

*The Indian Residential Schools
Settlement Agreement's*
Common Experience Payment and Healing:
A Qualitative Study Exploring
Impacts on Recipients



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A Qualitative Study Exploring Impacts on Recipients*

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It is our sincere hope that this research honours the bravery of Residential School Survivors and their families and offers some constructive benefit to communities across Canada.

Definitions

The following definitions are provided as a way of ensuring clarity throughout the document. Please read through these definitions and refer to them as needed.

Aboriginal people or Aboriginal – includes Métis, Inuit, and First Nations regardless of where they live in Canada and regardless of whether they are “registered” under the *Indian Act* of Canada.

Catalyst – a determinant or factor that provokes or speeds significant change or action.

Common Experience Payment (CEP) process – the first component of the *Settlement Agreement* that offers all Survivors of Indian residential schools a common experience payment for attending these institutions. It is the entire compensation process beginning at the time a Survivor fills out a CEP application form to the time when they either receive payment or learn that their application has been denied. Components of the CEP process include the initial CEP application, reconsideration requests, and appeal letters:

CEP Application – a four-page initial application form requiring sufficient information to allow Indian Residential School Resolution Canada (IRSRC) to verify years of attendance at one or more recognized schools. Initial CEP applications are administered by Service Canada and then sent to IRSRC where files are verified. After applications are processed by IRSRC, Service Canada mails decision letters and initiates payments to successful applicants.

CEP Reconsideration Request – CEP applicants who are not satisfied with the decision regarding their payment can apply for reconsideration to IRSRC where additional research (document search and/or contact with the applicant) is conducted. Service Canada mails decision letters and initiates payments.

CEP Appeal Letter – applicants not satisfied with a decision on their reconsideration request may submit a letter of appeal to the IRSRC National Administration Committee. Rulings on appeal are final.

Elder – generally means someone who is considered exceptionally wise in the ways of their culture and teachings. Elders are recognized for their wisdom, stability, humour, and ability to know what is appropriate in a particular situation. The community accepts them as Elders and looks to them for guidance and sound judgment. They are also recognized for their caring and are known to share the fruits of their labours and experience with others in the community. The spelling of “elder” with a small “e” means a person who has attained a certain age.

Healing approaches:

Alternative – approaches incorporating all those strategies outside of most regulated and provincially insured Western therapies including, but not limited to, homeopathy, naturopathy, aromatherapy, reflexology, massage therapy, acupuncture, acupressure, Reiki, neurolinguistic programming, and bioenergy work.

Traditional – approaches incorporating all culturally-based healing strategies including, but not limited to, sharing, healing, and talking circles, sweats, ceremonies, fasts, feasts, celebrations, vision quests, traditional medicines, and any other spiritual exercises. Traditional approaches also incorporate cultural activities such as quilting, beading, drum-making, and so on. Others include on-the-land activities such as hunting, fishing, and gathering medicines.

Western – approaches incorporating all strategies where the practitioner has been trained in Western institutions (i.e., post-secondary educational institutions) including, but not limited to, psychologists, psychiatrists, educators, medical doctors, and social workers. For the most part, Western practitioners are regulated by professional bodies, have liability insurance, and are state-recognized or their services are covered by provincial health care plans.

Healing Journey – engagement by Survivors or people affected intergenerationally by the legacy of residential schools in any of the healing approaches described above.

Intergenerational impacts – the effects of sexual and physical abuse that were passed on to the children, grandchildren, and great-grandchildren of Aboriginal people who attended the Indian residential school system.

Historic trauma – historical experiences of First Nations, Inuit, and Métis people during centuries of colonial subjugation which disrupted the process of Aboriginal cultural identity formation. The trauma to which Aboriginal peoples were exposed in the past continues to be manifested intergenerationally into the present. Unresolved and cumulative stress and grief experienced by Aboriginal communities is translated into a collective experience of cultural disruption and a collective memory of powerlessness and loss.

Holistic healing – healing of the mind, body, spirit, and emotions.

Independent Assessment Process (IAP) – the second component of the *Indian Residential Schools Settlement Agreement* established to compensate Survivors who choose to come forward as victims of physical and sexual abuses at residential schools. The IAP is designed to resolve and compensate claims of sexual abuse, serious physical abuse, or other wrongful acts which caused serious psychological consequences. The independent assessment process promises to adjudicate any residential school abuse-related claim within a nine-month period. The Indian Residential Schools Adjudication Secretariat deals with most claims through a hearing conducted by an adjudicator.

Individual or personal healing – is focused upon personal growth and not community development.

Legacy education – raising awareness and understanding about the history of residential schools that includes the ongoing direct and indirect effects of physical and sexual abuse that took place at these schools, which has continued to impact on the lives of former students, their families, and communities.

