbulent communities.

Non-Native or "southern" service providers are outsiders. They are kept at a distance both by their own interpretation of and reaction to "difference" and by others who are suspicious of their motivations and commitment. Some cope with their outsider status by reinforcing it; they withdraw from active personal and professional participation in community. But instead of refusing to change and clinging desperately to what is familiar, those southerners who have remained the longest in these northern locales are willing to acknowledge the relevance and rewards of different ways of living and working.

Native or "local" service providers are insiders, connected to community through blood ties, long term residence and identity as Cree and are therefore vulnerable to demands, criticism and the same struggles with identity experienced by all Aboriginal people. Coping takes the form of investing in community, co-workers, family, self and Creator in order to regain a positive identity and strengthen supportive relationships. A tendency to escape stress through leaves of absence and changing jobs becomes a short-term coping alternative.

Based on these findings I offer recommendations aimed at enhancing the coping of local and southern service providers, in order to improve quality of life for helpers and quality of service for residents.

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DISCOVERY

I seek the knowledge
Of the ancient ones.
To hear the tales
Of how we came to be
And why we do what we do
And to know right from wrong.
To understand my relationship
With Mother Earth and Father Sun
And All.

I seek the knowledge
Of the modern scholars.
To gain the knowledge
That will advance us
And allow us
To guide our destiny
In the way we know is right,
With harmony.

I seek the knowledge
That binds our past
To our future.
And when the knowledge
Is found
I will have discovered
The greatest discovery
I will have discovered
Myself.

Michael D. Avritt
San Felipe Pueblo

from: *Two Cultures Meet: Pathways to American Indian
Medicine* edited by Larry P. Aitken and Edwin W. Haller

SO, WHEN ARE YOU GETTING OUT?

So, when are you getting out?

It must be cold and without...

Family, theatres, restaurants, stores.

You must be awfully bored!

I patiently explain...

Hoping this doesn't sound insane—

Jockville, Edgars, S&M,
Goose Creek Subdivision, Jim McGlynn,
Cranberries, Geese
Tundra, one sided trees,
Dashing into Hudson's Bay—
Yes—past your knees!

Housing, the roads,
Flurry white beasts,
Blown over by the wind,
A and B Block feasts.
White outs, camp outs
and the Northern Lights.
Dances, theme parties,
frozen water pipes.

Caribou, rocks, beluga whales,
Waiting for the plane and train,
Picking up the mail.
Curling, swimming,
Living by the sea,
Bingo and hockey games with
a very short referee.

Open doors, two stores and forty-five below,
Sun dogs, permafrost and the mosquitoes.
Frank, Emma, Yankee Bill,
Merv and Sue.
Pat and Bob, Plywood Pete,
Liz—yes—Taylor, too!

Windchills, big white boots,
coloured northern coats,
Calm Air, keys in cars,
Community Channels personal notes.
Geronimo, Shady, Brian,
and Winnie the Pooh,
Kenny, Charlie, Murtle, Herb—
just to name a few.

**So, my southern friend—
When are you getting out?**

Karen Ingebrigtsen

from: *Northern Perspectives: Practice and Education in
Social Work* edited by Margaret Tobin and Christopher
Walmsley

RECALLING RESEARCH

Early morning.
Most days I walk to work,
Shoulders bent under weight of laptop,
Followed by dogs, hounded by bugs,
Honked at by construction workers:
"Want a ride, honey?"
They yell. Sometimes I accept,
Sometimes they leave me
Lost and choking in a cloud of dust.

I never seem to get the outer-wear right.
I'm the girl who scuffs to work in raincoat and rubber boots
Predicting showers and getting a sunburn.
I'm the girl who wears big earrings
And lots of black.
I walk fast.
I get teased.
Sometimes I tease back.

The water taxi.
Big earrings are bad news in a big wind—
I learn to pocket them and preserve my lobes,
The old driver and I exchange a smile.
Happily, the tide is out
Longer to enjoy wind in hair, water splash, reed heads dancing.
I say "wachay" when I get on and "meegwetch" when I get my change.
He teaches me to say "it's a beautiful day"
But now I forget how.
I remember how to say "damn", though—
It's my friend's favourite phrase in Cree.

The interview.
Adrenalin flood, flushed cheeks, kind of shy—
I feel so much younger than I am
As I fumble with tape recorder and earnest introductions
And finally break the tension of new face and clammy handshake
With a joke.
Ninety minutes of closed door and opened mind—
Mine and theirs.

After work.
Babysitting means playing endless games of Crazy Eights,
Walks along the river bank, sneaking onto barges.
Sometimes I make supper, sometimes almost drooling
Like the kids I'm summoned.
After supper, dishes and a smoke,
My friend vents about her day,
Tells me why she never empties ashtrays—
Rebellion against residential school rigidity.

Before bed.
Brush teeth, p.j.s, back at the computer.
Little B.A. asks me why I'm always working
And if she can write something after.
Reflections on the day, covert confidences to be filed away,
Feeling guilty as I record things others have said.
B.A. writes me a letter
And I promise not to read it until work tomorrow.
We sing the Cree alphabet and I tuck her into bed.

Hamilton.
Home doesn't feel so homey,
Strange faces, anonymity,
I feel drawn to anyone who looks remotely Cree.
I miss B.A.
I even miss Crazy Eights.
Dreary drone-work, I start to transcribe
And the sounds of kids and trucks and dogs barking
Which I never noticed during interviews
Take me back.

J. Dawson

CHAPTER ONE: BEGINNINGS AND BASICS

Introduction

Sitting at the back of the Brighter Futures Social Development conference in Moosonee, I shift uncomfortably on the hard wooden chair. I feel like a conspicuous outsider, glaringly uninvited. I have tagged along with Donna, my friend and primary source of information on living and working in Moosonee and Moose Factory, but she is talking with co-workers elsewhere, and I feel like maybe I shouldn't have come. It's not that I am the only one here taking notes. Others around me are furiously writing, chewing on pencil ends and frowning with concentration. We have all come to learn—service providers, Elders, youth and political leaders. And I have a semi-legitimate reason for attending, being a volunteer employee of the mental health program in Moosonee. But I am new in the community, and in small towns a new face is spotted instantly and scrutinized carefully.

The topics being discussed—parenting needs, healthy babies and solvent abuse—reflect the most pressing concerns of community members all along the western coast of James Bay. Community healing. Healing the family. Healing the healers. These are oft-repeated phrases, key words in community presentations and strategic planning sessions, and like Pavlov's pup I am hungry when I hear them.

I had not expected the lively group discussions, the dog-eared and marker-scrawled sheets of flip chart paper taped around the room, to so closely tie in with my research topic. I was interested in stress and coping among service providers working in Moosonee and Moose Factory—a fact which Donna knew well when she opened her home to me. But here were sixty or seventy community representatives, not only from Moosonee and Moose Factory but from other reserves up the coast and from further south near Cochrane, stating that a priority for them was healing their stressed-out, burned-out and tired-out front-line

workers. As one soft-spoken man succinctly put it: "how can we expect our workers to help with community healing before they've been healed themselves?"

Three days at this conference and I was convinced my thesis topic was relevant, even beyond the communities with which I was working. Cree care-givers were struggling with the difficulties of working with their peers and relatives, surrounded constantly by abuse, alcohol, and animosity, often reminded of similar experiences they had survived. They clamoured for retreats, for access to treatment, for healing circles, for organizational support.

But only half my sample would be local service providers. The other half I planned to include the physicians, nurses, police officers and other professionals who had come from the south to work in these largely Native communities. Did they consider themselves stressed? Certainly their responses to me when I asked them, or when they approached me after having spied one of my posters or notices on the Community Access Channel, indicated that they were. I was emphatically told, "you could interview me". Or, with a resigned laugh, "have you got all day to talk about it?". Or better yet, an enthusiastic "I could be your star interview!"

So the interviews began. Repeatedly I was told that in today's work places, one need not feel ashamed to speak of stress or feel guilty when requesting a leave of absence. "Stress is understood, now" I was told. "People who need it can get help". Whose stress, I wondered, is understood? The Native person's? The northerner's? And where does the help come from?

The results of this research indicate that educators, writers, policy makers and potential employees of northern service organizations must turn their south-centric gaze towards the 60th parallel. The experiences of service providers in politically and socially turbulent, isolated and small northern communities have not been adequately recognized or documented. Idealistic born-and-bred southerners still come north hoping to "make a

difference". Most leave shortly thereafter, disillusioned and humbled or perhaps resentful and angry. Regardless, they can contribute little with their short stay, other than to the already ridiculous turnover rate of social service personnel. At the same time, local service providers still find themselves ignored and scapegoated, frustrated by lack of education, elevated as role models only to be hacked down by unhappy community members.

Sources of stress and methods of coping are different for both groups, indicating a telling divergence in the way people of different backgrounds experience living in the same place and working in similar jobs. Obviously, cultural difference, culture shock, and cultural adaptation must become components of studies of stress. Academic writing on stress and service providers will rarely note the need for further research concentrating on the stresses of Black, Hispanic, Asian and Aboriginal service providers. Rarer still are the works which include a short chapter on the experiences of "ethnic" or "minority" workers. The effect of culture and place has, in the past, been largely ignored by academics listening to the louder voices of Euro-Canadian—or more often, Euro-American—service providers who work in southern urban centres.

What makes life and work stressful in Moosonee and Moose Factory? South dominates north. Difference prevents people from working effectively together. Individuals are recognized as representatives and stereotypes. Communities do not acknowledge the contributions of their own members. The importance of these issues goes beyond their debilitating effect on individuals living in Moosonee or Moose Factory, or even on the communities themselves, because they are symptomatic of the struggles and setbacks of all hinterland First Nations peoples in their quest for self-determination. Severely stressed out service providers cannot undertake the enormous responsibility of community development, cannot endure the high profile pressure of modelling wellness and balance. "Healing the healers", "care for the care-givers"—these catchy buzz-words have become mottos for communities desperate to move beyond discrimination and depression,

communities who no longer want to supply statistics for the briefcases of bureaucrats, communities who are beginning to recognize the importance of their service providers.

In this first chapter, I discuss my methodology, describe the communities and the sample of service providers with whom I spoke, and briefly explore the mainstream and aboriginal literature pertaining to the topic. Chapter two provides a background on historical and contemporary service provision in Moosonee and Moose Factory, with emphasis on developments and issues post-1940. Chapter three explores the stresses experienced by service providers from the south, and is followed by a chapter on methods of coping utilized by these "southerners". Chapters five and six mirror this structure, but discuss issues pertaining to "local" or Cree service providers. The final chapter offers conclusions and recommendations.

Methodology

As is true of much research with an applied focus, this study was not undertaken with a specific theoretical approach or to build on an identified academic literature. It derives, instead, "from those *assumptions and perceptions of need* which have been identified as having policy significance" (Chambers 1985:141, italics his). An initial six weeks in Moosonee the summer previous to my Master's research—during which time I lived with a local service provider and volunteered at the mental health program to update the region's Community Services Directory—indicated that both local and southern service providers experience stress and could benefit from both organizational and community awareness of their struggles. It was this realization that led me to pursue this research topic.

Many people questioned why an anthropologist was conducting research on service providers, stress and coping. "That sounds more like social work to me", some commented. This unconventional choice of topic is again motivated by a desire to research what is relevant to those people involved. As Stull and Schensul (1987:3) state in the introduction to their volume on applied anthropology, "the problem may or may not fit

within a current theoretical or methodological issue of anthropology". The important consideration is that the topic "arises from a social problem central to the interests of the collaborators".

Being a Master's undertaking limited by budget restrictions, time, and researcher experience, the research could hardly realize all the ideals of applied anthropology—community initiative and request for research, the equal participation of local collaborators, the handing down of tools and techniques, the implementation of practical strategies. However, I attempted whenever possible to involve service providers in the process of research, to circulate results, and to offer my services to the community.

For example, by volunteering at the mental health program in Moosonee for a second summer, I was able to exchange ideas and receive feedback from employees and administrators. I was also given—in addition to a generous donation of office space—a certain legitimacy and community contact that a wandering, unaffiliated researcher would have sorely lacked. Through the program I wrote a weekly column on stress, coping and service providers in the local newspaper, *The Freighter*. I also organized a stress management discussion group to which I invited all interested service providers in Moosonee and Moose Factory. I considered this to be a chance for service providers to support and appreciate one another, to forge or renew ties and to discuss issues or suggest ways of coping—some of which may have come up in interviews with myself—in a larger, more meaningful forum. Response to the discussion group was very positive and several individuals attending felt encouraged to make such a meeting a regular occurrence. I was also asked to conduct a workshop for staff at the hospital in Moose Factory on the topic of "care for the care-giver" which took place during the year subsequent to my stay in the north.

I was concerned that interviewees would worry about information they had shared with me. In a small town, pseudonyms are no guarantee of anonymity and some

interviewees seemed to forget they were being tape-recorded, ranting about co-workers, sharing unsubstantiated gossip or revealing information which could be deemed "dangerous" if their identity was later discovered. Prior to the interview I promised that the interviewee would have the opportunity to edit his or her transcript of all incriminating, sensitive or identifying information—or to add anything forgotten or anything that had changed since we spoke. Colleagues at school were amused: "I tried that; nobody sent their transcript back to me". One pointedly queried, "do you really think they care?" But the fact that I was contacted by 18 of the 39 individuals I interviewed—either by phone to reassure me that everything was okay, or by mail to indicate changes by way of an edited transcript—demonstrates their concern for the subject matter and their own participation in the study. In interviews, service providers consistently expressed their vulnerability as targets in politically turbulent communities. The response I received to requests for editing assistance could be interpreted, in some cases, as further evidence of this insecurity. In other instances such cooperation shows an interest in the research topic and process and a concern on the part of the interviewee for accurate representation, both of themselves and the issues discussed.

The Communities

Moosonee and Moose Factory are located in northern Ontario on the Moose River a few miles shy of James Bay. Moosonee is a mainland town, and Moose Factory is an island across the river. No road connects either community to the south, or to each other. In summer, transportation between Moosonee and Moose Factory is by "freighter canoe"—a large motorboat—and in winter individuals skidoo or drive over ice roads. Helicopters provide the only transport of goods and people during the spring "break-up" and fall "freeze-up" of the river. Transportation to and from the south is by daily plane flights and, during tourist season, daily train arrivals and departures.

A study of Moosonee was published by McMaster University in 1991 (see Stephenson 1991b) and offers much important background information on this community. The population of Moosonee was estimated at 1796 in 1991. As with other communities which have a large Native population, the number of individuals under the age of 18 is disproportionately high. The majority of the 77 respondents reported that their birthplaces were elsewhere, often other Native communities on the west and east coasts of James Bay. Most moved to Moosonee to find work. Questionnaire responses indicated that English is the main language used in Moosonee, with 61 of the 77 individuals stating it was their primary language. Over half the 77 respondents reported their religious affiliation to be Anglican; one third cited Catholic and only 4 people admitted to having no religious affiliation. Of the 168 Moosonee residents surveyed who had completed their education, 22% had less than grade 9, 30% had grades 9-11, 12% had grade 12 and 14% had attended college. Younger community residents were more likely to have achieved a higher level of education. The Moosonee Development Area Board—the organization which functions in lieu of a municipal body—estimated in 1985 that only 19% of the population had year round employment and a further 7% were able to obtain seasonal jobs during the summer months. It is suggested that the current unemployment rate is even higher, given recent population increases (Stephenson 1991b:47).

McMaster conducted a similar survey of Moose Factory in 1991 (see Stephenson 1991a). Moose Factory comes under the jurisdiction of three separate bodies. Moose Cree First Nation¹ administers the Moose Factory Island reserve, which covers 300 hectares or two thirds of the island. A provincially owned section is controlled by the HBC, the Anglican church and MoCreebec. The latter is a politically active group of off-reserve status

¹ During the time research for this thesis was conducted, Moose Cree First Nation was called Moose Factory First Nation. Since those I spoke with referred to this political body as Moose Factory First Nation, subsequent references in this thesis will remain in keeping with this terminology

Cree originally from the east side of James Bay who receive compensation from the James Bay and Northern Quebec Agreement. Federally owned land is located at one end of the island on which is built the hospital, public school and housing for non-local employees of these institutions.

The total population of Moose Factory island was estimated at 1760 in 1991, but the on-reserve population was declared to be 1230—of which 1139 were Moose Band members (Stephenson 1991a:13). As is the case in Moosonee, the population is overwhelmingly young, with 45% of those represented in the survey being under age 20. Sixty-one percent of the 136 individuals surveyed regarding place of origin were born in Moose Factory, and a further 16% came to the island as children. Three hundred and sixteen people currently out of school were questioned on their highest level of education completed, and the most common answer (27.5%) was grade 8-10. However, 22% of individuals had completed grades 11-12 and 10% had attended college. As in the data from Moosonee, English appears to be the main language used in Moose Factory, as 101 out of 136 respondents claimed it was their primary language. In terms of religious affiliation, Moose Factory is overwhelmingly Anglican with 74.5% of 135 individuals declaring this as their denomination. Only 5 people stated they had no religious affiliation. The largest employer in Moose Factory is the hospital, where 73% of the 220 employees are Cree (Stephenson 1991a:54). A 1991 Band estimate of unemployment in Moose Factory was 40% (Stephenson 1991a:58).

The Sample

The first issue I will address here is how I defined the sample group. I was advised of people who might be willing and informative interviewees both by the local woman I was living with, and by the director of the mental health program in Moosonee. I diligently contacted these individuals, but I also wished to give potentially interested individuals the opportunity to volunteer. Thus I augmented my "cold-calling" with posters placed

strategically around the communities and advertisements aired on the local cable channel, inviting anyone with questions or the desire to participate to contact me at the mental health office.

In response to advertisements for the stress management discussion group I organized, I received a phone call from an employee of one of the political groups in Moose Factory. He bluntly asked me who I considered to be a "service provider". Up to that point I had been treating membership in this select group of people as a given. I had read enough books and articles about "service providers"—none of them had justified inclusion or exclusion. I simply selected groups to interview according to the professions written about in these books. How could I explain this oversight? *Who*, exactly, was a service provider? Health professionals, like physicians, nurses and counsellors, certainly. And teachers—although my thesis would unfortunately neglect this group, as the research was conducted over a summer and teachers tend to fly south during these months. I had spoken with police officers and lawyers. But what the caller wanted to know was whether, as an employee of a political organization, he could attend.

In Moosonee and Moose Factory, service providers and political leaders don't see themselves as part of the same group. Though they share many of the same goals, they work to achieve them in different ways, one group often criticizing or blaming the other for impeding progress or misunderstanding process. Politicians accuse service providers of being impatient and demanding. Service providers complain that their jobs are becoming "too political", and that their political leaders do not share their priorities. Each group comes at the problem of community healing from a different angle. Service providers have clients. They work directly with community members requesting or requiring help. Politicians work on a more abstract level, planning for the community at large. As one political leader stated: "I'm a service provider, but I don't think in the way you mean". There is also a hierarchy evident in the relationship between service providers and political

leaders. Service providers must answer to the political organizations that run their programs, and must often rely on political leaders to provide or secure funding. I didn't exclude political leaders from the thesis, however. I talked to those who worked directly with service providers, those who presently held jobs as service providers concurrently with their political roles, and those who had occupied service provider positions in the past. I also interviewed anyone who was interested in the topic, and had something to say about it.

What becomes evident in comparing the transcripts of service providers and employees of political organizations is that their different roles in the community are reflected in their approach to the subject of stress. Service providers, especially "local" ones, gave very personal interviews which discussed their experience of living and working in the community and demonstrated their narrow, concentrated focus. Politicians tended to speak of stress and healing on a wider scale, and often diluted their discussion by referring to the situation and experiences of Aboriginal people all over the country. They offered little about themselves, and much about others. These perspectives—the concrete and the abstract, the personal and the political—have become integral in the thesis.

Four months of field work in Moosonee and Moose Factory during the summer of 1993 resulted in interviews with 19 service providers originally from the south, two of whom are Aboriginal, and 20 service providers born and raised in the James Bay region, all of whom are Cree. One southern service provider withdrew her transcript; consequently the southern interviewee totals in the following description are eighteen instead of nineteen.

Of the service providers from the south, seven are directly involved in the health field: three are doctors, two are nurses, one is an ambulance attendant, and one is labelled a "nutrition community worker". Four are involved in the legal system: two are lawyers, one is an OPP officer, and one is a probation officer. Three are involved in counselling and social work: one is a psychologist, one is a social worker, and one is a counsellor. Two

service providers from the south are considered program directors, and two—a librarian and a teacher—are employed by educational institutions. Twelve of these interviewees are female and six are male.

Five service providers from the south each fall into the age categories of 20-29, 30-39, and 40-49. One is under 20 years old and two are in the 50-59 age bracket. Seven of the 18 service providers from the south are single and have never been married; four are single and either divorced or separated; one has been widowed. Six are married and three of these service providers have children living with them. One divorced woman lives with her adult son.

Two interviewees from the south have been in Moosonee or Moose Factory for less than a year. Three have been in these communities for one to two years; 5 for three to five years, 3 for six to ten years and 5 have resided in Moosonee for more than ten years. Only 3 of these southern service providers reside in Moose Factory. All but two of them have completed post-secondary education related to their particular field of employment.

Of the Cree service providers, eight work in the counselling field: one is a social worker, six are counsellors and one is a self-employed healer. Three are in administrative positions and two work for political organizations. Five are directly involved in health care provision: two are nurses, one is a patient representative, one is a community health representative and one is a registered practical nurse. Two are involved in the legal system, one as a First Nations Constable and the other as a court worker. Again, 12 of these individuals are female, while 8 are male.

The majority (13) of these service providers are between the ages of 30 and 39. Two are in the 20-29 age category and three are in the 40-49 category. One Cree service provider fits into the 50-59 age bracket and one is over 59 years old. All but one of these individuals—who came from the east coast of James Bay and has himself been in the community over 10 years—consider themselves to have been "born and raised" in

Moosonee or Moose Factory or to have "spent most of my life here". Thirteen of these service providers reside in Moose Factory, while only 7 live in Moosonee.

Three of the local service providers are single, and two of these individuals have children from previous relationships. Five are divorced and all five of these service providers have children from prior marriages—two have joint custody and three have full custody of these children. Twelve are married and ten of these have children living with them.

Eleven of the twenty local service providers have completed post-secondary education; three commenced post-secondary studies but eventually discontinued them; and four never had any post-secondary training. Three individuals are currently enrolled in post-secondary programs—one who has no prior education past high school and two who have already completed other courses. For one interviewee it was not known whether any post-secondary education had been undertaken.

Theoretical Issues

The definition of stress used in this research is a rough interpretation of Lazarus and Folkman's (1984) theory of "stress appraisal". The work of these psychologists released researchers from the decades-old tug-of-war between stress-as-stimulus and stress-as-response (Sutherland and Cooper 1990:11-17). Lazarus (1986:5-6) defines stress as a process, an ongoing relationship between person and environment where stress does not reside in either the person or the environment, but in the relationship between the two. Appraisal is the key aspect of this process. Through appraisal, the person-environment relationship is interpreted by the individual and its meaning forms the basis for evaluating coping possibilities (Lazarus and Folkman 1984:31-5). In effect, the basic premise of this definition is that the perception of stress is subject to individual interpretation—stress is in the mind of the perceiver. It is this aspect of Lazarus' theory which informs this study.

Like much psychological research, however, the emphasis in Lazarus and Folkman's work is on the individual. While they attempt to give consideration to the effect culture, class and society can have on individual stress and coping (Lazarus and Folkman 1984:226-260), their rigid definition of culture and emphasis on rules and rites ignores the subtleties of cultural influence. Culture, considered a "distal variable", is little more than an unobtrusive background on which the individual—the "proximal" variable—frolics at whim. Indeed, the term "social" soon replaces "cultural" in the discussion, further de-emphasizing difference between groups so as to highlight differences between individuals living in a homogeneous "society". Lazarus' later work on emotion and adaptation (1991) exhibits a more sophisticated understanding of culture. Unfortunately, it does not discuss stress directly and continues to characterize culture as static.

This tendency for stress research to "de-socialize" people, to ignore the importance of specific social, cultural or historical contexts in generating stress, has been criticized (Dressler 1991:25; Young 1980). Researchers tend to work with well-educated, culturally familiar and convenient research samples, thus limiting understanding to this segment of the population (Dressler 1991:24-5). But it is not only stress research that suffers from this problem. Studies of coping, too, are affected by this perspective. Lazarus and Folkman (1984:150-154) divide coping into "emotion-focused" and "problem-focused". The former is defined as passive, rationalizing and tending toward self-deception while the latter is considered active, logical and working at altering the stressful circumstances. Women (Korabik et al. 1993:141) and those whose culture or social position leaves them relatively powerless (Dressler 1991:27) are usually accused of employing "emotion-focused" coping methods. But, as Korabik and Dressler point out, the pejorative cast thrown on "emotion-focused" coping strategies is not merited. The male=problem-solving and male=power equations have de-valued other strategies which may not act specifically on the problem but may contribute something equally important. This appears to be the case with Cree service

providers living in Moosonee and Moose Factory, a fact which will be demonstrated in this thesis.

This study seeks to document the stresses and explore the coping methods used by two diverse groups of people. The first is composed of individuals who were originally part of a relatively privileged mainstream but who have been displaced by accepting employment in a northern setting. The second is a selection of individuals who, as indigenous people, are identified with a relatively underprivileged group but who are themselves among the most privileged in their communities. Although evidence of stress and coping comes from individual interviews, subsequent analysis has tended to group responses in terms of recurring themes. I have made a concerted effort to illuminate and correlate the social, historical and cultural factors which influence the experience of stress and attempts to cope with it.

All of this begs the question of whether or not stress, as a concept, is transferrable across cultures. In speaking with Cree Elders in Moosonee and Moose Factory, I came to understand that emotions associated with stress were certainly felt in the past, but "we just didn't know how to talk about it" or "we didn't know how to get it out". Certainly Cree families in the bush experienced hardship, near starvation, uncertainty, and loss. However, they relied on self-control and tended to react to difficulty and tragedy with a "controlled, measured response" which Richard Preston (1975:248) refers to as "diffuse emotionality"². This did not involve "talking it out". "Stress" is a contemporary way of conceptualizing emotions such as worry, sorrow, and anger, and seems to imply a sharing or unburdening in order to cope.

This may be an imported perspective, but it is one with which Cree service

² The feelings are strong but are kept less consciously attended to and less differentiated; they are not appraised with cognitive categories or word-labels as precise as Euro-Canadians might use (R.Preston, personal communication 1995).

providers are quite familiar. They did not query my interest in stress or ask me to define the term. Many of these helpers have received training in stress and burnout through workshops and post-secondary education. Several of them describe themselves as "bi-cultural"—able to function well in both Cree and mainstream society—and thus they are well-versed in non-Native concepts like "stress". In fact, many referred to themselves or colleagues as "stressed" without prompting from myself. As with their counterparts from the south, the meaning and relevance of stress to their lives was understood.

One of the more controversial decisions I have made involves the grouping and labelling of the sample. Labelling is a political action; it places limitations and erects boundaries. It can be awkward and confusing, and often unfair and misleading, privileging some while others are left feeling very small and inconsequential.

These are crucial considerations when the labels one uses become a theoretical map, and when one is working with Aboriginal individuals— people who have been, in some cases literally, labelled to death. I could divide my discussion according to profession. This could be dangerous, however, making it particularly easy for community members to pin point individuals, regardless of pseudonyms. Since the thesis is being written not only for an academic audience but to be used by students at Northern College in Moosonee, protecting the identities of interviewees—many of whom are still in the same jobs—is a concern.

An obvious, simple and more anonymous approach would be to categorize my interviewees as "Native" and "non-Native". This is tidy, familiar, and not overly controversial. But given that labelling is inherently political, why not use the labels for more than convenient oversimplification?

Dividing my sample of interviewees into "local" and "southern" accomplishes this. Ethnicity is not used to neatly define the two groups, although being "Native" or "Euro-Canadian" is an important consideration because most of the "locals" are Native people and

most of the "southerners" are Euro-Canadian. Instead, the division is blurred, being based on something more subjective and complicated. What qualifies one for "local" or "southern" status is contested within the thesis. The rare non-Native service provider considers him or herself "local", or is considered by others to be "local". Two Native people born and raised in the south share characteristics with both groups. Another Native person is from further north in Quebec but has lived in Moose Factory for more than two decades; yet another was born and raised in Moose Factory but because he isn't a Moose Band member, his alliances are not entirely "local". Other interviewees consider themselves "southern" but Native ancestry or Native step-family members connect them to "locals" in a way absent for other "southerners".

On a practical level, the terms "local" and "southern" are self-definitions, labels actually used by residents of Moosonee and Moose Factory to distinguish between people. But on a theoretical level, the use of these particular terms makes one think carefully about how place and culture come together. Cultures are not bounded but blur and run into each other like ink in water. Culture is not biologically imprinted, or even socially ascribed; it is possible to adopt and discard practices as the need for adjustment or adaptation arises. I like Arjun Appadurai's term "ethnoscape" (1991) because it evokes both the changing character of culture, and its rootedness in place. Place becomes the commonality in the experience of people, the shared aspect of existence. Yet the individual experiences of this place may not be held in common at all but vary based on where one has been and where one is going. The labels "local" and "southern" convey this movement, this process of going and coming and staying which is a defining characteristic of life in Moosonee and Moose Factory. A non-Native person can never become Cree, but over time and with substantial effort, a southerner can be considered more or less "local".

"Local" and "southern" as labels applied to service providers also concretely convey the historical and contemporary political dynamics and dichotomies evident in northern

aboriginal communities: server/served, power/powerless, north/south. For generations, political power has been held in southern, urban centres like Ottawa and Toronto and the residents of remote northern communities have been subject to the whims of often-ignorant and assuredly distant bureaucrats and program administrators. But the on-site employees of these political and service institutions—individuals who live and work in Moosonee and Moose Factory—have themselves traditionally been "from the south". Thus the term "southern" marks the connection and assumed allegiance between the new arrival in the community and the dominant culture.

"Local" may imply rootedness, but as a political term it also infers "grass roots". The current political climate of Moosonee and particularly Moose Factory is one of change, of local government initiatives, of devolution of power from southern authority, like the federal or provincial government, to local control. Thus the term "local" is one of empowerment. In contrast, "southern" becomes almost pejorative in communities which are seeking self-determination. An understanding of this changing dynamic becomes crucial in an exploration of stress and coping in service providers—some of whom lament their association with a colonial presence in the community, while others undertake the responsibility of healing communities struggling toward self-government.

A summary of academic and Aboriginal literature pertaining to this study is necessarily affected by the paucity of information having direct thematic or theoretical relevance. Anthropological approaches to health tend to focus on the clients and patients who seek, receive or ignore the aid of service providers, not on the service providers themselves. Service providers are the much-maligned bad guys, offering culturally inappropriate, colonial, and insensitive assistance. Disciplines like social work and health sciences concentrate on the relationship between White professional and "ethnic" or "minority" client within mainstream, urban society. Current writing about Aboriginal people seems consumed with economic development, indigenous land use, education and

other highly contested and volatile issues surrounding self-government. Discussion of these political issues emphasizes the Aboriginal politician's perspective, a viewpoint which I have stated previously is not necessarily shared by Aboriginal service providers. Most writing on Aboriginal helpers is optimistic and glowing, as if afraid to insinuate that the hard-won opportunity to help one's own people may have drawbacks. It has been difficult to place this study in an established theoretical context. Hence, I will examine three distinct literatures that have some connection or relevance to this study.

The first is drawn from psychology and social work, and focuses on stress as experienced by service providers, human service workers, and health professionals. While providing an overview to the issues and validating the relevance of my undertaking in Moosonee and Moose Factory, the experiences documented and suggestions made in this literature are largely inapplicable to those of northern service providers.

These texts often focus on burnout, as an extreme and debilitating effect of prolonged stress, instead of on stress alone (see Cherniss 1980; Maslach 1982). Although I initially planned to adopt a similar focus, interviews with service providers in Moosonee and Moose Factory forced me to abandon such an emphasis. For them, burnout was a phenomenon of their past, or a future consideration, but no one labelled themselves "burnt out" in the present. I suspect that for southern service providers, burnout is synonymous with leaving the north permanently, hence the scarcity of southerners who were still in Moosonee or Moose Factory and claimed to be "burnt out". As for local helpers, Maslach's (1982:59) limited research with Native service providers has demonstrated that these individuals are less likely to burn out than White service providers. This suggestion is borne out by my experience in Moosonee and Moose Factory. For these reasons, an overarching emphasis on burnout does not make this literature particularly relevant.

Two key assumptions are made in the stress/burnout and service provider literature. The first is that employment is in a large urban centre. Second is that the employing

organization or agency has a large staff. The service providers who compose the sample of this study work in an isolated, northern location and are often employees of skeleton-staffed operations. This crucial difference eliminates much of the congruence between the literature and my research results. Issues of importance for employees of large organizations in urban centres—like bureaucratic interference, group conflict, and overbearing supervision (Cherniss 1980; Maslach 1982; Maslach and Jackson 1982; MacFadden 1980; Russo 1980)—are not common problems in Moosonee and Moose Factory. These concerns are replaced by other, site-specific issues which this thesis discloses.

This literature is relevant in that it occasionally discusses professional values and the social/historical context within which the idea of both the professional and the client has been constructed. The professional has been portrayed as altruistic, competent, unprejudiced, empathetic and at the same time objective. The stereotypical client voluntarily seeks out the professional, is trusting and grateful (MacFadden 1980:37-8; Cherniss 1980:253-4). Professionals are motivated by a "humanitarian principle" to help others—they are not drawn to helping because of shared understandings with clients but because "serving those in need" offers satisfaction and a sense of competence (Reiff and Reisman 1970:9). This concept of competence is crucial. Professionals are not supposed to question their abilities and their knowledge; they come out of school as "finished products" and therefore should not feel anxious or insecure (Cherniss 1980:251).

Because the southern service providers in my sample are largely from urban centres and received their socialization and training in mainstream society, they bring with them to Moosonee and Moose Factory these mainstream ideals and beliefs. Particularly for those southerners who are young and have not had their idealism tempered by real-work experience, this cultural baggage assuredly has an effect on their experience of working in a remote, culturally unfamiliar environment.

In the mainstream literature on stress and service providers, occasional mention will be made of "minority" or "ethnic" service providers, usually encapsulated in a sentence or paragraph outlining areas for future research (see Maslach 1982:58-9). The rare chapter will explore the particular circumstances or experiences of being a Black, Hispanic, Asian or Aboriginal service provider (see Rooney, 1982; Liverpool 1982; Curry 1982; Calnek 1982) . But always the assumption is that the "minority" worker is employed in a milieu where "minority" is more than a label but a statement of circumstances. Such employees are tokens, greatly outnumbered by White staff, working in urban centres which may not be pre-dominantly White but are composed of individuals from a rainbow of ethnic backgrounds. In Moosonee and Moose Factory, the inverse is true. The Aboriginal service provider works in his or her home community, where Cree residents are by far the majority. The non-Native or White service provider, in contrast, has re-located to a place where he or she is the "minority".

Much has been written, however, on White professionals—particularly social workers—whose work entails reaching "ethnic" or "minority" populations. Certain chapters are devoted to discussion of Native clientele. Emphasis is placed on offering check-lists of demographic and cultural factors which distinguish the "Native" client from others; on listing "Native" social problems; and on documenting historical interaction between "tribes" or "bands" and government/social agencies (see Blount et al 1992; Locklear 1982; Lewis and Ho 1982; Good Tracks 1982; Green 1982; Minor 1992). Some document the success or failure of particular therapeutic strategies with Aboriginal populations (see Blue and Annis 1985; Green 1982). Others offer suggestions as to the role an outsider can play as a helper in a Native community (Anderson 1995; Good Tracks 1982). Such information, if it doesn't unashamedly generalize about all Aboriginal people by simply referring to "Natives" without regard to First Nation or "tribal" affiliation, can be useful for one preparing to work with Native clientele, and could be incorporated into

orientation packages.

The second area of relevance to this thesis is a diverse concatenation of writing on the experiences of non-Native individuals who have worked in northern locations, usually as nurses. *Canadian Nurse* and the *Canadian Medical Association Journal* have, for decades, been a forum for commentary on living and working in the Canadian north. Some of these articles are anecdotal reminiscences about far away people and events by those who have since returned to the south. Others expound happily on the unique advantages and learning that accompany northern work. These read as recruitment notices. Still others are more political, commenting on or forecasting changes in the provision of health care to indigenous people.

It is interesting that so much of this literature focuses on the experiences of the northern nurse, as opposed to the northern social worker or physician. The history of nursing in the north is long, much longer than that of the physician whose visits are still sporadic in some communities. This, combined with the traditions of whole-person care and health promotion which are elements of a nurse's work, uniquely position this southerner to comment on experiences of cross-cultural interaction and community life. Noteworthy are three texts, all by or about nurses. One takes the form of a personal narrative, and two are theses about the employment experiences of nurses in the north.

Judy Smith (1994) wrote *Native Blood: Nursing on the Reservation*, a contemporary personal narrative of her experiences as an outpost nurse in northern Alberta and Saskatchewan. Stabbed through with violence and soaked with alcohol, this book is a disturbingly blunt record of reserve life, government ineptitude, culture clashes, incompetent and insensitive co-workers and northern nursing. Smith is an unabashedly opinionated author whose un-politically correct book says what some southerners in Moose Factory might have liked to say—but bit their tongues, fearing the repercussions from both non-Native administrators and officials and Native politicians and community members.

In her Master's thesis *Sitting on an Island: Nurses in the Canadian North*, Corinne Hodgson (1980) outlines the ramifications of poor cross-cultural communication on both quality of health care for residents and quality of life for nurses. It details stresses such as linguistic, cultural and socioeconomic barriers to understanding Native patients, gender issues such as nurse-doctor relations, the increased clinical responsibility of outpost nurses, lack of social ties in the community, and being "bushed" or having "cabin fever". Little attention is given to coping, as it appears that turnover among nurses is so high that they rarely stay long enough to establish adequate coping mechanisms.

Brenda Canitz' (1993) thesis *A Study of Turnover in Northern Nurses* details the particular circumstances experienced by outpost nurses—those who are the sole clinical care providers in a small, isolated community. She discusses such stresses as lack of social support, loneliness and isolation, overwhelming clinical responsibility, expectations that the nurse will perform jobs from veterinarian to plumber, gender issues such as lack of respect and power, cultural unfamiliarity, and lack of orientation. As in Hodgson's account, emphasis is placed on the high turnover which results from these stresses and the association of turnover with poor health care for Native people.

While the specific focus on nurses, and in Canitz' case outpost nurses, limits the applicability of certain issues to my study, the stresses due to cultural and socio-economic difference and lack of social support have definite relevance to my discussion of southern service providers. Such stressful experiences appear to cross professional lines.

The literature written about, and increasingly by, Aboriginal service providers is the final area I will examine. Frequent mention is made of the stresses experienced by this particular group of people. This is occasionally a line or two which notes that stress and burnout are occupational hazards for Native helpers (see O'Neil 1993:22; Aboriginal Family Healing Joint Steering Committee 1993:121; Stalwick 1986:114). Other references to stress are more comprehensive and offer wisdom on coping (see The Bulletin 1993;

Health and Welfare Canada 1989:96-98; Shawanda 1988:91-94; Erasmus and Ensign 1991:57). While these go further than mere acknowledgement of the problem, they fail to critically examine the cultural and historical factors which cause the Aboriginal service provider to experience stress, and tend to offer pat coping recommendations.

Other important sources of information on the Aboriginal experience are personal testimonials to the difficulties inherent in community development and service provision. Of note is an article in *The Canadian Nurse* (1978:50-1) which includes excerpts from a monthly report submitted by an Aboriginal community health representative to her supervisor. Experiences she records, such as interruptions at home, lack of political support, community crisis, feelings of inadequacy, poor turnout at scheduled events, and missed appointments, were all expressed by various Cree interviewees during the course of my research. A speech given by Phil Lane Jr. (1988:261-267) which movingly documents his "burnout" and subsequent renewal through attending treatment programs and participating in AA is also of relevance. Several local service providers in Moosonee and Moose Factory experienced similar disillusionment and likewise found solace and sustenance through treatment and AA programs. Theresa Tait (1993) published a brief but embittered and resentful account of her work as a front-line service provider in a non-Native organization. Although her employing agency is located in an urban centre and she is sorely outnumbered by White co-workers—two characteristics which it has already been established do not overly apply in Moosonee and Moose Factory—her intensely political writing does apply somewhat to northern circumstances. The prejudice, responsibility and cultural dissonance she experiences as an employee of a non-Native organization is overtly presented and has relevance to my thesis.

A final two sources have been of great use in both the inception of the research topic and in the writing of the thesis. One is a transcription of the 1990 Native Mental Health Association of Canada conference "Helping the Native Helpers". During the course

of the conference, various speakers offered opinions on the problem of stress and gave suggestions for coping, often in the form of role playing or group activity. Of great relevance, however, was the presentation given by Dr. Roland Chrisjohn (201-254), a Native psychologist, on the subject of burnout and stress management. He describes the individual, institutional and community factors which lead to "feeling stressed"—lack of education resulting in the "impostor syndrome"; culturally unfamiliar organizational procedure, protocol and management; government "project sabotage" like underfunding; sense of being "un-Indian"; and having to help family members. He warns against coping approaches which are inadequate, and emphasizes the importance of coping strategies which are active, inspire personal growth and spiritual renewal, and encourage sharing and networking with others who understand one's circumstances. These are coping methods recommended and practiced by many of the local service providers with whom I spoke.

The second important source of information is an issue of the journal *The Four Worlds Exchange* (1990) devoted solely to the discussion of the experiences and survival secrets of Aboriginal service providers. Opinions presented, as in all of the above Aboriginal references, are personal, practical and congruent with those expressed by local service providers in Moosonee and Moose Factory. Many of the issues discussed are similar to those presented by Dr. Chrisjohn. Unique subjects are the use and abuse of power in community work, wellness for "wounded healers", and the particular difficulties of working in Aboriginal communities and how these can be overcome.

The mainstream literature on stress and burnout as it pertains to service providers has little relevance to the experiences of southern service providers, given the unique cultural and geographic setting these professionals encounter in Moosonee and Moose Factory. Specific works on nurses in the north acknowledge the importance of the northern setting in causing alienation and hampering professional success both because of social isolation and cultural unfamiliarity. Information specific to nursing has less relevance,

however, and little attention is given to coping with these circumstances. The most useful literature is that published by Aboriginal people on the subject of stress and service providers. The honesty and personal nature of much of this writing is reminiscent of the interviews I was given in Moosonee and Moose Factory, and the subjects discussed seem consistent with those emphasized by local service providers. In this work, care is taken to offer solutions, not merely to vent frustrations or expound upon difficulties.

CHAPTER TWO: A BACKGROUND TO SERVICE PROVISION IN MOOSONEE AND MOOSE FACTORY

For the specific purposes of this thesis, this description provides a context for the words of contemporary southern service providers who, whether they are cognizant of it or not, are heirs to the colonial legacy of service provision in the north. And it indicates the ambivalent position occupied by contemporary Native service providers, as the Cree have historically been the helped and not the helpers. Finally, this description of service provision documents the interactions between service providers, their clientele, and the wider community. Service providers, particularly those on the front-line, have their quality of work life largely determined by the experiences, expectations and understandings of community members. I believe many of the assumptions about 'how things should be' are naturalized aspects of historical interaction between powerful outsiders and the Cree. These assumptions are confronted by service providers, politicians and administrators every time these individuals challenge the status quo.

This description emphasizes imported and subsequently institutionalized service provision in Moosonee and Moose Factory and therefore does not examine the important and changing role of "traditional" helpers like grandmothers, midwives and family and hunting group leaders. Certain service providers—religious leaders, Justice of the Peace personnel and welfare officers, for example—have been left out, primarily because the focus of this chapter is on the history of services which my sample of interviewees currently provide to residents.

Health Care in Moosonee and Moose Factory

A concerted effort to ameliorate the health status of the Cree at Moose Factory was undertaken by Letitia Newnham, the wife of Moose Factory's second Anglican missionary. In 1895 she applied for government assistance to move the old log home of Newnham's

predecessor from the threat of floods and thereby organized the first hospital in Moose Factory (Scanlon 1976:26). Instead of building their own departmental institutions, Indian Affairs allocated funds to already existing hospitals and clinics for the purchase of equipment and supplies (Young 1988:87).

Moose Factory's 4-bed hospital, named "Letitia House", was described by the Indian Affairs Department in 1912 as having "excellent equipment and room for six or eight patients" (Pugh:230). Yet the department—whose limited resources encouraged a denial of the already evident and deadly onslaught of tuberculosis in the James Bay region at this time—was likely seeing Mrs. Newnham's efforts through rose-coloured glasses (Pugh:230-1). If local initiatives were capably supplying services to isolated northern regions, then the department need not intervene beyond the annual medical officer visits which began after the signing of Treaty #9 in 1905. But the fact remained that "Letitia House" could not possibly house the numbers or handle the treatment of tuberculosis cases during the early 1900s (Pugh:230; Young 1988:124; Blythe et al 1985:40). This is not to suggest, however, that the missionaries' efforts were for naught. In 1905 a physician who accompanied officials for the signing of Treaty #9 noted that the "seven bed hostel run by Anglican missionaries" at Moose Factory had kept tuberculosis infection rates at a mere 1 in 5 when other locations had infection rates of fifty percent (Young 1988:39).

Treaty #9, because of its considerable impact on these communities, deserves discussion. The signing of this Treaty has not directly affected service provision—as far as the government is concerned—because no specific mention of health care or other services is made in the wording. However, a Moose Factory Elder adamantly told the Royal Commission on the Northern Environment that he remembers spoken promises being made at the signing regarding health care (RCNE 1978a:37). More problematic than broken promises, however, was the manner in which the Treaty signing was conducted. Families of mixed ancestry associated with the HBC were admitted to Treaty in Fort Albany but

were excluded in Moose Factory because they did not live "the Indian mode of life" (Blythe et al 1985:33). Others were excluded from the Treaty simply because they were absent from the community at the time of the signing (Blythe et al 1985:33). The artificial division of residents of Moose Factory into "status" and "non-status"—which occasionally divided close relatives into different categories—divided the island both physically and psychologically. Those Cree considered "status" were Moose Band members and had access to services administered by the Band and funding from the federal government. Non-status residents living on the island were considered a provincial concern and were left relatively powerless. The fragmenting and alienating effects of Treaty #9 are still felt in Moose Factory and Moosonee (Blythe et al 1985:43).

Visits of one or two days duration by physicians associated with Indian Affairs continued on an annual basis until 1929, when a permanent doctor was stationed at Moose Factory. This physician was also a government official, acting in the capacity of Indian Agent for those Cree governed by the stipulations of Treaty #9 (Smallboy 1995:7; Blythe et al. 1985:34). Graham-Cumming (1967:127) discusses the fact that Indian Agents were, in 1967, still considered the legally designated "health officials" on reserves. Medical personnel hired by the Department of National Health and Welfare were subordinate and all decisions regarding admission and transfer of patients, and course of action regarding communicable disease, were made by the Indian Agent, not the physicians dealing with individual cases (Young 1988:86-7). It is unclear whether the provision of health care in Moose Factory was less fraught with friction and bureaucratic foibles because the Indian Agents located there were frequently qualified physicians. What is evident, however, is the association—made flesh in the form of the Indian Agent—between the medical system and colonial forces of social control.

The building of Moose Factory Indian Hospital in 1950 was an endeavour associated with increased government commitment to Native health in general and the

prevalence of TB in particular. The hospital was initially a 135 bed tuberculosis sanitarium employing a staff of 65 which included physicians, chest experts, lab and x-ray technicians, and dieticians (Pugh:232). Only a small ward was offered to treat general maladies; most of the beds—divided into men's, women's and children's wards—were occupied by TB patients from the James and Hudson Bay areas (Culver 1993:39). Many families from communities on both the east and west sides of James Bay relocated to Moose Factory during the 1950s, in order to be closer to institutionalized family members (Blythe et al 1985:40).

That the "illness care system" serving the indigenous population of Canada's north developed in response to infectious disease has important contemporary ramifications. Current health problems affecting Aboriginal people are overwhelmingly social in origin, and the existing system—designed to battle infection—is inadequate to cope with such contemporary issues as alcoholism, diabetes, domestic violence and suicide (O'Neil 1993:15).

Public health initiatives, instituted following the opening of Moose Factory Indian Hospital, included "immunizations, school child check-ups, pre-natal and child health care and teaching, and minor field treatments" (Culver 1993:47). This work was accomplished mainly through home visiting in the local community and up the coast (Culver 1993:7). Today, public health offices continue to emphasize immunization and child health. Health education targeted at preventing and controlling lifestyle illnesses suffered by smokers, drinkers and diabetics is regarded with suspicion and seldom does anyone attend meetings or workshops that are organized (Spindloe, personal communication 1993). Many of these prevention-oriented activities are initiated by southern professionals, often by those who fly north for a week or so and then return to head offices in the south, and this certainly colours local response. Yet community health representatives, who are usually Aboriginal and undergo two years of post-secondary education to qualify for work "conducting health

promotion and liaison activities" (Health and Welfare Canada 1983:12), do not appear to experience greater success with such programs (Mianscum, personal communication, 1994).

Professional staff for the hospital at Moose Factory were from southern locales and were provided with accommodation near the hospital. Irene Culver, who worked at the hospital when it first opened, reminisced:

I enjoyed Moose Factory very much. The people were friendly. Possibly because we were all new to the island we were anxious to make friends. Living quarters were provided for the staff, houses for the doctors with families, and apartments for other employees with families. The nurses' residence occupied the third floor of the hospital and part of the main floor had been reserved for the male staff...I made more friends than I had during my entire lifetime. The community was completely different from my former home where the only contact with my co-workers was at work. Here we were together for all our meals and free time, too (1993:40,45).

In what Culver describes as almost a summer camp atmosphere, hospital staff had every need taken care of by the administration and their interrelationships were immediately personal as well as professional. Being "new to the island" meant clinging to each other for reassurance and cultural familiarity; friendships developed quickly under the threat of culture shock. Things have changed little since 1950. Considerably more housing has been built and, although the contemporary southern employee of the hospital in Moose Factory is no longer forced to eat hospital food, he or she continues to be assigned accommodation in a southerner encampment located close to the hospital. Neighbours are still one's co-workers and socializing often occurs between staff during off-work hours.

Young (1988:103) discusses the two types of people who came north during the 50s and 60s to work in remote hospitals:

Some came for the professional challenge and the learning experience or because they had an almost missionary zeal to work among the Indians. These incentives outweighed the disadvantages of low pay and isolation. Others came because they could not obtain suitable employment elsewhere. The quality of the medical staff during the 50s and 60s left much to be desired.

Dead-ends and god-sends arrived in northern communities to staff hospital facilities—those with nowhere else to go and those who wanted to 'save those poor Indians'. Even today,

southern professionals working in the north are jokingly characterized according to "the Four M's"—mercenaries, missionaries, mads and misfits (Ladouceur personal communication 1995). This did not guarantee high-quality staff. While Young's comment on staff quality refers directly to the situation in the hospital at Sioux Lookout in north-western Ontario, correlations between this health facility and the one in Moose Factory extend beyond their date of opening and initial role as TB sanatoria.

Transience was one factor which negatively affected the quality of medical care in Moose Factory. Blythe et al (1985:46) astutely typify changes in Moose Factory as being the evolution from a transient Cree population living mostly on the land to a transient non-Native population originating in the south. Historically, HBC personnel, certain missionaries, government officials and medical staff could all be considered "transient". Yet some, like Newnham, stayed in the area for decades and others, like the Indian Agent prior to 1929, were an easily-dismissed rare presence. The opening of Moose Factory Indian Hospital, as well as federal departmental offices in the community, marked the beginning of a large-scale transient southern population in Moose Factory.

During local consultations for the Royal Commission on the Northern Environment held in Moose Factory in 1978, residents raised concerns about transient staff—"those individuals who arrive to work in the area for two or three years time and therefore are unable to accept the responsibility of their actions and decisions" (RCNE 1978a:42). By the late 70s, southern professionals were well-compensated materially for their northern stay and this seemed to incriminate them even further. One respondent at the Royal Commission consultation, himself a professional from the south, stated, "some people may object to the word 'transient' because it reminds them of the reality of colonialism. How else can we explain the tremendous housing benefits and salaries and northern allowances which we 'transient professionals' receive?" (RCNE 1978b:184). Ready remuneration without community commitment was seen as colonial; it replicated historical short-sightedness and

discrepancies in power. Transience of staff continues to be a frequently-voiced criticism of the health care system in Moose Factory. In a study conducted by McMaster University, those who were not satisfied with health services in Moose Factory "cited, most often, the quality of care and the transience of doctors as reasons for their dissatisfaction" (Stephenson 1991:52).

The hospital at Moose Factory became a major employer in the community. Most often, the discussion of local employment in this facility is limited to unskilled positions like kitchen, maintenance and laundry staff (Blythe et al 1985:40). It appears, however, that the isolation of the hospital and its consistent under-staffing (Culver 1993:87; Wherrett 1965:62; Young 1988:103) meant that local people employed as ward aides, orderlies and nursing assistants performed duties well beyond their job descriptions. Even today, newly graduated nurses often rely on long-time aides to refresh their memories regarding certain, usually mechanical, procedures. Yet in today's highly legalized climate of liability and skyrocketing insurance costs, these employees have felt their responsibilities eroded because their expertise comes from personal experience and not professional accreditation. Increasingly, local staff at the hospital have post-secondary training. But there remains a shortage of Cree university graduates who could undertake employment as public health nurses and physicians.

In 1968, the threat of TB much diminished, the hospital's mandate—along with its name—was changed to reflect the more diverse needs of the western James Bay population. Moose Factory General, as it was re-named, became an acute care general hospital. As part of a trend toward "community involvement" embraced by medical schools in Ontario during the 60s, partnerships were established between the federal government and universities to alleviate the chronic under-staffing of northern hospitals under the jurisdiction of Indian Health Services. In exchange for providing qualified personnel to these isolated hospitals, the universities concerned were offered the opportunity to "teach

and conduct research beyond the confines of the urban teaching hospitals" (Young 1988:110). In 1965 Queen's University became the southern partner for the Moose Factory Zone—an area serviced by Moose Factory General which covers the communities of Moosonee, Moose Factory, Fort Albany, Kashechewan, Attawapiskat and Peawanuck. Queen's provides physicians and nursing faculty who offer service to the region's approximately 5,500 people and supervision for interns, residents and nursing students. The university also coordinates consultant visits in specialty areas. Most staff recruited through the program have renewable one year contracts, but some have tenure of only a few weeks or months (Queen's Moose Factory Program; Blythe et al 1985:179).

Coastal communities are serviced by allegedly frequent visits of physicians to the outlying nursing stations and clinics, but statistics compiled by James Bay General Hospital on Fort Albany and Attawapiskat show that less than 10% of all patients are actually seen by a physician. Most patients receive full care from nursing staff (JBGH Operational Plan 1995-6).

In February of 1995, the name of Moose Factory's hospital was again changed. As with the previous name change from Moose Factory Indian Hospital to Moose Factory General, this change reflects a major alteration in hospital mandate and governance. Being given a new title—Weeneebayko General Hospital—marks "an historic event in the transfer of health services to community-based control". The memo regarding the change continues, "It is also hoped that the name change will more accurately reflect the regional nature of the facility, serving the people and communities of the Mushkegowuk Territory" (Hunter 1995).

Medical Services Branch, in 1982, instituted the Health Program Transfer Initiative for First Nations communities (Young and Smith 1992:17). In order to take advantage of this opportunity, all of the Mushkegowuk communities—with the addition of Moosonee and those Cree represented locally by MoCreebec—have formed a Regional Health Board.

This board will directly participate in the planning, design and implementation of health services in the region. This allows for the adaptation and re-invention of current services if they are deemed inappropriate.

The name change is merely a beginning. Contract services have already been transferred to board control, but professional employees are awaiting the transfer of public servants which is slated to occur between February and November 1995. Current professional employees will receive a "notice of surplus" from the federal public service, and pending the results of prior performance evaluations, will be issued letters of offer of employment from the board. It appears that all benefits of employment at Moose Factory General will also be elements of the employment package offered by Weeneebayko General, including Isolated Post Allowances and Isolated Post Allowance Travel benefits.

In order to prepare staff for this stressful time, "work force adjustment" workshops have been held and employees are continually informed of changes through pamphlets and memos circulated throughout the hospital. Many employees originally from the south, however, are fearful of the transfer and of becoming employees of a locally-run institution, and several have left Moose Factory. These fears have been expressed by employees of Medical Services Branch working in Native communities across the north. Many of these individuals suspect local expertise in the health field is of dubious quality, sense that political differences and family loyalty will negatively affect service provision, and are concerned that power struggles and personal conflicts will erupt as a result of changing relations between Band, Tribal Council and health professionals (Thompson 1993:30). These fears are shared by Native and non-Native employees alike (Second Band Nurse Workshop 1986). However, local nurses employed in their home communities have specific concerns. Some believe that employment in a locally-controlled institution will deny them the protection from local criticism afforded one working in a federal organization (Linklater, personal communication 1993). Others predict feeling torn between two cultural

ways, as employees of an indigenous-run institution who have only been educated in White health programs (Thompson 1993:30). There is also the worry that the transfer will raise community expectations beyond what can reasonably be achieved by local service providers (Second Band Nurse Workshop 1986:17).

As a result of the transfer, both the federal and provincial governments will become involved with on-reserve funding of health care, thus destroying the once-rigid and awkward allocation of First Nations service provision solely to the federal government. With these newly forged provincial connections, the Weeneebayko Regional Health Board can assume control of provincially funded programs like the ambulance service and the James Bay Community Mental Health Program. In *Building a First Nations Health Authority in the Mushkegowuk Region* (Weeneebayko Health Ahtuskaywin 1995:11), such changes are optimistically expressed as providing "the opportunity to design a health care system in the Mushkegowuk Region which is neither federal or provincial in nature, but combines the best of both with the expressed needs and wants of the First Nations in the area". Affiliation with Queen's will remain the basis for physician provision and discussions are underway "geared to developing an affiliation agreement between the university and the Board" (Weeneebayko Health Ahtuskaywin 1995:5).

In Moosonee, a non-Native medical system developed in a similar fashion but much later than in Moose Factory. Although Revillon Freres set up a rival trading post across the river from Moose Factory in 1903, Moosonee did not really exist as a community until the arrival of the Temiskaming and Northern Ontario Railway in 1932. The Depression had affected trading companies and Cree alike; many individuals flocked to Moosonee from outlying areas with ambitions for wage employment initially in railway construction and later in freight industries and the construction of a radar base (Stephenson 1991:8-9). Employment ambitions were not realized for many, and a squalorous squatter community established itself on one side of Store Creek in the 50s and 60s. The circumstances of this

group of off-reserve status "Indians" was given wide press in southern Ontario (see Mortimore 1965a, 1965b; Bucksar 1968). On the opposite bank of Store Creek lived comparably affluent individuals—the transient, usually young professionals and entrepreneurs attracted to Moosonee's new identity as a government and commercial nexus (Blythe et al 1985:11).

As in Moose Factory, the transience and motivations of southerners living in Moosonee were considered problematic. Mortimore, writing for the *Globe and Mail*, had this to say about the lack of community investment exhibited by these "temporary residents":

Most Moosonee whites do nothing to harm the Indians—and nothing to help them...They are no better, and no worse, than any group of southern Canadians; and that is basically what they are—southern Canadians doing a spell of temporary duty in the north, working for the railway, the air line, the air force, the stores or the Government. They don't expect to be staying long; therefore few of them embark on a program of community service—except for the professional Government workers whose mission is to help the Indians. Many of these are enthusiastic, but they are handicapped by shortages of money, manpower and special training (Mortimore 1965b).

Southern service providers were redeemed by their professional responsibilities but were seen as contributing little beyond these employment obligations. It is certainly debatable whether the presence of any southerners in Moosonee was as benign as Mortimore intimates. Government aspirations were for the assimilation of Aboriginal people into mainstream society, and southern service providers saw themselves as tutors and caretakers, responsible for socializing the Indian in White norms (Dyck 1991).

This is surely evident in the early provision of health care in Moosonee. As the Anglican missionaries were the first to make a concerted attempt to provide health care for Cree in Moose Factory, so the Catholics were the first to do so across the river in the railway town of Moosonee. In 1942, Our Lady of the Assumption Hospital was founded by the Grey Nuns of the Cross. Soon after its inception the hospital was recognized by the provincial government as a private hospital and later the same year the Department of Indian

Affairs agreed to pay for Cree individuals who were hospitalized there (Paul-Emile 1952:227). A larger facility, containing 29 beds, was completed under the direction of the federal medical officer in 1944.

Superficially an altruistic enterprise, provision of health care by these nuns did have an ulterior motive. Of the hospital run by the same Order in Fort George was written: "the hospital, which was completed in 1951, was the pearl of the region. What alms, what work and savings had to be channeled to attain such results. Yet, not one conversion!" (Paul-Emile 1989:362). As food has been considered a way to win hearts, so the nuns believed offering health care was a way to win souls.

Assumption hospital, along with its fellow Catholic mission hospitals in Fort Albany and Attawapiskat, eventually became provincial facilities. When Moosonee's hospital burnt down in 1969, the province made plans to build a new hospital in this community and to integrate this re-built institution with the coastal hospitals.

Outcry from Moose Factory residents regarding the proposed hospital in Moosonee reached national media attention (Hodge 1970; West 1970). In letters to the editor of the *Globe*, two Moose Factory residents expressed the "irresponsibility" exhibited by the provincial Minister of Health who would build a new facility in Moosonee at the risk of rendering redundant the services of Moose Factory General—an institution which one writer claimed "provides nearly 200 of the 360 jobs available to residents in our community" (Hodge 1970). Stephen Lewis, the then-leader of the Ontario New Democratic Party, publicly aligned himself with Moose Factory in this issue, claiming that "plans to locate a provincial hospital at Moosonee are typical of Ontario government mishandling of the north" (*Globe and Mail* 1971). While the province attested that the hospital would only be a replacement for Assumption, it was easy to assume it would be bigger and better equipped than its predecessor.

When James Bay General Hospital Corporation was founded in 1972, its facilities

in Moosonee did not include a hospital. Instead, it provided an "ambulatory clinic" and pharmacy. Health related jobs in Moose Factory were safe. The Moosonee clinic, along with hospitals in Fort Albany and Attawapiskat transferred from Catholic responsibility to the province, continue today to be administered by the James Bay General Hospital Corporation. Ground-breaking for a new clinic in Moosonee had been slated for numerous springs and the anxiously awaited Moosonee Health Centre finally opened in 1994. It was disturbing to some that local, Cree input into the new facility appeared to be minimal (Ballard, personal communication 1993). This may not be the case in the future, however. As a result the health transfer initiative, discussions are on-going between the Regional Health Board and James Bay General regarding the possibilities for change, improvement and perhaps even amalgamation of services.

On paper, a regular rotation of physicians in Moosonee accompanied the founding of the James Bay General Hospital Corporation, but in reality the clinic has been difficult to staff—even given an attempt to coordinate physician provision through the Underserviced Area Program (JBGH Operational Plan 1995-6). Doctors fear the personal and professional isolation of working in a northern setting and, because they are on-call for 24 hours a day seven days a week during their one month stint in the community, they risk "burning out" (Al Czap personal communication 1992; Katie Normand personal communication 1992). The arrival of a permanent physician for Moosonee in 1992 was greatly anticipated by community residents, but this doctor finds periodic "locum" shortages are frustrating and greatly decrease the quality of service she can offer (The Freighter 1993:1).

Mental health services, long neglected in Moosonee and Moose Factory, were provided for the first time in 1989 by Alemotaetak, the James Bay Community Mental Health program. Funded by the Community Mental Health Branch of Ontario's Ministry of Health and administered by James Bay General, this program's head office is in Moosonee but branch offices are located in Fort Albany, Kashechewan and Attawapiskat. Its mandate

is to provide front-line mental health services to individuals 16 years of age and over. Alemotaetak, in connection with the University of Western Ontario's Extended Campus Program, has secured the services of two psychiatrists who visit the communities once a month. All the mental health workers, prior to 1994, were Cree. The recently hired mental health worker in Moosonee, however, is non-Native and currently the only Native person employed in the head office is the secretary. Discontent with the program—which was proposed as a Native-run mental health service and is supposed to be community oriented and culturally/linguistically sensitive—has been further exaggerated by feelings that a recently hired non-Native clinical director has qualifications matched by eligible local people (Wesley personal communication, 1995; LaFontaine personal communication, 1995).

Policing and other related services in Moosonee and Moose Factory

The RCMP had a detachment in Moose Factory between 1926 and 1977. Prior to this an officer was part of the official retinue surrounding the Indian Agent when he visited on Treaty day (Young 1988:20).

The "Mountie" is a colourful and romanticized character in the history of Canada's north, but the reality of his job may not have been so glamorous to one expecting scarlet uniforms and Indian wars. Much less a hero, the RCMP officer's presence in isolated communities was more a reminder that control over local affairs and power to enforce ideals of behaviour lay in the institutions of the south. As Pugh (204) states, police contact in Moose Factory was "important and significant in bringing to bear the White punitive force on those who have not moulded their character along lines desired by the White society". Locals remember the RCMP officer busting into homes to seize alcohol or destroy a home-made still. The officer's role also extended beyond law enforcement into coercing "appropriate" behaviour from reluctant local residents. His power to sway opinion was exploited at times by nurses who wanted to convince recalcitrant Cree to go to the hospital,

or give permission for their children to be admitted (Culver 1993:52).

In 1977 the RCMP detachment in Moose Factory was disbanded and the OPP moved its officers into the old RCMP building. Now the presence of the RCMP is limited to the much-mocked annual "Treaty Day" where an officer in scarlet witnesses the disbursement of 4 dollars to each Moose Factory First Nation member as compensation for rights surrendered in 1905 (Barnes 198:62).

As of April 1st 1994, policing services for Moose Factory, New Post and the coastal communities including Fort Severn became the responsibility of the Nishnawbe-Aski Police Service (NAPS). This transfer was executed through a tri-partite agreement between the federal and provincial governments and the Nishnawbe-Aski Nation. The goals of NAPS are

the establishment of a police service which will provide effective, efficient and culturally appropriate policing to the people in the Nishnawbe-Aski area. The police service will promote harmonious, healthy communities by keeping the peace, and protecting persons and property through crime prevention, community education and law enforcement (Solicitor General Canada 1994:3).

In Moose Factory, the Nishnawbe-Aski officers are individuals who were referred to as First Nations constables prior to the NAPS agreement. Employed by the OPP, First Nations constables received the same training as all other OPP officers but were not allowed transfers like regular officers. A 1990 report showed that 79% of all First Nations constables policed their home reserves (Indian and Northern Affairs Canada 1990:29). The program was designed in 1975 "to enhance policing services for Aboriginal communities in the province" with the understanding that First Nations communities would "assume responsibility for the program in the future" (Jarvis 1992:6-7). NAPS is the realization of this goal.

NAPS gives Aboriginal officers the authority to use cultural understanding as a tool in police work. As officers answerable to the OPP, First Nations constables felt uncomfortable with the suggestion that being Cree could be an asset. One officer from

Moose Factory stated:

We didn't do anything without the OPP being involved. They were sort of always holding our hand. We weren't allowed to use our skills and use our race to our advantage. You know, we're dealing with natives and we're native, and nine times out of ten that makes it a lot easier. It's different now. Now we're part of the community and I think that's the biggest change we've made here in policing (Moon 1994:A4).

While a First Nations constable, this officer felt subordinate to non-Native co-workers, forced to compensate for and suppress cultural difference. But that same officer, employed by NAPS, feels empowered because he is Cree and from the community.

In Moosonee, prior to the 1957 construction of an OPP detachment, anyone who required police assistance on the mainland had to call the RCMP in Moose Factory. During the community consultations for the Royal Commission on the Northern Environment in 1978, a complaint was levelled against OPP officers in Moosonee for "the way our Indian people are treated in the local jails". With no witnesses to these events, the respondent stated "it is the Indian's word against the OPP's", implying that public prejudice against the former and the authority of the latter encourage such abuse (RCNE 1978a:27).

Attempts have been made to improve the OPP's reputation in Aboriginal communities. In 1993, fifteen years after the Royal Commission complaint, a Native Outreach Officer/Investigator position was created through the Office of the Police Complaints Commissioner. The responsibility of this officer is to investigate complaints issued by Native people against municipal officers and the OPP. (Omushkego Arrow 1993). A cross-cultural seminar has been offered, since 1987, as in-service training available to members of the OPP to improve policing services provided to Aboriginal communities. (Jarvis 1992:43). Originally held at the Provincial Police Academy in Brampton, this seminar has been offered, since 1989, "at the regional level to facilitate the participation of Aboriginal communities" and invites the involvement of "Aboriginal consultants to act as resource persons and provide input into course content". The target population for this seminar is officers who have recently been transferred to detachments

with substantial Aboriginal populations.

Since Moosonee is not yet a municipality and is not considered a First Nations territory, its policing services remain under the jurisdiction of the OPP until such time as Nishnawbe-Aski Nation and the province agree that NAPS should police both Moosonee and Moose Factory.

The first court was held in Moose Factory in 1922 and subsequent to this a magistrate would arrive by plane once a year. Court is now held in Moosonee once a month. While most other individuals who are professionally involved in the legal system and must attend court reside in Moosonee or Moose Factory, the judge still flies into town.

An office of Ministry of Corrections was located in Moosonee by 1979. Prior to this, probation and parole were coordinated out of Timmins and a probation officer would make monthly visits to the communities. Currently, two probation officers are located in this main office—one responsible for the coastal communities and the other for both Moosonee and Moose Factory. Two probation officers also work out of Payukotayno—the region's child and family services organization—whose primary responsibilities are to provide supervision and counselling services to those subject to the Young Offenders Act.

The Moosonee Native Friendship Centre has provided Native court workers to the communities of Moosonee and Moose Factory and the coastal reserves since 1982. Prior to 1994, the case load of these two workers was divided into family court work and criminal court work. In 1994 the two were combined and the services of only one worker were retained because community legal workers employed by Nishnawbe-Aski Nation Legal Services undertook court work in the coastal communities. Thus it became unnecessary for two workers in Moosonee to handle the reduced case loads of only Moosonee and Moose Factory. Court workers are primarily responsible for ensuring that clients have legal representation and are well-informed, both of their rights and of court procedure and protocol.

Keewaytinook Legal Services is a legal aid clinic in Moosonee funded under the Ontario Legal Aid plan. The program has existed since 1981. Since that time it has handled close to 10,000 cases for residents of the James Bay communities. Its staff of four—two lawyers, a community legal worker and secretary—provide summary advice and referrals on all matters, but specifically handle cases for low income residents with "Native issues problems". Lawyers fly up the coast of James Bay to attend court in these communities; one day prior to court there is a mad rush to find one's client, learn the details of the case and develop a defense.

Child Welfare and Other Social Programs

Child welfare, prior to the late 1980s, was handled by North Cochrane and District Family Services. In 1970 this consisted of a biannual visit to Moosonee from an employee of the Kapuskasing office (Payukotayno Agency Summary:3). Later, this organization ran a satellite office in Moosonee which provided a children's mental health worker and offered group home facilities to adolescents in Moose Factory. The Children's Aid Society was an autonomous entity based in the same office and responsible for family crisis intervention, foster care and adoption (Blythe et al 1984:174).

The Moosonee office was difficult to staff because of "inadequate housing and financial compensations, difficult travel, loneliness and isolation and a fear of physical or emotional reprisal by clients" (RCNE 1978a:29). The financial burden staffing problems were placing on North Cochrane and District Family Services was the impetus for administrators to seek local answers to the problem—namely transferring responsibility for child welfare to a Native organization. However, community desire to seize control of imported Children's Aid Services—and all other Child Welfare services because of their association with the stigmatized CAS—was not rooted in fiscal concerns. Children were being stolen from their families and their communities by self-righteous agents of foreign institutions. As a social worker employed by the CAS in a community 60 miles south of

Moosonee stated:

The life of a foster child from a Native home is not always good. As well as leaving his parents, he must often leave his brothers and sisters, his school, his community, his language and his culture. We have children who have experienced as many as 12 foster homes in the first four years of life. When a Native child is placed in a white environment the trauma he experiences is beyond our understanding (RCNE 1978b:181).

Such realizations were made concrete to individual CAS employees by threats of violence from family members as well as generalized community distrust. Administrators were made aware of the problem with child welfare services by high staff turnover and public statements such as the one above, heard by the Royal Commission. These circumstances provided the impetus for community based family services, and Payukotayno—the James and Hudson's Bay Family Services organization—was born.

After 1984, Payukotayno slowly began to assume responsibility for children's services previously handled by other organizations. Through Payukotayno it was thought that Native people could take control of their own child welfare services, ensuring a culturally appropriate and community based approach to these sensitive issues. Various employees of Payukotayno are involved in prevention work, family and adolescent counselling and act as probation officers for young offenders. There remains a Children's Aid aspect to the organization but a 1992 Annual Meeting report stated "we are pleased that most of the children in care are located in the area. In addition, most of the children's legal status are under Temporary Care Agreements and this reflects on our staff's commitment to provide service which is as least intrusive as possible" (Payukotayno 1992).

The head office of Payukotayno is located in Moosonee. While there are local workers in coastal communities who deal with emergencies and provide generalized services, teams of workers from the head office fly up the coast on a regular basis.

Other provincially funded social services in Moosonee include the Association for Community Living and Omushkegiskwew House. The former has operated a workshop in Moosonee since 1980 which employs developmentally challenged adults from the area

constructing and selling items of use in the community and running a bottle return service. Since 1990 the Association for Community Living has offered a residential group home for developmentally challenged adults. In the past, handicapped family members were removed from their homes and institutionalized in the south. Families were not informed of their options, or told they could visit institutionalized children, so they were left with feelings of guilt, loss and bitterness towards the authorities which seized their child (Sutherland personal communication, 1992). Because of this policy of removal from family and community, local residents have little experience with the developmentally challenged and are therefore suspicious—both of the handicapped individual and of the organization which assists him or her (Uiselt personal communication, 1993).

Omushkegiskwew House—the Moosonee Family Resource Centre—is a shelter for abused women which was built in 1984. Like so many government offices and service agencies, it is located in Moosonee but also serves Moose Factory and all of the coastal reserves. The program is administered by the Moosonee Development Area Board—the community organization which functions in lieu of a municipal body—because it was the board which applied for funding through the Ministry of Community and Social Services. Rumblings in the community are that the Development Area Board should transfer responsibility for operating the shelter to a more appropriate, perhaps Native-run organization like the First Nation or Payukotayno.

June 1994 marked the first intake of clients at Moosonee's new residential treatment centre—Sagashtawao Healing Lodge. The centre offers a six week training program for those with alcohol problems and offers participants the option of building on the traditional lifestyle of the Cree.

Several counselling programs exist in Moose Factory. Keewaytinook Alcohol Abuse Program, founded in 1980, is administered by Moose Cree First Nation but its services are available to residents of both Moose Factory and Moosonee. Its employees are

NNADAP workers— individuals hired under the National Native Alcohol and Drug Abuse Program which was established in 1975 "to facilitate the emergence of community involvement in health against the backdrop of an externally imposed, treatment-oriented primary health care system unable to measure, interpret or prevent alcoholism" (Young and Smith 1992:15). Also provided by the First Nation are an adolescent and family counsellor. In order to validate the contributions of the adolescent counsellor whose work is largely made redundant by counsellors employed by Moose Cree Education Authority, plans are underway to give this position the title of mental health worker qualified to serve adult clientele.

Service Provider Networks and Committees

In Moosonee, service providers from separate but related organizations share resources and overcome organizational boundaries through a number of local committees. The Women's Issues Committee has members from various organizations and holds regular public forums on topics of interest to the community. The Natumakawin Child Abuse Committee, whose goal is to reduce the incidence of child abuse through public awareness and education, was an initiative arising from Payukotayno but its membership is comprised of various service agencies in both Moosonee and Moose Factory. Another committee focuses on pooling training dollars and coordinating in-services and workshops which can benefit employees of different organizations.

Since 1992, Moose Factory's service providers have been connected through an inter-agency committee. Priorities of this committee include case-conferencing between different agencies which serve the same clientele and providing a sense of community and support among service providers. Some service providers from Moosonee irregularly attend these meetings, but they would rather Moosonee have an inter-agency committee of its own.

Conclusions

This overview of service provision in Moosonee and Moose Factory offers much in the way of context to the discussion of stress and coping which follows. It underscores the increasingly prominent role played by service providers and their employing institutions in Moosonee and Moose Factory. It also offers a history of the southerner's role in these communities, demonstrating a trend toward transience and documenting the negative reaction of local residents to this southern presence. Yet southerners, at least for a while, appear to be necessary even in a north which wishes to establish its independence from colonial authority. Northern institutions continue to be forced to forge connections with southern institutions, especially academic ones, in order to staff their operations. What becomes obvious, too, is the ironic position of Moosonee and Moose Factory as regards a colonial model of service provision. Being part of the "middle north", residents of these communities resent being "serviced" by the south. At the same time, however, they are home to numerous head offices which in their turn "service" communities further north.

A history of service provision also blatantly shows that "transfer", as a concept, is not novel in these northern communities. Church-run health care facilities were transferred to the government; policing was transferred from the RCMP to the OPP. Even within the federal government, the department responsible for "Indian affairs" has been juggled and splintered. Thus current transfers of services from government to First Nation control—although they differ fundamentally from past transfers in motivation and result—should not be seen as an uncalled-for anomaly but as part of a process of change which has historic precedent. The Regional Health Board and NAPS transfer initiatives have taken place subsequent to my research, yet a discussion of these changes offers the reader a future context in which to place present reading and emphasizes that service organizations in Moosonee and Moose Factory are not static. The evolution of service provision has been from white staff in white institutions to Native staff in, if not Native institutions, at least

Native-controlled institutions.

This evolution must be seen in the context of Health and Welfare's 1986 position paper *Achieving Health for all: A Framework for Health Promotion*. This paper advocates community empowerment in health care and defines health as a "resource which gives people the ability to manage and even to change their surroundings. This view of health recognizes freedom of choice and emphasizes the role of individuals and communities in defining what health means to them" (Epp 1986:3). Recent emphasis on Aboriginal people as service providers—through initiatives like the CHR, NNADAP and First Nations constable programs—can be seen as attempts to increase community involvement in service provision. Transfer initiatives ensure Aboriginal people have the power to define health and its institutions as they see fit. However, a history of service provision in the area shows that this is a radical change from what local residents have come to consider the norm. Suddenly, after decades of non-Native authority and expertise and minimal community input into service provision, local people are being told to define health for themselves. Service providers, politicians and administrators may enthusiastically embrace transfer initiatives, traditional healing, and community participation in health care. But they may be leaving behind their fellow residents who are less politically aware and active, who are suspicious of traditional healing, who have come to associate service provision with non-Natives and not their own people. This could well contribute to an initial disrespect of local service providers and lack of support for community initiatives.

CHAPTER THREE: THE SOUTHERN EXPERIENCE OF STRESS

The stresses of being from the south have much to do with being a newcomer who has not yet spent enough time in these northern communities to accept and even embrace a different way of living and working. The overall sense one gets from these southerners is that their experience of Moosonee and Moose Factory is as an outsider looking in at a community which has been and will continue to be unchanged by their presence.

Problems encountered when attempting to integrate with the larger community are described as stressful. Local people do not actively seek out friendships with southerners, being reluctant to approach strangers. And other service providers from the south are similarly hesitant, having learned that initiating close friendships with newcomers is risky and often painful because most new arrivals leave after one or two years. Participating in social activities is hindered by a class-oriented difference in preferred forms of recreation, and by the tendency for southern service providers to be seen in their professional role after hours and on weekends.

Encountering a different way of looking at the world is yet another stress the recently arrived southerner experiences. This "cultural difference" affects the service provider both personally, in terms of feeling comfortable in the community, and professionally, in his or her relations with clients. Newcomers realize quickly that clients or patients are not responsive or cooperative. An expectation of eager participation in programs or punctual attendance at appointments is quickly abandoned.

This situation evolves into the stressful realization that the service provider is powerless to effect change in his or her clients and in the larger community. Those who came north to help or make a difference may feel incompetent and disillusioned. Realizing it is not their place to force change further emphasizes their outsider status.

Prejudice about being White or being a southern professional is an additional stress,

and one which again reminds the service provider he or she does not fit in and is not appreciated. This is likely the first time the southerner has experienced being a member of a mistreated minority; sensitivity to prejudice is especially exemplified by the anger of southern service providers towards those who come north to make money and leave without contributing to the community.

Further professional concerns focus on degradation of skills and limited opportunity for advancement. Such circumstances create a contradictory and ambivalent position for the southerner who feels pressured to return south to advance his or her career, but at the same time feels less capable of beating out the urban, southern competition.

On the Outside Looking In: Difficulty Integrating

What was once a "blip on the map"—as one southerner described his prior knowledge of Moosonee—becomes progressively more real, first as the plane circles over Moose Factory (James Bay is a glint on the horizon and cookie-cutter islands rise from the winding Moose river), then at the airport in Moosonee as you collect your bags with the other passengers (all who seem to know each other, smoking and talking together outside as they wait for taxis) and finally when you arrive at your new home, unpack, and maybe meet your neighbours. All the time you feel polite, but curious, eyes on you, the new face in town. Weeks go by; you settle into your new job. Slowly you meet people, but locals are quiet and respond with reserve to friendly overtures. Employees in your organization and other southerners in the community seem superficially affable but you sense a cool core to their warm approach.

This reaction, this social impenetrability, poses a problem for many service providers from the south. While most of those to whom I spoke came to Moosonee or Moose Factory primarily for professional purposes—having applied for and accepted a job in the community while living elsewhere—the quality of social relations and a sense that one 'fit in' remains important. The fact that they experience difficulty integrating and that

this is a source of stress for many belies the connection between personal and professional life for these people. They have re-located to a community where they lack social supports and are unfamiliar with the culture. To cope with this they reach out, but the community is largely unresponsive.

Paul, a program director, may have claimed he "wasn't really expecting that much" when he arrived in Moosonee. But he must have had some expectations of the people because he expresses surprise at the reluctance of Native residents to open up to newcomers. He admitted:

"I wasn't expecting everybody to be so withdrawn and shy and wary of strangers, as generally people are up here. It took a while to build up friendships and relationships".

Donald is a Native man from Sarnia working as an alcohol counsellor in Moosonee. He tells of his realization that his relations with community members are superficial, having initially thought the residents were jovial and friendly. As someone who has travelled much and met people with ease in a variety of places, this is difficult for him.

"The people up here, I don't find them as friendly as other places. I've lived in a lot of places—in Timmins, in Sarnia, in Windsor, in London, in Montreal, in Detroit, in Calgary—and I just find the people up here very hard to get to know. I don't usually have a hard time getting to know people. I've got along great with people in the other communities I've mentioned, and I've been able to make friends in all the communities I've mentioned, but boy, I've had a hard time making friends up here...When I first moved up here I was talking to my daughters and I said, 'the people up here are very friendly, and they laugh and they joke' but since that time, it's been very hard to get to know people. It's all just surface, now. I've never had a problem in my life getting to know people, as long as I've stayed sober, and I have a hard time up here".

Dora, a public health nurse in Moosonee and long-time resident, explains her initial discomfort with the tendency of local residents to avoid small talk. Until she knew the community better, she interpreted this social silence as the result of something she did to offend.

"I found if you go downtown and people don't always speak to you, don't say, 'What have I done today?' That's just the way they are. Today they're not speaking to anybody. That used to *really* bother me on a personal level, to go downtown and the people who spoke to me yesterday wouldn't speak to me today. I used to ask my husband, 'what's wrong with me today?'"

What Paul, Donald and Dora are reacting to is a cultural difference in the way Cree people approach strangers, and often, each other. The norms of reticence and non-interference (R.Preston 1976; Brant 1979:6) set the tone and timbre of interpersonal contact. Cree individuals are often described as "shy" and they value silence. Thus a southerner expecting immediate acceptance or small talk on the street will have some uncomfortable initial experiences. Of course, there is always individual variation, and some Cree community members are outgoing and ebullient. But the overall sense a newcomer receives from the community is a neutral curiosity and not-unkind desire to maintain distance.

A discussion of reticence should not imply a hostile or dour approach to newcomers. As Donald's excerpt indicates, local residents may be friendly and joke with strangers. Yet this is interpreted as merely "surface", perhaps because the newcomer does not understand the importance of humour and teasing in Cree communication, and expects intimacy to correspond with the southerner's previous experience of it. Certainly an intimate relationship is possible between those from the south and local residents, but the newcomer must be patient. As Paul notes, it takes "a while to build up friendships and relationships". A period of trust-building is necessary, during which time the southerner familiarizes him or herself with a new culture and the local resident familiarizes him or herself with the newcomer. But for impatient southerners, whose experience has been of rapid acceptance in a new place and of quickly intensifying relationships, this so-called superficiality is a shock and may deter further attempts to integrate.

But it is not only the Cree residents who are reluctant to be-friend newcomers. Service providers from the south who have lived in Moosonee or Moose Factory for longer periods of time may seem outwardly friendly but will keep a newly arrived co-worker or neighbour at a safe distance. Adam revealed with some regret:

"I've had many people express, even the White people that stay here a long time, that I'm only here for a year so there's no sense in getting close because everybody comes and goes too fast. It's too hard to get close cause it's too emotionally upsetting to have friends leave".

Adam's co-workers, many of whom are also from the south, guard themselves against the woo and lure of transients. Because of the small size of the communities and the even smaller population of southern service providers, friendships have the potential to develop with fevered intensity. You meet newcomers in the grocery store, on the street, at parties or dances, invite them to your home for dinner, go visiting at their homes; you likely even work with them. Because the community is unfamiliar and perhaps even threatening to the newcomer, he or she will avidly approach others from the south, desiring an island of familiarity in a sea of difference. But those who have been in the community longer than one or two years have seen people come and go with such alarming regularity, it is assumed that a newly arrived southerner is yet another fly-by-night whose allegiance and connections will remain elsewhere. The pain of losing a friend is a good teacher, and longer term residents of Moosonee and Moose Factory develop a fatalistic attitude about newcomers, approaching them with caution. They do not want the responsibility of mentoring or socializing the newcomer to life in the community, only to have such emotional investment reciprocated with a premature retreat home. Mary, a resident in Moosonee for decades, acknowledges this.

"It was painful for us in our younger years, we were always losing friends, but a very wise Hudson's Bay manager's wife told me that the thing to do was not to get too close to people...It is painful to keep losing good friends, so maybe over time we just don't make friends with the transients".

Anne's story provides a concrete example of such loss. She speaks about the stress she experienced over a friendship stunted and abandoned because the woman involved left after only a year.

"It was so painful because you could just see this friendship that really needed to go somewhere, and it was just getting off on its feet and I remember watching her airplane leave with tears streaming down my face".

Anne has now initiated a friendship with a new nurse at the clinic in Moosonee but is approaching this relationship with trepidation, fearing this woman, too, will leave. "I told her about watching this girlfriend leave on the airplane," Anne continued, "and I said, 'I

don't want you to leave on the airplane, sniff' and all the tears came back". Was this a veiled warning to the newcomer, a request that Anne's invitation to intimacy be politely refused if the nurse was not going to stay long? Certainly it is an example of the motto which long term residents apply to newcomers: once burned, twice shy.

Longer term residents originally from the south, like Mary, distinguish between themselves and those recent arrivals they label "transients". Transients are regarded with suspicion until they have passed the test of time, proving that their stay will extend beyond the typical one or two years. But what is a coping strategy for local people and other southerners—reluctance to befriend transients—results in frustration and stress for those who are only in the community a short time, or those who plan to stay longer but have only just arrived. Because of the alien-ness of the community and the experience of culture shock—a topic which will be discussed in detail in the following section—the new service provider may reach out desperately to others in the same position for reassurance and the touch of something familiar. To have this request for aid brushed off with kind words but no real feeling would add considerably to the stress of early months and perhaps even years. Social support—usually defined as "the emotional support, advice, guidance and appraisal, as well as the material aid and services that people obtain from their social relationships" (Ell 1984:134)—has been linked in psychological studies with mental and physical health. Specific to the situation of newly arrived southerners are the results which claim social support increases self-confidence, realistic appraisal of threat and coping repertory (Sarason et al 1995:164-5). Many of the southerners interviewed, particularly those who arrived in the north without partner or children, appear to lack this source of social support. Thus they risk feeling intensely threatened and incapacitated by novel circumstances because of loneliness and social isolation.

As part of the process of adjustment to the particulars of life in Moosonee and Moose Factory, this strategy—once considered a barrier to integration and the cause of

many lonely nights at home—is in turn at least understood, if not adopted, by southern service providers if they stay longer than the standard one or two years. This establishes a vicious circle where those once-new are socialized to be hesitant about newcomers. In this way, newcomers are never given the sensitive orientation, the reassuring touch of the familiar for which they reach out during their initial weeks or months. As a result, each new contingent of service providers will feel outside of any social circle and many may leave the community, the problem of turnover due to lack of social supports never to be solved.

Community integration is hindered by more than cultural difference between southerners and locals, and the coping strategies of longer term southerners. These problems seem to be compounded by the class difference that exists between some southern service providers and other people, both Native and non-Native, who live in Moosonee and Moose Factory. Service providers from southern, urban locales tend to be middle class, and have middle class attitudes towards such things as drinking and smoking and participating in sports—whether it be actively by joining recreational athletic groups or vicariously by becoming a spectator. Northern communities, by contrast, are peopled typically by smokers, drinkers and those who have active, outdoor-oriented lifestyles. This impedes the integration of many service providers into community life. They can sit at home, alone, and read. Indeed, this is how some cope with their lack of interest in the community activities offered, and this will be discussed later in a chapter dealing specifically with coping. But many do not enjoy this self-imposed isolation and would like to participate in group activities and make friends with local people.

There is less tension and distress between Native and non-Native individuals in circumstances where "the atmosphere of power and authority" which usually characterizes relations between these groups is absent (Brant 1979:14). Given that service providers from the south have been indoctrinated into the school of professional-as-expert by

mainstream society, work place encounters between southern service providers and Cree clientele cannot help but be heavy with this atmosphere. But in an arena or on a baseball diamond it is easier for everyone to breathe freely. Social activities, especially ones which do not involve substantial organization (since non-Native residents tend to fill these positions, thereby re-establishing work place hierarchies in social settings) are places for interaction based on equality (Blythe et al 1985:106). Thus it is reasonable that those attempting to integrate with the larger community will have an interest in recreation, and will be disappointed when they find these activities not to their liking.

Anne, a physician who has lived in Moosonee for 6 years, explains her experience of community life.

"There is very little social life here as yet, and it takes a while to find your niche. Most people assume I'm too busy for a 'social' life. Also, I don't drink or smoke and don't care to be around smokers or intoxicated people, and this is well-known".

The issue isn't, really, that there is "little social life" in Moosonee. What Anne is saying is that the social life that exists—community dances where alcohol is served and private parties—is not one she relishes participating in.

Sarah, a physician in Moose Factory, reveals the difficulty she has experienced "finding her niche".

"If you play sports, then it's a lot easier. Sports, that's about it. If you do curling and play baseball, then there's some medium to get into that community. But there's no neighbourhood interaction with people which makes it difficult".

Sarah is frustrated by the lack of informal contacts between southerners and locals in Moose Factory. She longs for a heterogeneous neighbourhood composed of both southerners and local people, instead of the homogeneous southerner population among which she currently lives. In such a neighbourhood, unstructured and un-sports-oriented interaction could occur, offering southern residents an alternative to curling and baseball where interaction is forced, intermittent and seasonal.

Sarah's co-worker at the hospital, Adam, laments a similar situation. He

acknowledges that recreational activities are a way to make community connections, and would be prepared to do so, but blames the quality and number of these opportunities for his lack of participation.

"In Moose Factory, recreational opportunities are very poor. You've got curling, some skating, but that's about it. It's too damn cold even to skidoo much and so there isn't a lot of recreation. And the parties that are down at the Complex [the arena], for me personally, they're too noisy and too smokey. Being a non-smoker in that community is difficult".

And Mike, an ambulance attendant, tells of his frustration at the easy answer alcohol provides to the question "what do you want to do tonight?".

"The only problem is to try and get friends, too, who don't centre all their social activities around alcohol. Here it's, 'I've got a bottle, what do you want to do tonight?' Well, you've already decided what we're going to do. Everything seems to centre around that here, I find. It's very rare to get a couple of guys sitting around, watching a movie, drinking coffee or pop. Very rare".

Not finding an appealing avenue by which to enter community life means these service providers feel on the outside, their non-smoking, non-drinking, non-athletic attitudes symbolizing their stranger-status. It is easy to think of difference only in terms of the Cree. But what becomes obvious is that it is the southern service provider who is 'different' from the norm of the north. Social activities were in place prior to their arrival and will continue to exist after they are gone. Thus the responsibility to integrate lies with the southerners themselves. They must either fit themselves into existing patterns and methods of interaction or create new ones, often by networking with other southerners with similar interests. But as was previously discussed, other southerners may hesitate to "get to know" newcomers, so this option may not be viable until one has demonstrated a time commitment to Moosonee or Moose Factory longer than one or two years.

Simply being a professional in a small community can make integration difficult. While this holds true for both local and southern service providers, local people have families in the community and a history with residents that transcends their job. This does not always make life easier, as shall be seen in a later chapter. But it does accord them

support and contacts beyond their place of work, and a context beyond simply being "the mental health worker" or "the alcohol abuse counsellor". It is the local service provider *as a person* which seems to have more importance than the professional role he or she fills. But service providers from the south do not have a community context beyond their professional work. Those I spoke with were usually single when they arrived, and if they had a partner, only in very rare instances did family contacts extend beyond nuclear numbers. Since people are slow to open up, the newcomer cannot immediately be identified with a circle of friends. Thus it is the newcomer's profession which gives him or her meaning in the community, and it is easiest for him or her to be identified as "so-and-so the lawyer" or "the doctor". A statement by "Lisa the lawyer" concretely illustrates this phenomenon.

"In this town, you are what you do, very much. My last name here is 'the lawyer'. People do not know my last name. If I phone and say, 'Lisa Webber,' they go, 'who's that?' so I have to say, 'the lawyer'".

The tendency of local residents to label southerners in this way is likely compounded by the history of transience of southern personnel in these northern communities. Southern service providers are rarely in Moosonee or Moose Factory long enough for them to become known socially and for their names—especially last names—to be recognized in the larger community. The high turnover of southern staff means that it is the positions—of lawyer, doctor, nurse—which remain constant while the individuals who fill these positions are in a continual state of flux. Affixing a professional label to a southern service provider enables him or her to be understood within the community context.

O'Neil (1988:35) suggests that this labelling results in "surprise and hurt" for those professionals who "have gone north instilled with egalitarian ideals and cross-cultural interests". Having one's identity encapsulated as "the doctor" or "the nurse" means being regarded in a conservative and even stereotypical manner—replete with implications of

hierarchy and authority—which younger, 'progressive' professionals may be uncomfortable with. While the southerners I interviewed are certainly preoccupied with and sometimes frustrated by being labelled according to professional role, O'Neil's interpretation seems to apply only indirectly. For those I spoke with, concern is less with the obstacle professional labels present to maintaining egalitarian community relationships and more with the fact that in a small community it is impossible to peel off these labels after 5 pm. Authority during the work day is not seen as problematic, but being seen in an authority role when the work day is over places resented restrictions on the southern service provider's behaviour.

Because "Lisa the lawyer" is known this way, and lives in a small town and works on small reserves up the coast of James Bay, it becomes very difficult for her to have a personal life safe from prying eyes. Her actions when she is off work become equated with her role on the job and she is judged accordingly. She stated with resigned humour:

"It is a small town and there is no privacy here, but once you accept that, then you're fine. That I think was stressful, that your life is an open book and there's this aura that you're supposed to exude. I remember I went to the Kashtin concert and a lot of people from Fort Albany attended and I went with them and I had two beers over the course of the evening and every person from Fort Albany and Kash [Kashechewan] said, 'Lisa, you're drunk'. But I just thought of the lawyers that live in Toronto that are the biggest piss-tanks in the world".

Lisa, unlike Anne, Adam and Mike, is not averse to attending community functions or drinking. Yet her willingness to engage in established forms of community interaction is not necessarily supported by local residents. Some community members are averse to her participating; they feel that as a professional "there's this aura that you're supposed to exude" which precludes drinking even moderately. Lisa finds herself in a double bind, where attempts to make social connections with the larger community are undone by beliefs regarding behaviour appropriate for professionals.

What comes to Lisa's mind when faced by this restriction on freedom and exaggeration of inebriation is the anonymity accorded a lawyer whose practice is in a large

urban centre. A professional in Toronto can be a model of sobriety and sanctimoniousness from 9 till 5 and undergo a striking metamorphosis when the suit comes off at home. No one in Moosonee or Moose Factory wears a suit to work. Likewise, no one in Moosonee or Moose Factory has the luxury of changing their persona from professional to personal when they get home.

Margaret is the director of the mental health program in Moosonee. She values her professional reputation and sees her actions while away from work as having the potential to reflect badly on both her at-work persona and the organization that employs her.

"A friend of mine wants me to host *his* party at *my* house and I don't think it's a good idea because I had a couple of people over last week and having too many parties isn't good, you know, for your reputation. Gossip is bad enough without people seeing lots of friends coming and going from your house, and it could affect their respect for me as a director and how the program is seen".

Such sensitivity to how others perceive one's behaviour is not limited to southern service providers, as will be discussed in the next chapter. The expectation that those in positions of responsibility will act as role models is common in these communities, and affects both southern and local service providers to varying degrees. Southern residents often socialize in cliques composed of co-workers originally from the south, so their actions are not always open to the scrutiny of locals, except via hearsay. But individuals like Margaret, who have lived in Moosonee for more than a decade, tend to have a wider circle of friends which includes local residents. And because they are well-known in the community, these longer-term residents are held to a different standard than "transients" whose relative anonymity gives them a measure of protection from prying eyes.

David is an OPP officer in Moosonee, and his experience is yet another example of how service providers from the south are defined by their occupation. Although he doesn't talk specifically about his professional role interfering with his social calendar, his awareness that community expectations are that he will act in a professional capacity, whether on-duty or not, decrease his chances of integrating in the community. One can

imagine David going to a neighbourhood party only to break it up.

"When you come into this community, you're literally parachuted in here and everybody knows who you are, that's the thing. Especially if there's a new cop in town, *everybody* knows who you are. They know your vehicle, they know your wife, they know where you live, they know your dog...When I lived in Hamilton, I was just another face in the crowd. That's nice in some ways. If I was off-duty, walking down the street *here* and there was a problem, and I didn't do something, everybody's watching you. 'Oh there's so-and-so'. They all know who I am, so there's a little bit of a problem there. They have an expectation. If there's a disturbance outside the grocery store, and I'm in the grocery store and I don't do anything, what are they going to think of me? That's happened once, and it's just a matter of shoos them away".

David cannot just be an ordinary community member, apart from his being "a cop". Because he is considered to be in uniform even when he is in civilian clothes, his potential to interact with local residents as equals is severely restricted. Thus it is not surprising he confesses that almost all of his socializing is with the families of other police officers. Southerners like David feel forced into what others have termed a "fortress mentality", withdrawing into a closed circle of co-workers because it is only within this circle that they can abandon their professional personas. While being a service provider is necessarily an important aspect of a southerner's identity, it does not encapsulate his or her entire being, and the understanding that one is a lawyer, program director or police officer before one is a human being unfairly denies these individuals the wholeness necessary to fully integrate as community members.

So far it seems that these service providers feel scrutinized, unfairly monitored and judged, maligned victims of the game 'broken telephone'. They are personifications of their job, hence their desire to feel part of the larger community is quenched, their attempts to integrate thwarted. Having a beer or hosting a party become momentous actions, if not much deliberated and carefully planned. But not all people feel so beset by obstacles, lament so volubly their identification with their job. Paula, the librarian at Northern College in Moosonee, shows how 'being your job' can give a service provider easy access to community contacts instead of being an impediment to integrating.

"I have to laugh, because wherever I go up here, I'm identified as 'the

librarian'. It makes me smile, to me it's kind of funny—'there goes Paula, she's the librarian'. I remember when I first came up here. Of course, I knew no one, I came up here by myself, and I would walk to the bank, or I would walk to the Post Office, and it seemed like everyone knew my name...and I finally got to the point where I asked someone, 'how come everybody knows who I am?' and they said 'you're a new face in town and new faces stand out, so they know that you're Paula and you work at Northern College—that's your job'. I all of a sudden felt like I was part of a family up here and that's really how I identify Moosonee as a community—you feel like you're part of a family and that's a nice feeling to know that in a community that you're working in, that you're accepted. And that part alone takes away a lot of stress because I find that I've done work on specific community projects—someone will come in and say 'we're looking at doing a new program for the kids on drugs and alcohol' and of course the library is a place where they will come right away to look for information on what we have on video, to see what's available in the literature, so I find out about all the new things that are going on. The Healing Lodge, it was really nice to meet all the people who are working there because they are going to be using a lot of our resources. And it's a bonus for me, I find, at times at the public library because I meet all the new families in town—they come in and register at the public library. And it's nice to know, I mean we've got the public school on one end, and the separate school on the other end of the College, so I meet all the new teachers in the Fall, because they'll all come in. It's nice to get to know the new faces every year".

Paula sees herself as a resource and identifies her place of work as the centre of many community initiatives. This gives her a sense of belonging and acceptance—she terms it feeling "part of a family". Part of this is assuredly because of Paula's background and place of employment. Having grown up on a reserve in southern Ontario means she would be very familiar with small towns and the 'moccasin telegraph', thus these would not be a shock to her. And being Native herself may mean that local residents feel more comfortable with her. Working for Northern College does not require her to assume an authoritative role or take responsibility for the mental, emotional or physical well-being of community members. Her interaction with people who need help is not on the level of client and professional, or patient and professional. And working in the town of Moosonee versus the highly charged political climate of the reserve on the island certainly makes a difference to one's capacity to integrate.

For example, I spoke with Adam, a physician at the hospital, shortly before he left Moose Factory. I commented on the separation between where the southern service

providers live at one end of the island, on federal land near the hospital, and where the rest of the community lives, in the 'village', on the reserve. To me, this becomes a physical expression of the differences between local people and those who come to Moose Factory to provide a service, and symbolizes the barriers that exist to integration. "We are separate", Adam admitted. He continued,

"We're separate culturally, we're separate financially and we're separate in that many of us do just work one year...My wife taught skating, so she got in with the group that was into skating, plus she did home care nursing, so she ended up knowing a lot of the Elders. So she actually in some ways integrated better than me because I was in the hospital. I saw the patients and we had that relationship, doctor-patient, and in the hospital I had a doctor-nurse relationship, and my six year old played ankle-biter hockey, so I saw some people that way through coaching, but I don't think I made any real close Native friends. Just because I didn't have that kind of contact, and there didn't seem to be any mechanism to do that. Partly it was because I was busy doing my hospital stuff, and I was focused in on my own family. Those were the important things in my life. And also because of this distance, whether it be physical because of where we live, and also the psychological, cultural difference, there wasn't the intermingling of ideas or parties".

Adam acknowledges that cultural difference is a barrier to developing friendships with local people. But he also points out that his profession sets up a relationship—doctor-patient—which excludes the possibility of companionship. Helping professionals are accorded, hypothetically at least, an authority and respect that makes relationships with patients or clients based on equality a near impossibility in any community. In Cree communities, respect is not necessarily automatically accorded based on credentials. Trust is a key element of respect, and trust comes only with time and concrete evidence of worthiness, not with diplomas and degrees. Yet even if a doctor in Moose Factory is not regarded with the reverence and esteem immediately offered to one in southern practice, certainly there are differences between the physician and local residents that are difficult for both parties to overlook.

These communities have endured a long history of southern interference, during which time indigenous ways of educating children and coping with the errant or ill have been replaced by imported, culturally inappropriate institutions and agencies. Domination

by the outside has left some people feeling reliant on outsiders, and others feeling resentful of the outsider's seemingly irrelevant presence. The newly arrived service provider has not contributed to this situation—yet. But his or her presence is not neutral or benign. It is loaded with historical significance, and he or she does not step off the plane as an individual but rather as a representative of a foreign institution and culture. Perhaps this is where O'Neil's earlier statements regarding sensitivity to labelling do have relevance. Southern service providers who are referred to as "the doctor" or "the nurse"—terms which have more negative connotations than positive for local residents (O'Neil 1988:35)—are forced to recognize the similarities between themselves and their predecessors, are forced to see themselves as implicated in a legacy of colonial interference.

Given this combination of circumstances, it is not surprising that Adam finds he has not made "any real close Native friends" at the end of his short stay.

Cultural Difference

"It takes a lot of guts [to come here]. If you've never been subjected to this type of climate, atmosphere, culture, that takes a lot of guts, I think. It's like moving to Tibet, you know?"