Legacy of physical and sexual abuse in residential schools – (often referred to as “the Legacy”) means the ongoing direct and indirect effects of the physical and sexual abuse that took place at residential schools. This includes the effects on Survivors and their families, descendants, and communities (including communities of interest). These effects may include, and are not limited to, family violence, drug, alcohol, and substance abuse, physical and sexual abuse, loss of parenting skills, and self-destructive behaviour.

Residential schools – the residential school system in Canada attended by Aboriginal students. This may include industrial schools, boarding schools, homes for students, hostels, billets, residential schools, residential schools with a majority of day students, or a combination of any of the above. At the request of Survivors, this definition has evolved to include convents, day schools, mission schools, sanatoriums, and settlement camps.

Survivor – means an Aboriginal person who attended and survived the residential school system.

Trigger – a reaction set off by events, or chain reaction such as flashbacks or intrusive thoughts to a past event. The term is used here to refer to a negative emotional response caused by painful memories that surfaced while Survivors were in the processes of CEP or IAP. Responses ranged from feelings of discomfort, loneliness, anger, panic, fear, or depression. Triggers led some Survivors to cope through addictive behaviours or through thoughts of and attempts at suicide.

Truth and Reconciliation Commission (TRC) – Truth and Reconciliation Canada has a mandate to learn the truth about what happened in the residential schools and to inform all Canadians about what happened in the schools. The Commission will document the truth of what happened by relying on records held by those who operated and funded the schools, testimony from officials of the institutions that operated the schools, and experiences reported by survivors, their families, communities and anyone personally affected by the residential school experience and its subsequent impacts. The Commission hopes to guide and inspire First Nations, Inuit, and Métis peoples and Canadians in a process of truth and healing leading toward reconciliation and renewed relationships based on mutual understanding and respect. (For more information, please go to the TRC's website at: www.trc.ca)

Well-being – a healthy state or condition; moral or physical welfare. The term is used here to refer to the extent to which the compensation process, including the actual payment, contributed to or impacted a Survivor's overall satisfaction, self-esteem, health, happiness, or prosperity.

Executive Summary

This study reports on how Survivors have been impacted by the common experience payment (CEP), a component of the 2007 *Indian Residential Schools Settlement Agreement*. This is a qualitative research study with two main objectives: 1) to gather experiential data and to elicit CEP recipients' explanations about the impact of the CEP on Survivors and their engagement in healing; and, 2) to gather insights regarding the roles of support services in assisting them during the compensation process. The findings reported here are derived mainly from interviews with 281 First Nations, Inuit, and Métis Survivors from across Canada, who applied for or received common experience payments. This information is contextualized by an environmental scan based on a review of government services aimed at Settlement Agreement beneficiaries, and on interviews with AHF-funded project staff in the communities where key informants were interviewed. Where possible, the results have been quantified in order to determine the relative priority of impacts, reactions and opinions. The key findings of this study are:

- ✦ Most participants had received CEP at the time of the interview; 20% had confirmed receiving their full claim and 32% received only a partial amount.
- ✦ Forty per cent of participants found the CEP process difficult or challenging; 26% said the CEP application process was challenging both logistically and emotionally; and for 20%, the long wait time for processing of applications and payments created anxiety and confusion.
- ✦ One-third of participants said the CEP application was easy and straightforward. This was mainly the case for applicants under the age of 60 who were fluent and literate in English or French, in communities where Service Canada assistance was made available, or where AHF-funded projects provided form-filling assistance.
- ✦ One-quarter of participants were involved in the reconsideration request process at the time of interviews. These applicants were faced with the choice of retelling their story and of trying to prove their years of attendance in the hope that the government would validate their experiences. Survivors said they were made to feel like liars adding that it was not their fault that school records were lost.
- ✦ Participants were critical of the omission of some schools, hostels, and group homes from the list of recognized institutions. Decisions around the eligibility of certain schools were not well understood in communities. Questions were raised about why applications from Métis Survivors were denied because they attended as day-students, albeit at a recognized residential school, or why hostels in which many Inuit children were boarded are not on the list.
- ✦ Participants generally agreed that the compensation process seemed inconsistent, leaving them at the mercy of an outside agency in control of yet another aspect of their lives.
- ✦ For about 10% of the study group, negative experiences during the CEP and reconsideration process influenced their decision not to apply for Independent Assessment payments (IAP) and not to participate in activities related to the Truth and Reconciliation Commission.