For the southern service provider, part of the unfamiliarity of Moosonee and Moose Factory is the novel experience of small town living. The majority of southerners with whom I spoke had previously lived principally in large urban centres. While an urban environment is itself not homogeneous, its heterogeneity is somewhat controllable. A person can choose what 'kinds' of people he or she will associate with by living in a particular area, shopping at a particular grocery store. Even if a service provider deals with those different from him or herself in a professional capacity, he or she need not confront this difference outside the office. In a small town, especially one which has residents from diverse backgrounds, the variety of people the newcomer will encounter daily in his or her personal life is bound to be disorienting and stressful. This is exaggerated by the lack of

privacy and loss of anonymity which is an unavoidable part of small town life.

But the above excerpt equates a move to Moose Factory with a move to Tibet. This implies that there is a foreign quality about living in this community that simply moving to a small town in south-western Ontario would not have. Small town stresses are compounded by immersion in a different culture, because Moosonee and Moose Factory are largely Cree communities. This cultural difference is partly due to "Cree-ness"—reticence, reluctance to make eye contact and culturally specific use of humour, for example. But there is no pristine Cree culture, and the new service provider will find him or herself tangled in the complicated and often disturbing present-day results of historical interaction between Cree and non-Native explorers, traders, missionaries, police and other professionals. Anne explains with sadness her experience of Moosonee:

"We've got 80% unemployment here and dispossessed people because it's not even a reserve, nothing cohesive, nothing to feel proud about, and the men here have *nothing*. There's the few that do taxiing but that's about it. The women are the only ones that have much in the way of jobs, and they're not valued in their jobs, they're not valued in their home life. In a lot of ways it's a very sick community. The spirit of the community hurts, though it's struggling to pull itself together".

What Anne is describing is not merely "cultural difference". It is a legacy of loss and pain that has been passed down through the generations of Cree people living in Moosonee and Moose Factory since contact over 300 years ago. When Dora talks about her confusion at the reluctance of Cree visitors to remove their heavy coats once indoors during the 1970s, she is remembering cultural difference. "They'd perspire and look uncomfortable", she recalled with a smile. "I couldn't understand this. Then someone told me, 'well, it's a sign they're not comfortable yet'. They don't take their coat off until they're ready. Us, we take them off just out of politeness". But Anne's description of Moosonee and many of the quotations that follow aren't necessarily so easily understood in terms of *cultural* difference. Certainly they are about difference. But is unemployment, lack of respect for self and others, alcoholism and a sick spirit, cultural?

The phrase "cultural difference" denies that cross-cultural contact is an interaction and that there are at least two parties involved which mutually influence the outcome. One party is not 'normal' and the other 'different', although in the excerpts from interviews with southern service providers which follow, this is often what is assumed by the interviewee. Attributing difference to culture implies that no one else but the members of 'the other' group can be held responsible for misunderstanding, aberrant behaviour, failure to connect. "Cultural difference" is a phrase which makes it easy to distance oneself, makes it easy to blame the victim.

I understand most of what is said in the following passages to be as much historical as cultural, to involve outsiders as much as it involves the Cree. But many of those interviewed from the south do not put their experience in such a context. Because these southerners live in Cree communities and their clients or patients are Cree, they see the difference as cultural and only rarely realize that their involvement or understanding of the situation has important ramifications.

Much of the stress experienced when southern service providers relocate to Moosonee and Moose Factory could be typified as 'culture shock'. A single definition of culture shock has not been established, and some researchers believe the term to have more meaning in lay understanding than in rigorous psychological research (Furnham and Bochner 1986:47). Yet the idea that individuals faced with an unfamiliar cultural environment experience considerable stress because familiar ways of conceptualizing their role and relation to others are no longer applicable is certainly of relevance here. A newcomer may initially feel "enchanted" and "fascinated" by cultural difference. But this "honeymoon stage" soon gives way to feelings of inadequacy, frustration and anxiety as the newcomer struggles to move beyond a superficial understanding of his or her situation and attempts to function in the foreign environment (Furnham and Bochner 1986:131; Pedersen 1995). During this stage, the newcomer cannot remain an uninvolved observer,

complacently detached, but must respond to and make sense of the novelty and nuances in the foreign environment (Grove and Torbiorn 1986:80).

One service provider expressed disbelief and distaste regarding the difference he saw between his priorities and those of his Cree neighbours and clients. He felt incapable of bridging the chasm between two ways of understanding the world, explaining:

"You come from such a different place when you come up here. And there's a lot of things that you'll think are similar here to down south, and then you'll realize that you're living on a different planet sometimes and it's very hard....It will really amaze you sometimes, how people actually live. You'll go over and you'll see kids and there's no furniture. All their clothes are in boxes. Part of it's poverty, and part of it's just a different way of looking at the world, where different things are important to you. Just in the way that, you probably don't go to Bingo, do you? And you probably would not go to Cochrane just to play Bingo. And how do you deal with someone who seems like an intelligent person who actually would? It's not that you can understand people golfing, or all kinds of things, but why do they play Bingo? It just boggles the mind, that anyone would want to do that, until you start realizing how desperate some people's lives are around here, eh?...People's priorities seem really different to you when you deal with them sometimes".

For this southern service provider, part of the shock of difference comes from the superficial similarity between Moosonee and southern Ontario. The houses look like CMHC houses everywhere. The high school, the Ministry of Natural Resources building, the new treatment centre, these are all architecturally appealing, modern, even beautiful edifices. Would difference be easier to accept if it wasn't covert, wasn't understated, wasn't happening behind closed doors? Several southerners were drawn to the north because of the adventure and the romance. Is more overt difference, like igloos or hide-tanning, more comprehensible? Does it make the experience of "cultural difference" easier to enjoy, because it can be held at a safe distance, because it can be considered quaint, because it does not threaten values esteemed by the observer? Similarity sucks the newcomer in, entices involvement and then shocks him or her with the age-old realization that things are not really as they seem.

As is the case with some southerners' attitudes towards drinking, smoking and sports, a class-oriented narrow-mindedness prevents this service provider from

acknowledging alternative realities. To a middle class professional, living in a home "with kids and no furniture" is an indication of desperation, of misplaced priorities. By refusing to recognize such judgements as defensive ethnocentrism, this southerner turns cultural difference into an impenetrable wall. A Cree individual visiting the south might similarly comment on the unnaturalness of people who have no kids and spend heaps of money on white sofas and carpets. Or those who have kids and, instead of spending time playing with them, invest all their time cleaning up the messes these kids have left on the white upholstery and rugs. Lacking an ability to examine one's own values and accept those of others means the southerner remains uncomfortable with and aloof to neighbours and clients who do not share the middle class non-Native professional's vision of normal.

David, the OPP officer, discusses his reaction to what he terms as "the philosophy of life" in Moosonee:

"At first it was an unusual adjustment, not to the pace of life, but the attitude of the people. Sort of like, 'we don't care what's going to happen tomorrow'. It's like what's going to happen two hours from now. Live for the moment. Which is somewhat alien to our southern experience, because you've got to save for this, think of the future, what you are going to be doing a year from now. It's different. It's sort of refreshing, but both my wife and I still have that train of thought up here. What will we be doing two years from now? We're both planners...There's certainly very little materialism up here. The guys razz me because I cut my grass, but it's a source of pride for me, and it's good exercise and it gets me out. Our home down south was like that. Nice landscaping. It's just a source of pride. It's just sort of funny when you drive by my house. But that's important, you know, you've got to have pride in some things. Pride in your appearance, pride in your conduct, pride in your home".

In these passages, both speakers show a need to compare the unfamiliar perspective or way of living encountered in Moosonee with their own experience of normal. Life in the south becomes the standard by which life in the north is judged. The previous interviewee can understand golfing, but Bingo is beyond his comprehension, particularly a passion for the pastime that takes a player by plane to Cochrane to participate. He refuses to consider that a trip to Cochrane also means shopping, perhaps visiting with friends or relatives who reside there, a holiday away from the community. Would he be so suspicious of an avid golfer

who flew to Scotland to play on the course where the game was invented?

David comments on the 'live for the moment' philosophy of local people, and the lack of materialism evident in the community. But he freely admits he and his wife are still "planners", and holds up as key values pride in one's appearance, conduct and home—cultural norms of middle class southerners that are not immediately evident in Native communities. Indeed, David's favourite time of the year in Moosonee is the winter because "there's no bugs and the place looks better, it looks cleaner because everything's covered in snow, so it's sort of postcard-like". Winter turns Moosonee into the romantic, pristine north. It covers over the broken down snowmobiles and unkempt lawns that are a physical manifestation of the so-called philosophical differences existing between southerners and local people that David finds difficult to deal with.

This confusion and elevation of one's own cultural norms above local practice is typical of the experience of culture shock, where individuals may be opinionated, suspicious and overly critical of locals (Furnham and Bochner 1986:130-131). But culture shock is meant to be overcome, and some researchers involved in cross-cultural studies assert that it is a crucial step in adjusting and adapting to the "host culture" (Furnham and Bochner 1986:50; Grove and Torbiorn 1986:82; Juffer 1986:188; Pedersen 1995). Frustration and disbelief regarding 'the other' forces the newcomer to verbalize perhaps once tacitly-held assumptions about the way things should be. Highlighting one's own values allows for recognition of and reflection on one's ethnocentrism. Provided that this process is not considered intolerably stressful—which often results in the 'shocked' individual fleeing home (Grove and Torbiorn 1986:81)—the newcomer will grow from the experience of culture shock, becoming a self-assured and relaxed participant in the once-foreign culture (Furnham and Bochner 1986:130-131).

These general comments on the ways living in Moosonee and Moose Factory differ from urban southern Ontario are only an introduction to the more important issue of how

these differences affect southern service providers on the job. As a community member one can choose to ignore the cultural differences—the abandoned machinery in the front yard of a neighbour, the CAS coming to apprehend children after parents have been on a weekend bender. But an employee of a social service agency cannot shut his or her blinds to community activity. Perhaps he will be the police officer accompanying the CAS worker to the neighbour's home. Maybe she will be the nurse who tends to the distraught child or the physician who collects semen samples or the counsellor to whom the parents are referred by the courts. Regardless, a service provider deals with these very different people in a professional capacity, and it is this on-the-job experience of cultural difference that most southerners I spoke with referred to as stressful.

David, for example, spoke in an almost whimsical way about the live-for-the-moment philosophy of local people. But as an OPP officer in the community only 7 months at the time of the interview, he has realized the more dangerous aspects of cultural difference.

"You always have to be dominant and in control and you have to tell people what to do. Down south you can usually get cooperation, just by your presence. Up here you have to force it, be it verbally or physically. In nine years down south, I only had to wrestle, or get in a drag-out fight maybe 3 times. It's probably been about 10 times since I've been up here. But", he says once again, "it's a different philosophy".

In Moosonee and Moose Factory, individuals do not automatically respond or submit to symbols of authority. Police authority, particularly given the history of abuse of power by some officers in these communities, is continually tested and contested by certain individuals in these communities. But this means new officers must endure a violent initiation by local residents, and this unpredictable and dangerous aspect of employment is certainly stressful. Because postings in Moosonee are only two years, a continuous stream of new cops are 'broken in' this way and some may not remain long enough to establish a relationship with local residents based on trust and respect.

More than simply being ignored by community members, the trappings of authority

sported by cops may actually incite violence. And while police officers are trained to expect and cope with violent situations, other service providers may not be so accepting of the violent treatment they receive at the hands of certain local residents who mistake them for cops or transfer anger to them because their badges and uniform are similar to the police.

Mike, an ambulance attendant, admitted with almost hostile resentment:

"I've been hit—many people have *hit* me on the job, punched me, kicked me, choked me...[when you are called to] parties you look like a police officer. You have a little holster with your scissors, you have badges, you have a uniform. Police officers here aren't treated with the utmost respect, and [if] you walk into a house you have to keep your back to the wall".

While Mike's official concern is the immediate care of patients and their rapid transfer to the hospital, his precious time is often taken in an unofficial concern for his own safety. His priority is saving the lives of others (not his own) but his purpose may be interpreted differently by angry party-goers who see him as an unwanted intruder.

While the health care professionals I spoke to were not physically wounded by those they were attempting to help, their pride was perhaps wounded by patients they labelled "non-compliant" and "ignorant". These service providers expected to have patients follow their orders, attend programs, come to appointments, and respond to flyers sent to postal boxes. In short, these professionals expected to make a difference, and the Cree residents of Moosonee and Moose Factory were not willing bolsterers of this idealism. Adam explains the stress of working with an unresponsive population, with people whose habits and history, he claims, prevent them from taking responsibility for their own health.

"It's difficult not to end up blaming the patient for their lack of compliance. They're assholes because they're still drinking, or that they're sugars are 25, so it's hard not to blame the patient, to realize that that's part of the problem, that they don't understand, they don't have the education, they don't have the self-esteem, there's all these underlying issues that have nothing to do with their sugars being 25 but result in their sugars being 25. And I think that happens here, in the hospital, because we see the same people coming here with the same problem and they seem to never learn".

What Adam would like is for his Cree patients to understand health and illness—alcoholism and diabetes in particular—the way he does. But Native people do not often succumb to the

"healthism" which plagues many urban southerners. They tend to ignore or underplay health concerns, continuing to live as they wish instead of sacrificing fatty foods, meat, caffeine and alcohol to placate the pernicious gods of physical wellness. This cannot help but be frustrating and even disillusioning to the health professional whose advice is continuously disregarded. Competence is a crucial aspect of the identity of a southern professional, and negative self-judgements about competence often lead to anxiety and self-doubt (Cherniss 1980:21-37). Professionals are composed and infallible. Helping is seen as a win-lose situation, and a true professional does not lose. A "crisis of competence", especially for young professionals, is a common experience even for those practicing in a familiar cultural milieu. But for those whose ability to "win" with clients is further hampered by "cultural difference", the crisis may be even more debilitating.

Alison is the nutrition community worker in Moosonee. She described to me her disappointing experience with a recipe contest she ran in an attempt to encourage healthy eating habits. Having sent out 1200 flyers and receiving 6 entries, she felt angry and indignant. Subsequent to this, she sent out invitations—the names being culled from the medical clinic's files—to a session for diabetics. Only one person, a young girl, attended and she and Alison "chowed down" on all the healthy goodies Alison had prepared in expectation of 30 participants. In her frustration Alison vented by railing against the community.

"Maybe people are ignorant up here and they just don't care. Moosonee and Moose Factory have so many cases of diabetes and people just don't do anything about it. Even [the dietician] has told me there are *so* many cases up here and they still drink, they still eat, they don't even get medication. Until they get hospitalized, they won't pay any attention to it. They're not even willing to go for professional help, to get medication, to cut back their bad habits and go on a diet. How are we going to get them to come to a session? It's sort of like a support group, to find out if everything's okay, to see if they're having any problems. But if they're not even going to go to the hospital and take the initiative by themselves, they won't take the initiative to come to the session. So I don't know what else to do. There's nothing really you can do to get them involved".

Part of Alison's frustration at an unresponsive population stems from cultural difference.

Native people, in general, are not "joiners" (Lotz 1968:108) and they do not jump to attend group meetings. Group approaches are better modified to accommodate one-on-one instruction or support. While part of this is assuredly cultural, the impossibility of confidentiality in a small town also dissuades local residents from accepting invitations to group sessions. To share health-related matters with people known in contexts external to the group is to risk having such personal material circulated as gossip in the larger community.

Neither do local people respond well to the impersonal medium of mail. It is much better to convey information, not by stuffing flyers in postal boxes, but by word of mouth. As the closing date for the recipe contest approached, Alison, out of desperation, got friends and relatives to "spread the word" about the event. She does not realize it, but the success she achieved this way resulted because ultimately she adopted a more appropriate manner. Several local service providers shared their techniques for getting community members involved with their programs and initiatives, and always these entailed approaching people in a non-aggressive, informal way. They would go to the restaurant and talk with people over coffee, attend recreation programs to earn the trust of adolescents, walk downtown and meet with residents on the street. Cloistering oneself in an office and communicating with the outside world only on paper is not the best way to work in these small Native communities.

But even after trying these approaches, the southern service provider may still be faced with a "non-compliant" population. This is likely because local residents do not accord a professional the respect and trust they are automatically given in southern practice. It is said that in the army, one salutes the uniform, not the man. Not so in a Cree community. In Moosonee and Moose Factory, respect and trust are not assumed; they are earned. Because one is labelled a doctor or nurse is not sufficient evidence of authority or worth. Locals may feel more comfortable turning to someone who has perhaps fewer

"official" credentials but who has proven him or herself worthy of confidence. These confidantes and resource people are seldom southerners. Southerners come and go with such alarming regularity that they rarely establish any meaningful contact with local residents.

Not attending appointments and not understanding the concept that 'time is money' is a stress for Anne, the physician in Moosonee. She recounts in detail an occasion when a patient "didn't feel like" showing up for a costly test that required a flight down south.

"When I saw her the next time I said, 'do you understand what happens when you don't make these appointments?' and I went through everything that had to be arranged and I said, 'You really should let us know if you're not going to go. I don't mind if you cancel, but let us know,' because she just didn't know. To give her her due, she didn't understand, and nobody really explains—we assume people here are as aware. But people here get something for nothing all their lives. To them, money is a commodity for recreation, it's not something you need to live on, to pay the rent and the food, because the rent and the food is mostly covered by whomever—the Band, welfare—whomever. And they just don't have a concept of that the way we do down south".

Getting "something for nothing" is a way of life in Moosonee, according to Anne, and she finds it alien and an obstacle to running an efficient practice. There is a self-righteousness that surfaces in many of the interviews with southerners. Things should be done as they decree it; people should attend appointments, should get their act together, should understand life as southerners do. Local people should know better. As it happened, it wasn't Anne but the physicians at the hospital in the south who were really inconvenienced by the errant patient's absence. However, such experiences come to symbolize the day-to-day interactions with local people who, as David put it, "live for the moment".

Southern professionals feel frustrated and even angry because their clients are not eager, obedient partners in the act of service provision. The clients do not understand the rules of the game, as the game has been played in the south. And for the service providers, the south provides an albeit reluctant standard against which the culture and conduct of clients is held. People in service professions are largely in helping positions. People in Moosonee and Moose Factory do not appear to want this help, at least in the form it is

offered to them.

The "non-compliance" discussed in the last three excerpts can be examined in light of the professional drive to help and the Cree norms of non-interference and respect for individual autonomy. For many professionals in southern practice there is an on-going tension between respecting another's freedom to make independent choices and being the client's "keeper" by offering advice and expecting compliance. This tension is less evident, says Dr. Clare Brant (1979:6), when the clients or patients are Native because the motivation to "help" is overwhelmingly strong in these cases. Yet any kind of interference or advice-giving, Brant continues, is considered inappropriate in "Indian society" and will be met with silence or a polite but dismissive nod. Adam, Alison and Anne, as professionals, believe they have the obligation to give advice and the right to expect compliance with their orders. Cree patients, however, may be offended by this interference in individual autonomy and will continue to do as they choose. The misguided southern service provider will not be alerted as to his or her culturally inappropriate expectations and behaviour—at least by the Cree client—because to do so would be to interfere with the professional's autonomy.

Kelly, the probation officer in Moosonee, is flummoxed by the lifestyles of some of her clients, and frustrated that she cannot make them see the error of their ways.

"I have clients that, I get so discouraged too, eh? I had one, she has six kids, seven kids, she's probably been pregnant ten times and lost them, and she does nothing but drink, and her kids are always in trouble with the law, and she had a baby in January of '92 was it, and pregnant again in May? And I was talking to her, and said 'What's wrong with you? You know, you had six boys, you wanted a girl, you had your girl, in January you're pregnant again. Common sense, where is it? Did you think about getting your tubes tied, do you know what the pill is?' I get frustrated that way and let them know, but it's just like talking to a wall sometimes. So she lost the baby and she's pregnant again".

Common sense implies universality. That this client, after ten pregnancies, does not see birth control as an option is so frustrating to Kelly because she regards this option as self-evident. Yet children are a highly desirable, inevitable addition to a Native family, and

aren't seen as a lifestyle choice which one can postpone or simply opt out of (Thomas 1991:63). Having attended sessions on parenting at the Social Development conference in Moosonee where teen pregnancies were discussed, I am not surprised that this woman didn't exhibit "common sense". Many suggestions and solutions were put forward during this session, including mandatory attendance in parenting classes at the high school level, but not one person pointed out that sex education including instruction on birth control was a possible answer. I didn't suggest this option, suspecting it may not be culturally appropriate. Kelly, on the other hand, does not have a degree in anthropology with its rigorous training in cultural relativism. She was not even offered the rudiments of cultural sensitivity training in the form of a workshop or orientation when she arrived in Moosonee. Thus she loudly pronounces judgement on her client because she doesn't recognize the client is making a choice that is perhaps partially culturally motivated.

Kelly also finds it difficult working with Cree clients because of their tendency to laugh at times she feels are incongruous. This is certainly a cultural difference, as Native individuals tend to use humour and laughter as coping strategies and believe strongly in its healing power (Guilmet and Whited 1989:85; Aitken 1990:29-32). Kelly, however, interprets this laughter as a way of avoiding reality, as evidence that the client will not effect a change in his or her life, as impertinence, almost. She sees it as an inappropriate response. Serious problems require somber, earnest countenances, not jovial repartee.

"You get frustrated when someone sits across from you and laughs when their world is falling apart. 'Get a grip on it! What are you doing sitting and laughing? This is serious! Do you not see the seriousness of it? What are you going to do? Life is not one big joke'...They come across as if they don't give a shit, but deep down they do, and laughter is just a way to forget it all and hope that the problem goes away".

Some southern service providers related anecdotes which told of unique and disturbing encounters with clients or patients. Many wielded the mighty editorial pen and scratched them from their transcripts when given the opportunity—fearing, many wrote, that the words would be attributed to them and endanger what they perceived as an already

vulnerable position in the community. But a few brave souls did not see these examples as cause for castigation and permitted them to appear in print. What these anecdotes convey, like spray paint on a wall, is the shocking and emotionally trying aspects of working in Moosonee and Moose Factory. While earlier excerpts may have portrayed southern service providers as unsympathetic helpers out to better the world but only on their terms, these stories will show the compassion these people can exhibit, and the circumstances under which they work.

Mike tells, with disbelief and a resigned horror, of a little boy whose foot has been sliced by a beer bottle while swimming and whose only support during the ordeal is his 11-going-on-18 year old sister.

"We stopped by the mom's house on our way to the hospital because they didn't have a phone at home because the phone got cut off. Mom was hammered. The little girl said, 'Mom's gone'. I said, 'What'd you mean, 'Mom's gone'?' 'She's hammered'. She told us on the way that Mom was 'on a hangover'. She was eleven years old, and could just say, 'Mom's gone'. I said, 'Where's your Dad?' 'Oh, he went to Calgary, he took off there a couple of weeks ago'. 'Do you have a Granny you could call?' 'No'. And she stayed with her little brother, who was six years old and looked after him. She held his hand, he cried, she said, 'it'll be all right', she gave him a kiss on the head. Just like a mother. She was eleven years old, and she'll probably be a mother within a couple of years. Or drinking, or partying. And you think, 'Wow, this poor little girl has no chance. Or this little boy'. What a horrifying experience, getting stitches when there's nobody around. Six years old and he's crying, 'I want my Mommy' and it's like, 'Sorry, Mom is on the porch, pissed. She can't stand up'".

Mike's professional work does not simply deal with physical distress and injury. His job often involves emotionally disturbing contact with individuals outside the protective walls of an institutional setting. The desperate future he predicts for the little girl indicates that those he helps are not 'just patients'. Their individual circumstances intrude into Mike's understanding of them and repeated exposure forces him to discern disturbing community patterns. He states adamantly that "the stress of the job here is alcohol", and it is evident that his professional experiences have had a profound effect on the way he conducts his personal life. The psychic and physical debilitation he has witnessed due to alcohol,

evinced by the above anecdote, have made it impossible for him to even "relax and enjoy one beer" because he claims "the last thing I want to do is see another beer bottle or contribute to the selling of alcohol".

A terrifying episode experienced by Susan brings to mind war-zone nursing, not employment in a small town health clinic.

"Last Saturday I had 22 patients, 20 of which were alcohol related injuries or assaults or beatings, lacerations, all kinds of things. And I was glad it was myself and not maybe a nurse who'd just graduated because one of the people who'd come in with a cut hand was someone who a few minutes before that smashed the window of the clinic and I honestly thought I was being shot, so I was crawling around on the floor to get to the pharmacy to get the phone because the blast of the windows going—because it was a double pane vacuum—sounded like a 12 gauge shotgun. It was right at my head that it went, so in the next few minutes the poor person comes into the clinic to be treated, and I had to decide very quickly that it was the alcohol that was the problem, not this poor person, and suggested to her that she must be quite upset and was pleased that I was able get around that in my own mind quickly".

This episode outlines the frighteningly ambiguous position in which a service provider can be placed. Susan feared she was being shot at. This may seem, to the comfy and complacent southern Canadian reader, a hyperbolic conclusion to reach. But violence is commonplace in these northern communities (see Smith 1994). And while violent acts are most often committed against family members and acquaintances, southern service providers in Moosonee and Moose Factory are the occasional targets for angry and usually inebriated local residents. In fact, several southerners chose to edit accounts of violent contact between themselves or their family members and clients from their transcripts, so Susan's words must be seen as having wider but silenced relevance.

The situation described by Susan is so difficult because, following the adrenalin rush of fear where she suspects an unprovoked attack, she must assume her nurse-persona and help the perpetrator. An experience like this, where one must bury personal feelings of fear and perhaps even resentment in order to perform professional duties, is stressful. Susan coped, to her surprise it seems, by separating the person from the problem. Instead of blaming the patient, she blamed the alcohol, and was able to care for the individual

concerned. Her maturity and composure in dealing with this event likely stems from her decades of experience nursing during which she spent some time on reserves. This would explain her relief that the encounter did not happen on a night when a newly graduated nurse was on duty.

Inability to Effect Change

Rejection of professional aid and the realization of difference between oneself and one's clients leads the southern service provider to feel ambivalent about his or her role in these communities. Some were prepared for a cool reception and an uncooperative population. Susan, who had worked on reserves in southern Ontario, claimed, "I was very aware that I wasn't going to come here and there would be welcoming parties. I knew that and," she asserted, "I think that's something that a lot of people *don't* know". Many others, as Susan suggests, were expecting to make a difference and acknowledging that it was not a southerner's place to effect change was stressful.

Adam describes his position, with a tinge of bitterness, as that of "a transient White worker in a foreign country". He draws an imaginary international border around Moose Factory, thereby insinuating that the community is not like those that dot the rest of Canada. He typifies himself as a "foreigner", indicating cultural dissonance, his temporary status, and his symbolic citizenship in another country. Had Adam merely been a camera-toting tourist, snapping shots of Indians and squinting into the distance to catch a glimpse of a polar bear, being a foreigner would not perhaps have bothered him too much. Tourists *are* transient. They *expect* to be foreigners, purposefully placing themselves in this position in order to enjoy a foreign experience and return safely to normality after a short period of time. Adam, however, came as a physician, and the foreign-ness of his experience is troubling. His role is to help, to heal, to change things for the better. He is shocked to discover that this is unrealistic. His role is to suture, set bones and write prescriptions—all superficial stuff—not to make anyone's life fundamentally better.

"The most stressful thing for me was the level of trauma and death here...Like what is the underlying problem here, that the community is so dysfunctional? And looking at their background with the residential schools, clashes of culture, the education, the de-valuing of their culture. So I looked at that and it deeply affected me. And I still don't know what to do about it. I got the feeling, 'I'm a band aid'...You're putting your finger in the dyke, you're not building a better dyke...Last Fall, I had the symptoms of depression. I felt hopeless, helpless, and for my patients. I can't make a difference, or I didn't feel I could make a difference. The size of the problem is too big...I recognized that there was nothing I could do for a lot of the underlying problems. It was beyond the scope of any one person, or the training that I have, to do".

A similar revelation and subsequent re-evaluation of role has been experienced by Sarah, also a physician at the hospital in Moose Factory. She initially saw herself tackling the domestic violence problem evident in the community, but her sensitivity to issues of power and powerlessness made her hesitant to step over the outsider-insider boundary. She feared she would step on someone's toes, thereby contributing to the oppressor-oppressed relationship historically established in the community. She now recognizes that change comes from within the community, not from a temporary outsider arriving from the south.

"It's a difficult position to be in—to be a White outsider working as a professional for the federal government, particularly. I found that really difficult when I came here because I was always used to being on the advocate side, and I wasn't used to being on that other side. The commonest thing that came up for me that I would see over and over again was assaults by boyfriend, husband, father, and really feeling like I wanted to get involved with working with the community along those issues because domestic violence was always something I wanted to work on...then suddenly feeling as if I didn't have any role to play, that it needed to come from the community and it wasn't for me to come in and say, 'hey, this is assault! You need to leave, you need to do this, this and this'. That was very difficult, and it came up in a number of other ways—just the realization that I was part of the problem, not a part of the solution. It gave me a lot of empathy for men, which I'd never understood. For the men that are, say, pro-feminist, but really are at a loss as to what to do with that because to be involved is disempowering someone else. And that's what it is here, all the time".

Sarah, at the time of the interview, was planning to leave Moose Factory within a matter of months. She hoped to join Physicians Without Frontiers and be stationed somewhere like Bosnia. Moose Factory's wars are not fought with guns and bombs. Saving lives in a physical sense does not contribute that much. Sarah has not lost her idealism and drive to

make a difference, but she, like Adam, has realized that her ability to contribute in a substantial way is severely limited in Moose Factory. In Bosnia, she can work unencumbered by the highly political identity she has as a physician working on a reserve. And she can make a difference with the skills and training she has received as a doctor, because staunching wounds, administering medication, and setting broken bones are a priority in a war zone. As Adam stated, such physical aid is only a band aid in Moose Factory. But will Sarah come to realize that her work in Bosnia is also only a band aid—that it is the larger conflict that sustains the wounding, and that she cannot effect a solution there either?

Adam also describes himself as "part of the problem". Like Sarah, he is acutely aware of who he is, where he came from, what he stands for, and how this is regarded by the local population.

"In some ways I felt like I was part of the problem, too, because you're a White, educated worker, coming up here to work for a year, see the problems, maybe do a little bit but ultimately leaving...Being a White outsider making good money coming in here, just my presence can be interpreted as, 'you're not working and have no place to go and I'm leaving and I have a future and you don't'...I wrote actually several letters to friends where that's what my point was, is that I was part of the problem, even though I had altruistic feelings and wanted to help, just my very presence, of who I was, was not helpful".

Being seen this way is disempowering for a service provider committed to helping others. Both Adam and Sarah have learned they can't force help on patients and that attempting to do so is only reinforcing community sentiments towards "White outsiders". They have come to see themselves, their profession and their culture, not as agents of positive change and sources of aid, but as symbols of wealth, power, authority and freedom—aspects of existence which have largely been denied the Cree by the same society which has awarded them to physicians. This loss of innocence is paralyzing. Professional maturation means discarding naive notions of helping and adopting politically and culturally sophisticated understandings of what it means to help. But what to do when this means being personally implicated in the very same destructive forces which one professionally combats? For

Adam and Sarah, it means leaving Moose Factory. The assault on professional and personal integrity is too brutal, the dissonance between idealism and reality too sharp, the difference between motive and result too irreconcilable for them to resolve such professional dilemmas and stay in northern practice.

Ellen, the psychologist in Moosonee, came north with an enthusiastic desire to work with Native people. The mental health program she is employed by serves the reserves up the coast of James Bay, and some of her early experiences were working in Fort Albany, Kashechewan and Attawapiskat. She initiated a woman's healing circle in Fort Albany and realized, after several meetings where she sat alone, that it was not her place to invite these women to a circle. The leader had to be someone local. This has become a guiding principle in Ellen's work since, but instead of making her job easier, this relinquishing of control has increased her stress level.

"A main stress for me, as a part of working up here, is trying to sort out, as a White person and as a professional, what my role is. Because I do believe that the people here have to do their own healing or organize the movement within their own community and that my role really is to stay more in the background as a support".

Southern service providers are doers. They are initiators. Their education and professional status gives them the confidence to believe they will accomplish something. Ellen, instead, becomes a spectator, a cheerleader who had expected to be a key player.

Susan's approach differs from that of Adam, Sarah and Ellen in that she did not expect to initiate change herself. She did expect, however, that a grass roots push for change would be evident in Moosonee, and that she could support this. She states emphatically:

"I didn't come here to 'save the Natives'. I came here with the hope that it would come from within, and I really wanted to see that there was a lot of Native things happening as far as stating what their needs were, and how they would want them met. And if I could support that, because I feel really strongly about that, as a White person I really want to help them—oh, I really hate that word, 'help'—to stand with them on their side against other White people who would say, 'you have to do this,' or 'you have to do that'. And that's been a little discouraging because I don't see a lot of that".

Susan recognizes her inability to make a difference on her own and has no illusions that "helping" is an apolitical or neutral act. But her realization that local residents aren't as politically active or aggressive as those she has worked with in the south has been stressful. Her position, while initially different, ends up much as Adam, Sarah and Ellen's—she too is powerless because there is nothing for her to unite with and to support.

Experiencing Prejudice

The above excerpts show that a number of these southern service providers are conscious of their "Whiteness" while working in communities where most individuals considered local are "Native". This becomes a stress for them because they feel uncomfortable usurping control in community initiatives, either because of experiences prior to arriving, like Susan, or because of understandings they have reached during their stay. But their consciousness of their colour and what it represents does not only come from within themselves. Many encountered a bitter and even violent reaction to their being "White" which has made their personal and professional lives more difficult. Dora thoughtfully explained:

"I've run into a couple of times, just people who think if you're White you must be the same. You have to go through some of it. Like one time, mind you this fellow was drunk, and he was giving me a hard time in the office and was going to hit me and I didn't do anything, I just sat there and my secretary ran out—he didn't see her—and got somebody to come in and they took him out. But you know, that man, when he was sober, came back and apologized, and that's really something as far as I'm concerned. I'm a friend of his, now, and he said, 'I know you're not like that'. A long time ago in the Bay store, a young fellow who was actually working there gave me a hard time and started running me down in the aisle as he walked beside me. And I didn't respond. I just thought, 'Oh, this is too bad that this guy feels this way, because I don't feel the way he's saying, that I'm a dirty White person'. But this man, too, apologized at a later time. He came up to me and said, 'I realize you're not like that.'"

Dora does not get overly upset about these experiences, and she did receive apologies from those who had confronted her about the fact that she was White. Perhaps her relaxed attitude has enabled her to remain in Moosonee for twenty-two years. Or, maybe it is her long-term community membership that makes such memories mellow, the initial pain

largely forgotten. Other interviewees, who, with one exception, have been in Moosonee or Moose Factory for less than five years, are not so forgiving. For them this prejudice—even if it has not been experienced by them directly—has come to symbolize their negative experience of living and working in Moosonee and Moose Factory.

Mike is outraged at the racism he sees directed at other non-Native southerners. He vehemently asserted:

"White kids at school get beat up often. I don't know if you know [one of the doctors], he has kids that are blond, blond. His next door neighbours ganged up with a bunch of kids and pounded this kid. Tore him right off the fence as he was trying to get away. You'd never let your kid grow up in a place like that. And it's the next door neighbours! As the father, I may have lost it. A group of kids doing that to my kid because he's a different colour, or because he has blond hair?...My girlfriend's a teacher at the school. She's been hit by kids at the school, she's been called White, racist names, she was hit because she's White. I know that she's a big girl, that she can handle herself, but it still makes me upset".

Whether or not prejudice was actually the motivation for these attacks will never be known. But that Mike interprets these events as racially motivated says much about how he feels about living in Moose Factory. For Mike, the community is divided into "us" and "them", with violence marking the division between insider and outsider, Native and White. Much writing on Aboriginal communities focuses on "internalized oppression" and the tendency for the oppressed to lash out at their own. Mike's interpretation, however, indicates that—among children at least—the anger is being directed outward at individuals who symbolize the oppressive powers: children who are blond, teachers at the school.

Adam related a story about the theft of his bicycle and skidoo, an event which has come to represent community sentiments towards him. "I felt violated," he confessed. "There was sometimes a feeling like everybody else knew who took these things in the village, but nobody was telling it. I got them all back, a little bit damaged, but it was one of those things where you think, you know," he paused, groping for the appropriate phrase. "Like", I suggested, "it's reinforcing that you're outside of," and he interjected, "the system. Yeah. Like you're a foreigner".

For this physician, Moose Factory can be an alien and alienating place where local people unite against newcomers, even to the extent of tacitly protecting law breakers. The violation

of the theft is only part of the stress he feels regarding the incident; the feeling that others were privileged to the identity of the thief but withheld this information from him adds insult to injury. Adam does not specify that either the theft or the community's silence on the matter were motivated by his being "White". But when he labels himself a foreigner, he is identifying himself as different from local people, without referring directly to his colour. Whether or not residents of Moose Factory actually knew who stole his bicycle and skidoo does not matter here. And, if the identity of the thief was indeed known, neither Adam nor I will ever learn if the silence of local residents was because of where he came from or what he stood for. What is important is that Adam does not feel part of a community of people but outside of this community, and that this incident has reinforced for him the ill-feeling some local people hold for those from the south.

Sarah also discusses her experience of prejudice. She said matter-of-factly: "You feel you're so much in the minority, and so much looked upon as a stereotype—you're a White person and you're a doctor working in this hospital therefore you are *this*". Working in Moose Factory, which is almost entirely Cree except for a couple hundred service providers from the south, all of whom live at one end of the island off reserve-land, the southerner feels, perhaps for the first time, "in the minority". Being part of a *maligned* minority, feeling unable to make an impression as an individual because you are slotted into a negatively stereotyped category of persons, is stressful. It is important that Sarah connects being White *and* being a doctor with the community's response to her. Being White is only half the problem. Being a service provider is the other half. Service providers have been agents of social control and sources of colonial influence in these communities. While being White merely denotes membership in the dominant society, being a service provider means acting on behalf of that society and furthering its ends in the community. The association between being White, being a service provider and being a negative presence is assuredly most strong in the case of physicians. There are Native nurses, social

workers and counsellors working in Moosonee and Moose Factory who have broken the White monopoly on these professions. But there are no Cree physicians employed in these communities, a fact which makes the situation ideal for breeding stereotypes about the White doctor.

Nancy has lived in the area since her parents came to Moose Factory when she was 9. She is now 27, resides in Moosonee, works as a CAS supervisor and believes that "even though we're non-Native, we're considered local, which makes a big difference. I'm not seen as somebody non-Native flying into this community to make a big buck and then leaving". Yet even she experiences some prejudice because she is White.

"People make assumptions about my thinking because my skin is white, which isn't fair all the time...I had one worker who was talking about dealing with a case a little differently, like with traditional spirituality, and she started out by saying, 'oh, you're not going to believe this,' or 'you may not understand it, but'...because she assumed I would judge it as useless. And I didn't".

Ellen likewise encountered prejudice regarding her thinking. Being a Sister, and therefore more spiritually oriented than most service providers, made hurtful the oft-occurring assumption that she was ruled by books and was a professional before she was a person.

"Every time I'm with an Elder, or a medicine man, the first thing they say is 'throw away your books, leave your degree behind the door'. I was with this healer and what he said to me was 'you have to stop operating so much out of your head. Don't keep working according to the book, with your theories. You need to come more out of your spirit and your heart'. That really hurt because I thought, 'am I always working out of a book with people?' I feel when I'm with people, I *am* pretty much coming from my heart".

Both Nancy's and Ellen's anecdotes tell of very subtle prejudice. But that they related these experiences to me at all, knowing I was studying stress, is an indication that the assumption of a close-minded or textbook approach to helping is stressful. Perhaps such incidents bring into focus an ambivalence about their role as service providers in a Native community, motivated to help but sensing this help is not always wanted or appropriate. Perhaps these experiences serve as a constant reminder to these women that they have not yet been accepted on their own terms but are seen as representatives of another culture—

one which highly prizes academic credentials and outlawed traditional spirituality in many Aboriginal communities.

Service providers from the south are themselves sometimes accused of being prejudiced. Such a charge greatly angered two of the service providers with whom I spoke, I suspect because they feel connected to the community and are therefore more sensitive to these allegations. Alison, who is not Native herself but who has a Cree step-mother and considers herself related to a large family in Moose Factory, is offended by accusations that she is prejudiced. Indeed, she claims that these assumptions, coupled with the lack of participation in programs she plans, has affected her desire to "give something back to the community". She told me:

"You walk down the street and you see these drunks, 'why don't you like me, you're prejudiced,' stuff like that. They're just hammered out of their minds and are saying, 'you don't like us'—saying something I've never said. I'm not a prejudiced person. My family's Native...They make up their own prejudice".

Mike is similarly incensed about being labelled prejudiced. He claims his grandmother was Native and, like Alison, having this connection to those who would accuse him of prejudice seems to make the accusation that much more potent.

"I get mad about Native issues here. My grandmother was born on a reserve and she was beat up and thrown off when she married a White man. Back then, women lost our status. She asked us never to get our status, 'we're no longer Indian', we had nothing to do with it. That's fine. But come up here and everybody calls you 'mishtibishiw'—'White man'. You get people saying, 'what do you know, you're White,' or 'you're just another dumb White man', and they're the simplest people you ever met in your life calling you stupid or having control over your destiny. I got to start an athletic committee here and it was the worst nightmare...I went from organizing the whole thing to nothing. Called a racist, called a jerk...And I'll never *forgive* the people for calling me racist—the people that did...By starting this committee I was trying to help. They told everybody I was trying to harm".

As these excerpts demonstrate, assumptions about a southern service provider's thinking can influence his or her desire to help. Accusations of prejudice, in turn, emphasize negative stereotypes about the accusers—hence Mike's derogatory comment that those who called him names are "the simplest people you ever met in your life". One who was perhaps not initially prejudiced in his or her thinking towards local people may become so in

response to specific negative experiences. This, ultimately, may affect the service provider's drive to participate in the community and overcome other barriers to helping, like cultural difference. For Mike, this is certainly the case. He aggressively asserted that he will never again initiate a community-based project, labelling such an ambition "madness".

One of the most commonly raised subjects in interviews with southerners is the motivations of *other* service providers for coming north. They accuse these faceless southerners as wanting to profit financially from life in Moosonee or Moose Factory, without contributing anything in return. Hugh Brody (1975:51), who closely examined

Inuit-White relations in Arctic communities, states:

A White may talk about why he came north, but much more often he is eager to explain why one or the other of his colleagues came north. Probably the most frequent attributions of motive are related to money—someone who wants a fast buck goes and finds himself a northern job...The middle class Whites do not often speak of their own financial circumstances, nor do they often place money high among the advantages they say they find in the north—but there is a ring of truth to their gossiping attribution of financial greed to their colleagues.

I must agree with this—at least superficially—simply because my transcripts are full of such comments. But Brody looks at the southerners he studied in the Arctic through grey-coloured glasses, suspicious of their ways, snarkily snorting at their pretensions. Hence there is an unmistakable undertone to his above comment that, seen in the context of the rest of his book, insinuates southerners gossip about each other as a form of projection. "My neighbour came north to make money" really means "I came north to make money but am too pathetic to admit it".

I tend to take a more sympathetic view of the southerners I encountered. Maybe this is because two decades separate my work from Brody's. Native issues and the failure of assimilationist tactics are currently big news. The southerners I talked with were not ignorant of the effects of Indian Agents and residential schools, and they did not deny that much of their experience was affected by the interaction between Native people and non-Native newcomers which has taken place over hundreds of years. They may have been

opinionated, using their time with me—a fellow southerner—to air their views about everything from the revival of traditional ways among youth to the prospect of self-government. But they were not naive. This makes me believe that their constant talk of other southerners, and especially their derision of teachers as a group, has a more important purpose than simply explaining their own motivations for coming north.

Having established that these service providers have given up hope of "making a difference", feel stereotyped and experience prejudice, I believe that this so-called "gossiping" is a further indication that they are uncomfortable in Moosonee and Moose Factory, both as residents and as people employed in the helping professions. Talking about the fact that Jane Doe or Joe Blow came north to "make the almighty buck", as one interviewee termed it, "and get out without inputting something into the community" expresses one's discomfort with both the historical and current situation in the north (see Koster 1977). There is the sense, too, that these service providers worry that they will also be seen this way—what one southerner does reflects, usually negatively, on all southerners. This comes out in frequent statements made by southern service providers that assert local people do not see southern service providers as altruistic helpers because past experience makes them leery of a southerner's motives. Given the difficulties encountered integrating with the larger community, such accusations about "other southerners" both express the frustration felt when trying to 'fit in' and provide a convenient scapegoat upon which to pin the blame for this difficulty. And I suspect there is the tiniest hint that these interviewees worry it could happen to them, too. Unable to make a difference in the way they planned, they could easily be led astray, lose their motivation to help and simply collect a paycheque. This threat could be the reason so much of the discussion of other southerners has a defensive tone of moral outrage.

Teachers are often cited as an example of mercenary money-grubbing. Unfortunately, I was unable to speak to any teachers other than Mary, a resident of

Moosonee for decades, because they all go south for the summer, like seasonally maladjusted up migratory birds. This discussion, therefore, is rather one-sided. But even Mary is not completely in defense of her co-workers. She says, "I listen to my fellow teachers and they gripe and complain, but most of them have never taught anywhere else, for any other school board, so I often think they don't argue from what they know".

It is well-known by other service providers that teachers in Moose Factory and Moosonee are the highest and second highest paid in Ontario. With that in mind, their attitudes are considered reprehensible. To reap the rewards of a position in a northern community but not contribute anything in return is exploitative, and reflects badly on other southern service providers. Lisa states:

"There is not a great deal of sympathy for teachers in this town, because as a group they're probably the highest paid and they have subsidized housing and they don't pay their hydro, in fact they talked about teachers paying half their hydro and some threatened to quit. I mean, I pay all my hydro. There are some, I don't intend to generalize, there are some that contribute to the community...So there are people who do and there are others who I know are here to make as much money as they can so they can leave. And people in town know this, and they know the difference, but unfortunately they're the ones they hold up as typical".

More than simply condemning the greed of teachers, who would quit their jobs rather than pay even a portion of their hydro bills, Lisa is careful to point out that *she* pays *all* her hydro. Her willing financial outlay is more than just evidence that monetary rewards are not her sole purpose for employment in Moosonee. By setting up a dichotomy between those who take and those who give, she is forcing me to see her as different from her scholastic counterparts. In reality, however, I am not the one she would like to convince. It is the "people in town", those whose past and contemporary experience with southerners has coloured their attitude to individuals like herself, whose judgement she would like to sway. Southern service providers must fight so many battles upon first arriving in Moosonee and Moose Factory, including culture shock, social isolation, personal and professional re-evaluation, and prejudice. In addition to this, they also have to combat reputations

established by the legions of faceless and nameless exploiters who have gone before them and have set the standard for southern conduct. This becomes yet one more struggle in the fight to be recognized as individuals, apart from stereotypes of Whites or service providers or transients.

Susan is also concerned about teachers, not so much because they fail to contribute to the community, but more because of the way she sees them treat their students. Again, she feels this reflects on other southerners.

"It's very discouraging to see how some people come up here, some White people, and I guess I really sensed it at the school. And I don't know whether it was because the teachers were young, or whether they had no counselling about the culture, but it really made me sad to see how they dealt with the children sometimes...And that sort of grows into the rest of the community that I think it's very discouraging to see White people come up here and try to make the almighty buck and get out without inputting something into the community".

Margaret says:

"I used to hang around with different teachers and nurses, but I just found that the teachers were constant complainers...yet none of them would volunteer to do extra activities, get involved in community events...They're compulsive complainers who think that everything should be handed to them on a silver platter, and that they're doing the greatest thing in the world, yet they won't put anything back into the community...They don't spend their money in the community yet they come to the community, make megabucks and then leave...which leaves a bad impression with people".

Mike does not complain about teachers. His discussion of other southerners centres around the sexual proclivities of medical staff and students, and his resulting lack of confidence in these people as professionals.

"Promiscuity is bad here. If AIDS ever came here, this place would be wiped out. This hospital, instead of being a TB hospital, would be an AIDS hospital. And not just Native, either. Straightforward White people who normally wouldn't do that come up here—nurses, doctors...It's like they lose any morals they had. 'I'm here, nobody'll know, I'm lonely'. It's a lonely atmosphere at first...They do whatever they've ever wanted to do, because nobody here goes down south, nobody here will ever see them again...When people come up here it's almost like it's their goal. To be a totally different person, or to totally let anything they've ever wanted to do come out...These are supposed to be professional adults, and they're the most disgusting people I've ever met...It's a strange place to work, too. A lot of people in control, who I don't perceive as being in control of their own selves let alone of medical facilities or medical staff".

Dora's concerns are with the police stationed in Moosonee. Because coming north is not really a choice for these officers—they must take a northern placement in order to advance their careers—Dora suspects they have not historically been the best people to work with a Native population.

"Some people come here for jobs that are placed here, like the police, and some never develop any respect for Native people. They come and complain. Teachers come because they can't get a job. With the police, it helps them as far as their placement is concerned, and some of their attitudes toward the Native people have been quite poor."

Those who do not simply fly into the community and leave soon after with their bank accounts full and fantasies fulfilled, feel a focused but unproductive anger towards those who do. It has been established that most service providers from the south feel ambivalent about their role in mostly Native communities which they cannot, in most cases, call home. Much of their work seems to involve at least dealing with, if not combatting, prejudice and the less overt ways local people convey their lack of trust or respect for southern professionals. Clients do not attend sessions or appointments, patients are "non-compliant" with their medication, local residents maintain a polite distance from newcomers. Thus the fact that so many other southerners are seen as exploiters, rather than helpers, is yet another manifestation of the uncomfortableness these interviewees have with their identity as White and their connection with the south.

Certain southern service providers have built or bought homes, developed long-term friendships, become active in community initiatives, and basically tried to make Moosonee and, less often, Moose Factory, home. They highly resent being associated with those who would exploit local residents for financial gain, or who treat their tenure in the north as a chance to behave irresponsibly and without moral restraint. Such activities are selfish and convey the impression that residents of Moosonee and Moose Factory are somehow not worthy of "community commitment" and responsible behaviour. These places are playgrounds shaded by money-trees, not communities deserving of individuals

who will answer for their actions. For those who have been in the north for a longer period of time, such assumptions about Moosonee and Moose Factory are not only insulting to Cree residents, but to themselves as well.

Rusting Out: Limits to Skills and Advancement

Most southerners with whom I spoke arrived in Moosonee and Moose Factory having applied for and accepted positions relating to their previous training and employment experience. There is a move from south to north in which professional work provides at least a semblance of continuity between past and present. The clientele, institutions, and physical and cultural environment may be different, but the southerner is still fundamentally a doctor, nurse, social worker, or probation officer. Professional credentials are assumed to be stable, transportable from one locale to another, immune to outside influence. Yet some southern service providers sense their professional capabilities are being eroded by their stay in the north. This is worrisome because it further threatens the southern service provider's already tenuous sense of self-worth. But perhaps more importantly, only the rare southern interviewee planned a long-term commitment to Moosonee or Moose Factory. Thus a belief that one is a less competent professional as a result of even a short-term tenure in these communities leads to apprehension about the southerner's ability to re-integrate upon returning south.

The job situation in the south is bad, I was repeatedly told by those who had looked north for work following graduation or who now looked south in preparation for a return home. Envisioning the competition for positions and sensing one is less prepared to beat it out is intimidating and may even result in a helpless resignation to an unhappy continued existence in Moosonee or Moose Factory. Mike, though permanently dissatisfied with his employment and living situation in Moose Factory, refuses to actively search for work elsewhere. He bitterly intoned:

"Whether I stay in Moose Factory depends on the job market down south, and where the job is offered. I could apply for a job in Timmins along with 900

other people, but it's not really fair because they've had access to better training and probably have better qualifications than me".

Moose Factory's isolation has been to the detriment of Mike's professional credentials, denying him access to supplementary courses and other training which would make him a more appealing candidate at a job interview. In an almost-paranoid fantasy he imagines legions of certificate-waving ambulance attendants vying for a single job. Why bother applying? Mike has convinced himself that southern employment experience confers an unfair advantage on prospective job applicants.

Working in a remote northern location need not be seen as entrapment and as eliminating alternatives. Ellen, drawn to Moosonee by a spiritual yearning to work with Native people, finds her circumstances allow exploration of aspects of psychology likely labelled "eccentric" by southern colleagues involved in mainstream concerns. Moosonee represents freedom from professional constraint, an escape from orthodox work. But still, Ellen confesses trepidation regarding the effect this unconventional involvement has had on her professional skills.

"I know that the main story of my life is the inner story, and it's trying to listen to what path am I to follow, what exactly is it that I need to learn. It may mean that I'm not exactly following the most usual path. At the same time, every once in a while I think practically. One of these days I'll be out searching for a job again, and when you're searching for a job, there are expectations. Some of the assessment skills I've lost, because I haven't given a psychological instrument in ages. You only become good at things by doing them, and I haven't given them, so I'm not good at them. I'd have to be really honest about that. I haven't really had experience with the mentally ill, so you can't expect me to do assessments, to have expertise. And now, I haven't even been doing therapy. So! there have been very definite losses".

Ellen, like so many other southerners, regards her employment in Moosonee as temporary. Thus the personally motivated professional explorations permitted by her employment here are only a hiatus from the mainstream, not a permanent alternative. She will eventually be faced with the more mundane considerations of job search and interview, and the losses in practical skills she has experienced are a concern for her.

Ellen does not claim to be worse off for her stay in Moosonee, balancing the losses

associated with atypical practice with the gains such opportunities have offered her. Lisa, however, associates the unconventional work she does as a lawyer in Moosonee with an erosion in skills that affects her sense of competence. She admitted wryly:

"I haven't written a memo since I got here. I miss that, actually. I was reading one I'd written back then and I thought, 'I was better then than I am now!'"

While re-reading a memo perhaps reminds Lisa of writing skills which have deteriorated since her arrival in Moosonee, I suspect the memo is a symbol for other losses which are perhaps more important to her. Writing a memo is unnecessary in an organization which only employs four people. What Lisa likely misses are not the memos—which any southern service provider will tell you are often tedious, indecipherable and easily misplaced—but the professional context which necessitates memo-writing. As an articling student, Lisa worked as a health and safety prosecutor for the provincial government. Her work was intense and had enormous consequences as it often meant taking big business to court. Involvements were prolonged, responsibilities were great, professional contacts were extensive. She wrote memos. All this contrasts with the smaller scale and slower paced work she does in Moosonee; the absence of memos is a metonym for the loss of professional stimulation which Lisa expects has made her less of a lawyer.

Because offices in Moosonee have few staff and supervisory positions are often located in head offices to the south, some southern service providers are concerned that there is little opportunity for professional advancement. Peter laments that he is "the most experienced lawyer in Moosonee"—a title which accords him little respect and few material rewards when he is one of only two lawyers in the community. In the course of explaining what drew him to Moosonee, his fears regarding the ramifications of his stay in the north were evinced:

"I was working in Toronto and I wanted to come to northern Ontario, and the place seemed kind of neat. That was 11 years ago, so I've probably been here much too long for my own good, or for my career, because it's a career-limiting move to stay in a place like this for so long, but it's not a bad place". "You say it's a career-limiting move", I prompted. "There's no opportunity for promotion for me whatsoever", he clarified. "I'm at the top. I'm the most

experienced lawyer in Moosonee...There's nowhere to go from here, except down, and I'm only 39, so I've got another 30 to 35 years to work after this. We don't get pensions or anything, so when we're finished, we're out the door, not like university professors or government employees or teachers, where people can retire after working 30 years...So I worry an awful lot about the future, like what'll happen to me after I'm here. I can't see myself doing this for the rest of my life".

Lacking the protection of a pension, Peter feels pressured to advance his career in order to receive the financial benefits which accompany promotions. Such opportunities are simply not available in Moosonee—a situation which prompts Peter to consider leaving legal aid work in the north.

Kelly, too, has reached a point in her life where professional advancement is important to her. Following graduation from university she encountered a stagnant job market. "It was difficult getting in, you know, after school was over. It took a year and a half to get a job," she stated, and added with a wry and almost sarcastic laugh, "in Moosonee!" In desperation for employment, she accepted work in a place she could hardly place on a map. Today, however, Kelly is no longer content working in the Moosonee office of the Ministry of Corrections, whose staff of two—probation officer and secretary—leaves no room for promotion. She is preparing to move south, career aspirations having tempted her to accept employment in a larger office. She explained:

"I don't really want to move because this is home, now, but at the same time I have to think about my job. So the move is completely job-related. There's nowhere to move up—this is it—and I'm worried about job security with the Native transfer of services, eh?"

Kelly's move is evidently not solely motivated by hopes of promotion. Her bold statement regarding transfer of services to Native control confirms numerous rustlings of the grapevine which intimate that some southern service providers feel threatened by self-government initiatives. For Kelly, leaving Moosonee is a pre-emptive strike. She fears that with the regional take-over of policing services by NAPS, the provincial jurisdiction over probation may be transferred to a local body and provincial, non-Native officers "phased out". Kelly safeguards her career by vacating a position which she predicts will become

highly contested and politically volatile in the near future. By going south now, she is choosing to leave instead of risking being forced out.

Conclusions

This chapter has explored some of the stresses that southerners experience as professionals in Moosonee and Moose Factory. What becomes evident is that being a newcomer in the community is at the root of much of this stress. Southern service providers lack a community context and support network which extends beyond the nuclear family. They have not been in the community long enough to establish a respected reputation, to learn to accept and esteem difference, to discover for themselves a meaningful niche in terms of personal life and professional contributions.

But these stresses—which could affect any professional who re-locates to a small community away from family and friends—are compounded by the particular circumstances of working in a northern Aboriginal community. Service providers from the south are high profile outsiders in Moosonee and Moose Factory. The comfortable complacency allowed an employee of a southern institution whose authority, credentials and colour are not questioned by those in power is quickly shaken out of the newly arrived southerner. These individuals—many of them young and only beginning their careers—are forced to re-evaluate their understanding of what it means to help as a non-Native in a Native community. In fact, the very definition of "helping" undergoes a radical re-examination as these service providers confront segregation, prejudice, lack of respect and an uncooperative population. Southern service providers realize that helping is a political act, and that their initial reception has been largely pre-determined by the historical interaction between the Cree and powerful outsiders from the south.

These experiences and revelations must be seen in the context of requests for increased commitment and accountability regarding non-Native service providers employed in Aboriginal communities. In an article titled "Health Care Providers: The Solution or the

Problem?" Elizabeth Roberts (1988:130), medical consultant to the Nishnawbe-Aski

Nation, concludes:

Non-Native health care providers presently working in Native communities have a responsibility to learn for themselves the principles of community development, decide how they can incorporate these approaches into their particular situations and go further by implementing the changes necessary for them to begin their work in their "new" role. If they are unable or unwilling to take these steps and recognize the changing needs within their work place, they may be wiser to re-consider their desire to work in Native communities.

I would not restrict the relevance of this excerpt only to those non-Natives employed in the health care field, but enlarge its audience to include all service providers from the south. Non-Native service providers are here charged by Roberts to fully participate in community development strategies and to make the personal and organizational changes necessary to enable this participation. Such an admonition places the burden of change on the service provider without putting any resources at his or her disposal. The particular circumstances facing southern outsiders in Moosonee and Moose Factory force even those who once saw themselves playing an active role in "community development" to re-think their motivations and take a hands-off approach. Their sensitization to issues of power and authority, and their consciousness of their outsider status, become paralyzing. What was once a desire to "make a difference" sadly becomes little more than a tendency to see difference between themselves and other community members.

In order to move beyond disillusionment and self-doubt in the context of cross-cultural helping, it will be necessary to offer substantial initial and on-going support to southern service providers. Rigorous cultural orientation offered by the community upon arrival could include education in community development theory and techniques which have been tailored to suit the particular needs and goals of Moosonee and Moose Factory. White guilt encourages silent withdrawal, not active participation. Until such time as all professional positions in Aboriginal communities are occupied by Native service providers,

communities must work with and foster the growth of non-Native employees instead of requesting participation under circumstances which erode their confidence to do so.

CHAPTER FOUR: SOUTHERNER COPING STRATEGIES

It has been established that working in Moosonee and Moose Factory is stressful for the southerners who come to these communities as employees of service organizations. But those I interviewed do not speak only of stressors; in fact in some ways this division of chapters into stresses and coping is artificial. Certain interviewees, especially those who have resided in the north for longer periods of time and consider themselves "locals", discuss stresses and coping together.

Most southerners have discovered ways to deal with the barriers to integration, the cultural difference they encounter daily, the prejudice and stereotyping they experience, their ambivalence towards the work they are doing in communities that aren't, in most cases, considered home. While the interviews with recent arrivals are rife with complaints and loudly expound on difficulties, the less exuberant and more retrospective interviews with those who have been in Moosonee and Moose Factory for more than three or four years are an important source of information on coping.

The reader will notice that the interview excerpts in this section are not the blunt tidbits frequently offered in the previous chapter. This is because, unlike discussion of stresses which tended to be unorganized and anecdotal, discussion of coping methods took the form of well thought out, structured commentary. This probably has much to do with what Dora refers to as "conscious" adjustment. What is stressful is not always obvious to the interviewee, or to the researcher until careful analysis. Coping methods, on the other hand, seem to be the result of careful consideration and patient adjustment. Hence they can stand more on their own, with less interpretation from myself.

Some maintain that enjoying life in Moosonee and Moose Factory is a matter of a fit between individual preferences and what the community offers. Paul, a resident of Moosonee for 5 years who married into a local family, reiterated this point several times in

his interview. Here he emphatically states:

"The community is what you make of it, and a lot of people come up here and say, 'oh, geez, there's no shopping malls, so I can't go shopping, and there's no nice restaurants, and no McDonalds.' It depends on what you like doing...If you like canoeing or skiing or skidooing in the winter, Moosonee is a haven. Every day you've got clean snow from about the middle of November into April. If you hate snow and you miss the shopping mall and you miss the nice warm stores, then Moosonee is not for you. In the summer, if you hate mosquitoes, and I don't have much of a liking for mosquitoes, then it's harder. But you can go out on the river, go fishing, and the mosquitoes don't bother you so much out there. It all depends on what you like doing, it is what you make of it. If you don't like being in a town where alcohol has a big hold on the community, then Moosonee is not for you. No matter where you are in the community alcohol touches you somehow. Moosonee's not for *everyone*".

Paul asserts boldly that a person reliant on the conveniences of southern living, one who does not enjoy the outdoors, one who is offended by or overly sensitive to the alcohol and resulting community dysfunction, will not last in Moosonee. The former two statements, while true, are trite. An enjoyment of the outdoors and an appreciation of an active lifestyle in a place which doesn't offer much else in terms of entertainment or recreation are certainly important—hence the stress of integrating, spoken of in the last chapter, when these aren't pastimes considered pleasurable by the newcomer. But Paul's last statement, I believe, has larger implications than he states here regarding whether a service provider will remain in these northern communities.

Much of the act of helping in Moosonee and Moose Factory involves alcohol-related incidents and their repercussions. David, the OPP officer, avers that "most of our calls are alcohol-related domestic situations". Mike, an ambulance attendant, states in a startlingly similar statement that "over 93% of our calls are alcohol-related". Susan, on one Saturday, saw "22 patients, 20 of which were alcohol-related" at the health clinic in Moosonee. Sarah states that she gets a skewed sense of the population of Moose Factory because at the hospital "you see all the drunks and all the overdoses". Perhaps one does need a certain tolerance of alcohol and its destructive power, an ability, as Susan puts it, to "have a great empathy for people who are alcoholic" and capacity to see that "when they

aren't under the influence, they're all very gentle, kind people who are easily hurt and just picked the wrong crutch". Without either psychological blinkers to block out the prevalence of community problems due to alcohol, or a non-judgemental attitude, a southern service provider might yearn to return to southern city living. In an urban centre, not all the problems seem to stem from one source and some distance can be put between oneself and the professional issues one deals with.

Other southern service providers feel there are certain personality characteristics one must possess prior to arrival in the north in order to survive. Peter asserts that a sense of humour and realism about professional capabilities are necessary attributes.

"When I was first up here I was with a guy that was really serious and it was just *scary*! You'd say something joking to him and he'd think you were serious and go into a long thing about it...So you have a lot of problems up here if you have normal lawyerish issue...it's important that they have a sense of humour, that they're not people who believe that they can change much of the world on their own and you might do half decently all right with them".

Given the "non-compliance" and obliviousness to professional opinion of many local residents, it is not surprising that Peter is leery of those who come north with an idealistic or missionary zeal to "change the world". In fact, this loss of idealism and willingness to see change happen slowly seem to be crucial elements of adaptation to working in Moosonee and Moose Factory for several southern service providers.

But not all the qualities of a service provider who will last more than the usual one or two years are predetermined. People learn to cope with their circumstances as they find them; they do not have to arrive, like robots, programmed to fit exactly with the community. Indeed, what the interviews and the previous chapter suggest is that no one from the south finds life in Moosonee and Moose Factory initially easy. Most, in fact, stated, like Lisa, that the crucial element was "being here long enough to develop the connections and recognize the positive things". While character and predilection for a certain kind of life can aid in adjustment, coping is an interaction with the environment over time, and adaptation seems the key.

Southern service providers appear to cope in what is termed a "problem-focused" manner by Lazarus and Folkman (1984:152-154). Problem-focused coping strategies are specifically oriented towards abating the stress associated with a particular difficulty or 'problem', and largely mirror problem-solving techniques. Coping may be directed outward at the environment, or inward at oneself, but in either case the individual's attention is concentrated on making specific, concrete changes. Most southern service providers seem to take this problem-solving approach, altering their behaviour or attitudes in ways which directly affect the potency of particular stressors.

For example, some interviewees choose to cope by remaining distant from the community. They accept the difficulties inherent in integrating, particularly as professionals in a small community, and put their energies into hobbies and friendships outside of Moosonee and Moose Factory. Others realize the comfort of "getting out" of the north and returning south for holidays. This offers them a chance to renew contacts with family, friends and local restaurateurs, a chance to feel a part of a familiar way of life.

Many interviewees cope with the stress of immersion in a different culture by adapting and adopting local habits and attitudes. For them, the motto is, "when in Rome, do as the Romans". This also alleviates some of the stress of feeling dislocated and unable to integrate. These individuals emphasize being flexible, both as community members and professionals.

To cope with the professional stress of unresponsive clients and patients, many choose to let go of their need to be in control. They try to maintain a balance between lost idealism and hope that at some point, perhaps in a distant future they will not be part of, change will indeed happen. Important aspects of this type of coping are resolving to relinquish responsibility for others and learning to be patient.

Remaining Distanced: Hobbies

In many ways, a newcomer from the south feels like an outsider to community life.

Some do not make it a priority to integrate, but profit from their outsider status by maintaining a distance from community issues and local residents. This helps prevent the inevitable cross-over between personal and professional life that happens if one associates socially with non-professionals in a small town. The sentiment that "everyone is a potential client" is offered in several interviews; not mingling with these people eliminates the professional quandary that results when friends want favours or when you are too involved with clients to help them adequately. And there is the previously referred to problem of being seen as a professional even outside the office which makes dances and parties questionable social activities. Because of these reasons, Peter claims "I'm not a person who has a lot of friends. Mostly I have a lot of other activities and that's how I spend my time when I'm not here [at the office]". He cited HAM radio, computers and reading as his "other activities"—activities that are solitary and therefore don't require a foray into the often wild social life of Moosonee.

Anne is another service provider originally from the south who copes with stress by spending time alone with a hobby. For her, gardening is a private way of finding a respite from the demands of work and her troubled marriage.

"I've got a lot of interests at home, like my garden. My garden is, at home, my place of peace, and I have established a recent ritual. Every day when I come home I go around the garden and look at everything. It's sort of when I go into neutral for a while. I've been taking—because I'm an idiot—several courses in order to get my diploma in Ontario horticulture".

Working towards her diploma in horticulture means that even in the winter, when the physical act of digging in soil and enjoying watching things grow can't be realized, Anne can still pursue her gardening hobby.

Lisa, like Peter, mentions reading. She claims that associating with other long term residents who came originally from the south is an important way of sharing this hobby—one which wouldn't necessarily interest local people.

"People I know here tend to live here usually longer than I have and have developed their own coping mechanisms, and for some of them it's reading, and so is mine, so there's someone I can discuss books with, and that's really

important, finding people who are interested in it, and sharing books, swapping books".

When Lisa discusses reading as a "coping mechanism", she is ascribing this hobby a significance beyond mere pastime. More than simply a pleasurable or fulfilling activity, it becomes a way of dealing with the particular circumstances encountered by the southerner in a northern community. Lisa is not content to read in isolation, and in this way I believe reading becomes a coping strategy for her. By seeking out others who share this interest and becoming part of a community of readers, she develops a social network. Reading is an imported activity in orally-oriented Native communities. Lisa, an import herself, ensures she doesn't lose touch with either her past interests or other southerners by forging connections with other readers.

Susan also discusses reading as a form of coping, a way of compensating for the work she does because it is a "non-people thing". For her, reading is an escape from professional demands. Sarah, on the other hand, uses reading as an escape from peer contacts. Living in Moose Factory means her neighbours are all health care professionals.

She says,

"It's such a small place, it's not as if you could self-select that the people that you work with will have the same kind of world view that you do. By virtue of the work that you do you have to hang out with this group of people. It does get very boring over and over. I think what I do right now is hang out with very few people, and that's okay. I still have my bookshelves!"

While reading is an excuse for Lisa to seek contact with other southerners, Sarah sees this hobby as offering an escape from these individuals. The attitudes of these women may seem contradictory, but their situations are very different. Lisa works in a small office which employs only one other southerner, and she lives in Moosonee, where the community is not segregated according to place of origin. Thus contact with others from the south is not as ubiquitous for Lisa as it is for Sarah who confronts the same southern service providers both at work and home. By using reading as a filter through which to view the southern service provider community in Moosonee, Lisa is doing what Sarah

claims is impossible in Moose Factory—"self-selecting" that others "will have the same kind of world view that you do".

Unlike joining a curling team, reading doesn't necessitate bridging a cultural barrier or hauling oneself from a comfy chair on a winter week night to stand around in a freezing arena. I think its value as a coping strategy lies in its easy answer to a community that doesn't throw open its doors to newcomers, a community where southerners tend to socialize in cliques where membership is decided based on occupation. Integrating with the larger community is time consuming and difficult, not to mention that it brings up confidentiality issues for service providers in a small town. Initiating relationships only with co-workers can, as Sarah reminds us, be tedious. Reading requires minimal effort, is all-seasonal, and while having friends to discuss plot-lines and swap tomes with is nice, it isn't necessary. Reading is a way of turning inward to another world of fantasy or education, instead of outward to the real world of Moosonee and Moose Factory.

These hobbies may take on an additional significance for those who are single. Adam claims he wasn't overly troubled with his status as an outsider, quarantined at one end of Moose Factory Island with other southern service providers, because his family was with him. He says, "I brought my own stuff with me, my family, and my best friend lived with us and was our nanny, so I brought my social structure with me, and that was my major focus". Of the above cases of southerners who invested in hobbies as a way of coping, three were single, one would be separated from his spouse months later and one claimed she had no place at home to be restored because of her husband's mid-life crisis. Thus even those quoted here with spouses would not be inspired to participate in community activities with these partners.

Being socially active in Moosonee and Moose Factory seems easier for those who are married or involved in serious relationships, as many avenues for interaction are couple-oriented. David's experience curling with his wife enabled him to meet "other

couples in town that we socialize with". He also joined a "snowmobile club" with 15 other couples. He claimed,

"I think it's a lot better for a married individual to work up here as opposed to a single person. There's not really that much for a single person to do, and if you want to go out for supper, out dating, it's a small town and everybody knows your business".

Peter has a similar opinion, stating that, "in this town I think it's very hard to be single because the social stuff is very difficult because all you can do is drink". It has been established in the stress section that southern service providers consider themselves personifications of their jobs and that this makes it difficult to integrate. If 'wholesome' activities centre around couples, and dating or drinking make one the object of speculative gossip, it isn't surprising that single professionals choose a coping strategy that maintains a low profile.

Contact With Home: "Getting Out"

Service providers who come from southern locales frequently use the term "getting out" to refer to returning south for a holiday. Some speak of it in an almost desperate way, implying that their stint in Moosonee or Moose Factory is like a jail term, and leaving the community is their break for freedom. The isolation of these communities, both geographically and personally, makes this an understandable sentiment for those who are habituated to city living with all its attendant amenities, or miss living close to family. Others discuss this coping strategy in a less emotional way. Regardless, "getting out" is a way of enjoying some of the southern things they miss. Even Mary, a resident of Moosonee for 31 years, says "we spend summers with family, and make sure we get out and do southern things for parts of the year". By "making sure", Mary implies that going south is a preventative measure—but preventing what?

There are frequent references in both academic and popular literature on the north to southerners becoming "bushed" (Brody 1975; Paine 1977; Lange 1977; Hodgson 1980). Symptoms of being bushed include an inability to function in White, middle class society

and a subsequent withdrawal from contact with southern individuals and institutions. "Bushed" individuals are in limbo between cultures, increasingly aware that although they are from the south, adaptation to northern living has made them less adept at negotiating within a southern environment and acting according to mainstream expectations. In this way, being "bushed" is like a stage between culture shock and its resolution, where initial adaptation to the new culture leads to feelings of discomfort and loss of identity regarding home. "Getting out" to the south is a way of inoculating against this threat to identity. As long as the southerner "gets out" enough, he or she will maintain sufficient contact with "southern things" that a minimal comfort level can be maintained. Much of what southern service providers told me indicates that remaining too long in Moosonee or Moose Factory is a threat to their mental stability. "Getting out" is the cure. Adam, for example, laments that he did not realize sooner the effectiveness of this coping strategy:

"I think one of the things I didn't do was get out enough. I stayed basically seven months straight here without going out and when I finally did go I thought 'geez, I've been here for a long time without a break' and I was a little burnt".

I spoke briefly with Brad, a service director in Moosonee, who likewise had a fatalistic view of staying in the community too long without a sojourn south. He stated: "If you don't get some pavement under your feet, go see a movie, go eat at a restaurant, you're a goner. Even if it's just for a weekend. If I see somebody stressed, that's what I tell them, especially those guys who are money hungry and won't go because it costs too much".

Paul also suggests that becoming crazed is a possibility for a southerner who stays too long in Moosonee. He judges the efficacy of his other coping methods based on whether a year without getting out of town has given him "cabin fever". He had just commented on the reluctance of local people to open up to strangers, and I responded that he seemed quite comfortable, now. He replied:

"Oh, yeah. I haven't been out of town for a long time, for more than a year so it can't bother me that much or I'd have cabin fever or something. I am going out next week, no, in two weeks time, so I'm looking forward to seeing a paved highway again".

Susan admitted:

"I sometimes will really make a point of listening to CBC because it helps me to remember that there is a world going on out there, and I really enjoy the fact that they talk about regular people, whether they're in Newfoundland or wherever, because it helps me stay balanced. You get antsy every once in a while and think 'oh, I've got to go to a donut shop' or to the theatre or even something that would make me cross before, like smog and too many cars, I think, 'hey! I need to be abused by technology!'"

For Susan, some of the southern things she craves are those for which she had no affection when living in the south. Because these things—like smog and too many cars—aren't elements of life in these northern communities they become the object of nostalgic longing. Again, difference becomes the key paradigm for understanding the southerner's current circumstances. South and north are never said to be similar; difference characterizes their uneasy relationship and "getting out" for a southern trip is a way of reinstating "balance".

Even when she can't "get out" in a physical sense, Susan turns on the radio and there, in her living room, is the rest of Canada, replete with "regular people". Does this imply that residents of Moosonee and Moose Factory aren't regular? I suppose it does, if the standard for "regular" comes from the CBC and one regards much of CBC's programming as WASP and middle class. Local people in these northern communities are Cree and many do not espouse middle class values. So more than contact with familiar *things*, like automated bank tellers, paved roads, and cinemas, going south or maintaining contact with the south is about contact with familiar (read "regular") *people*.

Others do not see getting out in these terms, however. Living in Moosonee or Moose Factory simply inspires them to travel—they do not reflect further on their motivations for leaving the community. However, for southerners living in the north, travelling does become a priority. It is a significant part of their experience which inconvenience and expense do not impede. Paula told me excitedly:

"Another perk of my job is I get to travel, another personal perk is I have done more travelling for myself since I moved to Moosonee, than I did when I lived in Toronto, and it's more expensive! Truthfully, I've gone, the second Christmas I was here my Mom and I went to Hawaii. I went to Albuquerque New Mexico, and it was the first time I did that. I feel really fortunate because a really close friend and I took a vacation together [that] we promised ourselves

we'd always do. We wanted to be two kids, so we went to Florida, we went to Walt Disney World. That trip will always mean a lot to me because she died about five months after that so it was a trip we promised we'd always do and we did it. And so for myself, I've done more travelling now that I live up here than I did when it was more convenient to do it and the thing is, the more I travel the more I want to do it. I enjoy it. It's nice to get out and see things that you've never seen before".

For Paula, "getting out" does not restrict her to visiting family and her home region. She does not yearn for the familiar; on the contrary, living in an isolated community has inspired her to go places and do things which she has never experienced. Paula seems surprised that it has required her to move to Moosonee to learn she enjoys travelling and novel experiences. But the literature on culture shock admits there are people who begin to seek out the unfamiliar following first exposure to it (Furnham and Bochner 1986:50). This is not to imply that Paula has been infected with a pathological wanderlust because of her stint in Moosonee. On the contrary, her experience of adjustment to the community, as will be discussed later, has been one of the most positive among the southern service providers I interviewed. This would indicate that her new-found love of travel is more likely the result of personal growth and self-discovery rather than a need to escape the realities of life in Moosonee. Paula does not define herself in terms of her southern connections and doesn't frantically fly home like a lost pigeon every vacation. She doesn't require the identity-validating experience of southern *things* but instead takes the elements of home which are important to her—mother and friends—along with her on adventures to new places.

Mike spent much time detailing for me the difficulties encountered preparing for a holiday while living in a community where "every time you leave you're always at somebody else's mercy—somebody else's schedule, somebody else's work habits". He complained bitterly, "I've gone to leave here some nights and the plane didn't show up". But this doesn't stop him from craving adventurous southern experiences, and acting on these cravings.

"You're going to go white water rafting, you're going to go canoeing. Every trip is an adventure and you want to do something because you haven't done something for so long and you see it on T.V. and say "well, if I was there I'd do it". But really if you were there, you wouldn't. If you live in Toronto, how many people have been to the Museum or to the Science Centre or to the Planetarium, but when you leave *here* and you go to Toronto you see all those things and it ends up costing you a lot. How many people in Toronto have never seen Phantom of the Opera, and I've seen it three times, *only* since I've been up here".

In contrast to Paula's example, Mike's experience of Moose Factory has been largely negative and his quest for southern experiences does smack of escapism. The irony of Mike's excerpt is that many southerners come north for the adventure, for the opportunities they think northern living will offer them. Mike, for example, enjoys fishing and hunting but he admits "since I've been up here I've done it the least I've ever done it in my life". He cites bugs, the weather, his demanding job as an ambulance attendant and lack of a companion to accompany him as reasons for this. Now he seeks adventure back where he came from, unrelentingly playing the role of tourist in his home community.

Accepting, Adjusting, Adapting, Adopting: "When In Rome"

While the temptation to flee the unfamiliar and "get out" is powerful, many southern interviewees resist the call of pavement and package tours. They realize that the stress of cultural difference, of being regarded as a position instead of a person, of being associated—sometimes in a hostile way—with past service providers and White society can be coped with in a different way. This may be a subtle, gradual realization or a totally unconscious process, unknown to the interviewee until questioned about it by a prying researcher. But miraculous as it may seem to those who would itch for a southern weekend, as if life in Moosonee or Moose Factory caused one to contract an irritating rash, some southerners become accustomed to their new way of life, accept its differences and even adopt some of the population's once-strange habits.

Sarah provides an example of unconscious adaptation. As her interview progressed, she realized that what she has held in such high esteem and even looked

forward to re-experiencing upon her return south, are things she feels she may not be able to do as well following her stay in Moose Factory.

"I feel very separate from the kind of life I would have in the city. It's very hard to explain, but when I go south now, I just always find myself looking at people, and looking at my friends and thinking how *different* my life is from theirs. Just this concept of going to work and coming home and you're finished your work now. You've come home and you don't go back to work and you have some friends over, perhaps, or you might go to a movie or you'd wander down the street and there are other people there, and you'd make plans for something you want to do on the weekend. It's just a very different life. You buy clothes! You care about how you look, and you work out, and all these things...I don't know if I'll be able to do it again. I thought I could, but I'm getting to the point now that I'll probably be less good at it".

Having become accustomed to a different way of living and working has afforded Sarah the distance—both physical and emotional—to reflect on the southern lifestyle which was once the norm for her. Trips to the mall or the gym or the movie theatre were likely unquestioned aspects of her previous existence. That she now regards past habits as alien underscores her adjustment to and acceptance of the way of life in Moose Factory. And her worry that she will "probably be less good" at southern living if she returns points out that the changes she has made are not merely superficial.

Dora, familiar with southern living, remembers being frustrated by her early tenure in Moosonee. Little things, like the Bay store not having a lamp shade, caused her grief out of proportion with the problem, simply because they were daily occurrences and reminders that life in the north was not only different, but inconvenient. Here she documents her more conscious realization that she could indeed accept Moosonee for what it was, lamp shades or no lamp shades.

"Oh, it really gets you down and you say, 'oh, I've got to get out of here. I've got to *leave*.' What you do, I feel, and what helped me, was the philosophy that, 'I've got to stop comparing this place to others. I've got to live with what I have.' And I used to tell women that came to see me about it and were really stressed out, 'you've got to stop comparing. You've got to say, this is what I have, and I'm going to make the best of it'...I think you have to make conscious decisions to adjust if you want to stay. And I think you have to come to a point where you feel there is more than one way to do things. Like you said, there's a difference in our ways of doing things in the south and you have to let go of that and recognize that there are other ways. When you do some of these things consciously, it helps you to relax and adjust and be accepting. For

me, some of these were conscious decisions, though some of them aren't. We don't realize how much we adjust. But there certainly *is* a big adjustment to living and to working here...If you don't adjust, you may as well leave, because you won't find it rewarding being here".

Dora makes an important point about the necessity of adjusting to life in the north if one's experience is to be "rewarding". Constant unfavourable comparison between the dearth of amenities and social life in Moosonee and Moose Factory and the luxury and convenience of southern living only stalls such adjustment. In order to enjoy his or her stay, the newcomer must throw away the comforting life jacket of southern standards and learn to swim in the currents of the Moose River.

Part of this adjustment is professional. Dora has realized over time that recognizing and respecting culturally patterned behaviours exhibited by clients makes for more effective communication. She told me:

"I've had to learn to listen more to try to understand what they're really trying to say, because they are not always so direct. And I've had to learn how to interpret them in that eye contact is not that important. In fact, I don't do eye contact all that much, you'll notice I've been looking out the window all the time, and that's just part of what I've learned to do up here. You learn how to cope with it. Silence is not always disinterest, but you have to allow them the silence...When someone comes, I often say, 'how are you' and they'll answer, of course, but there's a point where they may say nothing, and I don't look at them at that point. I look away, I look down, or I just sit there and it doesn't make me feel uncomfortable anymore. It's after that they begin to open up. But these are the kind of skills that I had to learn".

More than simply accepting that there are different ways of doing things, which would suggest that the service provider him or herself remains unchanged, Dora's key coping strategy has been to adopt these different approaches. She discusses above how her approach to patients has changed, and that this change is not an artificial turning-on and turning-off. Although I was not a Cree individual requiring the services of a public health nurse, she did not make eye contact with me during the interview, and was very unassuming in her manner. Thus her learning to deal with difference, while initially meant to make cross-cultural interaction easier, has become a part of who she is.

Others have adopted culturally appropriate ways of dealing with the local people

they encounter professionally. One doctor with whom I spoke was rigidly righteous in his approach. He once remarked with frustration and a tinge of disgust about a "most uncooperative" pregnant patient who refused to take off her coat and whom he had to "practically rape to see how dilated she was". In contrast to this disturbing example, Adam has adjusted his aggressive, southern-oriented style to suit Cree patients.

"The first couple of months, [my] style definitely had to be modified. I had to be responsive to how the patient wanted to be questioned, the physical exam, what is acceptable and tolerable as far as touching, disrobing, and those sorts of things. I've come to be able to pretty well examine people with their clothes on, hat and boots and ear muffs".

Paula also detailed the skills she has learned as a librarian interacting with Cree students.

"I've found my ability to read body language is a lot more keen, because our students, in the Fall, are not verbal at all. And having grown up in a Native community, I know that the [lack of] eye contact is not disrespectful...I find the first thing I have to do in the fall is I have to slow down when I speak because the first thing that was pointed out to me when I came up here was, they all told me, 'you've come from the city, haven't you?' and I said 'Why?' and they said 'because you talk so fast!' That's why I say, 'when in Rome do as the Romans do' because if you want to be accepted, then you have to respect the way of life that's lived up here. And I do".

Paula's experience growing up on a reserve in southern Ontario again serves her well in terms of smoothing her adjustment to working in Moosonee. But something she wasn't prepared for was the reticence of Cree students. Her comments and my discussions with others who have had contact with various Native groups indicate that southern Native individuals are frequently more outgoing and verbally communicative than the Cree. In response to this difference, Paula has altered her style.

She also mentions that having respect "for the way of life" in Moosonee is necessary if one wants "to be accepted". This is similar to a comment made by Dora regarding what is considered appropriate dress in Moosonee and that one must adopt this style if one is to "not look conspicuous". A motivation for adopting other ways of doing things is that it confers a certain legitimacy in the community and breaks down the barriers between locals and southerners. Thus it serves as a way of integrating, of becoming

"accepted", as Paula said, or as Dora phrased it, becoming "one with the people" instead of "standing out" as a foreigner and outsider. "Accepting" and "being accepted" become part of a feedback loop where each initiates and reinforces the other in a continuing circle.

Nancy, the CAS supervisor whose co-workers made assumptions about her thinking because she is White, explains her acceptance, if not yet adoption, of the local practice of self-disclosure in counselling sessions. Her exposure to different ways of thinking and different techniques has become a valuable learning experience for her, helping her see alternatives not validated by her training.

"A lot of people in helping roles up here have had really significant life experiences and I've heard sometimes people sharing them and sometimes I think, 'Ohhhh, that's not appropriate', and then I sort of take a step back and realize that our professional training is giving us rules as to what's appropriate and what's not. I know that people here have a lot of respect for people who have been through life experiences in the field, and maybe by self-disclosing they're helping make that connection with their client even stronger, and really capitalizing on that respect and maybe even being more helpful. It makes a lot of sense to have self-disclosure, and it's something that I'm trying to—I don't have that reaction of, 'Gasp!' unless it's something really inappropriate, and sometimes it is really inappropriate. But when you think about the counselling relationship, it's a professional relationship, but it's also a human relationship, and if you take that human part out of it, I don't think you can be a very good helper. And that's something that I've really learned up here, it's something that has been really enriching being up here, is seeing other people do things, and that's one of them, for sure".

As stated previously, Native individuals tend to rely on personal experience, rather than "book learning", as evidence of understanding or competence. Self-disclosure both validates the local service provider's position as helper and enables the sharing of wisdom gained through life experience. Yet self-disclosure as a counselling technique may not be a viable option for most southerners. Two interviewees specifically mention that their experiences and background are too different for a sharing of them to be meaningful. Ellen claims, in response to the warning that she needs to work more out of her spirit and heart, "I don't have the same kind of story that I can share with people here". And Anne says, in reference to local people, "I don't know how well the people here will relate to the sorts of experiences I've had". Self disclosure initiates a contact of equals. It assumes a

commonality of experience between professional and client that many southerners cannot establish because their experiences prior to arriving in Moosonee or Moose Factory are largely foreign to life in these communities. But simply understanding that there are alternative ways of approaching helping may make a southerner's adjustment easier in other areas. Self disclosure is likely not a technique many would successfully adopt. But working toward a non-authoritarian relationship with a client or patient, for example, comes from a similar assumption that all people have something valuable to contribute.

Dora would probably not share her life story with a client. But she does treat her clients as equals. She told me in her quiet yet candid manner:

"I don't feel like an authority. I'll give what I can offer but other people have other things to offer me and I think that if we work on that playing field with people then you get along...If you work with someone and you get the feeling they're up *here*, you don't open up to them much, you feel reserved, you feel almost resentful...If you're going to work with another culture, you have to be willing to work with them at their level".

This approach, which implies an understated reciprocity, acknowledges that both the service provider and client are capable of giving and learning. In this way Dora structures the helper-client relationship in a way similar to local service providers, who tend to view helping as a "two way street" where both parties contribute and both benefit. Dora admits that an obliviousness to cultural difference or an ethnocentric assumption that the southerner's way is the only way inhibit the helping relationship. Thus she learns appropriate behaviour and expectations and adjusts her approach with the understanding that she is the one who is different and must change.

Two interviewees specifically stated that they have adopted local methods of coping—methods they were unaware of or did not practice while residing in the south.

Ellen claims that her enjoyment of the outdoors has become the same as local residents.

"There is something about it, that they [the Cree] know that they're 'going home' when they go back to the bush and that they can just be with each other in a way they can't be when they're in town. So I find it really interesting. And I know for myself, in terms of stress, that for me to go for a walk and just to look out on the river, to go into the bush in the wintertime and go cross-country skiing—now that is my way of healing, of being removed".

Exposure to culturally specific attitudes towards the environment has encouraged Ellen to regard "the bush" or "the riverbank" with an altered perspective. The significance of these places to local individuals has been a signpost for her, pointing the way to relaxation and healing.

Paula believes her move to Moosonee was the "healthiest decision" she ever made. She attributes this to her altered outlook and embracing of different ways of dealing with stress, learned from local people.

"What I've seen with our students especially is when they get really stressed out or they say, 'I've got to do something to get away from this', the guys will say 'I'm going out hunting' or 'I'm going out on the Bay'. The people up here are of course very water-oriented. The water up here has a very tranquil effect on them. The women up here use their hands whether it's baking or crafts and plus we all like to talk! But what I found when I was in Toronto was if someone was having a really stressful time they'd say, 'let's go out for a drink', 'let's meet at the bar', 'let's go out after work'. What they sought out to release their stress was something that was being done to them. It was a movie that they went to go and see. It was always some sort of entertainment that was being brought to them whereas up here, the way they seek out their relaxation is something that they *do*, so I find it's completely different. The end result is often the same, but the people up here will seek something out. *They* seek it out. That's what I've found up here that is very much different. I have found finally that I *can* entertain myself. You learn the art of conversation, you learn the art of entertaining and these are things that you actively go out and do...Everybody says, 'there's something about going for a walk along the Moose River'. You actively go out and do it. A couple of times I've gone with someone out to the Bay—just jumped in the boat and gone—and of course I love it because I'm Turtle Clan so I'm attracted to the water. So that's the big difference I see in the coping skills. The way that we de-stress ourselves is in the satisfaction you get by going out and accomplishing something because quite truthfully, after that movie is over, yes, the movie is over but you may not necessarily have gotten rid of that stress. But when you are actively going out to do something, to seek something, you're going to keep on doing it until that stress is gone".

Paula makes some wonderfully astute observations of the differences between how city-dwellers cope in an urban environment and how Cree residents cope in Moosonee. One of the remarkable aspects of Paula's interview is her whole-hearted espousal of the way of life she has immersed herself in. Her attitude is almost overwhelmingly positive, and her interview is much more about coping than stress—a refreshing change from the naggingly negative and niggardly comments and experiences some southerners shared. This is not, of

course, to offer Paula kudos while kicking other interviewees for being honest about their difficulties. But I cannot help but see Paula, and Dora for that matter, as examples of people who really made it a project to positively integrate into the community, to not only adjust to their circumstances but embrace the differences they encountered and make them their own. Fisher (1993:5) discusses research results which demonstrate the positive effect willingness to change "cultural and social outlook" and "to become committed to a new place" have on the effects of relocation. Dora and Paula have shown such flexibility and commitment; consequently they now describe Moosonee as home.

I will close this discussion with an anecdote as told by Paula because it offers further insight into her adjustment and appreciation for Moosonee. For those who aren't avid TV watchers, or who are unfamiliar with the program *Northern Exposure*, let me say that Dr. Fleishmann is a Jewish physician from New York who has re-located to a small town in Alaska. This sets the stage for some cultural dissonance, resultant humour and application to life in Moosonee.

"There's two shows on TV right now that I watch up here because I like to make comparisons to Moosonee—*Northern Exposure* and *North of 60*. And Moosonee has become my Marilyn—Marilyn is the secretary for Dr. Fleishmann. So much of what she says has a double meaning. And I remember one of the first things she said to Dr. Fleishmann, and he comes flying into the office, and of course it's empty. And she looks at him and says, 'no, you have no patients today'. What she's really saying to him, because he's just like a bundle of nerves, is yes, there are no patients there, but she also meant the other kind of patience. So Moosonee has really become my Marilyn. I've really learned to calm down. I've learned to accept things I can't change. I've really learned to acknowledge my stress whereas I used to try to ignore it before".

A discussion of adaptation should not only imply outward change. A more casual and less aggressive manner with clients or a heightened appreciation for the outdoors may make life and work in Moosonee and Moose Factory more rewarding. But the understandings reached through years of residence in these northern communities go beyond external alteration and encompass internal self-discovery. Paula does not speak only about changing, but also about accepting what she can't change. Residing in Moosonee has not

necessarily made her a very different person on the outside, but internal revelations have enabled her to respect her limits and forgive her failings. It is telling that the character Marilyn, referred to in Paula's anecdote, is a "local" person in *Northern Exposure's* fictitious small town. For Paula, it is the local residents of Moosonee who have provided the impetus and model for her coping, just as it is Marilyn who reminds Dr. Fleishmann that there is more than one way of looking at a situation.

So far the discussion has centred around the individual altering aspects of his or her personal or professional self in order to cope with circumstances encountered in Moosonee and Moose Factory. Yet professional adaptation practiced by southern service providers can also involve the individual working within the organization to adapt the service to suit its clients. This institutional change is a way of alleviating the stress of culturally inappropriate services or guidelines—an overarching concern since most of the service agencies in Moosonee and Moose Factory are province-wide, government funded organizations, whose mandates and methods are urban-centred and not particularly Native. Thus this adaptation makes the service more responsive to the residents of a northern community. From the service provider's perspective, such an outcome can also help with any ambivalence he or she feels regarding his or her role as a representative of a foreign institution serving a largely Native clientele.

David, like Paula, uses the phrase "when in Rome" to describe his professional conduct and believes that adopting a Native approach to the service he offers may help him cope. Like Nancy, he has learned through his experience working in Moosonee to appreciate different approaches to service provision and understand that what he once considered a universal way of attacking a problem can be adjusted.

"I always have to keep in mind the nature of the community here and the Native philosophy of life is very different from the White philosophy of southern Ontario. Being a policeman, coming up here with my southern Ontario mentality just doesn't work. So when in Rome, be a Roman". "So how exactly have you adjusted your philosophy?" I prompted. "I've slowed down a lot and my priorities have changed a lot in dealing with people", he responded. "I can

say I don't care about a lot of things that used to be an issue with me. Perhaps that release has also helped me with stress management. I certainly don't take the job home...Our focus is on domestic violence, which is a major problem up here. And it's looked at with very *strong* ideas down South...but we're more social work oriented than anything else. We'll lay the appropriate charges if there's been a breach of criminal law, but we tend to follow up more closely, almost like a social work approach...Sometimes we intervene and it's almost proactive".

David understands that cultural difference, compounded by under-staffing and the lack of supportive courts, makes the justice system function poorly in Moosonee. In response to the acknowledgement that "the Native philosophy of life is very different from the White philosophy of southern Ontario", he has become less hasty in his approach and looks on his role as proactively keeping the peace more than constantly slapping charges on offenders. He asserts that domestic situations in Moosonee are 99.9% alcohol related, and that sending these repeat offenders, once sober, to jail is neither practical nor appropriate. Prisons are not treatment centres, and there is very little hope that a Native person sent south to a detention facility will return home a recovering alcoholic.

The technique of detaining the violent party under common law authority for breach of the peace, the norm in Moosonee, is something David had to learn. He recounted the events of his first shift during which he was called to "a domestic". Unaware of the tactic used in Moosonee, he "just figured, 'well, the same techniques worked elsewhere, why not try them here?'" and was shocked to learn that his approach, common practice in southern locales where he had worked previously, is considered overkill in this new town.

Lawyers, too, are able to fiddle with the gospel, so to speak. Lisa explains how those involved with the law in Moosonee and Moose Factory are able to adjust to the unique situation of being in an isolated community.

"One of the things about working around here is that sometimes the players can look at the law as 'it's not going to work here, let's try to make it a bit more accommodating'. The participants, or they call them 'stakeholders', would meet every couple of weeks and keep a lot of things out of court. You don't have the resources up here that people have down south...So we pursue other avenues

up here that they don't have to. But everything seems to be urban-centred and it just doesn't apply up here".

The reality of agencies providing services for the north is that they were engendered in the south and imported to the north. Thus it is the responsibility of individuals within these northern branches of province or country-wide organizations to work around the rulebook. Unfortunately, this isn't an adequate answer. Lisa lamented the fact that one of her collaborators in the drive to "keep a lot of things out of court" left her position and "her successor wasn't nearly as keen on that sort of approach". Left in the hands of individuals, especially given the turnover of staff in Moosonee and Moose Factory, little real change will be effected in organizations. But, although fallible, it is one method of coping with employment in a culturally inappropriate organization and a way of working with the community instead of against it.

Dora discusses the impracticality of encouraging nutritious eating, southern style, in a northern community where food is costly, limited in variety and of dubious quality. As a result, she has adapted mainstream approaches and rules to coincide with local practices, attempting to mold behaviour already in place instead of eradicating it altogether.

"I find it's hard to teach people about drinking milk when they have six kids and you're saying, 'your children need milk every day,' but it costs \$6 for 4 litres. You're looking at the price and saying, 'yeah, woman, how realistic are you being, talking to this person?' So what you do, I've learned, is you say, 'if you can, this would be a good idea,' but you also say, 'what are you doing?' and if they're using Carnation milk—I talked with the nutritionist at one point and asked how we could help—if they're using Carnation milk, which a lot of people do because it's cheaper, you can use it half and half and that's the same as whole milk. One of the habits here is to give them weak tea, so you tell them, 'give them a little bit of tea and the rest milk, or half water and half milk,' so you sort of fall in with what they're already doing and they're still getting the nutrition. With fruit and vegetables, you say, 'well, use your cans.' We don't use so many cans down south...The nutritional value of canned vegetables is all right, so you don't *always* teach fresh. You teach what is available and what you can afford and adjust it to what you're already doing. Carnation is always looked down upon up here, by a lot of the doctors that come up. They don't want the babies on Carnation. 'Get them on Formula!' Well, ideally that's great, but you can't always do that. When I taught at that workshop, some of them said they couldn't afford Formula, so I said 'Carnation is fine,' and they

were surprised that I said that. I said, 'just give it in the right strength'. You certainly have to look at the feasibility of things...To me, if you're just saying what is the ideal, they'll say, 'yes', but you know they'll go out the door and do the opposite, so it's not really helping anybody. And then they're not going to talk to you, because you've told them what they have to do and they're not able to do it. You have to work within the community".

Dora's professional tactic is the same one she applies in her personal life. She does not want to dictate ideals and in response lose the trust and confidence of clients, just as she does not want to dress up and stand out in a community of casual dressers. Her goal is to "work with people at their own level", and this requires adjusting and adapting traditional southern thinking regarding healthy eating to the availability of food and income of clients in Moosonee. Dora does not see herself as an "authority", proclaiming what is right and as a result estranging those she is supposed to help. By "falling in with what they're already doing", Dora ensures she is a positive contact for local people and can feel she is doing something to encourage incremental change, instead of whole-scale alienation.

Getting Real and Letting Go

Dora's strategy serves yet another purpose. Southerners experience stress related to working with what many termed a "non-compliant" population, and by adjusting standard practices to work with behaviours already in place, she helps ensure people will continue to listen to her and see her suggestions as helpful. But this is not the only way of coping with this stress. Some southern service providers, including Dora herself, have come to realize that letting go of unrealistic expectations, and refusing to see themselves as having power over their clients, are also ways of coping with people who do not follow instructions or attend sessions. This is not a cop-out coping tactic. It is not a giving up or a turning away. This strategy permits these service providers to continue their work as professionals through a tricky balancing of letting go and holding on.

Ellen explains this balancing act. On the one hand she is depressed by the work she puts into event planning which seems to make little or no difference to her clients or the

community. But she copes with this by maintaining hope that someone, someday may be helped by her efforts, even if she isn't around to see it.

"Every experience all day long is one that says, 'let it be' and 'don't put on any expectations'. Like the Women's Issues Committee, and all the different events that we organize, and every once in a while you think 'is it worth it?' I mean, the amount of effort that we put into that, and the money at times and the running around and after a while you're just exhausted and you say, 'I don't think I ever want to do something like this again' and you sort of recover some energy and say, 'yeah, I think I do want to do it again'. Maybe *one* person, other than myself, maybe that one person will come and be touched. Maybe one person will come and feel encouraged. Maybe one person will come and hear something that is new that sort of turns on a light—for a moment. I keep lowering and lowering the expectations and yet not giving up hope, or the belief that every little bit somehow does make a difference. I have these images and sometimes I go with them well and sometimes they don't give me energy but I have this image of a pool, and you keep throwing little bits into the pool, and each little bit may not seem like much on it's own, but to really trust that your little bit is adding to everybody else's little bit. And then there is the other image that I have of the rippling, that you throw one little pebble in, and the ripples go out and out into the water. You'll never know where the ripples go to. You never know who you've touched... You just have to live in faith all the time that somehow, though you can't see it, somehow something is happening".

Such confidence requires an impressive amount of faith and dedication and leaves the service provider with little tangible feedback to fuel further efforts. Thus it is not, I believe, a coping strategy to be relied upon too heavily. On a good day it is easy to envision the faceless and nameless who have been touched, the future generations, the long term changes. But on a bad day, when coping is especially crucial, such abstract thinking is likely to fail Ellen—hence her confession that she occasionally feels like giving up on projects which meet with no response, clients who miss appointments, and a community which struggles on, seemingly oblivious to her efforts.

Like Ellen, Sarah has let go of unrealistic expectations, and allowed herself to be content helping on an individual basis. She sees change and healing happening over a long period of time, with initiative coming from the community and not from herself. This helps her cope with the stress she described in the previous chapter—feeling her "Whiteness" precludes her helping, because to help is to disempower.

"I think its very difficult to affect any big change in people's lives and I don't feel like I need to make big changes. I did when I came here. There's this, this

and this that needs to be done, and needs to be set up here, and that's why I'm here, I don't think my job is just in this office, it's involved with the bigger community and 'let's go!! Let's get it done!' It was really hard for me not to do that, and it was part of that process of realizing that it has to come from the community. So I don't have any illusions about having to do that anymore, and that's nice. I think if it does come now it will come very slowly and naturally...I don't get discouraged or pessimistic about it. I just see things happening over a very long time line and see that I won't be a part of that...I think it's important for me to look at my motivations for doing things. I went into medicine to help people and it was important for me to leave that behind me, and to realize that I wasn't going to save anybody, that I could make a difference on an individual basis, but the goal wasn't to have people thank me or be grateful. You lose that so quickly, though. You have to switch to another way of operating".

Both Sarah and Ellen have left Moose Factory and Moosonee. Perhaps the experience of thanklessly helping, or witnessing change without their participation or presence, was too difficult for them. Maybe change took too long and they couldn't be as patient as they once thought. Or maybe they "let go" of expectations until there was no longer a reason for them to be professionals in these communities. Their leaving should not be interpreted as wholesale failure, however. This assumes that a decision to leave is not itself a coping strategy and that the realizations and learning these women experienced while working in the north had no purpose. On the contrary, what they learned in Moosonee or Moose Factory could well help them adjust better in whatever position they subsequently take. Regarding leaving as a failure also implies that in order to be a successful service provider, one must set up practice in one place and never move, never experience anything new. Given that all of the service providers whose words have graced the last 70 pages came originally from some other place, this would be an unrealistic assumption. These are obviously people who are not afraid of change, of leaving and moving on.

But so far I have looked at the question of leaving or staying only from the perspective of the individual concerned. It is an oft-raised sentiment that hiring local service providers or those from the south prepared to make Moosonee or Moose Factory their home will cleanse service agencies in these northern communities of colonialism and result

in better service for residents. This community perspective indicates that coping methods enabling a service provider to stay in the north should be applauded. And there is also the perspective of other service providers from the south. These professionals, as was demonstrated in the last chapter, harbour many ill feelings towards those who stay for only a short period of time, believing them responsible for the tarnished reputation and negative stereotyping of southerners. If a substantial number of southern service providers were to commit many years to these northern communities, enough pressure would perhaps be placed on such stereotypes to break them.

How should this dilemma be resolved? Should any coping strategy, if it works for the individual concerned, be considered adequate? Or should the wider community context and the interests of other parties influence the definition of a successful coping mechanism? My inclination is towards the latter argument. Since it has been established that service providers do not arrive in Moosonee or Moose Factory as individuals but as representatives, they should leave also as representatives, with all the attendant responsibility and liability this position assumes. Much of the sad history of northern communities could perhaps have been averted if individuals from the south were considered responsible, both *for* their actions and *to* the people they were working with.

I cannot actually determine what made Ellen or Sarah leave, or what would have encouraged them to stay—what I know is mere speculation from those I maintain contact with in the community, to which I cannot give much weight. But what I know about how Ellen and Sarah coped with the stress of professional disillusionment—their unresponsive clients and patients, and seeming inability to make a difference—tells me a great deal. They were satisfied with a passive solution. They chose to wait, to let go of expectations, to accept their inability to effect change and accept that they wouldn't be around to see change when it happened. Instead of taking an active, problem-solving approach—like the majority of their southern counterparts—they were satisfied with re-appraising the

situation, with changing the way the situation was construed without changing the situation itself. This form of coping, labelled "emotion-focused" by Lazarus and Folkman (1984:150), is considered to be less successful than "problem-focused" coping.

As intimated in the literature review, I have reservations about the cross-cultural relevance of Lazarus and Folkman's coping categories. But for the southern service provider, who has been socialized and educated in a society which places great value on active coping and problem-solving, the inefficacy of "emotion-focused" methods of coping is likely well-founded. What seems a better strategy, at least in terms of allowing a southern service provider to remain in Moosonee and Moose Factory, is an active approach to coping. As regards patients or clients, this could be a resolution to change one's approach in a way that lets go of idealism but holds tight to practical ways of contributing.

Anne offers an example of such an approach. She has realized, like Sarah, that as a physician she cannot "save anyone's soul". But she does not simply acknowledge this and leave herself with no role to fill, as Ellen lamented when she said, "it's like 'let go, let go, let go' till I wonder what *is* my role?" When Ellen lets go of her ability to define her role, I suspect she lets go of her reason for being in Moosonee. Anne, while letting go of the idea that she can change someone's behaviour, holds onto her role as a source of information.

"I don't get particularly annoyed by people not showing up, or being non-compliant with their medication or not taking my advice. This is a bugaboo that a lot of physicians have, and probably particularly family physicians who are involved a lot in lifestyle counselling. When you get this overweight, smoking, hard partying person coming in, and they've got high blood pressure, you know that they're a walking disaster for heart disease, and diabetes and all that type of stuff. So you sit and give your little spiel. If you expect them to go away and do everything you said, you're dreaming. I mean, how long did it take me to give up coffee?...So if I can't take my own advice—and I am *only* too well aware of what all these things can do to my body—how the hell am I going to expect someone who is feeling perfectly all right and is enjoying himself to come in and pay attention to me? My job is to give them the information, and to be available when they want me to help them. That approach eliminates a *huge* portion of the stress that family doctors are under—because they really expect people to listen to them. Incredibly unrealistic...I've probably tried umpteen times to get these people to treatment centres. Again, it's not a mark of *my* failure if they don't get in. It's just that the time isn't right yet. And maybe the time will be right before it's too late, and maybe it won't

be. So maybe I've taken a bit of a Native approach to time and things, but that's the only way it's going to work...People go out and they drink again and again...But it's their body and their decision, so I eliminate all kinds of stress by not trying to live their lives for them. Hopefully that'll stay over time, and I won't get fed up, because if I start to get fed up I'll have to get out of here, because I can't change people. I can't even change myself".

Dora sees herself filling a similar role. She, too, lost her idealism and realized that her words of wisdom would often be disregarded. She coped with this frustration as Anne did, by becoming an information provider and allowing her patients the freedom to make choices.

"Many times I felt, 'I don't understand what's going on, I don't think I'm making any progress, I'm not really helping these people'. I wondered if anyone really *could* help. However, unless it's an emergency or a major problem, I've found that a lot of times in public health that you have to give the person time. If it's information you present, give them time to digest it and see if they want to make it part of their lives. So I think I've learned to slow down a bit, and to allow them the freedom to make their own choice. I remember a man who had diabetes and his foot was sore and they were concerned that it would get gangrenous and he wouldn't go to the Clinic so I found him and talked to him and at first I said, 'you've got to go, you've got to go,' and he never went. So I went back the second time I saw him, I said to him, 'it's your foot, it's not mine, and it's your choice. I'm telling you the facts of what may happen. I can't say it *will*, but certainly it's a possibility that you'll lose part of your foot. It may become gangrenous,' and I explained what that meant. 'But,' I said, 'I can't make you. It's your choice'. And he did. He lost part of his foot. I have learned to put the onus on the person. Now he works well with me. I didn't really help him, but he knew I was honest with him and he knew I gave him the choice. You have to allow, I think, any people that freedom to make that choice, whether it's a wrong choice or a right choice in *your* eyes. I've found that if you respect them in that way then they too will respect you. I think that that's one of the things that helps me. There's a lot of frustration in public health in that I *try* to motivate people to live a healthy lifestyle and you cannot put within them the motivation that you'd like. You allow them that freedom. You tell them what you can and you share with them and you give them information, but the ultimate choice is theirs. I think if you work with them that way, *they* are more comfortable with you and also, as you said, you're not carrying around with you all the baggage of all the failures. When I worked with the government I think I was more zealous in the respect that I was trying to change the world, and I think you go through some of that here and I see it in others now and I had a bit of it myself, I have to admit, but slowly you learn that the world isn't going to change. Either you're going to settle down and do what you can and try to help where you can, or else you're going to burn yourself right out".

Dora's last sentence succinctly outlines her approach and it also reveals that it is not only the patients who have choices. Service providers do as well. They can realistically assess

their capabilities and continue to see themselves as providing a service, or they can enthusiastically fan their idealistic fire, only to burn out. Or, and this is a third alternative I will take the liberty to add, they can let go of their expectations to the extent that they no longer see themselves as fulfilling a role.

As individuals employed by bureaucratic organizations whose ideology and practice have been imported from southern climes, Anne and Dora have little power to make large-scale institutional changes as a way of coping with culturally inappropriate service provision. They choose, therefore, to offer their services to patients as an option, an alternative, a choice. While this may have always been the understanding of the patient—who can regard or disregard instructions or advice at will—for the professional this alleviates the stress of rejection and makes the colonial medical system they work within less paternal and confrontational.

The position of "information provider" is conceived of as a "new role" for health professionals working in Native communities (Roberts 1988:130). It is said to demonstrate respect for the patient and his or her family by "encouraging and 'allowing' them to participate jointly in the decision-making process regarding management, investigations, alternative therapies, lifestyle changes and relevances of traditional healing". Anne and Dora have adopted this approach in light of the lack of success realized when importing mainstream professional-client relations to Moosonee.

Nancy describes her expectations as becoming more realistic over time, and she raises a crucial point about the liability youth can be in a service provider. Newly graduated from school, the naive helper assumes he or she can change the world. Especially in Moosonee and Moose Factory, where people are often suspicious of service agencies and sick of tutelage in the form of Indian Agents, missionaries, and health professionals, this idealism will result in a rude awakening.

"I think my expectations have become more realistic. I think everybody who is brand new in the field thinks they're going to go out and save the world and do

all this good, and it's just a very natural thing when you get out of school you're all pumped up, but then reality sort of smacks you in the head. So I think over time my expectations about how much change you can facilitate with your clients or with the community have become more realistic".

Unfortunately, many of the service providers who come north are young. Youth makes risk less frightening, and it is the young who most often crave the adventure that working in a northern location is presumed to provide. But it is the young who are most often idealistic. As Anne states regarding locums who come north, "a lot of their idealism is because they've gone into medicine when they're very young, and they haven't learned what people are really like, and they haven't even learned what they're like!" Thus they are incapable of seeing themselves reflected in their patients, as Anne does when she sees her own trouble giving up caffeine and sugar as mirroring an alcoholic's persistence in drinking. Anne went to medical school when she was 42, not 21.

Nancy, though recently graduated when she came north as a child protection worker, has learned to work around her loss of idealism. She has chosen, not to leave, but to move out of a front-line position. As a supervisor she continues to contribute, "to have something to offer", but she is able to distance herself from some of the paralyzing issues she dealt with on the front-line. In this way Nancy copes with professional difficulties in a way more typical of a local person than a southern import—a fact which is not surprising, given her past socialization in Moose Factory and contemporary commitment to living and raising her family in Moosonee.

Kelly, the probation officer in Moosonee, offers a different way of coping with uncooperative clients who do not heed her orders. While other southerners complain of having to work when off-duty, being seen in their professional role even in their personal life, she refuses to accept this. She maintains that her job ends at 4:30, and if she witnesses clients refusing to comply with their orders after this time, it is not her responsibility to enforce the order and confront the client. She, too, acknowledges she has no real control

over clients, and that they, not the probation officer, are responsible for their actions.

"As far as distancing myself from them [clients], the other two guys that worked here, they'd never be caught dead at a dance or anywhere their clients might be. Well, this is a small town, you cannot help that. Sure, I go and bartend a dance, and I have clients there with abstain clauses, but there's nothing I can do about that, and it's been proven before that if I even breach them and go to court—well, how do you know they were drinking, and it's easier just to let them do their own thing. I'm not working at 9 o'clock at night. I'm at the dance for another reason. And if there's going to be trouble, then the police will get it and I'll get them later. My job finishes at 4:30, that's it. It's up to the police to intervene if something's going on. And that's how I do it. You know, in Toronto, you'd never have a problem running into your clients, there'd never be a problem. Here, there's only so much going on, and they have a life, too. I don't expect them to hibernate. So that's the way I work it".

Kelly's attitude gives her the freedom to attend social functions and integrate into community life. This is perhaps not the best attitude from the point of view of the errant client's family, who may be subject to a violent, intoxicated partner or parent following the dance, or from the perspective of community leaders and local service providers, whose commitment is to community change and healing. But Kelly's approach ensures she can enjoy life in Moosonee after she has left the office.

This attitude is a luxury which only an outsider can afford. Kelly was not born and raised in Moosonee. She does not know her clients or their families outside professional encounters. She does not approach her work with the hope of fostering community development, with the zeal of one whose primary commitment is to improving the lot of "her people". This leaves her free to separate personal and professional commitments, and to consider her work-related obligations over when she leaves the office.

Conclusions

Implicit in this chapter is a hierarchy of coping methods which esteems certain approaches above others. Coping strategies which perpetuate a feeling of dislocation by encouraging the southerner to withdraw from community interaction or to re-establish now-distant ties in the south should only be considered temporary. These methods merely reinforce the outsider status which forms such a barrier to full community participation.

Coping strategies which capitalize on (instead of amend or dull) the heightened sensitivity to identity and values which cross-cultural interaction inspires should be considered more successful in light of long-term coping. The southerner who switches his or her allegiance from some romanticized "south" to Moosonee and Moose Factory through a process of acceptance, adjustment and espousal will inevitably be happier and more successful in both personal and professional endeavours. "Have-not" thinking must become "have" thinking; discontentment and looking away for answers must become contentment and looking within.

The difficulty with this model of coping is that it requires an extended tenure in the community and relies largely on individual motivation and resources to be successful. Such realizations about self and its relation to "south" and "north", "home" and "away" do not come quickly or easily. The process of culture adoption, of "becoming local", cannot be taught and hence cannot be hurried. Certain supports for new arrivals can be put in place which give the newcomer a head start, but it seems that the profound and largely unconscious changes that occur as the southern service provider becomes accustomed to his or her new way of life are the result of individual time, effort and commitment.

CHAPTER FIVE: THE LOCAL EXPERIENCE OF STRESS

The stresses of being a local service provider appear to contrast with the experiences of southern professionals, who, as newcomers, are unfamiliar and uncomfortable with life and work in Moosonee and Moose Factory. Local counsellors, health care workers and police officers experience stress primarily because Moosonee or Moose Factory are considered "home". Their commitment to remaining in these communities may be inspired by a sense of belonging and shared destiny. But having been born and raised in Moosonee or Moose Factory, they are not regarded solely as service providers but instead have complex contacts within these communities which complicate their personal and professional lives. Thus they live an often painful paradox: the insider status that motivates them to work in their home communities is also the source of much of their stress.

Many local service providers complain that residents have unrealistic and frustratingly high expectations of them. Clients call on local service providers for frequent after-hours assistance and consider these familiar helpers to be liaisons with their employing agencies. Concerned community members, employers and political leaders expect front-line helpers to be visible in the community and, because they are considered role models, expect them to lead exemplary lives. The "dependence" which is said to characterize relations between local service providers, their clients, and the wider community, as well as relations between local residents and non-Native outsiders, is also considered stressful.

Local service providers are not supported by the community members that expect so much of them. Community factionalism presents problems for employee relationships and for implementing programs. But this generalized non-supportive climate extends beyond the expected divisions and heterogeneity of Moosonee and Moose Factory into

personal vendettas and a tendency to undercut the success of local service providers. Their visibility and prominence as role models makes them targets for criticism and competition. That they are so well-known in the community makes their past—often a drinking problem that has been since overcome—or their background—perhaps as members of families feuding with others in the community—ammunition for professional critique.

Simply being from the community and privy to inside knowledge is another stress. Being surrounded by community problems and familiar with the circumstances experienced by those requesting assistance makes it extremely difficult for these service providers to separate their professional responsibilities from their personal lives. They experience difficulties maintaining friendships and claim to know too much about their clients.

"Ethnostress"—a uniquely indigenous experience labelled as such by Dr. Robert Antone (1986)—also contributes to the local service provider's overall experience of stress. This, unlike the previous stresses, has not so much to do with being "local" as with being "Native". It involves questions of identity, and the stress of being a member of a subjugated and stereotyped group of people.

Community Expectations

As a local service provider, one feels intense pressure to meet the often excessive expectations of clients and other residents. In these communities, where so many require help, the helpers are assumed to have super-human capabilities. One presumption is that the local service provider is available 24 hours a day. Of course, many service positions in these communities—especially those which involve emergency assistance—have such expectations built into their job descriptions in the form of on-call hours. Even southern professionals, like physicians, nurses, ambulance attendants and police officers, must accept these responsibilities as a condition of employment, and they are generously compensated for their time. But local counsellors are not always officially mandated to provide their services around the clock and, because many are paraprofessionals, their

wages are certainly not to the southern professional standard. Yet the expectation remains that the precious hours they spend relaxing with families or friends, or restoring their energy sleeping, may be interrupted by phone calls or visits from clients.

True to their considerable empathy for clients and their commitment to helping fellow residents, these demands are not considered intolerably troublesome by many local service providers. Jerry, an adolescent counsellor, is aware that he is only required to work from 8 till 5. But he also understands that community members and clients expect him to be available at all hours. Rather than regard this with bitterness as a presumptuous inconvenience, he prides himself on his patience with those who would interrupt his sleep with an early morning phone call.

"When you think about counselling, you can try to put limits on yourself, and say, 'okay, it's an 8 to 5 job, that's all I'm having, I won't do anything else' but for a counsellor to be effective in this community you have to be open 24 hours a day, and sometimes you don't really know what's going to happen during that 24 hours. I've been called at 2 in the morning, at 4 in the morning and sometimes you think about that and you say, 'what happens if somebody called you at 3 o'clock in the morning, would you go? Would you support the individual or just go back to bed?' I take the time to get up and to go. I'm not saying that everybody should do that. There's only certain types of special people that can do those sorts of things".

There is an understanding that in order to be effective as a professional in Moose Factory, one must sacrifice personal time to work-related concerns. Troubled community members cannot predict or postpone their pain so that problems can be taken care of during business hours. Residents react to immediate needs and expect their service providers to readily respond. That Jerry considers himself a "special person" because he can survive such extensive demands—in effect to have work encapsulate his entire life—is evidence that such demands are stressful. Less strong individuals would have burned out and moved on.

In fact, Jerry himself admits:

"I'd go home at night-time and sometimes I couldn't sleep or just something would come to my mind that would say, 'get me out of here, I don't want any more part of this, let somebody else take over this position'".

There is a discrepancy between Jerry's tolerant and even enthusiastic acceptance of

community expectations in the first excerpt and the desperate urge to escape his position evident above. An ideal service provider is always on call, and it is towards this ideal that Jerry strives. But in reality, the pressures of his position make him feel like quitting. The ambivalence he feels because his ambitions and his capabilities are not congruent adds to the stress of telephone calls jarring him awake and jolting him to action at all hours of the night.

Ellen, the psychologist frequently referred to in earlier chapters, is responsible for supporting workers employed by the mental health program. She related to me her concerns regarding the uniquely stressful aspects of being a local service provider. Among those was an adamant belief, similar to that held by Jerry, that they had to be available at all times. She recalled with a resigned sadness:

"I remember at team meetings [staff meetings] I found it agonizing, absolutely agonizing for many reasons, but one of the things they [local workers] always seemed to be struggling with was 'everybody makes so many demands on us. They expect us to be there all the time, to be available 24 hours a day'. And I said, 'you can't go on that way, you need to set limits' and they said bluntly, 'you can't, you *have* to be available 24 hours a day'".

Both Ellen's and Jerry's excerpts express the hesitation with which local service providers regard setting "limits" on their professional obligations. Though Jerry admits "you can try to put limits on yourself", and Ellen advised her workers to "set limits", the reality is that community members will not respect these limits. Perhaps this is because scheduled hours of work are an imported element of helping, or because it is assumed that if one is paid to do a job, it should be done regardless of the time of day. Perhaps it is because community residents are accustomed to the dedicated, all-hours assistance of helpers associated with religious orders (Hodgson 1980:47). Or—and this is more likely—perhaps this assumption of all-hours availability comes from the belief that the complex inter-relationships and personal bonds that exist between local residents and local helpers justify requests for assistance during what would be considered personal time. Regardless of why limits are disregarded by local residents, to the local service provider, "setting limits" means refusing

to help, because clients will continue to call after the work day is long over. Given the fact that service providers, especially local ones, entered their chosen profession to help, such a refusal would seem to contradict a fundamental commitment to their work and the community. Frank, the First Nation's constable³ in Moose Factory, feels both bolstered and frustrated by the expectation that he is always available to provide assistance. In his unassuming but confident manner he told me:

"Sometimes it's hard to get away from it [your job] in a small town, and sometimes people come right to your door when they want a cop, they come and bang on the door. Sometimes I go because it comes back to that again, where I became a cop because I want to help people...Because a lot of our calls here are 'my husband's beating me up' or 'my boyfriend's beating me up' or 'my son and his wife are in the house and they're fighting' or 'there's someone in my house that doesn't want to leave'. Those are the kind of calls you get the most. So when they come to your house they're saying, 'come and help me', and when I can help somebody, I feel *really* good. There's a lot of times when people call here that they'll ask for me or they'll ask for Al [another First Nations constable], because we've been here a long time. Since I've been here, I've seen maybe 10 OPP officers on this island alone. They come and go. And Al saw a lot more than that. And the people know that. When they want help, they come to us...But it's not always that good, you know what I mean? I have my days, too. It's not always that somebody will come to the door and I'll jump up and say, 'oh, can I help you?' There are times when, like I don't tell them to get out of there, but I tell them there's a proper way to call and this is the number you call at the OPP. People can't think that I'm always going to drop everything and go, eh".

A sense of well-being arises from the knowledge that the local service provider is needed by the community and that his or her presence can make a difference to clients. It is this recognition and opportunity to help that several southerners, especially physicians, feel they have been denied because they are outsiders and have not lived in the community long enough to earn the trust of local residents. Hence there is a compensation for middle-of-the-night requests for help from residents fearing the worst from a domestic row.

But Frank recognizes these requests as presumptuous and demanding when he would rather be otherwise occupied. What seems to bother him is being a liaison with his

³ As of April 1st, 1994, policing services for the Mushkegowuk region (excluding Moosonee) were transferred from the OPP to the Nishnawbe-Aski Policing Service. Individuals referred to as "First Nations constables" prior to this date are currently considered "Nishnawbe-Aski officers".

employing agency. While he understands that he is a constant while other members of the OPP detachment are forever changing, he would occasionally appreciate people seeking help through the proper channels. The stress of being bothered at home is compounded by the knowledge that there is an officer on duty who should be responsible for taking the call. What becomes evident is that there is a disparity in the community's understanding of service provision and the agency's expectations of its employees. When not under-staffed, officers are required to work 7 day shifts followed by 2 days off, and then 7 night shifts succeeded by 4 days off. The community, however, does not transfer loyalty to whomever happens to be on duty. Faced by an alarming turnover in southern staff, they approach the local officers for trusted assistance. It is not the *position*—particularly in the case of the OPP where recollections of southern officers who abused their authority are burned into local memories—but the *person* who deserves respect and trust.

The fact that local people do not understand or accept the formal workings of service agencies can be frustrating for local service providers. As Donna, the mental health worker in Moosonee asserts, this reconciliation of community and organizational expectations, which she terms the "combination of two ways", is itself stressful.

"People think they can call you up, no matter what time it is, you know. Or if you see someone on the road, you can't say, 'oh, I have to go back to the office, I'm late for work.' You can't do that. It's different. That's what I mean, it's the combination of two ways".

The formal aspects of employment in service agencies include adherence to certain rules, like arriving at work on time and taking only an hour for lunch. These are less rigidly enforced in organizations serving Moosonee and Moose Factory than their southern equivalents, often because supervisors are located in head offices elsewhere, or are themselves local people and understand the realities of working in these communities. But there is still the assumption by management that service providers work out of an office, and are expected to be there during work time, not chatting on the street or in a nearby restaurant. Donna may be late for work because a client stopped her for advice, or because

an interested community member had questions. Her initial tendency, having been raised in a culture in which "there is more emphasis on completing human interactions than on holding rigidly to schedules" (Devlin 1991:224) is to ignore the clock and finish her conversation. After all, the nature of the conversation is professional, not personal. But because the interaction does not occur in the office, as a result of an appointment, it is not regarded as official and Donna feels torn between bureaucratic regulations and fulfilling what she deems are professional obligations in a culturally appropriate manner. Such conflict between organizational rules or job descriptions and cultural understandings have been identified as key stresses for Aboriginal service providers (Chrisjohn 1990:206-7, 232).

This conflict can also be described as part of the difficulty experienced by a culture broker or mediator. Certain individuals, like Donna, act as intermediaries between groups which operate according to mutually incomprehensible cultural rules, assisting each group to understand and function with the other. But at the same time as he or she bridges gaps in understanding, the mediator remains primarily identified with one of the cultures. Donna is still Cree, and she must balance her work as a culture-broker with her participation in the local community (Sullivan 1981:275). This can result in confusion and even the sense that one is an outsider to both cultures (McLeod 1981:46)—a stressful by-product of "bi-cultural" living which will be explored in the section dealing with ethnostress.

Beth, once one of two public health nurses working in Moose Factory, is now in charge of the administrative aspects of the public health office. She experiences stress due to clients who expect her job description to remain the same, even though her title has changed. She vacated her previous position in hopes that "community oriented" stress would be replaced by a more tolerable "management-administrative type". "When you're a nurse out there," she observed with a sigh, "you always see people, you always see your job, whereas in this job I don't have direct contact with very many people". As a nurse,

Beth saw clients and was more active in the community. As "nurse in charge" her current responsibilities lie with maintaining a smoothly running operation and overseeing the work of employees. But former clients continue to see Beth in terms of her previous role and specifically request her as their nurse, even though her client contact is now minimal.

"Many times I would drive home and see somebody that used to be a client, and I'd think, 'oh, shoot, I haven't seen that person in a long time', and then I'd think, 'no, they're not my client anymore'. A lot of times that would happen to me and I'd feel guilty for not seeing that person. You almost feel like you're letting people down because those people know you and they call for you and they ask for you and they don't know many other people here".

These clients may be unfamiliar with organizational hierarchy and the designation of particular duties to particular employees, or they may choose to disregard this bureaucracy because it is deemed meaningless or a barrier to desired service. Regardless, they continue to see Beth as a public health nurse doing work in the community and seeing clients. Beth feels guilty because in her attempt to alleviate the pressures and stress of front-line work by moving into an administrative position, she must refuse to help individuals who know and trust her.

The stress, for Beth, is not merely that former clients ask for her; she senses she is "letting people down" even when they are spied at a distance. This would indicate that client expectations amplify her already-present uneasiness about abandoning community work for administrative duties. There is a mystique about helpers that they should be benevolently selfless, and I suspect this ideal of behaviour is exaggerated in the case of local helpers who are fundamentally committed to community development and are regarded as leaders and representatives in their communities. Much Aboriginal writing on service provision emphasizes this self-sacrificing, super-human, almost visionary aspect to helping others. Serving one another is considered to be life's purpose and a spiritual responsibility (Four Worlds Exchange 1992:21, 29). Working in one's own community and with one's "own people" is not considered a job. It is "a part of being, a part of being human and sharing with people" (Stalwick 1986:113) and therefore cannot be relegated to a

standard work day. The implication is that an authentic Aboriginal person can and will put the needs of others before his or her own. Native people are, after all, more concerned with their obligations and responsibility to the group than their rights as individuals (Chapman et al 1991:342). Indeed, "traditional culture" may have taught the Aboriginal service provider "not to say 'no'" (Four Worlds Exchange 1990:26).

This largely pan-Indian writing on helping must be seen in light of Richard Preston's (1979:90) comment that traditional Cree culture emphasized individual autonomy and responsibility much more than other Aboriginal groups having more elaborate political and ritual institutions. Yet this does not discount the effect that pan-Indian representations of helpers and the act of helping may have on local service providers in Moosonee and Moose Factory. Workshops and other training programs which emphasize a Native curriculum or perspective are not specifically Cree and will likely present this pan-Indian perspective. Such ideals seem to be absorbed by the Aboriginal service provider in these northern communities—hence the ongoing tension obvious in almost all of the foregoing excerpts between advocating self-sacrifice, striving to meet the community's expectations and needing to carve out some personal space for relaxation and recuperation.

The ambivalence which characterizes the local population's regard for their own service providers—seeing them as both liaisons with and representatives of a foreign system—creates further stress for these workers. The same helpers who are expected to tolerate work-related interruptions in their home life find their time in the office scrutinized by community members who suspect they do nothing all day. Community members have their own ideas about what particular positions should be involved in, and where the service provider's activities should take place. Front line workers are expected to be in the community, visible and working on projects and workshops. Administrators and supervisors, however, should be hidden away in offices. Their time in the community is considered wasteful.

Jerry is painfully aware of such community expectations. As the adolescent counsellor, he is employed by Moose Factory First Nation, but has his office on the third floor of the hospital, an arrangement that poses several problems. He feels disconnected from his employing organization. This means his director and co-workers are not aware of what he does and the difficulties he encounters bringing his services to adolescents in the community. And because he spends so much time in his truck—commuting from the hospital to the opposite end of the island in order to communicate with employers and fellow workers in the social services field—he feels the suspiciously watchful eyes of community members following him.

"I've been in that position where I just wanted to get out of here, you know, because you get so frustrated with the staff at Moose Factory First Nation and with the staff at the hospital because they don't really see what you do. They want to see the external part of things, they want to see the change, and it's a very hard thing to do when you're counselling. It can grow by many years of steps, of growing...They look at you, and probably say, 'oh, he doesn't know what he's doing, he probably doesn't know what he's doing in the office, there, as an adolescent counsellor.' But I know my position, I know what I'm supposed to be doing here, but someone always says, 'well, do something externally, do something outside'. That's what they want. They expect to see someone changed within one month or one year—dressed nice, looking nice, clean-shaven—and that's what they seem to want to see, but it doesn't work that way. I get the feeling from my First Nation and my community when I'm in the community, driving down the road, I can sense that people there are saying, 'what is that guy doing, he does absolutely nothing at all, sits on his butt in his office all day long, sleeps in his office.' So I did a task analysis on the job description, on the program, everything I could think of I threw in there and went to the social and health director and said, 'look, this is what I do here,' throw it all in and see that everything is internal, inside the office, and they said, 'God, Jerry, you do *too much*' she said, 'you do *lots*,' and I said, 'well, people out there look at me and say, 'do your workshops, have people come in here and do all these conferences and workshops, do something—make a program, schedule activities weekly'—that's what they seem to want".

Moose Factory First Nation is a political organization, and while it provides services to the community, its employees are not necessarily sympathetic to, or cognizant of, the kind of work performed by counsellors and other service providers. Southern service providers, although ultimately answerable to First Nations organizations like the Band and Tribal Council, have a certain degree of autonomy which results from employment in provincial

and federal institutions. And because these institutions are primarily concerned with providing a particular service, their employees have supervisors or boards which focus on their needs and work. Positions filled by local service providers are often directly overseen by the Band or Council. A concern, then, is that these organizations are political bodies which do not deal only with social services and health. Their interests extend well beyond these issues into economics, land claims, language, education and self-government initiatives, and employees of these political bodies are expected to tackle all these issues while experiencing chronic understaffing. Still, several interviewees are disturbed that their employing organization does not view health as a priority. Thus Jerry is not alone in feeling that his "First Nation" ignores his work and lacks an understanding of the limitations of his position.

One could pose the question: why should health be a priority when it is obviously so intimately tied to all the other issues with which an Aboriginal political organization deals? A trope in this thesis has been the differing perspectives that are forwarded by service providers and politicians, and the answer to the question lies in this difference. Service providers necessarily have a more narrow focus than politicians. Because service organizations have particular mandates, their employees are forced to regard particular issues and even a specific target population as being priorities. As front-line workers, their attention is turned to those individuals who require the agency's assistance, instead of to the community as a whole. In contrast, those employed by Aboriginal political organizations examine community issues and needs in their entirety. Because they are not required to answer to the day-to-day demands of clients, they have the luxury of adopting a holistic perspective which regards all aspects of community development—housing, recreation, economy, spirituality, language, education, self-government—as interconnected and needing to progress together (Band Nurse Workshop 1987:12).

Jerry's sensitivity to the expectations of community members and his employing

organization led him to spend his time doing a task analysis justifying his work, instead of putting his energy into more fruitful endeavours. His almost-paranoid belief that he is being surveillanced, that his productivity with clients is being monitored, and that others have no confidence in his abilities seems symptomatic of what Dr. Roland Chrisjohn (1990:205) labels the "impostor syndrome". While this "syndrome" can affect any service provider, Chrisjohn asserts it is prevalent and potent among Aboriginal helpers because they are often paraprofessionals who have experienced substantial prejudice throughout their lives. This combination of lack of "official" certification and faltering sense of self-worth can crush the local service provider's self confidence. Thus Jerry's accusations that his employers and fellow community members expect overnight change in clients and suspect he lacks the skills to successfully accomplish this may be projections of his own feelings of insecurity.

Bob, like Jerry, senses that local residents believe office work is a euphemism for "slacking off". With the restrained belligerence that typified much of his interview he stated:

"It's not an easy job, I find, anyways. Like a lot of them would say 'What do you do all day?' Well, look at the reports, that'll tell you what I do all day. But I find its not only from the administration, the board, I feel its also from local people in this town. They may say it as a joke, but it can only go so far, and it gets to you sometimes...Like people think I'm slacking off. I don't get upset, its just that, how would I say it, it just kind of bothers you because they don't know how much work you're really doing, it's a lot of mental work, too".

Like Jerry, Bob feels he must justify his work to bosses and community members who do not understand that much of his job involves "mental work". They expect outward results but as a coordinator he is responsible for the more ephemeral administration of the literacy program in addition to the practical job of tutoring clients.

Perhaps what this points out is the chronic under-staffing of service organizations, particularly Aboriginal ones. Bob should probably not tutor clients but devote his time instead to planning programs and organizing volunteer tutors. Likewise Beth, as "nurse in charge" at the Moose Factory health centre, should not continue to see patients but put her

energy into managing the health team and ensuing bureaucracy. Her continued connections with clients, albeit on a much reduced scale, leave her vulnerable to expectations usually reserved for front-line employees. Beth tearfully recounted her humiliating experience at an Elder's Council meeting where she was accused of not being "in the community".

"Like, honestly, they were criticizing me as a public health nurse, they actually said, 'I don't know why I never see that Beth Wesley around in the community. I don't know why they don't hire a real Indian to be a public health nurse'...And it's coming from so-called Elders who supposedly expect respect".

The fact that Beth was accused of not being "a real Indian" is crucial. Southern helpers, even if they perform front-line work, are associated with offices and appointments, the formal trappings of service provision. But local helpers, like Beth, are expected to be "in the community", not in an office, regardless of whether they have office duties. If these people could be divorced from front-line roles, it would perhaps be easier for community members to associate them with office work. But because they invest much energy and vision in community development and have a very client-centred approach, helpers like Bob and Beth add front-line work to their other responsibilities rather than see clients turned away.

Robert offers an example of someone whose role is clearly defined as an administrator. As zone director for Moose Factory General⁴, he cannot be confused with a front line employee. His job is considered to be behind a desk and, in his case, the suspicions of local residents regarding his presence in the community are reversed. Instead of accusing him of "slacking off" when doing office work, it is when he is outside of the hospital setting that residents surmise he must not be busy.

"This morning I had to rush down to the post office to deal with a Priority Post document, I had to sign the document and I know people were watching me. One guy came up and said, 'what are you doing away from the hospital at this time of day? Aren't you busy?' Joking, eh".

⁴ The hospital in Moose Factory is currently undergoing transfer from federal to First Nation control. As of February 1st, 1995 its name was changed from Moose Factory General to Weeneebayko General. I continue to use the previous name because the research for this thesis was conducted prior to the name change.

Both Bob and Robert characterize the comments of community members as "joking". But this does not mean the words lose their critical edge. In Cree society, order is often maintained by teasing. A certain standard of behaviour is expected; an individual who fails to meet this standard will be shamed by the teasing of an Elder or parent (R.Preston 1979:86; Aitken 1990:31). This form of social control, though subtle, is certainly not lost on these two service providers. They recognize that a "joking" community member may well be conveying his or her dissatisfaction with how they are performing—or not performing—their jobs.

So far this discussion has emphasized community expectations as they are felt in a service provider's professional life. But there exists a tendency to see local helpers as role models and expect them to provide examples for the rest of the community in their off-work behaviour (Justice and Warry 1995:31). Aboriginal service providers are instructed to "walk their talk" (Four Worlds Exchange 1990:32; Four Worlds Exchange 1992:10).

Donna's comments illustrate this stressful expectation. She bitterly iterated:

"You almost have to change your *whole* lifestyle, you have to change. Like I understand that, I know you have to go through your own healing, but it seems that when you're put up there, the expectations are *way* too much. And that becomes really stressful. And you get angry, and it's almost like you're by yourself, it's almost like you're ostracized. You have to play that role, I guess. You're a role model and people are watching you *all* the time, waiting for you to slip up, almost. I know it has a lot to do with education, and lack of awareness, but I guess it's combining two cultures, too. And once you slip up, it's hard, because they hold it against you".

Donna understands that in order to be successful as a service provider, she must cope with her past experiences and problems and have gone through her "own healing". She is aware that the leadership role she fills in the community has certain prerequisites, including a certain degree of personal well-being and balance. A local person must earn his or her position as an authority through hard work and demonstrated ability (Chrisjohn 1990:208). But Donna interprets being watched by community members who would elevate her to role model status as frustrating interference. She doesn't ask to be viewed in this manner and

resents the restrictions placed on her behaviour. But more importantly, Donna senses that being considered a role model is not an esteemed and well-supported position. Role models exist only to be pulled down, their failure to live up to community expectations being remembered far into the future. This tendency has been labelled "internal cannibalism" by Billy Diamond, once Grand Chief of the Council of the Crees of Quebec (MacGregor 1989:275). At once there is admiration and animosity for local helpers. This tendency to undercut the achievements of service providers will be examined more fully in a succeeding section. For now, suffice it to say that Donna suffers for her success, because role models lead lonely lives. This "ostracism", as Donna refers to it, is certainly a stress in communities where visiting with friends is the most readily available form of recreation.

The pressure of being a community role model is nowhere better demonstrated than by Donna's candid account of when she broke under the weight of these expectations. I spoke with her following 6 weeks of stress leave during which she "socialized like it was going out of style". With angry indignation she said:

"I was living and working here and I wanted to get out and get as *far* away from here as I could, you know. Like just f-ing leave me alone. I'm going to do what I want to do and I'm going to socialize *every* chance I get. I'm going out and I don't *care* who sees me at the beer store because I am going and I went there and when I went there in July I'd *never* gone in there, that was my first time".

Community scrutiny and expectations of her as a "healed" and therefore infallible individual had prompted Donna to avoid entering the beer store in Moosonee. When she wanted alcohol, she had always asked friends to buy it for her, or had abstained from drinking. But these same expectations are what she claims sent her on a social rampage, disregarding disapproving glances. Going to the beer store for herself becomes a touchstone event, symbolizing Donna's re-captured freedom and disregard for the opinions of others.

The expectation that local service providers should not drink is also stressful for Henry. When I asked him if he found it difficult working in his own community, he

replied:

"Hmmm. I think so. People *know* you. They can tell you anything, you make a mistake, you hear about it, whether it's personal. Some people, not all the people in the community, think that a community health representative, somebody in that position, should not go to parties, should not drink, they should stay home and be an example to the community. They don't understand. Somebody told me that one time. They said, 'You're the CHR, you aren't supposed to drink. You're supposed to be an example to the community,' and I said, 'what am I supposed to do? Bury my head in the sand when I get home?' There's no right way to tell them. What do they expect of me? I go to parties! I'm not pure! No, I don't really go to parties. Out to dinner, or if I'm invited to a wedding, I'll go to the reception".

Local workers are expected to be seen in the community only in a professional capacity. After hours they should refuse invitations to social events and stay at home, because participating in such events reflects badly on one considered to be "an example to the community". Responsible drinking or attending social functions but refusing to drink does not set an example. Simply being at such functions tarnishes a role model's reputation and is seen as contributing to community problems. Henry does not aspire to sainthood; he jokingly asserts that he is "not pure". But community members do not recognize the humanity of their local service providers. They expect their helpers to live cloistered and un-social lives—much like the missionaries who were responsible for providing services in the past—while the rest of the community parties without restraint.

For John, the pressures of community expectations do not limit his interaction with his fellow residents. Instead, being a role model means he is prompted to be more involved in politics and expected to volunteer his time as a board member for various organizations.

"After I sobered up people saw me as a role model in the community and nominated me for Counsellor. So I sit on various boards and serve the community as a Band Counsellor...And sometimes these people want to put me on a pedestal and say, 'oh, you've been sober so many years and you should do this and you should do that'...I've been nominated as Chief a couple of times in the last 10 years and I've turned them both down".

John's sobriety, and likely his past work in the NNADAP program in Moose Factory, means he is encouraged to become involved in the running of his community. While this may seem initially flattering, he does not want to be elevated above his fellow community

members. His response to those who make these demands on him is "oh, no, back off, back off. Just because I've been sober so long doesn't give me seniority".

John recognizes that there is a fine line which separates helping the community by acting as a role model and encouraging community dependence by accepting accolades and extra work. Many people who have "sobered up, gone to treatment and got a job" find that others are attracted to their wellness and "want to give away their power" to these "well" individuals (Four Worlds Exchange 1990:8). As a Native principle, helping is understood as a humble act, a give and take which does not deny either party respect, responsibility or autonomy, an act which empowers others. When someone "gives up their power" to another, as it seems certain community members do with John, the disempowered individual cannot be helped according to these principles. I suspect John's reluctance to accept a nomination for Chief is linked to this issue of disempowerment and inappropriate helping; he senses that others empower him only at the cost of denying themselves the opportunity to contribute. John does not desire the weighty responsibility of having control over the lives of others in a culture where this traditionally incited feelings of ambivalence and even panic (S.Preston 1982b).

Expectations that local service providers will be role models must be connected to a discussion of leadership in these Cree communities. The Cree define the task of a leader as "looking after the people" (R.Preston n.d.), and in this respect local service providers can certainly be considered leaders. Unlike being a service provider, being a leader is not a job. Leaders do not keep office hours; they cannot adopt an at-work leader-persona and cast it off when they arrive home. Informal leaders in Moosonee and Moose Factory are supported based on respect for their knowledge and conduct without regard for whether these are personal or professional attributes. As far as traditional Cree patterns of leadership go, leaders are made, not born. They are made through their experiences and through the support of others. Because local service providers "look after" other, ideally

autonomous people, they are prominent members of the community, open to public scrutiny and vulnerable to criticism if it is felt they are not performing their leadership roles adequately.

The animosity felt by local service providers regarding these expectations could stem from their belief that, on one level at least, they *are* doing a job. This individualistic orientation could result from understandings of work, leadership and helping which have been adopted by these Cree service providers from exposure to non-Native education and co-workers. The expectations of the service providers—to do their job and have a fulfilling personal life, too—contradict the expectations of the community—that service providers are leaders and therefore must behave in an exemplary fashion.

But the leadership issue cannot be regarded solely from a "traditional" perspective. Leadership in Cree communities has undergone various changes since European contact 300 years ago; those who are today considered leaders are seen as part of a continuum which includes more than hunting bosses and shamans. Traders, missionaries and Indian Agents have all left their distinctive imprint on the definition of leader (R.Preston n.d.). Consensus does not validate the power of these leaders, nor are they expected to actively participate in community life. Their authority is institutionalized, comes from beyond the community and is exercised largely within it. While traditional leaders have power only to the extent that their followers allowed, these non-Native leaders have power irrespective of the opinion of local residents. A further category of leader—the elected Chief—has contributed youth and "bi-cultural" membership to the qualities of a leader (R.Preston n.d.).

Much of the experience of local service providers can be connected to the imprint left by these latter leaders. They are "ostracized" and expected to stay at home because leaders do not have to be active in community life. Their authority over the lives of others is tolerated because community members have become accustomed to the imposition of

authority by outsiders. The ability to operate in two different worlds is considered necessary and youth is understood as a necessary evil, for it is the young who possess "bi-cultural" skills. But there are compromises and tensions here, because traditional patterns of leadership do not comfortably co-exist with these more contemporary definitions. Again, the local service provider is caught "with a foot in two canoes", trying to balance conflicting expectations and understandings of his or her role so as to avoid getting wet—or, at the worst, drowning.

Dependence On Us, Dependence On Them

What is evident in many of these excerpts is that clients have come to rely on specific individuals who currently, or in the past, offered their services to the community. Several local service providers refer to this reliance as "dependence", expressing a frustration that clients are reluctant to take responsibility for certain aspects of their care.

Henry stated:

"When I first started here I would do this and do that, but I stepped into a trap because I would say, 'anytime you need me, just come and see me, just call me,' and the phone was always ringing—'could you come to my house, I feel sick; could you phone the doctor for me and make an appointment'. I stepped into a trap. I made myself too available. It was the wrong approach, but I thought it was the right attitude, the right idea to go through that and I found that it wasn't, because I was building a relationship between my client and myself that worked only one way. Having people be dependent on me for a lot of things, instead of their families. Like, 'will you go to the hospital and pick up my medication for me at the pharmacy?' which is fine, but there are times when the family could be involved, when there are members at home just sitting there doing nothing, but they phone me. One of the most stressful situations is clientele burnout, I guess you've heard about it, and this happens when the clients are so dependent on you for every little thing, whether it's the condition of the house, the lights have to be changed, it's stressful. You don't want to say 'no', especially to elderly people, you know?"

Local service providers are called on to perform personal tasks for clients which extend far beyond their actual professional responsibilities. This may start, as in Henry's case, when an idealistic, recently hired helper makes him or herself "too available". The ramifications of such self-sacrifice do not become evident until clients begin to take advantage of the service provider, requesting assistance from a non-relation when family members could be

participating in the client's care. Once this pattern is established, as Henry's testament proves, it is difficult to break. What may have been a kind offer of support beyond the call of duty becomes a standard for future participation in the daily life of clients.

However, it is evident that community expectations alone are not responsible for the stress of community care-givers. When Henry says, "you don't want to say 'no'", he is accepting the burden of these expectations, acknowledging that client requests are to be met. He could, in fact, say "no". He could tell his client to go to the doctor alone, to find someone else to change the light bulb. But the backlash from such an assertion of independent will, and the personal feelings of inadequacy they could engender in one whose job is to help, keep Henry from "saying 'no'". As previously discussed, it is the nexus of client expectations and the belief that these expectations are somehow justified that causes stress for local service providers.

Henry claims his clients are "dependent" on him. "Dependence" is a politically weighty term which dots both academic and Aboriginal writing, but very seldom is it discussed in detail or subjected to substantial analysis. Instead, its meaning and relevance are assumed to be common knowledge by the author and frequently only one or two lines are devoted to its discussion. Dependence is considered to be fostered by colonial institutions—the welfare state, residential schools, the health care system—and results in a self-destructive, powerless, frustrated and conformist community. Yet such emphasis on outsider responsibility for dependence sheds little analytical light on why the relationship between the local service provider and his or her clients should be characterized in this way.

Are clients dependent on Henry because he is seen as a representative of the imported institutions upon which the client has come to rely? Is it because he is easily accessible in comparison to his come-and-go southern counterparts? Is it because, as a local person, he is able to mediate between the foreign health care system and Cree clients?

Is it because his training was based in mainstream understandings of helping and therefore has not taught him ways to encourage independence and responsible behaviour in his clients? Or, is Henry's use of the term "dependence" as unreflected as the usage criticized above, the word chosen because it is a fashionable way to describe relations in an Aboriginal community and not because he has thought much about whether it is an accurate portrayal? I suspect that all of these questions bear some relevance to this discussion, and certain ones will be examined further by way of the words of other local service providers.

When local residents rely so heavily on their own service providers, I suspect they are seeking a comprehensible connection with these culturally unfamiliar services. Local helpers become culture brokers. They act as a liaison between services and their clientele; they translate urban, southern-based protocol and procedure into the local lingo. But why do these helpers, like Henry, feel obliged to encourage a "dependence" on themselves by acquiescing to requests for all hours assistance and offering services which should be performed by the client or a family member? Is this not culturally inappropriate behaviour, given the norms of non-interference and respect for autonomy important in Cree communities? The failure of southerners to respect these norms is somewhat understandable. They have been raised and educated in a culture where institutions are increasingly usurping roles once filled by the family. They have not been trained to encourage others to accept responsibility, but rather to encourage them to surrender autonomy to the "expert". But why does the local service provider choose to establish a relationship between self and client that goes against cultural values?

I believe that this is yet one more example of the on-going tension which characterizes the local service provider's relations with his or her community and culture. On the one hand, local helpers are assuredly aware of the need to respect another's autonomy and the contradiction implied by taking responsibility for aspects of another's personal life in an egalitarian community (S.Preston 1982a). But local service providers are

forced into this compromising position, I suspect, because the once-strong indigenous supports which enabled self-reliance have been weakened, in part, by missionary and government intervention. Families do not take care of their own, now, so the local service provider feels obliged to step in.

At the Social Development conference in Moosonee, an Elder from Peawanuck emphatically stated that "a long time ago" many of the same family problems existed but there were indigenous ways of dealing with them. "Families ran their own affairs" without the intervention of government programs. A member of the audience angrily asserted that community problems arose as a result of social programs into which "no Native person had any input". Mussell (1993:113) cites residential schools, birth of children outside marriage, separation and divorce, and the removal of children from families via wardship and adoption, as resulting in the disruption of extended family support networks.

Residential schooling has been studied in relation to family breakdown in Moosonee and Moose Factory (Schuurman 1994). Children were separated from their parents and taught to be ashamed of them, thus creating a deep chasm between the elder and younger generations. Those children, now adults, were denied family role models and subsequently may have difficulty coping with a marriage and parenting their own children. So, instead of turning to a partner or parent at 2 am for advice or support, a local resident will desperately phone or visit a trusted service provider. Instead of asking a grown child to accompany him or her to an appointment or change a light bulb, an Elder will call the community health representative.

But demand for all hours service often unrelated to the helper's area of expertise is not the only aspect of dependence that local service providers find stressful. While some clients may perhaps unwittingly exploit local helpers because they offer familiar contact with an unfamiliar organization, others associate service provision with non-Native outsiders. These clients seek out southern professionals, their dependence being on Whites

because it was Whites who originally brought the services north. For these community members, dependence has inspired a belief in the adage "White is right" (Mussell 1993:115). This means that a local helper working in an agency which also employs non-Native professionals may be considered a second-rate alternative.

Robert, the hospital zone director, has been working toward the transfer of health care from federal jurisdiction to Native control. But his efforts have been repeatedly thwarted because community members refuse to take responsibility for their own health care.

"The thing that gets me the most is that they see it [health care] as a government responsibility. They don't take any responsibility for their own problems in the community. They just think that someone is going to come and take care of it...In the north it's always been the Catholic church has been providing health care, or the Indian Agent, or in this case it's Health and Welfare Canada. So it's always people from the outside coming in and providing it, and unfortunately the people have become dependent on it, even the younger children who think that the White people are going to come take care of them. The White people provide the services and they'll be taken care of".

For those involved in the more political aspects of service provision, such dependence on outsiders is disturbing. Dependence implies addiction to an unhealthy habit, a powerlessness in the face of larger forces, an inability to see the little person as a contributor. Self-government requires seizing control, participation in change, and an ability to dissociate future community organization from past involvement with non-local institutions and personnel. Without confidence in local capabilities, self government is impossible. Dependence on outsiders means that politically aware and active residents, like Robert and many other service providers, fight for change while other community members contentedly embrace the status quo.

Many local residents look to White outsiders for answers, for expertise, for the "quick fix". This was nowhere made more clear to me than during the workshop on "care for the care-givers" I presented at Moose Factory General. In attendance were nurses, administrators, ward aides and orderlies—a mixed group in terms of age, education, and

cultural background. Early in the presentation, as I was dry-mouthedly leading the participants through a brainstorming exercise, an elderly Cree woman who had worked as a ward aide in the hospital for years spoke up. "What are we doing this for?" she aggressively questioned me. "I thought you were going to come in here and teach us something. Something about giving good care to the patients. I thought you were supposed to tell us something. This is a waste of my time". This woman had come to expect a particular kind of interaction with non-Native outsiders. She was looking to me to tell her what to do, to play the role of the expert, to give advice and orders. She was not happy when I explained that the purpose of the workshop was for her to explore her feelings and work with others to generate ideas and possible solutions. It was insulting to her that I would request her participation. Somehow that meant I was shirking my job. And she obviously did not believe that her ideas—or those of her co-workers, for that matter—had validity and were worth exploring.

Donna, like Robert, interprets the contemporary situation in Moosonee and Moose Factory as resulting from the historical interaction between Cree people and non-Native professionals. She indignantly told me:

"People still have, well, it's changing, but people still have this mentality about how we need a doctor to take care of everything and not realizing that whatever's stressing them out can be helped by sharing. So they think they need a non-Native professional and it comes from what happened a long time ago, when non-Native people came to save us *poor Indians*. That mentality is still there, I find mostly with older people, the Elders. They still do that. Even in terms of religion, too. It's so ingrained now in them".

Donna astutely links dependence on non-Native physicians with the dogmatic practice of non-Native religion in these communities. Both health care and Christianity are imported institutions which have largely usurped the place of indigenous belief, practice and authority. In fact, an examination of the history of these communities shows that the two are intimately intertwined; Anglican missionaries were the first to provide substantial health care in Moose Factory and Catholic nuns undertook the same responsibility in Moosonee.

Just as bush religion is currently condemned as impotent superstition by most residents, local service providers are sometimes regarded as ineffectual and second-rate alternatives to the non-Native doctor. This has frustrating practical implications for the local helper. Donna's experience at the mental health program has proven that clients will initially seek the psychologist's help, believing that Ellen's professional credentials and non-Native status ensure her success as a service provider.

"Some of them come in here with that mentality that she's a doctor, and she'll fix them, and then once they get to know her they get disillusioned, and they'll say, 'she doesn't know about kids,' or 'she doesn't know about relationships. You do—you've been through it, you know what I'm talking about'". "And then they come to see you?" I asked. "Yes", she replied. "Does that make you feel like second best, sometimes?" I suggested. "Yes", she answered with irate emphasis. "They don't want to tell her any of the gory stuff, they just tell her the superficial stuff and I get to hear all the rest...And gee whiz, I get angry, too. 'You only tell her the surface stuff, but you tell me the whole nitty gritty, incestuous whatever'".

I would infer from Donna's comments that the psychologist fails to connect with clients because her life experience as a southerner and Sister is so removed from that of a local resident in Moosonee or Moose Factory. Local people's concerns revolve around spouse and kids; Ellen, like many southerners in these communities, is not married and doesn't have children. But clients do not consider this before seeking Ellen's help. Instead they turn to Donna as a second choice, only after sessions with the psychologist have failed to make a difference. Even if they were not misunderstood by Ellen, their anticipation of misunderstanding may have prevented the revelation of information crucial to comprehending the problems facing them. So they confess "the whole nitty gritty incestuous whatever" to Donna, who they know understands. Donna grew up in the community and, if she hasn't had direct experience of the problems troubling the client, she at least has a concrete understanding of the client's circumstances.

Like Donna, Beth sees the more abstract, political discussion of dependence offered by Robert as having concrete significance in her daily work. Her concerns lie with the unreasonable expectations of Elders whose dependence on service agencies means they see

no role for themselves in community initiatives. She told me with restrained indignation:

"But I don't know why these Elders are so critical of people, and why they're focusing all their energy on complaints and negative things. Why don't they take a look at their fellow Elders who can't come out into the community, see what their needs are, why don't they do something constructive like start up a visiting program or something instead of always expecting community workers to go there, why don't they volunteer independently to visit some of these people instead of always putting their energy into criticism? I guess it's because they've been made to be dependent for so long over the years that it's become 'do this, gimme this, gimme that' all the time, that's just the way it is here. If we ever want to go somewhere towards self-government, this is going to have to change completely. It's going to have to, because we at the community level have to start solving our own problems. We can't always expect people from the outside to come in and fix it. We have to support each other and the people who want to try and help, instead of always running them down".

These particular Elders could be blamed for wanting to write the script but refusing to act in the play, but Beth's words must be seen in their larger historical and cultural context. In the bush, Elders were competent and respected participants whose counsel was sought and heeded. In the contemporary town context, however, this authority is precarious and largely unrecognized (R.Preston n.d.). Having been denied a culturally relevant and active role to play in the community, these Elders are not likely to feel confident undertaking volunteer work. And in their frustration, they may lash out at younger community members, like Beth, whose authority has been validated by the dominant culture through certification and employment as health professionals instead of in a traditional Cree manner, through wisdom obtained via experience and the legitimation of one's personal hunting group.

Local helpers are accessible and therefore easy targets for demands. Southern employees of service agencies come and go, and their outsider status provides them some diplomatic immunity. Local helpers, in contrast, provide consistent service and are connected to community members. Your kids play with their kids, you went to school together, you are distantly related. Thus you can easily confront them. They are knowable; they have none of the aura of mystery or presupposition of transitoriness that protects a southerner. For all that southerners complain about their inability to integrate, there are

advantages to remaining an impenetrable outsider.

While lack of community support is a subject that will be discussed in greater detail in the following section, I will briefly examine it here simply because it can be connected to the issue of dependence (Mussell 1993, Justice and Warry 1995). Dependent community members are complacent. They are content to have others think and act on their behalf. Yet this contentment is quickly inverted when the local resident is confronted with fellow community members who are "self-caring, self-sufficient, disciplined and socially confident and who exercise their ability to provide for others" (Mussell 1993:112). Local service providers are examples of such people; they think for themselves and are actively involved in encouraging a healthy community. Instead of being valued as resources and respected as role models they are often targets for jealousy and anger. Those who do not see a role for themselves in community development cannot feel proud of the role played by others; the achievements and contributions of community workers are envied and therefore degraded (Justice and Warry 1995:34). Thus Beth's comment that "helpers are always being run down" can be seen as another symptom of the dependence which makes other aspects of the local service provider's job difficult.

Lack of Support: Putting Up With Being Put Down

The reality of life in Moosonee and Moose Factory is that local residents have divergent and competing interests in how things should be done which are expressed on a very personal level. Matthew is both the coordinator for the Queen's-Moose Factory program responsible for bringing health professionals to the hospital, and an articulate political leader. With the introspection and reflexivity which typified his entire interview he stated:

"I find there's very little respect for people in these communities. We don't value each other as much as we should, and we don't support each other as much as we should...there's all of these competing interests and competing perceptions of what this community should and shouldn't be, or what this area should and shouldn't be".

It is within this heterogeneous, disrespectful and non-supportive environment that local service providers must work. And given the previous discussion of expectations, one can see that being pressured to meet the often differing ideals of community members who cannot in turn support their helpers is intensely stressful.

Helen finds that community factionalism is a barrier in her work as a counsellor at the public school in Moose Factory. The historical division of local people into those who chose to adopt Christianity and those who maintained a tradition of bush life has contemporary ramifications. Helen feels this generally, in terms of what programs can be offered to children in the school, and specifically, in terms of inter-personal relations with co-workers. She asserted:

"I find that there's conflict in the community between the values and beliefs that each individual holds, whether it's the way they raise their children, or their religious beliefs, and there's conflict there. Whether it's belief in the traditional way of life, or in the church, or whether it's someone who doesn't go to church and is caught in the middle and doesn't really have any spiritualness. They probably do, in their own sense, but there's no respect I think. So there's a lot of conflict there. And that shows clearly in our school, too. When we have our Native Awareness Days, we used to have drumming and dancing, but we don't because there's a lot of kids that are forbidden to go. I think it's very hard for me, too, because everyone has different beliefs, and some of the beliefs I have are different from some of the people I'm working with, and then there's no working together. That's something that I've learnt, is that it doesn't matter. It's your beliefs, it's you as a person. We should just respect each other and do what we can together, work together. It's hard, though. *Very hard*".

Helen recognizes child-rearing practices and religion as individual concerns which should not preclude working together, but this attitude is not prevalent among co-workers and other community members. Native societies operate largely through consensus and social control, hence personal views are subject to public censure (Chrisjohn 1990:207). Contemporary community factionalism, however, means that such societal pressures are not consistent but compete for audience within the community. Issues of community development and healing—which service providers may believe take precedence over other concerns—often lose their focus in bickering that revolves around questions of identity which are historically based. Attempts to communicate across such dogmatic and

uncompromising lines of thought are thwarted. Helen believes that personal differences should be respected, or at least put aside, in order to unite efforts usually dissipated in contradictory and mutually exclusive directions.

Local service providers often espouse such magnanimous approaches. They see the potential and power in "working together", likely because so much of their daily experience is an attempt to overcome the destructive effects of competing interests. Jerry recognizes that his voice, alone, is weak and easily drowned out. He claimed,

"being a Native person, too, you know exactly that you have a lot of powerful rights you can enforce, but even if you make a voice, they aren't going to hear you at all, it takes maybe 10, 50, 100 for a person to hear...Being in the centre of the community, you know that you have a background of what Natives really want but nobody's paying any attention. I get frustrated, too, when I meet people like that, and I can't sit down with people who are trying to dominate without first hearing ideas and listening, *really listening* to what is available, what options could be useful".

Uniting his voice with others shouting the same words is the only way Jerry can effect change, or have an opinion carry any weight in the community. "Listening" is a frequently raised theme in local interviews. These service providers struggle with closed-minded community members who do not respect the experiences of their helpers, who do not listen to small voices conveying big ideas. I suspect that this is why local service providers place such a priority on centralized service provision. If all community workers were under one roof, they could communicate with each other in a way impossible while they are scattered across Moosonee and Moose Factory and their 25 or so voices could powerfully unite.

Lack of support also manifests itself in the form of criticism. Already we have seen that the expectations of community members are often conveyed through this medium. Local helpers are admonished because they aren't visible "in the community"; they are rebuked because, esteemed as role models, they attend social functions or drink. As was presaged in Donna's discussion of role models, criticism frequently takes the form of humbling those who have had personal or professional success.

There is a commonly held understanding in Native communities that individual

achievement, with its attendant elevation of one person at the expense of the group, is destructive. I was told a joke by an Elder during coffee-and-smoke break at the Social Development conference which conveys this belief. I've never had much of a penchant for joke-telling, and my memory of the story is blurry, but it went something like this. "Why doesn't an Indian fisherman need to put a lid on his pail of crabs?", he asked with a mischievous look in his eye. "Hmmm, I don't know", I'm sure I answered. "Because he knows if an Indian crab tries to get out of the pail, all the other crabs will pull him back down!" When I interviewed Robert, I had a tape-recorder. So here, verbatim, is his real-

life explication of the "Indian crab joke".

"When I was up in Yellowknife, I met an old man—I don't know if he's still alive—his niece is Ethel Blondin, she's a Western Arctic MP. We were sitting around, we did a lot of that while I was up there. With the older people who could speak English I spent a lot of time. And I asked him, 'How come George Erasmus, nobody likes him? A lot of people run him down. Because,' I said, 'the same thing happens in my area. If people are successful—businessmen, politicians, anybody—people drag them down'. 'I don't know,' he says, 'but my opinion is it's in the blood of the Indian people...When people lived in the bush for a long time in extended families, you'd have the grandfather and the father as the best hunters and you'd need someone to be the Chief, and he'd set out where the people would trap and hunt and fish. Where they'd set up camp, where they'd move to in the winter and the summer, where they'd hunt in the fall. What happens is that everybody depended on everybody in the community to do certain things. Young men did certain things, children had chores, women always had jobs. And if somebody went out of their way, they'd rope them back in, and all of the community would take part. So this person knew that he had to be part of the community, and if he went out there and tried to run things, he'd be killed. So to put that in today's situation, when people go out and try to be successful, on their own and doing their own thing, and we hear more about that person than about the community, then problems arise'...I know even myself, I've been successful with my family, raising my kids, and doing what I did, I got picked on. But it gets to the point where you don't care. I still set goals for my job and what I'm going to do. and that's where you talk about stress, because of the people, the expectations of the community, they expect things and if you do them, they'll pull you back in. So it's no matter what you do".

Robert's story puts the crab joke into a cultural context. A hunting group would not survive unless everyone competently and unquestioningly performed the duties ascribed to them. Individual ambitions were sacrificed for the betterment of the family or community; cooperation was the norm, not competition (Muller n.d.:69). What becomes evident from

Robert's personal experience of this bush norm is that it was not abandoned when bush life became village life. He has endured criticism for his personal successes. And he has been "dragged down" because, paradoxically, he has tried to meet the high expectations of his fellow residents.

Successes can be of a highly personal nature, and even be considered evidence of "wellness". But they will still be interpreted negatively by community members who invert good as a form of social levelling. Jerry has been sober for nine years, a fact which should be supported and commended. Instead, he is accused of being "anti-social".

"And now, when you come out of there and begin to work with yourself and refrain from the abuse and the alcohol and everything you see before you that you have done and you try to cover it up and say, 'it's not there anymore' but you say, over 9 years, you haven't touched anything, you haven't associated with the people who do in the community, then people begin to see you as an anti-social individual, they say, 'he's anti-social, he's against us,' and that begins to come in. And I say, 'I can socialize with the individuals, if they invite me to go and have tea or whatever, but if I'm not invited, I won't go'. So there is a lot of problems with being in the middle of everything".

What Donna terms the "ostracism" of role models is evident in Jerry's excerpt. To be successful in maintaining one's sobriety, for example, is to be seen by others as self-righteous, as proud, as better than the rest of the community members who still drink. "He's anti-social", these residents grumble, simply because Jerry chooses his friends carefully. "He's against us", they meanly mumble, believing his sobriety is a condemnation of their own predilection for liquor. But Jerry himself would drink tea with those who throw accusations at him, *were he invited*. But the invitations are not issued—as they often aren't in Cree communities, where one is just expected to show up—and Jerry feels insulted and abandoned because he has tried to better himself.

Jerry is waiting for a sign of acceptance from fellow community members which is not likely to be offered, and this is an important issue. Local service providers often describe themselves as bi-cultural. Their experiences in residential school, high school and in post-secondary education have taught them non-Native ways, just as living in Moosonee

and Moose Factory and being initially socialized into a Cree family have taught them Cree ways. But some understandings have been lost or misconstrued along the way, and an example is Jerry's belief in the importance of invitations. He stated, earlier in his interview, that "invitations are the Native way". But this shows some cultural confusion, because the Native assumption is usually "you'll come if you want to, I don't have to ask you to". It's almost as if Jerry's sensitivity to community opinion has caused a him to cross his cultural signals. Invitations are important in non-Native society, where formality and predictability are valued aspects of interpersonal contact. Thus Jerry's accusation that fellow community members consider him anti-social and condemn his sobriety cannot be divorced from an even more important issue—the difficulty local service providers encounter as individuals forced to function in two different cultural worlds.

Robert specifically discusses education in terms of the tendency for locals to put down their fellow residents. He admitted:

"People are shunned when they return with an education, or it takes them a while to work their way back in. It's a funny thing. We spend all this time trying to get the government to support students, not to cap funding. Maybe in the future that'll change, as more people get an education. People think, 'oh, they think they're too good,' and those who think that way are in positions to recruit those who return with an education. I think they're intimidated, threatened by people with an education".

Again, the paradox of being a service provider is evoked. Local people are pressured to return to school so they can better perform their jobs, as non-Native education is more highly esteemed than training in Native healing or learning from Elders. The outward trappings of an education—being able to put a diploma on the wall, or write initials after one's name—are respected. This is a complaint of Greg, a traditional healer and contract worker, who has experienced wide acceptance outside of his own community while being ignored in Moose Factory. He stated:

"These communities lack the initiative to venture into traditional healing. That's the biggest thing about working in your own community is that people can't recognize that their own culture is the agent of positive change. They've been educated away from this, brainwashed, and I believe a lot of the Aboriginal leaders and the service providers are struggling with this issue today. A good

example is if I want to do a training put on by the Toronto Board of Education and I would get a certificate, I won't have any problem with getting permission. But if I want to go to a traditional healing or gathering, I may not be able to go because I won't get a certificate and I won't move up on that pay scale".

This is entirely an adoption of non-Cree values. In the past, Cree individuals learned through apprenticeship, through trial-and-error, through gentle hands-on instruction by parents and Elders (R.Preston 1979:85-6). Indeed, Jerry asserts that this is still how local people learn best. Non-Native training works for non-Natives, but a Cree student learns more successfully "by you showing them what to do rather than taking a book and saying, 'read the whole book'". But much of college and university training, apart from a placement or practicum, is instruction from books and lectures. It is passive learning, as opposed to the active learning which Jerry believes works best for local people. However, he has struggled through post-secondary courses because he believes that it is this kind of education that community members and employers want for their workers. He told me with quiet frustration:

"At school I read and read and read and I make notes and I just feel like I'm not learning anything. The social and health director knows this isn't how Native people learn, but they still want you to go out and get an education. But when you go out, what you learn doesn't seem related to work when you come back. What they want to see is all the certificates and degrees—pieces of paper—on your wall. They'll even pay you more money. But all these certificates don't mean anything to a Native person, so what we do is go ahead and get 'em anyway, as a symbol for the outside that we are what we are".

So local service providers require post-secondary education to be respected and to earn more money, regardless of whether this education ultimately helps them do a better job. When Jerry claims that "these certificates don't mean anything to a Native person," he makes a crucial connection to Robert's opinions on education. Non-Native education is mistrusted. Vestiges of past learning traditions linger, and those who "return with an education", as Robert stated, "are shunned". So once again, service providers are caught between two cultural ways, not receiving support for espousing one or the other. Many do pursue university or college education, often at great personal expense. Post-secondary

studies often require the student to uproot his or her family and leave the safety of a small and familiar community. But even attending school by distance education or in Moosonee entails balancing parenting with school-work and often continuing professional responsibilities, as well. When they have graduated, however, they will not receive the accolades and opportunities they may believe they have earned. Beth's situation is evidence of this. She was accused, you will remember, by her Elders of not being "a real Indian". The Elder responsible for the comment may as well have called Beth an "apple"—red on the outside and white on the inside. She attributes such derogatory and wounding remarks to her having a university degree.

"I get really angry when I hear things like that because I think, 'oh sure, I'll go and they'll put somebody else in the position, and they don't know the community'. If you're working in this area, you're supposed to have your university degree to work in community health, that's what you're supposed to have as special training, and there's no other nurses in this community, from this community, who have this qualification".

As a public health nurse, Beth is required to have a university degree. And as she states, all the other nurses in the community are college educated, and therefore not qualified to do her job. Thus the only alternative to Beth is one of the endless stream of southern public health nurses which the community has seen come and go. Beth has returned to Moose Factory after completing her degree because she is committed to working in her own community. But instead of support and encouragement, she has encountered prejudice and what she terms "outright discrimination". That it is local people discriminating against their own is what makes Beth's experience so disturbing. You meet expectations only to have your efforts undercut and your success held against you.

Because Moosonee and Moose Factory are small communities and local residents are closely connected through familial ties, local service providers can easily have current personal and professional successes undermined by reminders of past indiscretions or family history. It doesn't seem to matter that a hard-partying, alcoholic youth was abandoned for a responsible and sober adulthood. Or that the undesirable activities of a

brother or sister do not reflect one's own attitudes or involvements. Or that one does not align oneself with a family feuding with others in the community. A local service provider is seldom allowed to forget the past or stand as an individual apart from family actions. Eligibility to hold a position of leadership and authority in these communities is decided based on long-term evidence of merit. And because relations in these communities are corporate and therefore not between individuals, the local service provider cannot easily be divorced from familial ties.

This has certainly been John's experience. He may have given up drinking 10 years ago, and be considered a role model in the community, but to take a leadership role in Moose Factory regarding the fight against alcohol is to be reminded of his booze-laced past. He admitted:

"I've done workshops in every community up and down the east coast and west coast on solvent abuse, drug abuse and I've never done anything in Moose Factory. I've wanted to do it but I've felt the public is not ready for it. I've called a public meeting on alcohol and drug abuse and the public wasn't ready for it. It is more difficult [working in your own community] because people tend to bring up your past all the time and use that against you. They'll mention the fact that you used to drink. There's some people that will try to drag you down...I see a lot of it. Where somebody starts bringing background or family into it".

John characterizes this collective memory of an individual's past as yet another example of a community that tries "to drag you down". To organize initiatives or meetings in Moose Factory is to raise oneself above other residents, to draw attention to one's own accomplishments. John, as a role model, has been nominated for Chief twice and sits on Council. But this community participation has been sanctioned by the group. When he accepts these positions he is merely following the directions of others. To initiate a community event, however, is to act as an individual on behalf of the group, to play a starring role, and this results in retaliatory remembrances.

Family feuds and factionalism also result in prejudice and bias against certain local service providers. Professional criticism can be traced back to personal contention. Beth

told me bitterly:

"There's always somebody who gets picked on, and I think we're a very good target. We're not going to come back at them and say something. We're safe people to get mad at or pick on, and it's really bad when you're from the community...And I know a lot of these words, they come from, it's personal because it's family, it's against family, it's jealousy and stuff like that".

Local service providers get "picked on" because of family rivalries. And Beth asserts that jealousy plays a role in criticism against local helpers—a topic discussed earlier in the context of dependence. There is also an indication that service providers from the community are scapegoats, powerless to retaliate in a substantial way, and this raises another important issue. Southern service providers, protected both by their employment in federal and provincial institutions and their outsider status, are seldom in the community for longer than one or two years. Thus they are comparably invulnerable to community attack. In contrast, service providers employed in their home communities often work for tribal organizations and are always well-known in the community. Thus they are easy "targets" for the pent up frustrations local residents may harbour about culturally inappropriate or unresponsive services. What may initially appear to be attack based on family ties or past history may actually be traced to a resentment regarding service provision in general which is most easily expressed in a specific, personal way against local helpers.

Too Close for Comfort: Separating Professional From Personal Life

So far the analysis of stress experienced by local service providers has emphasized pressures and put downs from outside the helper him or herself. But working in one's home community also entails experiencing stress related to the simple fact that insider relationships and knowledge become a complicated and inseparable part of professional work. These more internal stresses mean that the local service provider may have difficulty separating work from personal life (see Anawak in Hamilton 1994:287-8; Band Nurse Workshop 1990:4).

Local helpers, because of their enduring contact with families and friends who live in the same community, may find these relationships tested and even severed because of the service provider's professional role. This would not necessarily happen in a southern, urban environment where work-time and work-identity can be more easily divided from home-time and after-hours persona. But in a small Native community, such divisions are impossible. This situation is compounded by the fact that many local service providers enter this line of work because of their commitment to helping fellow community members. This may be because they have overcome problems once shared with those they now help; newfound stability and peace are inspiration for aiding others. For these reasons, local service providers may be more inclined to "help" those who don't seek such aid from them in a professional capacity. Friends and family members receive advice and warning from those to whom the secret of a more fulfilling life has been revealed. Alice's experience of losing friends speaks to this problem.

"I have lots of people out there that don't think too much of me, for what I don't know, and sometimes it makes me sad, like I've lost *friends*, you know, because of the things I say to them maybe, or what I say to their families, and they don't want me to stick my nose in their affairs so they get really angry with me. And it hurts me for a while and then I figure it's not my problem and why should I carry it around? And I miss my friends that I lose over situations like this, but then again, I always find new friends".

There is a strong ethic of non-interference in Cree communities which Alice breaches when she offers unsolicited advice to friends or their families, which is why such counsel is interpreted as "sticking her nose in their affairs". But her own experience with the problems facing her friends makes it difficult for Alice to keep quiet. She wants to share her struggles and successes, so that others can learn from them and realize, as she put it, "that there is hope". She admitted, "there's lots of times when I wish we could sit down and listen to what I have to say from my own personal experience, dealing with my own family...My heart goes out to them, my heart bleeds for them when I *know* there's something they can do".

Alice's authority comes only from personal experience; she does not have official training or credentials. Thus, unlike many southern service providers whose authority comes only from post-secondary learning, she cannot easily distinguish between personal life and professional qualifications—the one implies and enables the other. Her job as a helper cannot be dissociated from the life she lives at home and the past she copes with daily. This may be what makes approaching friends with advice and encouragement so tempting. But this well-meaning interference is resented by those who are not ready to "take that time to see what one individual has gone through...to learn from other things and people". So they sever their ties with Alice in order to escape her unasked for insight.

Joanne also experiences difficulties with friendships because of her professional role. She finds socializing in the community awkward because intoxicated clients will approach her, their inhibitions washed away by alcohol. She stated with quiet emphasis: "I find it hard when you're dealing with somebody you knew in a friendly way, and then his wife comes to the door and you hear what she's been put through and all of a sudden you have to look at that person in a different way, you can't help it. It's very hard. He tries to make things sound really good—like he's trying and the woman's not. And I find it *so hard*, too, when I meet up with somebody who's intoxicated, an intoxicated client, you know, like, if we're out socially, and I'll have to go so far as to remind her that I'm not working right now and this is not the time to talk".

As an employee of the Family Resource Centre—an non-threatening way of describing a woman's shelter in a community where the value of keeping families together is still strongly upheld—Joanne knows where her professional allegiance must lie. "Women are our first priority," she told me. "This is a home for battered women". But she feels torn because it is sometimes the partner of a friend who seeks her help. Suddenly all hope of unbiased involvement—unrealistic under the best of circumstances in these communities, as will be discussed later—is lost. She must now regard her friend in a different light, and is pressured to align herself with him, to believe his side of the story.

The second part of Joanne's excerpt discusses the stress of social contact with clients. As Donna stated earlier, it is difficult to extricate oneself from the after-work or

lunch-hour demands of those who recognize their counsellor as always on duty. Local residents can be expected to approach a service provider on the street, at the grocery store, and especially at a social function where alcohol is sold. Alcohol loosens the tight-lipped reticence of Cree individuals who may find discussing highly personal problems with a service provider difficult while sober. Spying their counsellor at a dance or party may lead to tears in the beer and an awkward situation for the service provider who merely wanted to enjoy a night out. Joanne will tell clients who approach her at a social function that she is "not working now", and this may avert an emotional encounter. But local service providers in such circumstances are understandably torn between jealously guarding their personal time and generously listening to a distraught client.

The actions of family members also make it difficult for a local service provider to separate the professional from the personal. Donna surmised:

"It's almost like you're right in the frying pan, too. Especially when you know there's stuff going on in your own family. Like even my brother, he bootlegs and I'm trying to help the people and he's not doing anything and it's like, 'okay, how do I deal with that? I can't tell him anything. Do I ignore it?'"

Donna cannot view her work in the community as distinct from her brother's bootlegging, as his behaviour reinforces her connection to the agents in the community which hinder her helping. She sees herself as "right in the frying pan", sizzling along with fellow residents, implicated in the problems which professionally she must try to solve. As a local service provider, Donna is too much a part of the community, too intimately tied to fellow residents, to remain an unscorched outsider. In this case it is her connections to a close relative which prevent her being aloof to community problems, immune to their effect on her personal life. She is powerless to change her brother's behaviour. But ignoring it is not a viable option in a community where everyone's business is common knowledge. Donna knows others will remark on her contradictory position as a mental health worker whose family members are involved in illicit and destructive activities. Her authority in the community will be undermined because of the tendency for local residents to "drag down"

their own helpers on the basis of family background. And she will be struck by the painful irony of being responsible for helping others when she can't help those closest to her.

Because the local service provider is a community member him or herself, commitment and connections will make the effects of abuse, neglect, alcoholism, poor eating habits, and sedentary lifestyle practiced by neighbours, friends and family members more disturbing. For Beth, the unhealthy diet of local people, especially the young, is a daily reminder of how her organization—meant to focus on prevention but unable to secure the resources to do so effectively—has failed in its mandate. But on a more personal level, Beth recognizes that she cannot cloister her kin but must struggle with her daughter's socialization in a community where many consider a Coke, a bag of chips and a Jos. Louis for dessert to be a balanced meal. She stated with resolution:

"It should be number one on the agenda, to see that we have a healthy community. The alcohol and the kids and drugs. Our young population, we should really be focusing on them, there's been a really big change. I see these things and it bothers me. But if I was just an ordinary community member, I probably wouldn't see these things, but that's the type of thing that really gets to me as a worker here. I have observations of the kids and their actions and how they're being raised. I see the type of foods they're eating and I'm struggling right now with a daughter who is five years old and comes to me every day and asks for two dollars and I'm trying to teach her the value of money. But I'm struggling against all the other kids in the community who are given money everyday to go and buy junk food. She's thinking that she should get that too, and I'm trying to teach her, number one, the value of money, number two, junk food's not good for you—if you're going to get something, get something healthy. And the whole community is doing that, and that bothers me, because I think, 'how can I, as a health worker, take on, and try to figure out a way'—shall we form a committee or something, shall we try to get something going so we try to educate people more about nutrition and the importance of nutrition and how pop and chips really aren't good as a snack?"

A local service provider is in many ways set apart from the rest of the community. He or she will often have more formal education than fellow residents, and will be less inclined to condone many of the activities and practices going on behind closed doors or on the front lawns of neighbouring homes. What seems "normal" to the majority is deemed pathological by the service provider. And being a community member him or herself, having close connections with village residents, means that a protective distancing from others who do

not share the helper's perspective is impossible. You will inevitably confront work issues in your personal life. As a public health nurse, you may battle your children endlessly on the subject of junk food and attempt to inculcate in them a middle class appreciation for the value of money. But all around you, kids eat ketchup chips for breakfast and lose their lunch money on the way to school. As a mental health worker, you may listen, horrified, as your daughter shyly expresses concern about the version of "doctor" played by the girl next door whom you know has been sexually abused. Or, as an alcohol abuse counsellor, you may watch your adolescent boy stagger home drunk from a party and feel your efforts to maintain a sober home are no match for the power of peer pressure. The same problems the local service provider deals with professionally saturate personal relationships, especially with children.

Jerry also indicates that his insider knowledge of the community makes his job stressful. In this excerpt he links the history and experiences he shares with community members to a desire to quit his job, and to a need for self healing.

"I come from a stressful, suppressed reserve, and when you grow up with that, you *know* exactly the problems people go through, you *know* exactly the hurt and the pain that you go through, you *know* exactly all those things that are there...I live on the street here and I see a lot of individuals who are isolated from other individuals and the group. I go to the work in the morning and I see the kids waiting for the bus. You know the ones that are isolated. You know the ones that haven't been fed. You can see that. I've come to a point where I just *don't want it*. Give it to somebody else to do, let them solve that problem...When you grow up as an individual in the community, on the reserve, what you see is a lot different from the view of somebody living off-reserve. Everybody intermingles and that's hard in some ways because you grow up with that, you see the difficulties and you see all these problems daily and you begin to get into it and you begin to think about your personal growth and your personal development, and you look inside and say, 'oh, I've got to take care of this, I've got to take care of that,' even before you can talk to the individuals".

His personal experience, training and position as service provider combine to heighten his awareness of the problems experienced by his fellow residents. Instead of keeping work at work, focusing on the few adolescents that come to him for counselling, Jerry is forced to recognize the larger problem around him, the kids at the bus stop whom his program does

not reach. He situates himself with regard to the rest of the community with the phrase, "I live on the street here". This acknowledgment of his insider status is both a statement of solidarity and a cry for help. He "knows", because he grew up in Moose Factory, the "problems", the "hurt and pain", of community members. This knowledge is not merely a tool, useful in therapy, to enable real empathy. It blurs the already ill-defined line between professional and personal domains, especially when Jerry claims he has to "take care of" his "personal growth" before undertaking his responsibilities as counsellor.

Most local service providers have had some post-secondary education in a field relevant to their professional work, and are instructed to maintain objectivity and professional detachment. But this ideal of "concerned detachment" is a skill inapplicable in the work of a local helper whose intimate connection to the community means he or she knows a client's history before the client even arrives for the initial session (Chrisjohn 1990:203). Donna stated with frustration:

"It's almost like sometimes you have to wear blinders like a horse, so you don't know what's going on on either side of you, but still, sometimes you can't help it, they poke you in the side and you know they're there. It's hard at family gatherings. All the drugs and alcohol, and you know the families in Moose Factory and you carry that around with you. Things like that make it hard, too, carrying around horrible secrets".

Donna's familiarity with clients and their families means that time she spends off duty, socializing at "family gatherings", for example, is a constant reminder of her professional work. She typifies her insider knowledge as something "you carry around with you". She cannot abandon it at the office, like a briefcase, in order to ignore work-related issues for a weekend. Because this information involves human contacts and blood ties, it is always present, carried from one situation to the next, from home to work and vice versa. Such confusing and complicated connections make each counselling session an ordeal for Donna, because she fits into the lives of her clients.

Ethnostress

The term "ethnostress" has been coined by Dr. Robert Antone in his work for

Tribal Sovereignty Associates. He defines this stress, experienced primarily by Aboriginal individuals and communities, as occurring
 when the cultural beliefs or joyful identity of a people are disrupted. It is the negative experience they feel when interacting with members of different cultural groups and themselves. The stress within the individual centres around this self-image and sense of place in the world (1986:7).

Antone links ethnostress to contemporary circumstances in Aboriginal communities and traces its effects in the individual and group. The legacy of the Indian Agent, residential schools and Hollywood westerns is felt in present-day community life as individuals who adopted "distressful" behaviour patterns to cope with oppression find themselves incapable of living any other way. The experience of ethnostress is inextricably linked to questions of identity and a sense that cultural beliefs are no longer viable, valid or valued, given current community circumstances.

Antone's concept is a useful way of understanding local residents' seeming disrespect for the humanity of their own service providers—their high expectations, dependence on institutions and outsiders, and tendency to undermine success. Unhappy with themselves, it is inconceivable that they could be happy with anyone else. It has certainly been shown that helping a community whose members suffer from ethnostress is itself highly stressful. But local helpers may themselves have attended residential schools, been exposed to negative stereotypes of "Indians" through contact with outsiders, wondered why they couldn't speak Cree. This discussion will focus on the experience of ethnostress specific to the service providers themselves.

Being a "local" service provider is not just about being from the communities of Moosonee and Moose Factory. The importance of this label extends beyond place of origin, beyond location, into issues of identity and membership in a high profile and maligned group of people. Being "local" has specific consequences when working in one's own community. But being "Indian" or "Aboriginal" entails an experience of life which, although perhaps complicated and heightened by working with one's own people, is

carried with the service provider beyond the confines of community. In fact, it is often through contact with others of differing backgrounds that such an awareness of, or confusion about, identity is realized. This is not to suggest that realizing a self-conscious sense of identity is entirely negative. Leaving the community can become part of a rite of passage, an opportunity to develop an understanding of self and other unlikely if the individual spent life solely in Moosonee and Moose Factory (R.Preston, personal communication 1995). It cannot be denied, however, that the process of attaining a complex consciousness of identity is a painful one for local service providers. Matthew

explained his understanding of being an Aboriginal person in this way:

"The fact that I came from this community, and—whether by accident or design—I'm seen by others and by myself as being an Aboriginal person, I think, that's a very political identity to have in this country, and one that we either accept or have trouble with for the rest of our lives. Because no matter which way you look at it, we are reminded of it through our experience, and we are reminded of it in ways beyond our community. We are reflected in statistics that get quoted here and there, we are reflected in documentaries, we are reflected in theses that are written. In all these things we are in fact in that position, whether we realize it or not. And I think there's a certain crisis that continually revolves around us because we've never fully understood who we are. We are eternally reflected and never project ourselves".

As Matthew points out, coming to terms with one's identity as a Native person is not so much an isolated and inward quest as it is a negotiation with and discarding of constructions of "Indian-ness" put forth by others. Native people do not really discover 'who they are'. They discover who they aren't. Even this thesis, though it grows from the words of local people and is written by one sympathetic to their struggles, is yet another example of interpretation and reflection of Aboriginal experience by a non-Native person. The understanding of what it is to be a Native person is not controlled by individuals within the community. Matthew characterizes this outsider definition of Native people as effecting a crisis within those who must cope with its often pejorative quality, and asserts that liberation will only come when Aboriginal people "project ourselves".

Local service providers are not immune to such an imposition of identity. At the

same time as they embrace self-healing—in whatever individual form this may take—and commit themselves to community development, they are faced with past and continuing reminders of what it means to be an "Indian" in this country. Alice shared her disturbing experiences of interaction with outsiders with me. As is true of many Cree Elders who "often do not convey explanations in the form of simple, single facts, preferring instead to converse about events in a narrative form" (R.Preston 1975:10), she initially told me a series of brief stories.

"And also being labelled an 'Indian', too, when I go places, I always have, somebody will want to buy me a drink, and I don't know what it is, maybe it's because I'm an Indian woman and all Indian women accept a drink, or all Indians are drunks, you know?" "Yeah", I agreed. "They think they're all easy". "Yeah, yeah, yeah, that's what it is", Alice continued. "And that makes me angry, because I know when I'm labelled for, you know. I am not that person, in fact when I used to drink, I never had anything to do with the White men, only the nice handsome Indians! So I have control over that, but it still makes me a bit hurt but I know a lot of women out there are being manipulated by these kind of men...I remember when I was working in a goose camp, I used to go cook in a goose camp, and it was all American tourists and this one guy came up to me and he asked me my name and I told him my name and I told him I was also a cook there and he asked me if I was from that community and I said, no, I was from another reserve, and he kept coming in to talk to me every day and then it was about the fourth day when he came he asked me if I'd go back with him, he says, 'I'd like to take you back' he told me, 'I think you and me could make a good life together'!! I said, 'how do you know that, we only met a couple of days ago'. So I don't know what it is, you know. It was so funny, when I came back I told my sister...And another time I was in Timmins, I went shopping with my daughter and my daughter was pregnant at this time, so we were walking around in the evening, window shopping, I think my daughter was about 7 months pregnant, so we were walking around to the corner stores and then she says to me, 'Mom, that guy's ever looking at us,' but I guess she noticed him but of course, me, I'm never aware of things like that, you know, so I didn't even bother to look round for who was looking at us and that's when I told her, 'never mind,' in Cree, you know. So we were on the other side and we were walking down the road, we had bought some ice cream and this guy comes over and he asks us if we wanted to go for a ride, and she said 'he's the same guy that was eyeing us at the corner store' and of course again I didn't see him right away and he says, 'you girls want to go for a drink?' and I said, 'no thanks'. 'You want to go for a ride?' and I said, 'no, we're on our way home.' I said to my daughter, 'I suppose he thinks he's going to get me pregnant while you're already pregnant!' But I guess it's like that all over, you know, men are just thinking about their own feelings. They think Indian women are all easy to get. Then again, this guy was a total stranger. It's scary, in a way. It makes you wonder what they see in us. And that's why I say there are a lot of lonely people out there that want companions, but you can't trust people, too, you know, so it's scary. So I've had

experiences like that, and it's scary.

When editing her transcript, Alice translated her narrative into a form she thought I would better understand. "You can break this down into something more simple", she wrote. "I just shared with you what it is like out there to be a woman. We women should not be ashamed of who we are as Indian or Native women. Let us not have or live a low self esteem. Let us believe and respect our value".

Alice's experience, particularly with non-Native men, has been one of objectification and exploitation based on stereotypes of "Indian" women. She can be bought with a drink, she is "easy". The American tourist needs only four days to know that he and Alice could "make a good life together", because she is a one-dimensional Indian, not a complex woman. As a stereotype, Alice is already understood by this man. Her ordeal in Timmins is another example of such prejudiced thinking. Being eyed by a stranger while walking down the street is a common enough experience for all women. But the sexism affecting the majority is compounded for Aboriginal women by the assumption that "Indian women are all easy to get". While the threat of rejection may cause a man on the make to hesitate before approaching a White woman, he is encouraged to hassle a Native woman to go for a drink or a ride because—he assumes—she will not likely refuse.

As Alice's addendum to her transcript indicates, such experiences lead an Aboriginal woman to feel ashamed of who she is; the lack of respect she experiences in daily life causes her to underestimate her value and suffer from "low self esteem". Native women are not cartoon characters, scripted to act in a predictable way in a particular set of circumstances. But their wholeness as human beings is undermined by the assumption that they are not three dimensional individuals possessing free will. As Alice repeatedly emphasizes, such experiences are "scary". But their power to invoke fear is not only in the encounter itself, although the threat of violence and violation is potent enough. Long after the experience, as Alice's testament proves, such moments will be remembered and will

prompt the woman to "wonder what they see in us". Alice now finds such exchanges scary because they symbolize the relations between Native women and non-Native men (and perhaps between Natives and non-Natives irrespective of gender), and because it is a struggle to refuse to see herself this way.

While stereotypes of Indian women include being submissive and promiscuous, the stereotype of the Indian man is often the strong and silent hunter. Antone (1986:17) explores this tendency to identify "real Indians" with a lifestyle which was practiced prior to European contact. He asserts that a "frozen" culture is denied what other cultures are accorded—namely that it is a "living dynamic" which adapts and changes with time. While many residents of Moosonee and Moose Factory—both men and women—continue to spend a significant amount of time in the bush (Berkes et al 1994), most would not identify themselves as making their living primarily as hunters. But stereotypes do not allow for shades of grey. Either you are a "real Indian", or you're not. Service providers are certainly examples of people who learn to operate bi-culturally, striving to preserve the best of Cree culture while adopting useful non-Native strategies, like formal education and employment in institutions. Thus they are sensitive to stereotypes which would identify them with what is regarded by outsiders as a quaint but waning way of life. Henry shared this anecdote with me:

"This summer last month I was on leave and I said, 'I'm going out fishing, going out camping' and they said, 'can we come?' and I said, 'sure, bring the grandchildren'. I was working, and where I live is right close by the river, so I don't need a car or truck to take my stuff down there, I just take it myself, blankets and camping gear, and it was so *hot* and I got frustrated and thought 'why the heck isn't anybody down here helping me? They're just sitting up there watching TV or whatever'. So I noticed two tourists standing on the river bank there, taking pictures of me loading up the canoe, so I thought to myself, 'they're not going to take pictures of me!' and they got closer and they said, 'sir, do you do this for a living?' I guess they thought I was a trapper, living off the land, and I said, 'no, I'm a health professional,' I said it right out loud. 'Ohhh,' they said. 'Can we take a picture of you?' and I said, 'no! I don't go around taking your picture!' I was in a bad mood. There was a lot of mosquitoes, then, too. Of course, everybody gets in a bad mood, sometimes".

Henry, in his good-humoured and understated way, dismisses this experience as being in a

"bad mood". Like Alice's narrative, however, his story makes a strong statement about stereotyping and its effects on one who does not see himself in such narrow and rigid terms. The tourists are looking to capture a "real Indian" for their photo album and a hot, sweaty and disgruntled Henry refuses to be their subject. As the camera would freeze his image on film, so would his identity be frozen by those who would see him as "a trapper, living off the land". Henry responds to the tourist's query, "do you do this for a living?" with the brash and authoritative, "no, I'm a health professional". He does not want to be nostalgically labelled a "real Indian" and dismissed, a nameless face to gather dust with other holiday pictures which prove "we were in Moose Factory". He understands that being labelled a trapper is to be labelled as less than the tourists. For this reason he raises himself to their level, enters their realm of experience, by labelling himself, in retaliation, a "health professional". He chooses this term, and not the more obscure and therefore less powerful "community health representative", in order to make the point that he is a bi-cultural individual and worthy of respect in non-Native terms.

A crucial contributor to ethnostress is the residential school system. Horden Hall and its precursor, Bishop Horden Memorial, were Anglican residential schools in Moose Factory. These institutions were set up to assimilate Native children to non-Native customs, religion and working class employment by removing them from the supposedly detrimental influence of their families of origin. What has been realized, as generations of children educated in residential schools have grown up and had families of their own, is that the school had the truly detrimental effect on these children's lives. Greg links the uncertainty about identity expressed by many service providers to their experience in residential schools.

"The thing about service providers is that they need to be exposed to learning about who they are. A lot of Aboriginal people are caught not knowing who they are because of residential school syndrome. Before you can help other people you have to help yourself".

While Greg refers to "residential school syndrome", I interpret this to mean "residential

school experiences". This syndrome is commonly raised in conversation and political speech but is seldom concretely defined; it is a catch-all phrase for a myriad of consequences stemming from attending these schools. A detailed discussion of these experiences and their ramifications can be found in other academic and community-produced works (see Schuurman 1994). It is important to recognize, however, that the cultural discontinuity and inadequacy felt by local residents as a result of residential schooling is a potent component of ethnostress.

Donna discusses the sense of loss and confusion she continues to experience because of her years at Horden Hall. I had suggested she might find it difficult relating her "official training"—textbooks and theory—to work in her own community. Her response tied the subject of post-secondary education back to her early years at residential school.

"Yeah, you know, because even though some of the things I learned, like I knew way back, too, I should've been taught how it all connects somehow, but it was never taught, I guess. Of course it was never taught to me because I didn't grow up with my parents. They were caught them, too, between the two cultures, my father having to trap on the trap line and his children being taken away from him. So it was lost somewhere along the way, I guess. Even though we were taken away, we were given an education so it's like a balancing of two worlds almost, you know, and it's *hard*. I think this is where people have this sense of loss of identity and they really struggle with that, and some of them die like that, still searching. And sometimes when I think of people my age, especially in terms of care-givers, it's almost like we're at a cross-roads in our lives".

Donna continues to search for a connection between the way of life her parents led on the trap line and her own experiences both as a student and an adult. She feels this link would have been "taught" if she hadn't been wrenched from her parents, the rudiments of informal bush learning she had already received to be replaced and degraded by formal schooling. Donna feels disconnected, at a cross-roads, because the connection between her past and her present has been lost in the chasm between two cultural traditions. It is her aspiration to re-claim her lost identity and to successfully balance the two worlds in which she lives. But the road to such a realization is one of searching and struggle.

Donna states that her peers, especially those who are service providers like herself,

seem to be "at a cross-roads" in their lives. I would suspect that the awareness fostered by their positions as helpers has encouraged them to think critically about their own experiences. Many service providers have attended post-secondary courses boasting a Native component or have participated in workshops or conferences organized by Native people. Such learning would provide an opportunity for the service provider to reflect on his or her experiences in light of new cultural or historical insight. Working in his or her own community also forces the helper to recognize commonalities in experience and patterns in behaviour that can be linked to such sources as residential schools. But one might say that ignorance is bliss. Recognizing that one must balance two cultural ways and tracing the need for such balancing back into one's past is a painful and confusing reflexive act.

Residential schools are not the only educational environments which can be linked to ethnostress, however. Individuals who wanted to pursue learning beyond grade 8 were forced to attend high school outside of their home communities before 1978 when Northern Lights Secondary School was built in Moosonee. What Jerry learned while at high school in North Bay was not only from textbooks and classes. His broader experience was of stereotypes and exposure to non-Native "traditions" of substance abuse.

"I had to learn when I was going to high school in North Bay in 1978 to deal with a new environment of pavement and getting called names—stereotyping of Native people. What we learned out there—alcohol, drugs, traditions out there—we bring them back with us and it makes our lives more difficult."

Leaving a small community while an adolescent to attend school in a city would be stressful for anyone. But the unfamiliarity with "pavement" and shock of an enormous population of disinterested and unrelated people is compounded for an Aboriginal child by his or her membership in a stigmatized minority. Before Jerry had a chance to develop a strong identity of his own, he had a stereotyped identity thrust on him by prejudiced outsiders. This "learning", as he terms it, was brought back with him to Moose Factory and means today he is still struggling with his own healing while concurrently he facilitates the healing

of others.

Education in non-Native institutions and communities serves to divide a Cree individual from his or her culture. This manifests itself in a lament for lost identity, a search for connections with one's heritage. For Beth, her inability to speak and fully understand

Cree symbolizes her cultural dislocation. She quietly confessed:

"It bothers me, too, that I don't know the language. I think, geez, I can't listen to the stories of the older people, about how it was, I can't get that message, but I usually don't let it bother me too much. But I also try to maintain that link with where my family came from, although they've lived here a long time, I've said to my husband, 'you know, we should try to take our kids back there'—because most of the community there is Cree speaking—we should take our kids back there, we should let them get to know their heritage a bit better, to get more in touch with the people there'...There's quite a few people I know that are my age that don't speak Cree. They may understand it, but they don't speak it, and a lot of them are in positions like mine. So that part is hard, because you sort of feel like, 'hey I should know, I should really make an effort,' but where do you find a place where they're speaking it all the time? What I'd like to do is go work up in Eastmain, like I'd like to relocate there temporarily, maybe one or two years. Or even up the coast, like in Fort Albany. I found, myself, when I went up to Peawanuk, I picked up so much Cree, and I was getting pretty good at understanding it. It just seems easier. But here, no one speaks Cree except a few Elders, and I find that when an Elder speaks to me in Cree and looks at me, I concentrate really hard and I'll understand some of it. But I really have to get a translator".

Beth suspects she is denied cultural context and understanding because she is not fluent in Cree. There remains a strong oral tradition in these Aboriginal communities and a belief that Elders' narratives transmit cultural knowledge and wisdom. Beth believes these stories carry a "message" for her (see also Cruikshank 1990). But because she cannot speak Cree and her understanding is simplistic, the complexity and nuance of these stories, and therefore their message, is lost. Beth locates self-understanding in her heritage. That she cannot speak Cree is both an abstract symbol of severed ties with culture and a concrete barrier to re-connecting with it. Only "a few Elders" speak Cree regularly in Moose Factory—a fact which facilitates outside research but frustrates one who would learn by immersion—so Beth feels pressured to live elsewhere to learn her language.

Implicit in Beth's excerpt is a fear that her children, like herself, will be distanced

and divided from their heritage. She not only struggles with her own identity as Cree. She must cope with feelings of guilt and inadequacy as she watches succeeding generations grow up to fight the same battles and feel the same sense of loss.

Beth, like Donna, sees her situation shared by other local service providers her age. It seems that learning the non-Native system through formal schooling has enabled these helpers to pursue post-secondary education and accustom themselves to the bureaucratic rigours of employment in a service agency. But this same learning has left the service provider fluent in English and not in Cree, living in a Cree community but unable to fully understand what it means to be Cree. Local helpers feel at once "bi-cultural" and "culture-less".

Conclusions

Working in Moosonee and Moose Factory as a local service provider means living a paradox. If the high expectations of community members and clients are met, the helper is ostracized and condemned for his or her success. Local service providers are often drawn to their careers and to working in their home communities because of a commitment to "their own people". But they discover that these same connections which make their work rewarding, make it impossible for them to separate their work and home lives. In taking on the responsibilities previously fulfilled by family and making themselves overly available, these service providers are trying to help. They come to realize, however, that this "helping" encourages dependence instead of fueling community healing. They are pressured to pursue higher education but are rejected for their achievements. They are culture brokers in their communities, liaisons between local people and non-local agencies. At the same time, they are caught between the demands of both ways of looking at the world, unable to satisfy one without transgressing the norms of the other. By trying to "take the best from both cultures" they realize they are being judged according to standards taken from mainstream and Cree culture which are often mutually irreconcilable. Local

helpers must support and tolerate residents suffering from ethnostress. But it is often forgotten that these helpers themselves struggle with the same issues and experiences. As role models and service providers, it is assumed by many that they are only the supporters, and not in need of support themselves.

"Human progress requires unity", declare the editors of the Four Worlds Exchange (1992:6). "Disunity destroys development efforts", they warn. To a large extent, the experiences of local service providers in Moosonee and Moose Factory can be characterized as disunity. This disunity is the friction and tension existing between what local helpers want to achieve and what results from the attempt, how they see themselves and how they are interpreted by others, where they have been and where they hope to go. It is the local service provider who is seen by many as the hinge on the door opening onto a healthy community. A rusty hinge is a temperamental and dangerous ally; unless the disunity experienced by local service providers is recognized, respected and remedied, the door may slam shut on community healing.

CHAPTER SIX: LOCAL COPING STRATEGIES

How do these individuals persist in their professions, given the frustrating and often contradictory conditions that characterize living and working as a local service provider in Moosonee and Moose Factory? Commitment to helping their "own people" and the comforting network of family and friends are certainly incentives to remaining employees of service agencies in their home communities. But, like plants denied water and sunlight, they can easily wilt and fade if unable to find the resources to sustain them against the barrage of criticism and demands coming from fellow community members.

As previously demonstrated, southern service providers tend to cope by distancing themselves from community life; they go south for holidays and invest in solitary hobbies. And they often make external changes, both to their manner and to the way they perform their jobs, in order to adjust to a different way of seeing the world. Local service providers, in contrast, do not look outward to cope with the stresses of their professional and personal lives. They turn inward, recognizing resources within their community, family and, as they reflect on their own growth and spirituality, within themselves. This is not to imply a provincial or small-minded attitude which eschews the outside world. Many of the local residents of Moosonee and Moose Factory, especially service providers, are well-travelled and sophisticated citizens of the 'global village'. Their approach to coping, however, seems to be introspective and embraces family and community instead of advocating trips out of the community and away from difficulties.

What becomes evident in a discussion of how local service providers cope with stress is that they do not always seek specific answers in reaction to precise problems and frustrations. They cope in a more generalized manner, learning about themselves and relying on their relationships with others. Instead of dissecting their stressful experiences and coping with each separately, they have a holistic approach, a perspective on life which

values balance and integration and big picture understanding.

Local service providers do not speak so much about "coping" with stress as they do "relieving" their stress. They tend to spend time away from the situation—by leaving the office on a daily basis, or by taking leaves of absence—rather than investing additional time and energy into solving a particular problem. This is in contrast to the coping exhibited by southern service providers, which tends to be more problem-based and a reaction to particular circumstances which can be more easily related back to their discussion of stress.

As previously stated, according to Lazarus and Folkman (1984) there are only two categories of coping strategies: problem-focused and emotion-focused. While southern service providers tend to cope in a textbook problem-focused manner, local helpers take an approach which seems to be neither one nor the other. Their coping methods are problem-focused in that they do not merely minimize, ignore or re-interpret stressful circumstances but actively seek solutions. Yet these strategies do not take a typical problem-focused form because they are not specific remedies to a particular problem. The coping exhibited by local service providers tends to be integrative and synthetic instead of analytic and reductive.

Although much of the stress experienced by local helpers originates from fellow locals, these service providers do not necessarily regard their insider status, with its resultant vulnerability to community critique and presumption, as entirely negative. They are not flies, tangled in a web of intimate relations, waiting to be devoured. The web which connects a local service provider to others in the community can be seen, not as entrapping, but as offering ties to those who would sustain and encourage the helper. Contact with Elders gives the service provider access to a valuable resource from which he or she can learn and draw strength. Familiarity with the backgrounds of other community members means the helper need not feel alone in his or her experiences. Having grown up in

Moosonee and Moose Factory prepares one for working with Cree clientele and may enable the service provider to reach clients more effectively. Employment in one's own community offers opportunities to help via role modelling, and dealing with professional issues which one has personally experienced is believed by some to foster self healing.

Healing through enrollment in treatment programs and workshops is another way that local service providers cope with stress. By learning about themselves, controlling their addictions and re-claiming a positive identity as Aboriginal people, those who attend these sessions are better able to cope with personal difficulties and pass this learning on to clients.

Spiritual beliefs are a ballast for many local helpers buffeted by stormy personal experiences and professional encounters. Belief in a Higher Power or Creator gives the service provider a sense of purpose and offers strength and renewal. For some local helpers, particularly those who follow the 12 Steps of Alcoholics Anonymous, such beliefs are an assurance that personal and private battles are not fought alone.

"Getting out" is a coping strategy used by both local and southern service providers, but to each group it has a specialized meaning. While a southerner will speak of "getting out" to the south, to pavement and restaurants, a local service provider uses this term to refer to returning to the bush, or to leaving the office and meeting with those in the community. "Getting out" relieves the claustrophobic sedentariness of office work.

Local service providers often vacate their positions, either temporarily or permanently. Many take leaves of absence, or stress leaves as some termed them, to replenish their energy and renew their enthusiasm for emotionally and physically draining work. Others, while refusing to leave the community altogether, leave positions deemed overly stressful. They may simply accept promotions within the same organization which promise administrative rather than front-line duties. Or they may seek employment in a different agency, sometimes under the same job title, other times in a related field.

Many cope with a loudly non-supportive community by seeking quiet sustenance and motivation among family and co-workers. Some find a supportive community at conferences and training sessions attended outside Moosonee and Moose Factory.

Taking Advantage of Insider Status

Being well-known and well-connected in Moosonee and Moose Factory affords a local service provider with access to resources, opportunities, and reassurances that help him or her cope with stressful circumstances. One oft-mentioned resource is Elders in the community. Previous discussion of Elders, especially Beth's testimony, has suggested that the contributions of these well-respected community members takes the form of non-constructive criticism levelled against local helpers. But many service providers have found that contact with Elders offers a unique and important opportunity to learn lessons that can be applied to their own lives.

Henry, as a community health representative responsible for home visits in Moose Factory, has many elderly clients. Going into an Elder's home provides him with a comfortable context in which to interact with his client. The sterility and bureaucratic bustle of a health clinic office is traded for the relaxed disorder of a home. Business-like interaction becomes a social occasion where, maybe over tea, an Elder will share experiences and wisdom with the service provider. Henry doesn't see himself as an altruistic expert attending to the needs of his client in an officious manner. Instead, he views his work as an interaction and sharing which offers him the chance to listen and learn. He clarified:

"You know, one of the most misunderstood aspects of home visits in this community, and in any community, is that you go in there as an angel of mercy or health worker to talk to them about health, but it's not like that. They do the talking. So sometimes you go in there and you might be in there for an hour. Especially the Elders. They like to talk about the past, the things they did, and you don't want to say, 'op, gotta go'. You sit there and listen, and learn at the same time, and it's a *relief* for stress, too, listening to all the good things, and it makes you feel good".

What could be deemed a stressful and distracting diversion, disrupting the worker's

schedule, becomes an affirming stress reliever. Talking with and listening to an Elder gives Henry a connection with the past—a past he likely shares because he is now 60 himself. This is not a specific solution to a concretely defined stressor. Like many of the coping strategies utilized by local service providers, Henry's contact with Elders is not a stimulus-response form of coping. A southerner may give up personal and professional responsibility for clients, may adopt a less aggressive approach to reticent patients. These examples of coping are direct responses to clients who are "non-compliant" and unwilling to follow advice, who are reticent with strangers and southern professionals. But a local person is not afforded the luxury of changing his or her behaviour as the culturally unfamiliar becomes less strange and more comprehensible. As one who was born and raised in the community, a local helper must often look beyond the context of the stress itself for answers. For Henry and others who are renewed and taught by their Elders, these answers do not necessarily change or eliminate particular stressors. Instead, they strengthen and sustain the individual so he or she can continue in his or her position.

The learning which comes from listening to Elders can be applied elsewhere in one's life, however. For example, the teachings and instruction which Jerry received from Elders in the bush has meaning outside of the bush setting. During a particularly moving and insightful moment of his interview he said with soft deliberation:

"There's always the saying, too, that when an individual, or a Cree Indian says the word 'ma' it means to listen with *every part of your body*, every soul, spirit, from your toe to the tip of your hair you listen and you'll pick up the sound you're listening for. So it's a different style of doing things, it's something we have to learn, because that powerful word, that word itself, 'ma', means everybody stops. If you're walking in the bush and you hear something the Elder will tell you, 'ma', and it means just be still, and your breathing begins to slow, slow, slow, and everything begins to calm right down until with your whole body inside and out you listen so all you can hear is the ring of something and you know what direction it's coming from and exactly where it is. So it's a unique way of learning, of being a listener".

Having read many books on coping which superficially consider breathing techniques and visualization exercises as ways to alleviate stress, my immediate response to Jerry's words

was "hey! this sounds like a relaxation exercise!". Jerry answered affirmatively, but I could sense he was somewhat puzzled by my paralleling "ma" with a technique that could be learned from a text. He replied, "we know that for Native people it works". I interpret this statement as a warning that "ma" has a cultural basis and cannot be equated with de-contextualized, non-Native relaxation exercises. Without the context—the Elder's instruction and the bush experience—the word itself is meaningless. This is a lesson that authors of mainstream coping manuals, replete with recipes for successful coping, would do well to learn. So many of these so-called "relaxation exercises" have been appropriated from (usually Eastern) religious meditations and philosophies. The eager reader experiments, hoping for success. But without a wider understanding of where these exercises come from and how they can best be applied, a non-Hindi chanting "ohm"—like a non-Cree saying "ma"—will experience little other than a hollow and meaningless ring.

But Jerry is a "Cree Indian" who learned the word "ma" in the bush from his Elders. This teaching has helped him focus and listen during stressful times. Again, this is only a coping mechanism in the sense that it is a skill applicable to many areas of one's life. Jerry cites work with clients and inter-agency meetings as two places where the ability to listen "not only with your ears but with your whole body" has proven useful. When messages are subtle, or the clamour of many voices is overwhelming, he can remember what his Elders said: be still, be calm, listen and you will know what you are looking for and where it can be found.

Alice, who is looked to as an Elder by those younger than her, also seeks the teaching of those who are older still. She claimed:

"I've learned a lot of things from other people, too, like when I join these women's groups, I've learned a lot of things from people that are older than me. I think that the best teaching is learning from each other".

For Alice, sharing experiences and wisdom with others is the best way to learn. Coping, for local service providers, is not so much about knowing as it is about learning. Learning

is considered the key to healing and positive transformation (Four Worlds 1992:5). Knowledge is important only in so much as it directs one to a teacher, and enables one to share understanding with others. It is this atmosphere of mentoring and information exchange which offers support and aid to the local service provider. It does not have to be professionally oriented or institutionalized—although I suspect this would be helpful for those service providers who feel isolated from other workers and misunderstood by clients and employing organizations—because much contact and interaction in these communities is refreshingly informal. Learning is not the result of tutelage but gentle instruction by example or inference which can be imparted at unexpected times. This has traditional significance and precedent. What was learned in the bush was not only the mechanics of securing a living from the land, but the subtleties of intra-and-inter-family interaction which would ensure survival. Such life skill learning seems to be imparted through Elders to this day, though the environment is no longer only the bush. For the service provider, these lessons are applicable in the community and the agency. The content of the lessons may differ, but the method of transmission seems the same.

Being part of a community where "everybody knows everybody else's business" can be a stress for a local service provider. It means that one's personal history and family associations can undercut one's professional standing. And it means that a local helper is always privy to information about clients which can affect his or her ability to see a client's case without bias or intense emotional involvement. But some local service providers view such often tacit mutual knowledge as positive. A helper who has had a difficult personal life, problems with family members, or repeated exposure to tragedy knows that he or she is not alone in such experiences. Leah, a registered practical nurse (RPN) at Moose Factory General asserted, "I see that other people have problems. Even just being around here, I can see, like with my friends, that I'm not alone". Such awareness of shared experience is reassuring. Alice related a number of troubling incidents in her life, including the suicide of

her father when she was a young adult. Decades later, she still has many questions about this painful event and is working toward answering them. But her understanding that she is not alone, that others too have lived a life rife with tragedy, makes her feel that her pain is shared. It is not a burden that she only carries. She admitted quietly:

"It's hard, and I know I'm not alone, there's lots of other people that go through that kind of a life, whether it's their parent or a family member, a brother or sister". "Have you ever talked to them about it?" I asked. "No, I just know what kind of a family background they have", she answered. "So that's almost a positive thing about living in a small community", I suggested. "Yeah, I guess in a way it is", she affirmed.

What Alice's anecdote reinforces is that much of the coping practiced by local service providers involves dealing with past hurts or present-day problems, circumstances which have personal consequences regardless of the helper's professional role. This is in contrast to southern service providers working in Moosonee and Moose Factory whose coping is largely job-related. When a southerner leaves home and sojourns north, he or she leaves behind extended family, friends, and reminders of prior difficulties. Shaking the soil from one's roots leaves only the odd clinging clod as a reminder of where one came from. Having arrived most often to accept an offer of employment, these service providers find their new organization, clients and co-workers are their most pressing concerns. But a local service provider is not given this freedom of de-contextualized individuality. He or she continues to work surrounded by and reminded of his or her past experiences, and vulnerable to new tragedy. Suicides, domestic violence, alcoholism, sexual abuse and negligent parenting—all of these leave deep wounds in those who have felt, either directly or indirectly, their sting.

Such experiences, as has been true of many problems suffered by Aboriginal people across the country, are not often openly discussed. Non-Native people and Native individuals who have been educated in post-secondary institutions or religiously watch Oprah may describe such reluctance to share intensely personal information as "denial". "Breaking the silence" is the catchy slogan accompanying the contemporary unveilings of

once-hidden incidents of past abuse and other forms of pathology in Native communities. However, Alice's excerpt shows that circulating experiences, announcing them on the public stage, is not always necessary for the residents of a small Native community. It may serve an important purpose for the outside world in terms of education and establishing the country, continent or planet-wide consistency of some Aboriginal experiences. But whether or not one openly admits to painful experiences within his or her own community, chances are everybody knows about them anyway. Such silent acknowledgement does not offer the catharsis of a confession to those who quietly carry burdens. It does not right any wrongs or encourage change and renewal on a community-wide scale. For these reasons, "ending denial" and speaking openly about distressing events can be important (Justice and Warry 1995:25), and can enable the Native community to fulfill its traditional function as maintainer of social control. But there is, from Alice's words, a feeling of communion with others which is helpful even without being openly declared. Tragedy seems less potent and threatening when it is shared by other community members. Unspoken understanding is still support.

This form of coping should not be seen as an acceptance of tragedy as the norm, a passive reinforcement of the status quo, an immunity to pain because it is so prevalent. On the contrary, it has its roots in the norm of non-interference which remains an important force in these Cree communities. Unless aid is specifically requested it will not be given, ensuring the sufferer's autonomy remains intact (S.Preston 1982a). The knowledge that help is available, that others, too, have survived such experiences, is perhaps reassurance enough.

The phrase "community healing" flies proudly on academic and Aboriginal banners alike. But in Aboriginal communities there seems to be much debate about what seems to me to be a chicken-and-egg problem: which comes first—community healing or individual healing? (see Justice and Warry 1995). Healing, both of the community and the individual,

can be seen as a circle where efforts made in one area fuel efforts in the other. Local service providers are a crucial link between the two. They are individuals who have at least begun their own healing and who now work as change agents within the community, fostering an atmosphere conducive to growth and striving for structural changes which will encourage other individuals to start walking the same path. But, as Matthew reminds us, these individuals clamour for help dealing with their unique experiences and do not want such focus lost in generalized community efforts:

"There are times when great things can happen, and great things unfold, and there's all this excitement and cooperation and things actually do work and things actually unfold as you think they should but for the most part I think that a lot of the work that needs to be done is internal, subjective. Before you get to the community, there's that individual and that experience that needs to be addressed...I find that there are generations here, and generations over time, of people that are just trying to deal with the hurt, whatever it might have been. It's a problem for trying to resolve things, because they are crying for attention in ways that deal with them as individuals, and not as part of the whole".

"Community healing" implies homogeneous experience, unity in voice and opinion, strength in numbers, "excitement and cooperation". The reality of Moosonee and Moose Factory is of a population having diverse experiences, divided by factions usually based on religious beliefs, hesitant to support initiatives and eager to criticize. In a community so divided, local service providers may be tempted to "share" their own experiences less openly and instead be content with the unspoken understanding that there are commonalities in experience and that their community work on such issues has relevance. Such an unassuming understanding is perhaps a more secure and effective form of coping than validating this feeling in open discussion. Such a risky exercise could see commonalities overshadowed and undercut by irrelevant but strongly felt differences.

Being an insider to community life confers still more advantages on the local service provider. Being familiar with the people, the culture and—often from personal experience—with the problems clients face enables the local helper to reach his or her clientele with greater ease. A southerner's outsider status creates barriers to integration and

understanding. A local person's insider status, then, can be seen as a valuable asset.

Frank believes that being from Moose Factory gives him access to information available only to one who has grown up in the community. As a First Nations constable, this privileged position means he is better able to identify law-breakers and perhaps prevent situations from escalating by predicting the behaviour of those involved. He told me:

"There are good points about being from here and growing up here. When something happens, you know who did it, right away who did it because you know who everyone is. If there's a B & E—Break and Enter—you have a good idea of who it was because you grew up with a lot of these guys, eh? You know their habits, what they like to do".

The intimate knowledge community members possess of each other is more than just a stressful source of gossip and reason for prejudice about a service provider's capabilities because of past behaviour or family background. When it is information held by the service provider about others, it can help one who is involved in revealing illicit activities, uncovering secrets, solving mysteries. It could also be useful to a local counsellor who would have a wider context and understanding in which to place the words and actions of a client.

There is a commonly held understanding in Native communities and among Native service providers that learning comes from life and that wisdom and understanding arise from personal experience. "Expert" knowledge which is not rooted in practical understanding is often regarded with suspicion, both because it has not been gained through life experience and because "expertise" implies the "expert" is no longer willing to learn (Mussell in Stalwick 1986:84-5). This was reinforced for me at the Social Development conference, where several Aboriginal speakers opened their presentations with the proviso that their knowledge was limited to what they had learned on their own journey through life. The infrequent southern presenter never mentioned his or her personal learnings via trial and error but quoted outside experts on the subject of infant nutrition or parenting. Local presenters, in contrast, adamantly denied being experts and

instead humbly offered insights from their own lives. I witnessed a similar difference in approach during a consultation between employees of the mental health program and the staff of Moosonee's treatment centre. The non-Native program director and psychologist spoke about case studies and the experiences of their clients when asked for opinions on program development. Employees of the treatment centre, however, spoke about their own experiences in treatment to justify or explain the program philosophy or its components.

This emphasis on life learning and personal experience extends into service provision. It is often assumed that in order to be a successful helper, one must have previously experienced circumstances similar to one's clients. An alcohol abuse counsellor who is not him or herself a recovering alcoholic may not even be hired for a NNADAP position. One who has not experienced abuse at the hands of a partner but speaks on the subject will not receive the same respect as one who has gone through such an ordeal herself. A nurse without children who explains proper hygiene and feeding to a new mother will likely have her instructions ignored because, not being a mother herself, she is not considered an authority. This subject was explored earlier in the context of the stresses experienced by southern service providers. Not having personal, subjective knowledge of a client or patient's predicament makes it difficult for a southern helper to reach his or her clientele.

Local helpers, however, often have this intimate, personal understanding and many believe it is a necessary quality in a successful helper. John, for example, firmly believes that the power to help others flows from having had similar experiences. He asserted adamantly:

"I do believe that when you help people, somebody else helps you help them, but *you* have to go through the same pain and suffering *yourself* before you can do that because I went through a lot of pain and suffering twice, first with my drinking problem and then with my divorce".

Surviving a troubled past for a local service provider is like a trial-by-fire. The power to heal others comes from emerging scorched but stronger from the flames of previous

predicaments. Not so for most southern helpers whose education is not from living but reading; most have only textbook case-study exposure to the plight of clients prior to accepting their first job. But for many local helpers, this sharing of personal experience, this insider understanding of a client's bruises and booze-haze, is a professional prerequisite. Their individual success leads them to help others overcome similar difficulties.

Joanne's excerpt shows how such personal experience offers an opportunity for enlightenment and preparation for professional work. She stated:

"I watched, as I was growing up, I watched a bad relationship. There was a lot of alcohol and violence—physical abuse, emotional abuse, mental abuse—going on. And I was put through some of that, you know, with the alcohol and everything, and that's where I found I got my experience. As I was growing up, I didn't have very much of a childhood, you know, or the teenage years. I was always watching out for my mom, that's how I lived and I found that was the best experience I could've gotten. That, and what I went through with my own relationship...Before I came into this program, to community outreach, I was a counsellor here, and I did get very frustrated hearing that once they've left the home they always go back to the same situation but I've done that myself, so now I've had that experience, I've done that to myself, and now I do have the patience and I find that I do understand them a lot more, I understand *fully* now what they're going through and why they keep doing it".

The stress experienced by southern service providers often stems from misunderstanding and what they often label "cultural difference". As outsiders to such experiences as domestic violence and alcoholism they are confused and frustrated by unresponsive clients who refuse to abandon drinking or an abusive spouse. Even Joanne, who was witness to a violent relationship during her childhood, found that true understanding and compassion for her clients came only after she herself endured an abusive partner and discovered how difficult it can be to extricate oneself from such a situation. Through experiences which made her an insider, privy to the realities of domestic violence, Joanne learned patience and tolerance. Though she would like to return to school, she is confident that personal experience has been her greatest teacher, preparing her to counsel and support battered women.

An understanding of community needs and cultural differences allows a local service provider to fill the role of culture broker (Devlin 1991:224). Many have attended post-secondary institutions and have learned mainstream social work theory or have had Native content taught in a non-Native educational environment. But prior socialization in a Cree community means these helpers can see two ways and can strive to build bridges between often disparate views. This key coping mechanism enables a local service provider to reach his or her Cree clientele more effectively by allowing the translation of inappropriate training or policy into a more comprehensible form. If this does not lead to greater success, it at least reduces the friction between what is taught in schools or expected by agencies, and what are community conditions or cultural constraints.

Jerry consciously uses his understanding of Cree culture and the specific circumstances of his community to alter the approach he has been taught in school. He discards inappropriate tools, recognizing that they may serve an important purpose elsewhere, but not in Moose Factory where clients are Native. He explained:

"So basically it's that—looking for what will work in our tradition, in our culture. How to use the information to help certain individuals. Like that Emotional First Aid Counselling manual, there, to me that's something that would be helpful for college and university, for somebody that comes up to be able to use that manual in their offices, but for a Native traditional person to see that, he's going to say, 'that's useless for me, and it's not going to work. It may work for somebody, but not for us.' What I've got to do is use the information there and hopefully re-translate it into something that could work for the community...I try to find different plans where I'll be able to work with them from a Native perspective".

Jerry asserts that the origin of much information and programming is the well-insulated ivory tower of academia. Most colleges and universities cater to the dominant culture, not to a particular community. It is the unofficial mandate of the local service provider to adapt learning and techniques to suit the distinct characteristics of his or her community. Jerry undertakes this process of discarding and adopting, accepting and altering, in order to apply a generalized education and imported way of reaching people to the specifics of Moose Factory.

Alice also finds her familiarity with Cree culture, and especially her fluency in the language, is an asset in work with clients. She is able to take an indirect and understanding approach, instead of the aggressive "attack" on a problem typical of a non-Native understanding of service provision (Chrisjohn 1990:206-207). She stated:

"When I get a referral that says, 'go see so-and-so' I don't attack that problem right away, or whatever I need to talk about. It's so different, you know, when you communicate in Cree, in my own language with my own people. I can talk about whatever that person's doing when I go in there, sort of say, 'oh, you're doing laundry', or whatever, in Cree. It's something that I *have* that I do for people, like if I walk in there and somebody's doing dishes, I just pick up a dish towel and help them dry their dishes, or if a person is really under a lot of stress, too, like if they can't even get off their chair to do anything, they're so down, I tell them, 'let's wash dishes together, I'll help you', and straighten up their house a bit".

Alice does not always meet with clients in her office. Instead, she will do a home visit and actively participate in the client's life, offer concrete support in the form of dish drying and house tidying. This approach seems to be effective in a Cree community. It sets up a relationship based on equality, shared experience, informality and non-threatening aid for those whose cultural values include non-interference and non-institutionalized authority. And by providing an example for her clients, by showing instead of telling, Alice again makes service provision more comprehensible to those whose tradition has been learning by modelling. Jerry astutely illustrates this tradition by relating how he was taught to hunt by his father.

"Us Native people are shown how to do things. Like how to make thread out of sinew. But if they just tell you, it's different and it's like you've lost out on the explanation. When they show you, they demonstrate what to do. When I was younger, 8 or 9 years old, my dad showed me how to hunt, and he showed me how the goose landed and so how the decoys should be exactly set. And he showed me how to make the camouflage so good that the canadas or waveys can't see you".

Bush traditions, as has been stated repeatedly, have contemporary relevance in these Cree communities. Jerry's father did not hand his child a goose hunting manual. He did not explain how to hunt while sitting at home. Learning is an interaction that takes place in a pertinent environment, and it requires watching as well as active participation. When Alice

does a home visit and picks up a dish towel, or encourages her client to tidy up with her assistance, she is teaching the client in a culturally appropriate manner. The interaction takes place in a relevant environment—the client's home—and does not establish an authoritarian hierarchy—because Alice herself participates.

Alice also provides a quiet example to the client through her sobriety and the care she takes of herself. In a community that learns best through modelling, a service provider could perhaps do more by openly living a healthy, sober lifestyle than by inviting clients to appointments in an office (O'Neil 1993:19; Four Worlds Exchange 1990:3). The opportunity to role model is seldom afforded anyone other than a local service provider. Of course, certain individuals originally from the south have been role models in these communities, especially those who have resided in Moosonee or Moose Factory for decades. But the short stay of most southerners make them foreigners and therefore unlikely candidates to fill roles which require familiarity, shared understandings, and community confidence.

Like being a culture broker, role modelling can be stressful—a fact explored in the previous chapter. But as a service provider committed to positive community change as well as to working with individuals, being seen as a role model is a powerful way to further this end. As was indicated above, role modelling is culturally appropriate and providing an example for others to follow is a more effective way of reaching those in a Cree community than making pronouncements or ordering compliance. Matthew's words provide concrete evidence of this. He told me:

"I've felt that in my own particular line of work and what I've been trying to do, it's not so important for me to do something for others, but by doing for myself, others see that they have to do for themselves and through that process we do things for each other and we service each other".

By taking responsibility for himself, for his healing and for implementing his vision of a better community, Matthew provides an unspoken impetus for others to follow his lead. Thus, through what could be typified as a reverse domino effect—each domino, instead of

toppling, stands on its own as it is nudged by the domino ahead of it—individuals are better able to "service each other". This is a very unobtrusive and natural way to provide service in a Cree community.

As an insider to many of the experiences of clients, local service providers discover that the work they do encouraging and aiding others helps them with their own healing and recovery. Unlike southern helpers, local service providers do not see themselves as markedly different from those they assist in a professional capacity. Suggestions by local helpers regarding service provision, access to training and community support were commonly offered with the understanding that such changes or improvements would benefit both the service provider and his or her clientele. An example of this is a recommendation made by two different female helpers that assertiveness training for women would be profitable, not only for themselves, but also for their female clients. There is more to this connection between helper and helped than simply being from the same community. Local service providers often share personal difficulties and past destructive habits with clients which allow them to see correspondences between their own needs and those of others. That they recognize similarities between themselves and those requesting aid indicates that they do not see themselves as being 'fully healed'. Thus, work with clients serves an important purpose in motivating the local service provider to maintain healthy behaviour and continue investing in personal growth.

For those who battle an alcohol problem, this perspective is assuredly supported by the commonly held notion that alcoholism can never be cured, only managed. Alice and John, who both consider themselves recovering alcoholics, firmly assert that the strength and support they receive from clients is crucial in maintaining their own sobriety. They equate themselves with clients instead of distancing themselves by establishing a hierarchical, authoritative relationship. Their connection with clients is based on reciprocity and they recognize that the power to teach and inspire does not inhere in the helper only.

Alice suggested:

"I guess that's the part of what I do for a person also helps me, that type of thing. It makes me feel stronger and it also helps me build up my own self and to maintain my sobriety...It just makes me feel so great at the end of the day when I know that I've helped someone who was really down in places. It gives me a lot of strength, I pick up a lot of strength from that person as well".

And John explained:

"You see, counselling is a two way street. I get as much out of counselling people as they get out of me, and that in itself helps you stay sober. This summer there was a time when I was feeling sorry for myself, I was just sitting at home, I wasn't even going to church. A friend of mine came to visit, and he was having a lot of problems with his marriage. 'I'm not going to drink', he said. 'I'm going to handle my problems like you.' That just took my reason for feeling bad and shot it out the window. It kicked my butt. So I went to an AA meeting—four meetings that week—and now I'm back on my feet again".

For these helpers, counselling can be a source of encouragement and nourishment, assisting the service provider with his or her own troubles. For Alice, the knowledge that she has "helped someone who was really down in places" makes her feel stronger. But it isn't the weakness of the client which makes Alice, in comparison, feel secure in her sobriety. Indeed, Alice indicates that strength emanates from the client and that she feels empowered by working with that person. For John, clients are a reminder of his responsibility to role model and the power his sobriety has to encourage others. The unwavering and ambitious statement of John's friend—that he would not drink regardless of his marital troubles—inspires John to abandon his self-pitying depression and seek support through AA meetings.

This introduces an important difference between local and southern service providers in terms of coping. While a southerner will respond to a professional problem by adapting or altering professional practice, and will deal with a personal problem during private home time, many local people are uneasy with such a dichotomizing of personal and professional existence. As is the case for alcohol abuse counsellors, professional work may offer the opportunity to salvage and sustain one's personal life. Or, looked at differently, personal successes may become the impetus for undertaking a professional

position which involves similar issues. For local service providers, the boundary between home and work—which southerners guard as a matter of professional pride and indication of competence—is blurred. One can affect the other, both in a positive or negative fashion. This is likely a culturally conditioned way of seeing life which is exaggerated by the fact that local service providers, as employees in their home communities, are not easily able to separate work responsibilities and home concerns.

Unfortunately, the tendency has been for outsiders—who are often in administrative positions in service agencies and therefore responsible for monitoring worker progress and reprimanding those who do not adhere to regulations—to regard this only negatively. Being unable to keep personal problems at home is seen as disrupting work patterns and leading to periods of absenteeism. Ellen, who is in charge of local mental health workers, phrased it this way:

"It's just very difficult because I don't think I've ever worked in a place before where people need so much sick time off. Again, this is a kind of learning—I recognize a difference between White workers in the south and Native workers. What we do, our skill, is compartmentalizing our lives. Our personal lives are falling apart but we come to work every day and go home and fall apart. Sometimes it catches up. We keep our professional life because that's a key value, whereas people up here don't compartmentalize nearly as neatly. Their personal life falls apart, everything falls apart. And I think in a lot of ways that's maybe healthier, but it makes for very complicated business when you're trying to fit into a White pay system".

Ellen grudgingly acknowledges that being unable to divide work and home life into discreet, unrelated wholes is "maybe healthier". Certainly taking leaves of absence can be regarded of as a form of coping, and one which will be discussed later in the chapter. As Ellen indicates, it is a commonly utilized method of sorting out personal problems, dealing with crises and renewing one's strength in order to eventually return to work. But the effect of personal life on professional career can be unequivocally positive, as evidenced by the words of John and Alice whose strength and renewal comes from interaction with clients. This may be an alien source of encouragement to a southern helper whose different background, difficulty successfully integrating into the community, and training in

"concerned detachment" means clients usually remain at arm's length. However, this coping method—unlike taking sick leave—certainly doesn't interfere or contradict the non-Native regulations and standards of conduct which govern the operation of many service organizations.

Even those whose work is not anchored in the addictions field sometimes believe that spending time with clients and the counselling act itself can be helpful for "wounded healers". This term is finding increasing acceptance in Aboriginal circles to refer to those service providers who have themselves had many of the same painful and debilitating experiences as their clients (Four Worlds Exchange 1990:16). It aptly describes the circumstances under which many helpers are brought to their professions, and their ongoing need for support in their own struggles toward balance and healing. Greg, a traditional healer who works with clients on an informal basis for pay in the form of tobacco, is convinced in the power of sharing with clients and "re-opening old wounds" to heal the counsellor. He explained:

"I look at counselling as exchanging shit. It's not only the client who benefits, it's a two-way street because the counsellor gets to share, too. Counselling means re-opening old wounds and beginning to heal those again. Each time you open those wounds, they get smaller".

Again, the interaction and exchange between counsellor and client is emphasized. By sharing "shit", as Greg aptly labels the grief and hurts brought to the counselling session by both parties, the counsellor and client are both able to heal their wounds. Evident in his words is the belief that acknowledging and examining pain instead of denying or ignoring its existence is an important stage in coping with past problems. Counselling offers this opportunity to a service provider. Reaching out to help others allows one to reflect inwardly and discover the roots of one's own troubles. The counselling journey puts two people on the road to recovery. More than just identifying past hurts, the service provider can work through feelings and make positive changes via the give-and-take counselling relationship. Each new client offers another chance for the "wounded healer" to learn from

and participate in the healing of another, thereby helping both parties.

Robert Antone and Diane Hill (1990) have written a manual titled "Helping as a Form of Healing" which details a process they have labelled "co-counselling". While the client is still of paramount importance in this method and the helper must keep his or her attention focused on the individual requesting help, there is an explicit understanding that the counsellor also needs support and assistance. It is assumed by the authors that he or she has likely been drawn to such work because of past experiences which have been overcome and driven the individual to help others with similar difficulties. The helping relationship outlined by Antone and Hill is, as John and Greg describe it, a "two way street". In fact, support for helpers and the opportunity for the client to experience the curative power of helping others is entrenched in their method. They close their text with this paragraph:

Counsellors who are very familiar with this process will know from experience that it is sometimes necessary for them to discharge or release their own feelings which may have been "tripped off" during the session. It is appropriate at this time [during the "closing round"] for the counsellor to switch roles with the client. Although a client may be untrained in managing the process, the natural tendency or inclination for all human beings who are operating in a good place is to extend warmth and comfort to someone in distress. Therefore, if the counsellor feels the need to discharge, then he or she will request the time and attention they need. Often, just the presence of the other person or people in the room is adequate for discharge to occur. There is a great deal of power and healing just in knowing that we are being listened to (19).

Self disclosure becomes a way for the helper to release the emotion associated with the correspondences between client and healer's experiences. This excerpt summarizes much of Aboriginal thinking on healing. Expertise does not lie in certificates, diplomas or degrees—though these may be useful in "managing" the process. It can be found in personal experience and the natural tendency for human beings to help others in similar circumstances. The fact that helper and client are coming from the same place means that healing is a circular exchange, not a one-way flow from professional to lay person. Thus, being an insider to the difficulties of clients can become a principal way of contending with

one's experiences as a "wounded healer".

Seeking a Sense of Self

While the benefits for local service providers of sharing experiences with clients may be largely limited to counsellors as a group, most other local service providers, whether they work as nurses, First Nations constables or administrators, find that coping with past addictions and securing a strong sense of identity are crucial to their continued personal and professional stability (Four Worlds Exchange 1990:3-5, 32). Part of this necessarily stems from the Aboriginal experience of "ethnostress" where a sense of self and pride in one's origins are disrupted. Some local service providers, prior to becoming helpers, survived this by dulling their pain with alcohol or drugs. Some, lacking self esteem and confidence, became involved in abusive relationships. Still others, while demonstrating no obvious outward signs of destructive habits, were inwardly depressed and lacked the motivation to contribute to family or community in a constructive way.

Many local residents continue to suffer from these difficulties—hence the overwhelming need for helpers in Moosonee and Moose Factory. But local service providers have somehow been able to pull themselves from the black of night to the grey of dawn and in the process commit themselves to bringing others with them. Their struggles are not over, however. Many continue to battle a drinking problem or attend to the scars left by a violent partner. And this inner healing must be done in the context of lingering questions about one's identity as "Indian" or "Aboriginal" or "Native".

Several interviewees sought assistance with these difficulties through Native-oriented treatment programs, some specifically designed to help those who had quit drinking. Attendance in such programs, which include cultural components, provides ample opportunity to reflect on past experiences and gain self knowledge. Alice, though she has been sober for 12 years, decided to attend a "Family Program" whose emphasis was not on drinking problems but on dealing with one's family relationships and inability

to express feelings. During this time it was suggested that she join a 28 day treatment program, and she followed this recommendation. She told me:

"It took me a long time to be able to really express my feelings...I had encouraged myself to go to this program to learn about myself, seeking treatment for myself. And then I was able to express love, anger and different feelings in a proper manner. Sure, I love everybody else, but I guess I never said to myself that I loved myself, even though I did I guess in a way, I just never, and then my loneliness, to express my loneliness, because I don't think we stay in one stage, like we have different feelings all through the day, and all through our life, so to express these feelings more in a way, like when you're happy or sad or in fear or when you hate or love etcetera, because we have all these feelings that run through our mind, so it's coming to express them, the desire and the joy, to be grateful about many things, and anger, to express anger in a proper way, before actually doing the action part of it. So I thought that was really neat. Now I'm able to do those things...When I was in the 5 day Family Program, they recommended that I go for a 28 day program, because I've never been in treatment—when I sobered up I just sobered up like that and I never actually went to treatment. So I went to treatment in January of this year, after being sober for 12 years". "And was that good?" I queried. "It was good in a way, yeah. I didn't know what treatment was like before because I'd never gone to it, I could never tell my clients what treatment was like, too, because I'd never actually gone through it. Sobering up is not enough. A person has to receive treatment of some kind to learn about oneself, to learn how special we are. So I took another sick leave, and I went to the 28 day program because alcoholism is a disease and I still had lots of sick leave left so I put it to good use...I'm glad that I went to treatment, I can share that with my people that I work with and I had to deal with a lot of things in the grieving part of my life, too."

Alice asserts that "sobering up is not enough". If alcohol was once a coping mechanism designed to drown sorrows, numb the pain of the past, and mask confusion about identity, then simply discontinuing its use does nothing about the underlying problems which prompted its use in the first place. Hence the importance of treatment, of discovering more constructive coping resources and strategies, of "learning about oneself" and "how special we are". An Aboriginal person will have no problem believing his or her uniqueness. The problem is believing *in* such uniqueness, recognizing its strengths and advantages and reclaiming a positive sense of identity in a country rife with negative Indian stereotypes, prejudice and the vestiges of colonialism. Attending a treatment program, for Alice, has given her confidence and self-awareness and the skills to make these realizations relevant in her daily life.

Alice was able to use sick leave to participate both in the Family Program and the 28 day treatment program. This indicates the flexibility of her employing organization and its awareness of the importance of healthy, balanced workers. "Healing the healers" became a slogan repeated by representatives of each community attending the Social Development conference. It is widely accepted wisdom that without stable and healthy front-line workers, community development and change is impossible. This understanding has made its way into the policy and procedure of various community-based programs. Margaret, the director of the mental health program in Moosonee, explained her commitment to the healing of local workers:

"This program is really needed up here, and if I'm not there to support the front-line staff—if they're having problems or need assistance—then what are we saying about the program? Like if we're to help the people in the community and we don't practice what we preach, we might as well close up shop. It was really identified at that Social Development conference, that's what is really needed right now. I don't feel bad about it at all". "You mean taking it easy on the workers?" I clarified. "Yes. You have to be supportive of them".

Organizations developed with substantial Aboriginal input tend to view the employee "in a holistic fashion, not as someone who turns up between nine and five, but someone who also has a life outside of the organization" (Chapman et al 1991:344). Thus many of the agencies in Moosonee and Moose Factory have been generous with absences and have broadened the definition of "sick days" to include mental health leave and enrollment in treatment centres.

Bob also quit drinking and enrolled in a treatment program. He admitted: "I used to do a lot of partying, like before, and I made a choice to smarten up, 'cause it was going too far, 'cause I wanted to make myself better and that's a choice I made, I quit drinking, I went to a treatment centre, I did what I wanted to do, you know, and it wasn't easy but I did it, and it was the choice I made, and I'm glad today that I did it because now everything's okay—I'm not saying everything's fine, like I still have my problems...but I'm beginning to learn how to deal with problems I have, personal problems, 'cause I found I had a hard time dealing with problems, didn't want to talk about them".

Bob has a realistic understanding of the capacity a treatment program has to change his life. He acknowledges that he "still has his problems", but in making the choice to enroll in a

treatment centre he is "beginning to learn how to deal with" them. Treatment programs offer no money-back guarantees on miracle cures. They provide information, opportunity for introspection and guidance; they are a good place to start. As it is the responsibility of the individual to take the initial step to enroll, so it is his or her responsibility to apply what is learned in life back home. What Bob gained from his time in the treatment centre was new found understanding and the tools to examine his life and habits for constructive and destructive elements. He can now talk about problems, whereas in the past his drinking forced silence, enabled a tacit acceptance of his circumstances. But talking does not imply solving; words can be meaningless hot air. Shortly after our interview I got a ride to work with Bob, and he joked about "getting pissed" the night before. I was dumfounded, unsure of whether to respond in a similar, seemingly inappropriate humorous manner, or whether to be supportive and encouraging. I think I managed some mutated and uncomfortable combination of the two. But in considering this exchange between Bob and myself after the fact, I remembered that many people go through treatment several times before sobering up for good. But this should not negate the importance of each separate and unique experience and what can be learned from setbacks and failure. Bob may, at a later date, enroll in the same or a different program, or he may decide to sober up without additional assistance.

For some, coping with emotions, healing and questions of identity is not done in an institutionalized setting or with the formal assistance of another. Matthew claims that simply his experience of life, of being from Moose Factory, going to university elsewhere, and returning to his community to assist his people, has been full of opportunities for learning. His naturally introspective character, coupled with his post-secondary education, has enabled him to think critically about events in his life. He stated with quiet enthusiasm:

"It's been a learning experience regardless of where I've been, about who I am, where I'm going, and never fully figuring it out, but knowing there's more to it than meets the eye. And that the learning has begun and you just take it up, not really knowing where you're going, but having an idea of what it should look like, based on your experience, you've extracted the good and tried to deal with the bad, tried to process that and heal it somewhat and let it go...It's a question

of being in touch with that and coming to learn that and empowering yourself to be able to deal with that in a way that not only liberates yourself but those around you as well who are also affected by the unequal perception of yourself and what your place might be".

Reflexivity and understanding are empowering. Life's journey will include negative and positive experiences, failures and triumphs, painful memories and healing of wounds, but will ultimately result in self-knowledge for the one who realizes "there's more to it than meets the eye". For the local service provider, coping implies "dealing with" generalized life experience. Refusing to think and speak about troubling incidents and previous problems is not an adequate response; silence on these matters is disempowering while learning from them means renewal and liberation.

Matthew indicates that such individual introspection and healing can help others. This could be due to the importance of role modelling in these communities. But it could also result from the understanding that preoccupation with one's own problems prevents one from being fully available to assist others. Thus personal healing and coping with difficulties becomes an important professional exercise.

John provides another example of someone whose diverse life experiences have offered him important opportunities for learning. Time spent away from Moose Factory while attending high school necessitated adjustment to a non-Native world where he was required to abandon his "Indian-ness". Such changes, while momentous, do not necessarily result in a permanent denial of self or irretrievable loss of identity. John can now operate in two worlds, able to apply Native or non-Native learning at his discretion to various circumstances. He acknowledged:

"I've learned long ago to adjust to situations that I've been dealt. If you're stuck out in the Bay with a big storm coming, are you going to go through the storm or are you just going to sit there and wait out the storm? I apply these skills that I've learned from my Native way of life to my drinking problem and some of them work and some of them don't, so you have to know which ones to use. When I went to high school in North Bay, back then there was no cultural programs, so I had to give up my way of living and say, 'I'm not Indian for a while,' and follow their culture, follow their rules, their way of doing things. I had to adjust my life to fit their standards, and that's how I survived high

school...My dad tried to teach me the traditional way but I was more attracted to the other way. My brother got fully taught the traditional way and he did mostly trapping and hunting moose and goose and being in the bush. I would survive on my own if I had to. I could survive in both cultures".

The ability to cope is learned through exposure to different situations, and, for John, applying coping strategies to problems is partially a matter of trial and error. For so many local service providers, learning happens through daily life, not merely in formalized educational settings. Finding oneself in novel situations may involve adapting to and perhaps even adopting unfamiliar ways of looking at life and seeing oneself. The experience of some southern service providers in Moosonee and Moose Factory attests to this. But whether the learning a southerner acquires during his or her northern sojourn is of use if he or she returns south is debatable. Much of the southerner's adjustment is job-related and the prevailing attitude is that, as David the OPP officer put it, "when I return to southern Ontario, it will just be a valuable life experience because the rules of the game change down there". John, however, applies experiences had at home and away, in the bush and in town, to various situations—like his drinking problem. His lifetime of diverse encounters and involvements results in the conclusion that he "could survive in both cultures".

Being "bi-cultural" seems superficially an ideal personal attribute. But analysis in the previous chapter indicates that confusion, contradiction and loss of subtle understanding may be experienced by one who considers him or herself "bi-cultural". Being able to operate in two cultures is certainly an advantage. But John's phrase "I could *survive* in both cultures" attests to the inadequacy of his bi-cultural training and his need for further learning.

Spirituality:

Belief in a Higher Power, Creator or God serves as a crucial form of coping for many local service providers. There is long history of missionization in Moosonee and

Moose Factory, and some helpers come from families with strong ties to the Catholic or Anglican church. Others have found stability and spiritual sustenance in the Pentecostal religion, or the Native New Life church. Still others practice a less institutionalized form of religion, occasionally attending services or seeking the guidance of traditional spiritualists and healers, but more often engaging in quiet prayer while at home. Religious differences may lead to factionalism at the community level. But investment in spiritual beliefs on an individual level seems a positive method of coping with stress.

Jerry creates a spiritual environment in his work place as a way of relieving stress.

He will read from the Bible, pray and listen to gospel music.

"During my coffee breaks I'll just sit here reading from devotional works and just put on some gospel music, lock my door, close my door and turn it up here and sit here and listen to it. And somebody will come in and say, 'what're ya reading?' and one time I was reading the Bible, I was praying here and down on the floor, and someone walked in. A lot of prayer for me, I try to relieve stress with that, because I try to leave everything to God, if you want to call him that. The Natives call him 'Creator', they seem to like it that way. So I leave everything to him".

There is a hint of self-consciousness in Jerry's anecdote, as he twice refers to being interrupted by others while reading or praying and notes that he will lock his door to keep out intruders. Spirituality is a private form of coping for him. Jerry relies on his Creator to take care of his troubles, ease his worries, give him strength. Faith becomes a reassurance that whatever arises can be dealt with. It is a support in stressful times. But spirituality is also a celebration, and Jerry likes to turn up the volume. He listens to gospel music in his office; spirituality is not something reserved for Sundays or home-time. Jerry turns to God and to creating a positive spiritual atmosphere when he needs it most—to cope with the contradictions and frustrations of his work.

When I spoke with Donna, she had just returned to work following 6 weeks of stress leave during which she socialized and drank and made a conscious effort to forget her work worries and home stresses. But over-emphasis in this outward aspect of her life meant her inward growth and spirituality had been neglected. She confessed:

"It's almost like I've been neglecting *me*, too. That's what I felt last night, when I was by myself. I haven't prayed for a while, and I felt really bad about that and I thought, 'I'll do it tomorrow'".

Donna has maintained balance in her life through combining prayer and informal religious practice with more secular activities like socializing with friends. During a quiet moment at home, she realizes how little time she has spent recently in spiritual contemplation and vows to make this a priority. Several local service providers, including Donna, aspire to the teachings of the Medicine Wheel and believe equal attention must be paid to the four areas of life: physical, mental, emotional and spiritual. The realization that one area has been neglected leaves one feeling "bad" and puts in place the motivation to reinstate balance.

Leah has resolved to attend church more regularly, and participate in spin-off activities like Bible study which are apart from the Sunday service. She noted:

"Another thing I do is go to church now, work on myself spiritually. I was listening to the Bradshaw tapes and he was saying that there's introvert and extrovert church-goers and I'm working on being an extrovert. They have Bible study and I haven't gone for a while but it's good. It helps me get out of the house, to do something, and it connects me with people who can be supports, too".

Ritual and quiet contemplation of the divine do not appear to be Leah's priorities when attending church. Instead, she uses services and the more social, associated activities as exercises in emerging from her shell. Bradshaw, a mainstream self-help and healing guru whose own following could be described as religious, has labelled church-goers as "introvert" and "extrovert". Leah has vowed to overcome her shyness by working towards being outgoing in spiritual matters. Also important to Leah are the connections she makes at religious gatherings. Others attending church are seen as potential "supports" for her. Thus spirituality as a form of coping is not merely a reliance on supernatural or divine powers but admits the importance of a human element. People, and not just God, are powerful and helpful aspects of an active religious life.

Some local service providers have, through Alcoholics Anonymous, developed

concrete and overt understandings about the role of a Higher Power in their lives. AA is based on the 12 Steps which are at once a doctrine and a step-by-step instruction manual for attaining and maintaining sobriety. The second and third steps deal exclusively with what AA terms a "Power" or "God" which the individual can define as he or she chooses. Step two states: "Came to believe that a Power greater than ourselves could restore us to sanity". And step three asserts: "Made a decision to turn our will and our lives over to the care of God as we understood him". Almost all of the other steps give at least passing reference to God or spirituality. Thus the 12 Steps are more than just a Bible in a figurative sense; spiritual awakening and reliance on divine power are entrenched aspects of the AA program.

John's discussion of faith in a Higher Power is strongly reminiscent of AA's credo. He stated authoritatively:

"Most people are not aware of the simple fact that human beings are not designed to be alone. God created human beings to rely on their Higher Power to get them through, day in and day out. Most people who are stressed out try to solve their problems on their own and humanly. They don't rely on their Higher Power to get them through the day. Every morning when I get up before I have breakfast, I read my books. I read my Bible, and I pray for the strength to get through the day, and at the end of the day, I thank my Higher Power for the day, even if it was lousy, I thank him. That's how I live on a day to day basis. There's certain things I can do as a human being, but there's certain things I can't do, so I let my Higher Power do them and then I'm not stressed. No human being can handle stress on their own, they have to rely on their Higher Power. One of the things I try to do is ten and a half years ago I gave my drinking problem to my Higher Power and as far as I know he still has it and that's why I'm still sober. I see people walking around this community in Moose Factory and they're trying to handle this addiction all on their own and they fall flat on their face because no human being can handle addiction, there has to be a Higher Power to break that addiction. Treatment programs and AA teach you that. That's why AA is so successful, because it teaches you to rely on the Higher Power to keep you sober".

I have heard Native people assert that an Aboriginal person will thank the Creator for the day's events, whether they are superficially good or bad, while a non-Native person only turns to God to ask for something. John seems to blend this traditional wisdom about the "Native-ness" of thanking with AA's expectation that one give up personal responsibility—

not only for addiction but for one's very existence—to his or her Higher Power. Just as John did this with his drinking problem ten and a half years ago, so he does the same today with other stresses in his life. He puts complete faith in his Higher Power that his human frailty will be compensated by the infinite strength of the deity.

Contact with Culture: "Getting out"

A southern service provider "gets out" to the south to visit with family and friends, and to renew contact with a familiar way of life. Southerners speak of "getting out" as a means to preserve sanity and avert the inevitable "bushed" syndrome that can take hold of one disconnected from civilization. Leaving Moosonee or Moose Factory entails taking a plane or, less often, a train, and means the southerner must make expensive and occasionally complicated vacation arrangements which can themselves be stressful. Thus "getting out" for a southern helper is seldom a spur of the moment coping strategy or one which can frequently be put into practice.

Local service providers also talk about "getting out", but for them this does not imply a southern excursion. Granted, some local helpers enjoy trips out of the community to Timmins, Cochrane or Toronto for shopping, visiting relatives or attending conferences and training. But more often they discuss "getting out" in terms of spending time away from the office in the community, or returning to the bush for spring and fall hunting.

Several local service providers assert that leaving the office is a relief for stress, an opportunity to escape work pressures and focus attention on people rather than paperwork. This indicates a predilection for active, fresh air, face-to-face contact with others, rather than the safety and comparable quiet of an office whose door one can shut. Local service providers seem to crave activity, movement, change and human interaction. This they can find by getting out of the office and seeking action in the community.

Helen, the counsellor for students at the public school in Moose Factory, has adopted this coping strategy upon returning to work from six weeks of stress leave. Her

time off allowed her to reflect on the manner in which she dealt with stress, and encouraged her to make some positive changes. She claims, "now, if things are getting too hectic, I'll leave the school and just go for a ride, go and visit somebody. I've started to do that. I have to learn to do that or I'll burn myself right out". Leaving the office is a way to distance herself from the busyness of work, to relax and collect her thoughts. Helen does not believe that the 8:30 to 5:00 work day should be a continuous struggle broken only by coffee breaks and lunch hour. Her approach is to divide up the day, not on a standard schedule set by someone else which forces her to take a break whether it is needed or not, but when she herself senses such a moment of repose is necessary.

Alice sees the chance to escape the office setting as good for both her and those in the community she would like to reach. Because she is a local person and well known in Moose Factory, she can "go out" and sit at the shopping complex and local residents will approach her. This contact is not overtly work-related, but it corresponds nicely with the informal way of conducting business which seems successful in these communities. But sitting in a restaurant, sipping coffee with friends and "sharing" is also a stress relief for Alice. She mentioned:

"I'll go out sometimes—and the younger guys will think it's funny—and I'll just sit at the Complex in the lobby and people will just come up to me and talk, share, we'll go for coffee. It's important to make yourself visible in the community, and I tell the guys not to sit in their offices all day. It's probably, too, that I've been here so long, and everyone knows me and what I do so it's easy for them to approach me, you know?"

Certainly social contact outside of the office and the opportunity to leave business behind is a nice change and could even be regarded as an escape from work demands. But being "visible in the community" and dealing with people in an unofficial manner is a coping strategy with relevance beyond a change in perspective and environment. As noted in the chapter on the stresses experienced by local helpers, a frequent critique levelled against front-line workers is that they are not "in the community" enough. It is doubtful whether strategies such as Alice's are adopted in response to such criticism, but certainly being

recognized outside the office meets with the approval of local residents. But more than this, it is a common complaint of both local and southern service providers that appointments with clients and official instruction are inadequate ways to reach the local population. Appointments are missed or ignored and clients will show up whenever they feel the time is right; words of authority and expertise are discarded or considered irrelevant. So Alice's method of contacting community members through unofficial means outside the grocery store or in the local restaurant is likely a more successful way of promoting wellness in Moose Factory, and one which is enabled because she is a local person.

Henry uses work-related responsibilities as opportunities to leave the office. Because an important aspect of Henry's job is visiting elderly and otherwise home-bound clients, he can find relief from office stress by attending to these duties. Abandoning paperwork and proposal writing and escaping the irritating shrill of the telephone ring has become a key coping strategy for him, and one he asserts has been recommended by his physician.

"I know when I get stressed, and sometimes I'll feel so stressed out that sometimes I'll go out and do a home visit, to get out of here, and it was recommended by my doctor, or any doctor, just to get out, you know, when you feel stressed out...Get away from your work. Say, 'I'm going, I'm very stressed out' and take some time off, go out into the bush and scream your head off".

Like most individuals, Henry is only "stressed out" by certain aspects of his work, and finds other aspects intensely rewarding. It appears that for him, as for the other local service providers whose opinions are included in this section, office work is stressful while work done out in the community is a "relief" for such stress. Investing in pleasurable and rewarding work activities does not change those elements of his work which he considers stressful, but it does renew his energy to tackle what he doesn't enjoy.

Henry also mentions taking time off to go into the bush. While his joking reference to being in the bush for the purpose of screaming his head off is likely facetious, several local service providers expressed the opinion that time in the bush is beneficial. Gail, for

instance, stated:

"Our Board really promotes the spring and fall hunting, and I do a lot of that. It really makes a difference being out in the bush. I find if you go out and take your holidays in the south somewhere, you're more tired when you come back. You really burn yourself out".

The local equivalent of "getting out" to the south seems to be spending time hunting. While both entail leaving the community and taking a hiatus from one's place of employment, Gail asserts that going south exaggerates her stress level, while a bush holiday "really makes a difference" as a stress reliever.

Jerry, like Gail, copes with stress by engaging in outdoor pastimes, like going out to his camp and, when the season arrives, hunting. In response to the question "what do you do to relieve stress?" he mused:

"Well, the only things that I do is on the weekend I have a camp on Checkpoint Island here, about half a mile or a mile from here and on the weekends I go there, and I'll go along the river on this side and I just look at things, at stones, and I make my way along the coast here and go across and unload the wood or whatever into the camp. Or I get ready for fall hunt. Another thing I do is go for a boat ride—around the island, here, upriver, down river—I'll go fishing or do work around the house, build something, cut grass, just to keep my mind away from the office, away from administration, from plans and problems. So I do a lot of things like that. More of the outdoorsy kind of stuff. I'm a naturalist, I like to be out there rather than inside. I usually take walks, too. We have a trail that runs around the island here, and during the fall or the winter or summer I'll make a trek around there, or I'll walk along the beach there, the coast, in the sand and let my mind wander. I'll think about my friends and lost friends, but not to the extent where I bring it up again or get depressed, just memories of what we used to do. I do a lot of that. I do a lot of walking and biking, I'll drive my truck around. I'll go into the community, too, and visit old friends there, just sit down and visit other people and talk to them. So that's what I do to relieve my stress. I'll go pick berries or something like that".

Staying active forces professional preoccupations out of Jerry's mind and allows him to focus on concrete, achievable ends—like building something or preparing for hunting—instead of abstract worries. However, not all his activities need be so purposeful. Going for walks or bike rides may not be as goal driven as home renovation or hunting, but quiet time in the outdoors also affords him the opportunity for introspection and reminiscing. Such reflection on the meaning of past events coincides with earlier discussion of coping through self-knowledge. Nature is Jerry's treatment centre; like many Native people, he

recognizes the healing power of his natural surroundings (Aitken 1990:25). His preference for outdoor activities has a strong cultural base. Just as a southerner will return south for a taste of the familiar and a re-connection with the city, so will a local person who has grown up in a community and culture with strong ties to the land return to the bush for support and sustenance.

The love of "camping", as some term the act of living in the bush, is felt so strongly by Alice that she has been tempted to set up camp outside her house when she cannot afford the time to really get away. She laughingly asserted:

"I love camping and it gets rid of stress because there's no phone and no TV. I haven't had a chance to go yet but it was getting to the point where I was going to set up camp outside my house! I was going to sleep in a tent there!"

The trappings of modern living which many would describe as indispensable are considered stress-inducers for Alice and going into the bush removes her from their clutches. Alice grew up in the bush and, for her, tent-living is a familiar way of life. Life on the land is certainly not without its own set of stresses, but they cannot be equated or related to the stresses of home-ownership and non-Native definitions of employment. Alice mentioned to me her abhorrence of house cleaning; she relates this to her early years living in a tent with a disposable spruce bough floor and no knick knacks to dust. Camping is a return to this lifestyle for her. A tent is such a positive symbol, and her yearning for camp-life is so strong, that she contemplates pitching her tent at home.

Leaves of Absence and the Informal Job Rotation

It is not unusual to speak to a local resident of Moosonee or Moose Factory and discover that life's road is winding and bumpy and often doubles back on itself only to veer off in a seemingly unrelated direction. Conversations about where one has been and where one is going caught me off guard early in my research. White, middle class kids are told that life's road should be straight—set goals and achieve them successively. When asked, I would tell people I had been in school for 19 of my 24 years and they could hardly

disguise reactions that ranged from dismissive nods to shocked derision. By 24 many of them have had two or three kids, held down a couple of full-time jobs, maybe been on social assistance, lived outside of the community—maybe for work, maybe to attend school—dropped out of school, returned to school. Very often the assumption is that life does not follow a straight and narrow path. Taking a break, or trying something new with undesirable results is not considered failure.

One way many local service providers choose to cope with either personal or professional stress is to take time off from their organization. Southerners, as Ellen indicated earlier, are skilled at "compartmentalizing" their lives and diligently perform professional duties regardless of the negative effect this outward dedication could have on their personal lives, including their families. To take time off work would be to admit defeat, would be proof of incompetence or incapacitation. But to a local service provider who doesn't view taking a leave of absence as evidence of failure and doesn't neatly divide personal life from professional life, time away from work can be rejuvenating. "Stress leave" or "mental health days" are opportunities to re-connect with family and friends, to put life and problems into perspective. Not having a linear view of life's course means that time off can be valued and helpful and spent in constructive activity instead of in fretful contemplation of what taking time off says about the service provider's professional capabilities.

Both Donna and Helen took stress leaves from their organizations during the course of this research and, at the time of our interview, Beth was also planning to take time off from her responsibilities as nurse-in-charge at the health centre in Moose Factory. This stress leave would permit her to replenish her energy supplies, better understand her "mental health needs" and spend some time with her children. She averred with quiet confidence:

"I think my needs, and I'm focusing on mental health needs, I'm going to try to understand what I'm going through and that I need a stress break and I'll take

off maybe six weeks...So when I come back from that leave I'll feel better. I think if I have those weeks away from here I think that's what I need right now. I was talking to [another employee at the health centre] today and she was saying, 'you have so much going on in your life and it all adds up and you can only handle so much without taking a break'. I feel like I have no energy left. Last night I had no energy left for my kids. And when I went home yesterday it felt like I was taking it out on them, and I'm starting to have problems with my daughter and I think it's because she's feeling the stress the way that we feel it. So when I take time off I'm going to do something with my kids, like maybe go away, take the tourist train, just do something with them, you know?"

Beth's tactic does little to deal concretely with the stresses she will once again be faced with upon returning to the health centre. It does, however, blow the whistle for a 'time out' during which she can catch her breath and focus on neglected areas of her life. "Indians", a minister who lived many years among the Cree on the east coast of James Bay postulates, "are not ready to sacrifice either their humanity or their family life to the dollar, nor are they willing to sell their heart, mind or soul to the corporation they work for" (Muller n.d.). Beth's concern for her children's well being and her own need for a break are sufficient reasons to leave her employing organization short-staffed and without a manager.

Taking a stress leave may also be a culturally appropriate form of coping. When living in the bush in small family units whose survival depended on cooperation and deference to the authority of a respected Elder, confrontation was not a viable form of problem solving. Anger and worry were not shared but repressed. Getting away from the problem became an appropriate way of coping with difficulties with particular people or circumstances (R.Preston 1991:71,76). Such methods of dealing with emotional upset and stress continue to be taught in contemporary families. I was recently at the public school in Moose Factory admiring a display of writing by grade one students. They had drawn pictures and carefully pencilled responses to the question: "When I feel angry I..." An overwhelming number of answers indicated the student would suppress his or her feelings or withdraw rather than confront the situation. Responses like "I count to 10" or "I go to my room" or "I go outside to play" or "I spend time by myself" were prevalent. Only one

student stated that she would "talk about her feelings".

While these answers could have been prompted by teachers, or have resulted from a unit on dealing with anger which taught ideal ways of coping with the emotion, I suspect they came from the children themselves. We live in the decade of sharing. We are told to talk about everything, confess everything. The one student whose response was to "talk about her feelings" gave the Oprah-approved answer. Everyone else, however, would be accused of suffering from repression which could later lead to denial—or so the self-help gurus would say. Thus I would conclude that these children are being socialized in ways which have their roots in bush living. Their parents, like Beth, likely exhibit similar approaches when dealing with employment stress. Already one such approach has been outlined in the section dealing with "getting out" of the work place and into the bush or the community. Taking time off, or a break, from the stress-inducing situation could be considered the adult equivalent of going to one's room. Because of its cultural basis, it appears to be an ingrained coping strategy. However, living on a reserve with 1800 others or in a town with a population of 2500 is not an equivalent to bush living. Some service providers recognize that circumstances have changed and have adopted more mainstream attitudes toward coping. As it will be later discussed, they are learning to ask for help when experiencing stress instead of always repressing their feelings or taking a temporary respite from the situation.

But this form of coping should not be understood only according to its cultural component. Even non-Cree professionals who lack substantial cultural insight recommend taking leaves of absence, and southern service providers utilize this coping strategy when they escape to the south. Henry asserts that both his employer and physician have instructed him to take stress leaves.

"You know, when you get into a very stressful situation, I take some time off and that's recommended by my doctor and even by my *employer*. Because when you get too stressed, you're no good on the job. They don't say that, I say that to myself, you know, how can you provide a level of satisfaction, even

to yourself, you cannot provide a level of service to your client or your community if you're stressed out or in a bad mood".

Getting away from the stresses of work is considered a viable form of coping by more than just the local service providers themselves. This may be because it is an easy answer that does not require structural changes in the employing organization or outside intervention. Responsibility is placed on the service provider to deal with difficulties and sort out personal or professional dilemmas.

The tendency for studies of stress and coping to emphasize the individual has been criticized (Dawson 1993). Solutions like taking stress leave imply that the problem lies with the employee and not with circumstances in the agency. The service provider lacks the resources to cope with a stressful environment; leave is granted for the individual concerned to replenish his or her energy stores in order to return more able to fight the same battles. Eventually, however, the service provider will realize nothing has changed. The glow of the time away from work, like a tan, will fade. Pressures at home and at work will again build. Beth's stress leave may allow her to spend 'quality time' with her children, but memories of the trip on the tourist train will fade and souvenirs will work their way under beds and into the shadowy depths of dresser drawers. Her children will again resent the time she spends at work and she will again feel the friction between parental and professional obligations. The answer, for many local service providers, is to take another leave of absence.

Yet time off from work need not become part of a stress and coping cycle to be repeated year after year. Some local service providers use leaves of absence for concrete ends and specific purposes. Joanne—like Alice who used her sick leave to attend a treatment program—took a year off from her position as outreach counsellor at the Family Resource Centre to "sort out" her personal problems. She felt pressured to take this time off because of her contradictory position as a counsellor for battered women who was

herself in an abusive relationship. She stated:

"To be honest, I asked for a year of leave of absence not very long ago, and it was just to sort out my *own* life. I felt here, I wouldn't be able to give all that I needed to give to my job because I had stuff that I needed to fix with my own life. That's why I took off a year".

Both Henry and Joanne indicate that in order to maintain a satisfactory level of service to clients, one cannot feel overly stressed. For Henry, this stress appears to be largely work-related, and a leave of absence entails time away from this stress to be spent in the bush or at home in rejuvenating activities. Henry has used this strategy every year for a number of years. But Joanne's stress specifically originated in her personal life, thus her leave of absence was no generalized escape. Instead, it was a once-only hiatus from work during which she charged herself with the task of "fixing" problems in her personal life.

Some local service providers leave their employing agencies, ostensibly for good. But upon discovering that their new position is not to their liking, they reapply for and are re-hired in their old jobs. Beth left her job as a public health nurse to work in the emergency department of the hospital. At the time of her move, she was working as the acting nurse-in-charge at the health centre and found her lack of training and new responsibilities, in addition to unreasonable community expectations, caused her to "burn right out". But having tried something different and finding it not to her liking, Beth re-applied for her old job. Experimenting, moving on and returning to what is comfortable and familiar seems common among local service providers. Discontentment with current employment circumstances may lead one to try something new—even if it is simply applying for a new job, going for the interview but refusing the position when it is offered, as Donna has done twice during the years our friendship has developed. While there seems little fear of the unknown among local service providers, still there is also little shame or guilt about returning to what is well-known and already experienced if the new position is unsatisfactory. Time away from one's previous job can highlight perhaps unrecognized positive aspects of this past position. In Beth's case, she has realized that prevention work

and community health is where her training and ambitions lie. Working at the hospital as an ordinary RN renewed her commitment to public health and was the impetus for returning to the health centre.

Taking a leave of absence appears to be a primary indication that a local service provider is considering a change of job, whether this be seeking employment in an entirely different organization, or undertaking a different role within the same agency. John took time off from duties as a NNADAP worker, and when he returned to the program he moved from a front-line position to that of administrator. He is currently in college, learning to better meet the requirements of this role, and he plans to return to the NNADAP program in Moose Factory with these necessary skills in hand. When Beth returned to the health centre following a recent maternity leave, she decided to apply for the nurse in charge position, hoping that performing administrative work would decrease her "community-oriented" stress. And when Donna returned from three months of stress leave, she began to question her commitment to the mental health program and wondered if it was not time for her to seek employment elsewhere. She admitted:

"If they ask me, 'well, what do you want to do', I say, 'I don't know, I don't really feel like doing anything right now, all I know is I'm back to work'. And maybe it'll be a change of jobs. It seems to be heading that way, anyway".

Donna's prediction came true, as she is now working in Moose Factory as a counsellor at the public school. Helen, who has vacated this counselling position thus making it available to Donna, made a move to a different job soon after returning from her six weeks of stress leave. She is now coordinating the Native Teacher Training Program based out of Moose Factory.

While southerners come and go from Moosonee and Moose Factory but remain in their chosen profession, local service providers tend to remain in the communities themselves but come and go from their employing agencies. There are some local helpers, like Alice and Henry, who have remained consistent and steady employees and have almost

come to symbolize their organizations. But there is an informal job rotation among many local service providers in which positions vacated by one are filled by another; when the newcomer leaves the veteran often returns.

Taking stress leaves and changing jobs become viable and, although perhaps disruptive to overall service provision, individually successful ways of coping with stressful situations. Such tactics enable a local person to remain in his or her home community and continue to participate in community development and healing, whether it be in the same or a similar capacity. These coping strategies are enabled by the limited number of local service providers in these communities. If the competition for social service and health employment was greater, it would not be so easy for a local person unhappy with his or her current job to immediately secure work elsewhere. Nor would a local person be privileged with the opportunity to return to the first organization if his or her occupational experiment in another agency did not have satisfactory results. Nor would it perhaps be as acceptable to take long leaves of absence to deal with personal or professional difficulties. If more local people were obtaining post-secondary education and returning to their home communities, presumably program directors would be less lenient and more prone to hire employees who promised to provide consistent service. However, if the numbers of community residents with diplomas and degrees swelled, it would likely indicate an improvement in the overall health of the community. Healthier community residents would be less prone to criticize and degrade their own service providers, and would be less dependent on agencies for every need because of an improved sense of self. These changes would likely decrease the service provider's initial need for stress leave and desire to abandon his or her current job.

Someone to Lean On: Seeking Support

Because many local service providers do not find their communities supportive but instead find much of their stress arises from the criticism of local residents and the

expectations these community members have of their helpers, these workers often turn to other sources of support as a form of coping. Henry advises his fellow service providers to seek help from friends, family and other workers when "bad stress" becomes too overpowering for an individual to handle alone.

"I think you have to understand what stress is, like I said, whether it's good or bad, you know. It's asking for help. They have to ask for help when you know that you're dealing with a stressful situation, whether it's on the job or off the job, your family can help you, your friends, they may joke around a bit, but they'll help you, and also talking to your supervisor, to people who are in high places. They understand because they also go through a lot of stress".

Stress is a shared aspect of working as a service provider. Admitting one feels stressed and turning to others who also experience similar circumstances can be beneficial. Henry's insistence that service providers ask for help is the result of many years of personal experience with unsuccessful attempts to suppress awareness of stress and handle it on his own. He began his interview with these words:

"Even as a Native person, myself, I tend to think, 'oh, it's just a matter of time before I will handle this, I'll be able to overcome this stressful situation'. And as a Native person, and I'm speaking for myself, I find that I don't always consult with people until it's almost too late, like what happened last summer...We say, 'alcoholics are in denial', but alcoholics are not the only ones that are in denial. We deny a lot of things—it doesn't bother me, I can handle this".

"Last summer" Henry was forced to take an extended stress leave. He considers this to be a consequence of relying only on himself instead of asking for the contributions, opinions or support of others. I infer that his repeated use of the phrase "as a Native person" indicates that this approach to stress is deemed uniquely Native or, more specifically, Cree. Frequent reference has been made to the norms of non-interference and personal autonomy which are crucial elements of survival for Cree living in the bush. Asking for help invites outside interference and entails losing a certain degree of autonomy because it allows the participation of another in private aspects of one's life. Help is not readily offered by others because this is seen as an infringement on these values.

But Henry has come to realize that bush norms may not work effectively in a

community or agency environment. Helping others can no longer be defined in an entirely Cree manner because the local service provider has been educated in non-Native ways and is employed by an organization which, if it is not non-Native, has at least been largely modelled on non-Native organizations. Helping oneself undergoes a similar re-evaluation in light of the novel circumstances of employment in these institutions. As is true of many local helpers, Henry tries to reconcile different ways of doing things in order to maximize his effectiveness. The "old ways" and the "new ways" must "look at each other" (Four Worlds Exchange 1992:21). He has adopted mainstream, Freudian-based understandings of psychology, characterizing the withholding or ignoring of feelings as "denial". Finding traditional Cree approaches unsuccessful, Henry is learning to ask for help and recommends that other local service providers do the same.

Co-workers are an excellent source of support for many local service providers. Because they are employees of the same agency, they encounter many of the same difficulties, endure the same stresses, and are readily available for consultation and sharing of experiences. One can seek help informally by going into the next office to talk, or by discussing a problematic situation during coffee breaks. And most organizations have staff meetings where problems can be aired and questions asked in a more formal manner. When I asked Alice if her relations with co-workers were supportive, she responded affirmatively and suggested that it was the caring and sympathetic atmosphere at her agency which has kept her working as an alcohol counsellor for 12 years.

"I think that's probably the reason I've lasted this long, because we used to share in the morning, if I'd gone through some crisis or some personal thing at home, I would feel so great to come to work in the morning and share that with whoever it was. It was good. People here, they listen, they don't judge. I think that's why I was able to stay here long. There's a lot of people who have stayed here long. And then we forget about what we said, after". "So it's a releasing", I suggested. "Yeah", she affirmed. "I don't even think we're even ashamed to cry in front of each other in here, anymore, you know", she continued. "We're so open. I guess we understand feelings, you know, and what we're going through...I think that listening is the most important. I don't really expect anybody to help me sort out whatever mess I'm getting myself into, I have to do that myself. The healing starts from within myself as well, but it's the

support of the people, the respect for each other".

Shared experience and an understanding of the importance of confidentiality are two factors which make co-workers ideal confidantes. While discussing private matters with other community members makes one vulnerable to gossip and speculation, Alice feels secure in divulging personal information to those at the alcohol abuse program. Confidentiality may be an imported value in Native communities, but its importance to local service providers—who endure sufficient criticism and lack of support from local residents as it is—cannot be ignored. Being counsellors themselves also gives co-workers ample experience in dealing with crises and consoling others. As Alice states, her co-workers "understand feelings", are expert listeners and are non-judgemental.

Service providers in Moose Factory have gone beyond co-workers in the search for support and service coordination by initiating an inter-agency committee. Henry, an avid proponent of the committee and regular participant in its meetings, explained its purpose and benefits to me:

"What we're doing now is inter-agency meetings. We've established that quite well though we're still in the process of implementing a committee, or establishing a committee where all the services are involved and support each other, where a person in a program may have problems with a client, we can deal with it more effectively when we work as a group. I suppose it's case-conferencing...and hopefully the inter-agency committee will be involved in something like this, because we do feel quite alone and lonely. We leave each other behind and we're getting deeper and deeper into a stressful situation, and we don't know it until it's almost too late and they ask, 'why didn't you ask for help?'" Later in the interview I asked Henry, "Do you get into counselling for alcohol abuse?" He replied, "We do get involved with alcohol but we do have a program here at Keewaytinook [the NNADAP program], so if anybody comes to you for help, we don't want to overlap with their program so we make referrals. But sometimes a person depends on you, has a faith or trust in you because you know them, eh, and you're open, so we try to work with them, and this is where the goals of the inter-agency come in, because we're working as a *group* for the community".

A strong network of representatives from all agencies in Moose Factory which meets on a regular basis can provide local service providers who otherwise feel "alone and lonely" with a feeling of connectedness and support. An inter-agency meeting becomes a forum to

discuss both professional concerns about clients whose needs extend beyond the services of one agency and personal concerns about work-related stresses. Issues raised at such a meeting receive wide audience and can be dealt with on a scope impossible if only shared among co-workers. And since many of the mandates of service agencies seem to arbitrarily exclude some clients or prevent some workers from helping with particular issues, inter-agency meetings are an opportunity for all to participate without feeling they are overstepping organizational boundaries. Such networking and "team building" among agencies is recommended by myriad authors writing about circumstances in Aboriginal communities (Four Worlds Exchange 1990:33; Justice and Warry 1995:57; Mussell 1993:117; Aboriginal Family Healing Joint Steering Committee 1993:156; Chrisjohn 1990:247).

Networking with other agencies can be up to individual discretion and motivation, however. This has to be the case in Moosonee, which does not as of yet have an inter-agency committee and has not been invited to participate in Moose Factory's committee. Bob, the literacy coordinator at the Friendship Centre in Moosonee, makes informal connections with other service providers in the community because their clients are the same as his. He explained:

"I do a lot more than what my job description says I have to do. I do a lot more and get myself into trouble sometimes. I just put my nose into some things I'm not supposed to. I find I correspond and interact with other people a lot, with other agencies, like the social workers. I get them to help me with this program, because we both work with the same clientele, so I try to work with them a lot. Like I had a meeting this morning with the treatment centre staff, and we accomplished something really good there".

Unfortunately, Bob does not feel his work with other agencies is well supported by his administration, sensing they regard it as a transgression, as "sticking his nose into some things he's not supposed to". But still he perseveres, considering the benefit of the support he receives from other service providers to far outweigh the risk such disregard for his job description holds for his job security.

Some local service providers look beyond their own community for support, finding it at conferences and training provided specifically for Native service providers in particular professions. April finds workshops attended outside of Moosonee to be useful in ways beyond simply imparting professional information for court workers. She stated:

"The majority of the family court workers and criminal court workers are Native, so we open our workshops with sweetgrass and handshakes so they're really good with that and you're really comfortable when you go there". "You sense a community there?" I suggested. "Yeah...That's what I like. You're free to say whatever you want, and no one's going to laugh at you...They'll try to build you. They'll put you in front of a group and you'll have to present and each person will do presentations to other groups. It's good because sometimes you have 2 to 300 people in one place and you'll open with handshakes and it will take all morning just to do handshakes and hugs, but then you're not afraid or shy, and you can say whatever you want and nobody will get offended". "So it's not just training you to do a job", I clarified. "Yeah, it's training you to be more open and confident. I think it's great, because I used to be shy. Like sometimes I used to be outgoing but then I could be shy, too, especially in front of big groups of people. I used to think, 'I have to get up and talk in front of all these people?!' And now you can't get me to sit down!" She went on to describe a particular conference she had attended in Kenora. "They had Native lawyers there, Native judges, Crown attorneys, court workers, basically everybody involved in the system. They had people from Greenland there. They had this big map posted and it was the size of those two walls there and you had a name tag and everyone had a certain colour dot and you had to put that dot from where you came from. So you'd look at the map and say, 'oh, they came from way up there'. It was good".

Hugs, handshakes, and sweetgrass reinforce April's membership in a supportive community that exists outside of her agency and her home town. As a Native person she is part of a wider circle of Aboriginal people across the country and beyond, and ancient traditions such as smudging sweetgrass and adopted traditions such as identifying place of origin on a map reinforce this connection. Hugs and handshakes bind closely those who attend these conferences or training sessions; their inclusion in the daily agenda hints that more will be touched on than simply professional concerns. Warmth, friendship and understanding are priorities, not just imparting practical information. As April indicates, these workshops "build you". They instill confidence in a supportive atmosphere. They work to strengthen and foster the growth of the whole person, not just the professional.

Beth ensures that every year she attends the Aboriginal Nurses Association

conference. She, like April, finds a community of her peers which understands her personal and professional dilemmas. She told me:

"I get a lot of support from there, too, because I meet with other nurses who have the same kinds of frustrations as me and who work in similar situations, who work in their home communities and feel the same kinds of stresses as I feel, and some of them even have the same kind of family stresses, like it's *amazing*. I've met nurses there that I can just identify with them, just like that. It's as if I've known them in another life or something like that. I find that from them I get more support in that one time per year than I would even get from somebody here".

Even though the nurses who attend this conference may live thousands of miles from each other, because they share both their profession and being Aboriginal, there is a remarkable congruence in experience. At this conference, Beth—who feels beset by those at home in Moose Factory—finds sisters (and likely the odd brother) with whom to discuss struggles and among whom she feels supported. Presumably she receives valuable information and returns to her home community with practical knowledge. But her words indicate that this tangible, professional end is less important than the feeling of communion she experiences with fellow nurses. Without the pressures of small-town competition and the prejudiced knowledge that comes with over-familiarity, those attending the conference can unequivocally stand behind each other. Their connections do not come from living on the same reserve, or being related by blood or marriage. They are connected only as Aboriginal service providers and through the experiences they choose to share with one another. This realization and communication of common experience is itself a crucial aspect of the conference.

Family is also an important source of support for local service providers. Siblings and parents are often available to help with child care, and the reciprocal relationships existing within families mean that material objects like vehicles and culturally important items like wild food are shared. But frequently it is children that are referred to as offering support and encouragement to their service provider parents.

Children can be seen as taking care of some of their parent's needs. A service

provider's job is demanding, both in terms of emotional investment and the amount of time which is spent engaged in work-related activities. As has been previously explored, local service providers are presumed to be available 24 hours a day; for some this is entrenched in their job description. Added to this are the numerous positions on committees and boards that local service providers are nominated for and which many feel obligated to accept. Therefore, while they may officially be off work at 4:30 or 5:00, many continue professional work well into the evening. Older children are often sympathetic to a parent's busy schedule and help with younger siblings. Joanne's son is an example of such a supportive youngster. She told me:

"I've found that my eldest tries to bring me up if he sees me down. I find that my eldest is very independent and so I find him like myself. I still see that he is a child, but there's a lot of things that he will do. He's a lot of help. He knows when I need sleep, and when the others are getting into my hair, he'll take his brother out and go play with him, take him to his grandmother's".

Joanne is a single parent of four children, and so the responsibilities of child care cannot be shared with a partner. Likewise, her emotional and physical needs cannot be taken care of by a spouse. Thus her eldest assumes some of these responsibilities.

John, too, is a single parent and, like Joanne, he relies on his mother for child care and on his children for nurturing. With words swollen with affection he emphasized:

"I think another thing that helps you handle stress is the supports that you have, your family members, your children, your parents. My mother always understands when I'm not home that I'm either at a Council meeting or counselling somebody, those two, and she's not surprised when I'm home late and the kids aren't even around. So I get a lot of support from my mother about my job and I also get a lot of support from my children...My kids are great. One of them saw me the other day and said, 'dad, you shouldn't go around smiling like that. People are going to think you're nuts!' My best critics are my children...My daughter said the other day, 'dad, go buy some new clothes for yourself,' because I'd been wearing the same clothes for the last two years".

"So your kids remind you that you have to look after you, too" I proposed.

"Yes", John affirmed. "And they're aware of the importance of my needs and my energy level, so whenever I go out, they pretty well look after themselves".

Like Joanne, John finds that his children are crucial supports. They are sensitive to his needs, remind him to look after himself, and their maturity means he can spend time away from home counselling or at a Council meeting without the added stress of worrying about

their safety or well-being. John's relationship with his children is one of give and take. He does not question the appropriateness of relying on his kids for sustenance or encouraging them to live responsibly and somewhat independently. The situation of a single parent is a unique and demanding one. But instead of lamenting what he cannot give his children and criticizing himself for failing them, he is content to see his offspring as critics and supporters of their father.

Matthew has joint custody of his children and has discovered they are a source of wisdom and teaching he had not expected. From them he has learned the value of unconditional love, and has tried to apply this learning to other areas of his life. He said with great humility:

"The fact that I have two kids has been a great teacher for myself. I see my own children and other children teach me and I'm hoping teach others, as well, the idea of unconditional love. People say, 'oh, those are just kids, they don't really know,' but the way I see it, what we might value in our fullest capacity as a human being would include the idea of unconditional love. And we can't do that as adults, we can't seem to do that...I think I've certainly learned from my own children how important it is to have that balance and how important it is to incorporate all those things in raising them and in being myself".

None of these parents see themselves as authoritarians, dictating what is right and wrong to immature and irresponsible kids. Neither do they expect to be the only ones in the relationship to give. Perhaps the reciprocity evident in these families is encouraged by the fact that all three of the adults are parents without partners. Their demanding jobs are not only in the work place but also at home; in order to preserve their sanity they must ask their children to accept some responsibility for supervising themselves and each other. But it seems some children volunteer this to parents they respect and love, looking out for their needs and protecting them somewhat from lack of sleep and an outdated wardrobe. These service providers do not feel they have failed as parents because they rely on their children, and give them responsibility for taking care of themselves. Part of this assuredly stems from the Native tendency to give children responsibility for decision-making at an early age (Brant 1992:24). Instead of guilt, there is a sense of gratitude and pride, an understanding

that children can be teachers and parents learners, an acknowledgement that adult fragility can be strengthened by a child's love.

Conclusions

Coping strategies utilized by local service providers move far beyond the confines of the employing organization and the client-helper relationship. But by securing a healthy identity, finding strength in spirituality and family, and investing in community and cultural connections, the local helper is better able to perform his or her role within the organization. For the local service provider, coping is about learning through experience, through trial and error, through give and take. Coping is about knowing when to seek the support of others, when to acknowledge one's own needs, when to admit that previous patterns of behaviour or attitudes are not satisfactory. If the stresses affecting the local helper can be characterized as disunity, their coping strategies are fundamentally about restoring unity. Through self-knowledge the local service provider strives to reconcile the paradoxes which typify his or her personal and professional life—not by changing the community but by changing his or her relation to the community and to self.

Opportunities for personal exploration through participation in treatment programs should continue to be supported by agency administration. But a concerted effort should be made to organize such events and provide such opportunities within the community and service organization. Sending a service provider out of the community for treatment parallels the inappropriateness of sending an alcoholic away for the same purpose. For local residents, community forms a fundamental and irreplaceable part of self and identity. Learning which takes place outside this context may be useful, but it will not have the same effect as learning which happens among family and friends and in the process encourages change in them, too. Agency-sponsored healing is also crucial. A strong link exists between healthy workers, a healthy organization and promoting wellness within the community (Four Worlds Exchange 1990:31). Instead of passively expecting each

employee to take the individual initiative to approach management with requests for leaves of absence to attend treatment and other culturally-based programs, the organization could take an active role in supporting and organizing such initiatives. Local resources like Elders and traditional healers could be approached to participate in workshops or retreats; employees could "get out" to the bush together. Granting leave is like acquiescing to demands; full support of local workers requires the participation of the organization.

CHAPTER SEVEN: CONCLUSIONS AND RECOMMENDATIONS

It has been argued that, while both local and southern service providers experience stress and practice coping, each group is unique both in where they locate the source of stress and how they choose to deal with it. By way of a conclusion to this thesis, I will represent much of the analysis offered earlier, but in a way which juxtaposes southern and local service providers' interpretations of stress and strategies for coping. Such direct comparison cannot easily be gleaned from earlier text, and is only sporadically offered within individual chapters, because of the division of local and southern experiences into discreet wholes. The following comparison is organized according to particular themes which may be implicit in earlier chapters but are integral to a holistic understanding of the issues presented.

Stresses experienced by both southern and local service providers can be related to culture. For the newly arrived southerner, cultural stress is related to the shock of the unfamiliar and an ethnocentric bias which esteems southern ways of seeing the world and rejects the difference exhibited by the Cree. The tendency to see this difference as cultural rather than historical slows the newcomer's adjustment. It permits the southerner to be complacent about his or her values instead of recognizing that the value conflict between client and professional or southern neighbour and local neighbour is a contemporary re-enactment of larger scale historical value conflicts that resulted in such institutions as residential schools. Refusing to acknowledge that the southerner plays a role in cross-cultural interaction makes it easy to self-righteously blame the Cree for missed appointments, inappropriate humour, lack of participation in community events and disregard of "expert" advice. The stress of negotiating in a new culture becomes less potent, provided the southern service provider remains in Moosonee or Moose Factory long enough to re-examine his or her ethnocentrism.

For the local service provider, cultural stress is related to the struggles and compromises inherent in being "bi-cultural". While the southern helper is confronted with an entirely new set of cultural circumstances, the local helper must juggle an imperfect familiarity with two cultural ways. This leads to confusion, misunderstanding and the feeling that one is an outsider to both cultures. Learning non-Native culture compromises understanding of Cree culture because of the circumstances under which the learning took place. Initially, for many local service providers, non-Native ways were encountered in residential schools where the child was separated from family and an evangelical effort was made to replace Cree values and behaviour with White ways. This has raised generations of Cree individuals conversant in the non-Native "system" and able to use it for their own ends. But what has provided them with skills in negotiating in the White world has denied them skills with "their own people". Because they were born and continue to live in Cree communities, local helpers are regarded as culture brokers by local residents, as links between the unfamiliar world of the agency and the familiar world of corporate relations within the community. At the same time they are torn between understandings of professional and personal responsibility espoused by both cultures. For example, autonomy and non-interference are traditional values still esteemed in these communities, yet in many ways the local helper "helps" in a way which fosters the dependence of local residents on agencies and individuals instead of encouraging responsibility for self. The local service provider's cultural confusion is confounded by the fact that the communities themselves are experiencing the stress of cultural change and dislocation. This means that the local helper is frequently caught between the traditional and assimilated understandings of concepts like authority, leadership, education and helping held by clients and other community residents.

Both local and southern helpers are also affected by stresses which can be subsumed under the theme of community. Local service providers consider themselves

"insiders" to Moosonee and Moose Factory. While this does confer some advantages, the intimate knowledge and commitment the local helper possesses regarding fellow residents and clients can become a burden, preventing a needed break between personal and professional life. But community members also know about the helper, and such personal information and accessibility can topple a role model, undercut personal success and transform a human helper into a convenient scapegoat. A part of the local helper struggles to be seen as an individual apart from family actions and wishes to escape the claustrophobic intimacy of community connections. Yet the reality is that he or she is necessarily seen as part of a particular family, and his or her identity is largely subsumed by this corporate entity. There is a tension between this struggle for individual identity and the intense commitment to community which keeps the local helper rooted in Moosonee or Moose Factory and involved in community issues.

The southern service provider's experience of stress usually contrasts with the local experience, and nowhere is this more obvious than in a direct comparison between insider and outsider relations to community. Southern helpers describe themselves as "foreigners" and "outsiders"; they feel isolated and have few, if any, social supports in Moosonee and Moose Factory. They lack community commitment beyond a bare bones sense of professional responsibility because they cannot easily integrate with local residents or feel a part of community initiatives. Place of origin, education level, place of employment, profession and skin colour all serve to identify the southern service provider, not with the larger communities of Moosonee or Moose Factory, but with an inconstant and ill-respected smaller community of southerners. Identification with this transient southern community is especially strong in Moose Factory, where southerners are sequestered at one end of the island. For many, this identification is the source of much stress. Just as the local helper desires to be seen as an individual apart from family actions, so the southern helper wishes to be judged on his or her individual merit and not according to a pitiful

standard set by past and contemporary transients. The southerner may have arrived with a conscious or unconscious desire to get involved with community issues and community healing, and quickly discovers that his or her participation is not often solicited or warmly welcomed. Both the local and southern service provider become symbols to the communities they serve, but the meaning of the symbol is contingent on insider or outsider status. While the local helper symbolizes wellness, change and "bi-cultural" living, the southern service provider symbolizes colonial intervention, forced dependency, and cultural imposition. Being seen as a symbol or representative is stressful for both groups; for the local helper it is because such expectations are difficult to live up to and for the southern helper it is because such expectations are difficult to live down.

Identity, as a theme, has been touched on briefly in the above paragraphs, but it demands further discussion. The local service provider's difficulties with being "bi-cultural" have already been explored. But this experience, unique to those of a particular age and education level, is complicated by an identity crisis which is experienced by all Aboriginal people. This has been described as "ethnostress", and involves feelings of frustration, powerlessness and self-depreciation in the face of outside prejudice and stereotypes of "Indians". But southern service providers experience their own brand of "ethnostress", feeling maligned and powerless when confronted by the assumptions about Whites, outsiders, and professionals held by local residents. One could argue that important differences in the prevalence, potency, and accuracy of the prejudice experienced by these two groups are substantial enough to reconsider using the same term to refer to both. True, an Aboriginal person is confronted by wide-spread and fiercely entrenched stereotypes which have little basis in reality, whereas there is a definite historical and contemporary precedent for assumptions about southerners. And an Aboriginal person can never completely avoid prejudice and stereotypes, while a southerner need only return to the south to recover a sense of professional and personal esteem. But the experience of

ethnostress, which is somewhat moderated for a local helper residing in a Native community, is significantly magnified for a southern professional living in that same community. Local service providers seem to be most powerfully affected by ethnostress when they travel outside their home communities. Similarly, it is by leaving home and immersing oneself in another culture that the southerner becomes acutely aware of how his or her identity is constructed by others. "Home" and "away" become critical factors in the experience of ethnostress and in the security of one's identity.

Further stresses experienced by both local and southern service providers can be related to education. For local helpers, this is because of a contradiction between what agencies and some local residents expect, and lingering cultural understandings of what is considered an authentic education. Degrees, diplomas and certificates are obtained to please program administrators, outsiders and some local citizens but are not respected by the many residents who value learning from experience and mistrust "experts". To satisfy one camp, the helper must remain a paraprofessional and contend with the insecurity and low status which accompany lack of "official" credentials. To satisfy the other, he or she gets a post-secondary education, risks becoming distanced from community and culture, and is labelled "an apple" when he or she returns.

Formal education becomes one of a myriad of symbols which serve to separate the southern service provider from his or her neighbours and clients. As is the case for the local helper, it is assumed that education distances one from practical, concrete understanding which can be related to life in Moosonee and Moose Factory. Thus having a medical degree or an MSW serves to reinforce the southerner's outsider status and may act as a barrier to understanding because such education inculcates values and teaches methods which may have little or no relevance in a Cree community. But the fact remains that competent professionalism is important to the southerner, and a further stress is the fear that skills are being eroded by one's stay in the north.

Interestingly enough, some of the aspects of living and working in Moosonee and Moose Factory which both local and southern service providers deem stressful also become avenues by which the helper copes with his or her circumstances. Such is the case with identity and culture, explored separately as sources of stress and here discussed together as the basis for coping. For the southern professional who is faced with a threatened identity, a foreign culture, and stereotypes about southerners, a coping option is to make the cliché "when in Rome, do as the Romans" a guiding principle in one's life. This change in attitude entails adjustment to and adoption of different ways of looking at the world and may be superficial or profound. In some cases, long term residents originally from the south describe themselves as "local", indicating their commitment to community and the scope of their cultural adaptation. In many ways, this could be described as becoming "bi-cultural". Instead of clinging desperately to old ways and consistently elevating the south as a standard by which life in the north is judged, these individuals have an open-minded, inclusionary and non-judgemental approach to culture. They cannot be accused of "going native" because their espousal of different cultural values and behaviour does not take a dichotomous either/or form. Identity is not so much sacrificed for these southerners as it is augmented or enhanced. Southerners who adopt this approach do not appear to suffer any of the cultural confusion or identity difficulty which accompanies "bi-cultural" living for the local helper. This is likely because learning another culture is a *choice* for the southern service provider, and because no attempt is made by powers outside of the professional to eradicate previous understandings of the world.

But as is often the case with southern helpers, the coping techniques of those who have remained in the north for many years differ markedly from those practiced by newer arrivals. For newcomers, the sense that new ways are usurping old ways is considered a threat to mental stability. These helpers tend to view cultural adaptation as trading one way of life for another and not as a process of reconciling two ways. This threat to identity

frequently inspires these southerners to "get out" to the south, to search for opportunities to immerse themselves in culturally familiar places and people. Such forays south reinforce the service provider's connection with home and membership in another culture, thereby alleviating the dangerous liminality that existing on the edge of two cultures seems to imply for newcomers.

For the local service provider, whose experience of "bi-cultural" living and "ethnostress" have resulted in a wounded and insecure sense of self, recovering a positive and culturally-oriented identity becomes a priority. This involves learning about oneself and culture; some do this in the context of treatment programs while others find solace and strength in returning to their cultural roots in the bush or by talking with Elders in the community.

While there appears to be a superficial similarity between this investment in self and culture and the southerner's escape south—namely in the reconnecting with one's roots—I would suggest that there are important differences between the two coping strategies. While the southern service provider flees the *potential* for identity crisis, the local helper is attempting to cope with damage already done. The southerner flies south as an immediate and initial answer while the local person seeks treatment only after several years or even decades have elapsed and other coping methods have been deemed unsatisfactory. Finally, the sense of identity secured by the local helper through investment in culturally relevant or enlightening activities enables stability and enhanced functioning in his or her current circumstances. A sporadic trip south does little to aid the southern service provider in adjustment to life in Moosonee or Moose Factory and in fact tends to encourage an ethnocentric and unreflected confidence that southern ways are superior.

Coping strategies for both local service providers and southern professionals can also be examined as they relate to community. The local helper—whose insider status is considered a source of stress—surprisingly enough often turns to the community for

resources and support. Yet it must be remembered that it is impossible for a local person to distance him or herself from community and still remain a resident of Moosonee or Moose Factory. Thus what appears initially to be a contradictory or paradoxical situation—seeking help from those that hinder—is not actually so incongruous. These communities are not homogeneous in opinion, united in voice or uniform in expectations. While the local helper may eschew certain individuals or groups because they are overly critical of or prejudiced against the helper, he or she may find others who offer encouragement, inspiration and wisdom. Local service providers seek the counsel or company of certain Elders and spend valued time during the work day "in the community" because such contact is deemed positive and sustaining. Further, the often-unspoken knowledge that one is surrounded by a community of individuals who share one's painful life experiences is considered beneficial. The community may not be homogeneous, but neither is it merely a conglomeration of unrelated, unconcerned and unconnected individuals. The relations between these individuals—their history, family ties, and identity as Cree—are important to local helpers and offer them the security of shared experience. But for some this is not enough. These local service providers seek support outside of their home communities and several mention the sense of belonging they experience at Native conferences. These helpers have found a community whose shared aspects are not place of residence and blood ties but are instead a more generalized Aboriginality and membership in a particular profession.

Just as the local service provider—the "insider"—turns inward to community for support, so the southern service provider—the "outsider"—may turn outward from community as a form of coping. "Getting out" to the south has already been discussed as a way of escaping the demands of living in Moosonee and Moose Factory. But some southern helpers maintain a distance from community even while they remain in the north. Some invest in hobbies, others in family. This is a reaction to a community which offers

them little in the way of preferred forms of recreation, which impedes the integration of those lacking partners, which has particular expectations of professionals which do not include integration or socializing with the community. The most drastic distancing from community, and one which most southerners ultimately resort to, is returning south. Yet some southern service providers make a concerted effort to integrate, and because of pre-existing preferences or changes in attitude, find community interaction rewarding. After many years of residence they are no longer seen as "the doctor" or "the nurse" but are considered community members apart from their professional duties.

Examining both the local and southern service provider's relations with clients offers further opportunity for comparison with regard to coping strategies. Local helpers, and counsellors in particular, do not tend to differentiate between themselves and those they help. More than simply being a resident in the same community, the helper has often endured a history of addiction or abuse which makes the parallels between service provider and client that much closer. Because of this egalitarian view of client-service provider relations, the local service provider is free to gain courage and strength from clients, and to learn from the relationship. This reciprocal helping facilitates the growth and "healing" of a helper who continues to struggle with past problems. But local service providers must cope with professional dilemmas in addition to their personal strife. As employees of agencies whose approach to helping has largely been modelled on mainstream institutions and as recipients of an education which has—at best—only a superficial cultural component, local helpers may feel alienated from those they are supposed to reach. Again, client-helper relations provide an avenue for coping. Shared cultural understandings enable the service provider to adapt organizational policy or textbook approaches to reach their clients in a more appropriate and therefore likely more effective manner.

The southern professional, distanced from his or her clients by divergent life experience, cannot foster a relationship of equals, cannot "self-disclose" and thereby

promote the healing of both parties. The hierarchy implied in this professional-client connection undercuts the service provider's ability to reach clients in a community which distrusts "experts" and resents advice-givers. What some southerners choose to do, then, is to let go of expectations that their presence in the community will "make a difference". They withdraw from the role of advocate or advice-giver and take a back-seat in community development initiatives. The southerner may label this as "learning patience", but the danger is that one will "let go" until one feels professionally incompetent and personally compromised. Not all southern professionals deny themselves a role, however. Like the local helper who attempts to reach clients in a more appropriate manner, some southerners choose to adopt a culturally relevant approach which respects the autonomy of the client and admits that helping is a two-way exchange. This approach can never amount to the emotional gut-connection with clients experienced by many local helpers—likely to the relief of southerners trained to esteem "concerned detachment" and eschew "self-disclosure". Yet this does not preclude developing a relationship based on mutual respect. Such a relationship, longer term residents from the south learn, is promoted by a professional who does not issue orders and demand compliance but rather offers information and gives clients the responsibility for making decisions.

Finally, coping can be compared on the basis of attitude towards one's job. For the local helper—and again this applies particularly to the counsellor—the work place is considered a bolstering and supportive environment. Co-workers are excellent sources of advice and are avid listeners when the local helper is encountering personal difficulties. Employees in these organizations seem to create their own informal Employee Assistance Programs which assemble and dismantle as required. But sometimes the local helper opts to take a leave of absence or change jobs as a way of coping with stress. This appears to be a culturally conditioned response to a stressful situation, and one which some are attempting to discontinue through adoption of more mainstream coping methods like

"asking for help". For the southern service provider, coping in relation to one's job seems to largely involve changes which are made at the level of client-professional interaction, a subject discussed above. But some attempt as individuals to change the way their particular service is brought to local residents—often by liaising with other professionals in the community—in order to make service provision more responsive to local needs and more realistic given geographical isolation and limitations in resources.

Given the foregoing analysis of stresses and coping and the numerous suggestions offered by both local and southern interviewees, I would make two key recommendations to both agencies and local political leaders.

First, with regard to new arrivals from the south, I suggest that a substantial orientation be offered. Most service organizations in Moosonee and Moose Factory do not have a formal orientation for southern staff; the assumption has been "sink or swim" both in terms of mastering new procedure and protocol and understanding the subtleties of living and working in Cree communities. The exception to this is a brief written document circulated among employees of the hospital in Moose Factory. This gives a short history of the community and Cree bush life, outlines very generally the differences between "Native" and "non-Native" ethics and behaviour, gives a summary of hospital bureaucracy and describes the seasons in terms of what clothing is appropriate. Obviously, this document is not enough. Even employees of the hospital who have diligently read their orientation booklet complain of culture shock and do not understand their clients. They wonder why their presence is often ignored or reacted to with hostility, why they cannot "make a difference".

A priority should be to provide an opportunity for new arrivals to meet with local residents, local resource people, seasoned southerners and Cree service providers. Such a group could explore in detail the circumstances under which the newcomer will be working. A piece of paper cannot answer questions, and a newcomer may not take the

initiative to approach someone informally with concerns. Sharing ideas, experiences and expectations with others can encourage the newcomer to reflect critically on his or her motivations for coming north and recognize that expectations may require adjustment. Exploring issues such as cultural difference in a group setting also ensures that specifics, not generalizations, are brought out. Simply reading that Native people often have an "intuitive, flexible concept of time" is not as useful as being told "Cree clients won't show up for appointments but here are some viable alternatives". Local service providers and those originally from the south who have lived in Moosonee or Moose Factory for a long time are a wealth of information on coping. Currently this information is not being shared.

An orientation also allows for a linking of history to contemporary circumstances. Newcomers to the hospital may read in their orientation booklet about early and continuing missionary activity in the region, but they will not likely connect this information to residential schools, to community factionalism, to how their own presence in the community is regarded. There are many politically active and eloquent local people who could provide such a link between past and present.

The orientation, given the on-going transfer of many services to local control, should be planned and executed by local people, and occur in an environment they deem satisfactory. This may mean it happens at a goose camp, or at the treatment centre in Moosonee, or on a fishing trip. It may mean newcomers are initially billeted out to local families as a form of informal orientation which is reinforced by more formal workshops or meetings. I can attest to the efficacy of the latter approach. While superficially my situation as researcher appears to mirror that of the southern newcomer, I lived with a local family in Moosonee during my stay. This meant I automatically had local contacts, social ties, went visiting, and attended dances. But these external opportunities to integrate with the community were greatly enhanced by the care my local friend took to "culturally orient" me. She told me stories of the old days and how (and why) things have changed, warned

me of gossip, and spoke to me about issues relating to my research topic. Thus I did not feel the cultural confusion and isolation many southern service providers describe as stressful.

The environment and the priorities of the orientation should be at the discretion of local residents. Such local control is imperative. Seasoned southerners, when in cliques of non-Native people, tend to play the role of cultural expert, hypothesizing on everything from the ramifications of self-government to the doomed-to-fail revival of traditional practices among the youth. The true experts are the local people themselves, and their presence will alleviate this White soap-box syndrome. It will also serve another important purpose. Local people hesitate to initiate relationships with strangers, and culture-shocked newcomers tend to cling to the familiar in the form of other southerners. This meeting could provide an initial contact between local residents and the newly arrived southerner so that future encounters at the grocery store, the curling rink, the work place, or a dance will begin building bridges between groups often unofficially segregated.

I suggest offering one orientation in Moosonee and one in Moose Factory. This would avoid a tendency to get bogged down in the specific aspects of one agency—which could easily become a pencil-pushing concern with rules and regulations at the expense of the cultural sensitivity and general life skill training which these southerners really require—and at the same time respect the uniqueness of each community. A twice-yearly community-wide orientation (which may need to be broken down into several orientation sessions, given numbers) would enable ongoing orientation, support and networking among service agencies as it would not only include the employees of one organization, or only new arrivals, but every employee, including those who came the year before, three years ago, or fifteen years ago.

Providing a substantial orientation is not the only answer, and it may meet with disapproval from politically active community members who are wary of "educating the

oppressors" (Mussell in Stalwick 1986:81) or who believe efforts should be directed at encouraging local people to enter the professions currently dominated by southerners and not at making it easier for southerners to stay. But the reality of these communities is that southern professionals will continue to be needed into the near future. These years of transition should be eased, not impeded. I believe the benefits of such an orientation would be a more informed and open-minded southern service provider population, better aware of the reality of working in these northern communities and recognizing co-workers and community members as valuable resources for suggestions and support. Such preparation could well enhance service provision and alter the largely negative assumptions regarding southerners held by locals by breaking down barriers between "us" and "them" and by decreasing the phenomenal turnover of professionals in these communities.

My second recommendation is that an official commitment to "healing the healers" be declared by both service agencies and communities on behalf of local service providers. It is imperative that the needs of local workers be not only respected but actively promoted, and that this support go beyond the present leniency with regard to sick leave and stress leave. Repeatedly this thesis has emphasized the disunity existing between individual and community, and individual and culture. For southerners, this can somewhat be handled by a rigorous cultural orientation. For local service providers, I suggest a rigorous cultural *re*-orientation. Local helpers require the opportunity to re-connect with and learn about who they are and what this means to them. While such learning cannot be forced, an environment conducive to such re-discovery of self and culture can be offered.

Local workers, educated in residential schools, in high schools outside the community, and in post-secondary institutions feel at once like they are culture brokers, fluent in both Native and non-Native ways, and like they have been deprived significant cultural understanding. They are caught between two worlds, unable to feel fully comfortable in either one or the other, yet charged with the responsibility of taking the best

from both. Many of these service providers are "recovering" from previous problems with alcohol or an abusive partner, are "dealing with" issues such as sexual abuse or their residential school experiences. At the same time they are considered to be representatives of the healing movement in their communities, and as such are held to very high and unforgiving standards of behaviour.

These individuals are so busy with family responsibilities, professional concerns and after-hours committee work that they may not have the time to reflect on the effect their personal and community history has on them as workers. What I recommend is that such time for introspection be considered an organizational priority. It could be effected through team meetings within the agency, where opportunity for expressing feelings and support are regularly offered. It could be offered via a retreat organized through the agency during a slow period of the year. Or it could be given the form of a healing circle/support group which meets regularly in the community to discuss issues of importance to workers, not clients.

A community-wide healing circle for service providers would overcome organizational boundaries and increase the scope of sharing and support available to the workers. If these meetings occasionally offered workshops and speakers, they would somewhat mimic the much-appreciated aspects of Native conferences—like opportunities for discussion and building self-confidence—but with the advantage of happening in the community and on more than an annual basis. Such a group could perhaps be co-ordinated through the inter-agency committee in Moose Factory or through more informal means in Moosonee. I must issue a warning, however. The discussion group for service providers I organized in Moosonee met with rave reviews, and several participants suggested that it become an on-going event. Yet, like so many projects organized in these communities, it was conceived and conducted by an individual who left soon after its inception. Such initiatives must receive full agency support if they are not to be left vulnerable to individual

whim and rapid turnover.

But attention must also be paid to the needs of local service providers which extend beyond the professional sphere. Coping strategies used by local workers on an individual basis include securing a positive sense of identity through attending treatment programs and traditional gatherings. This reconnecting with and exploration of one's roots and culture should be encouraged by and fostered within the community instead of necessitating individual initiative and a trip away from home. Local service providers need to re-establish an understanding of self and culture, and I don't believe this can be done effectively outside the community context. Treatment can happen at Moosonee's treatment centre, now. Traditional healers and Elders both from the community and outside can be brought in to renew the service provider's contact with the "old ways" and offer insight that may have been lost through years spent apart from family and culture in residential school. For example, instead of waiting for the service provider to reach a breaking point which requires stress leave and a trip into the bush, the agency could sponsor a spring and fall hunting break similar to that provided by the schools in Moosonee and Moose Factory. Elders could accompany family groups and re-connect the young and middle-aged alike with the land. Several local service providers suggested that they would appreciate a retreat for helpers, and a stay at a hunting camp would be one way such a retreat could be offered.

In the end, the method and manner of re-establishing ties with community and culture must be decided by the service providers, agencies and communities themselves. What I wish to point out is that such "healing" is sorely needed and should be made a priority.

Service providers in Moosonee and Moose Factory, regardless of whether they are local people or from the south, require both institutional and community support in order to continue as care-givers in these communities. But this is particularly crucial in the case of local helpers, who will be assuming ever-increasing responsibility for service provision as

more services are transferred to local control and these communities move toward self-government. Local service providers are critical components of the circle of healing. If they are not stable, balanced and supported they may crack under the pressure of this responsibility and leave the circle fragmented and incomplete.

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