- ♦ Over a third of the study group shared that the CEP process triggered negative emotions or traumatic flashbacks. The most common explanation was that completing the applications brought back negative memories and opened old wounds. Survivors described reactions to these memories that ranged from feelings of discomfort and loneliness to reactions of panic and depression, sometimes leading to self-destructive behaviours.
- ♦ More Survivors described positive types of impacts of payments than did those who described negative impacts; however, this *frequency* should not be confused with *magnitude*. The negative impacts described by participants were profoundly destructive for many Survivors and their families, and in some communities greatly outweighed any positive, material benefits of the payments. The general message of Survivors' accounts of negative impacts was that the decision to settle for individual monetary compensation was misguided and insufficient, compounded by a lack of planning on the part of those implementing the CEP to prepare for the triggers, self-destructive reactions, and predatory behaviours. In turn, Survivors' accounts of positive impacts convey a tendency to separate issues of healing from issues of money and hence to simply view the compensation as materially beneficial in its own right. Further, a relatively high rate of positive impacts among participants who received their compensation within six months of the interview suggests that the satisfaction derived from the CEP money was for the most part temporary.
- ♦ Almost half of the study group said that receiving compensation was both a positive and a negative experience. Fundamentally, this dualism characterized CEP as positive because it relieved financial stress and afforded opportunities to share with family or to make necessary and desired purchases, but also negative because these benefits did not outweigh the sense of injustice in the '10 plus 3' compensation formula nor did they alleviate the pain of triggered emotions and memories of trauma from their residential school years.
- ♦ The majority of Survivors in the study group required or wanted some kind of support during the CEP process, whether it was assistance with form-filling or counselling related to triggered emotions and traumatic memories. The over-riding theme in comments about services and supports was the importance of that support being available at the community-level. Over 40% of participants reported that access to services during the application process was a problem. Over 10% commented on the lack of CEP supports in their community, and 7% were unaware of any supports for the CEP process.
- ♦ Over forty per cent of the study group said they relied mainly on non-CEP specific supports such as family, friends, and/or on local resources such as the Friendship Centre, Band office, land-claim office, or community health centre for support during the CEP process. 16% relied solely on family and friends mainly because they did not trust local services to maintain confidentiality and anonymity. This was particularly the case in smaller isolated and semi-isolated communities.
- ♦ One-quarter of participants said they accessed government services. Service Canada application supports were viewed as helpful when such services were offered in the community or if applicants lived near a Service Canada office. Participants were very critical of the service offered by the CEP Response Centre and most who said they tried the toll-free numbers received little to no help, felt intimidated or frustrated by the operators, or felt the service was insensitive to the emotional effects the CEP process was having on Survivors.

- ♦ Many participants described the benefits of support and assistance they received from AHF-funded community-based healing projects. Participants said that the main benefit of AHF-funded projects' approaches is their focus on residential school trauma, that staff were Aboriginal and/or Survivors themselves, and that traditional Aboriginal activities and wellness practices were viewed as important in healing the legacy of residential schools.
- ♦ An environmental scan of supports and services available to Survivors throughout the CEP process indicates that AHF-funded projects tended to support Survivors by whatever means possible, often providing services that were outside of project mandates. Survivors' statements about lack of services spoke to the increased demand for healing services since the *Settlement Agreement*, which, in the view of community-based service providers, suggests that healing support is currently addressing only the tip of the iceberg. Statements such as this are consistent with a recent evaluation of project activity since the *Settlement Agreement* which concluded that healing from the legacy of residential schools has just begun.
- ♦ About two-thirds of participants were engaged in healing in some form. Survivors who said they were engaged in healing and those who said they were not both reported similar rates of positive and negative impacts of compensation. Survivors who were already on a healing journey before the *Settlement Agreement* were more likely to say that the CEP process and money promoted healing in some way and that, at the very least, it was a small step forward in their personal healing journey. In contrast, participants who indicated they were not engaged in healing were more inclined to say that CEP made no difference or that the process and money was detrimental to their well-being.
- ♦ Almost half of participants in the study said compensation made no difference to their well-being. The main opinion among these Survivors is that there is no connection between money and healing and no amount of compensation can replace what was lost.
- ♦ Participants most commonly defined healing as seeking ways to deal directly with residential school issues in order to cope with traumatic and emotional memories triggered by the CEP process, and to come to terms with the past. This included finding closure for deaths at residential schools, dealing with addictions, or building trust with someone in order to open up and release personal pain. Many defined the term as accessing available traditional, Western, or alternative methods of healing, or as finding personal balance and spiritual strength.
- ♦ About one-quarter of participants said that the CEP process promoted healing to some degree, mainly because of what it symbolized: compensation was a tangible acknowledgment of suffering in the residential school system; it revealed to Survivors that they were not alone and prompted them to open up about their experiences; and it provided a sense of closure for what was lost. The symbolic significance of the CEP was often associated with that of the federal government's apology.
- ♦ Almost 20% of participants said that the CEP process and money were steps backward on their healing journeys. For these Survivors the CEP process represented a very negative period in their lives and left them feeling worse off than before. They expressed bitterness and resentment toward an inadequate "10 plus 3" formula, anger toward eligibility criteria that deprived compensation to many living Survivors, and grief over the many Survivors who died before the *Settlement Agreement* was implemented.

- About one-third of participants spoke about CEP and compensation from perspectives that took into account the intergenerational impacts of the residential school system. Survivors said that CEP was not enough because the ongoing direct and indirect effects of the physical and sexual abuse that took place at residential schools cannot be compensated, and also that individual compensation is illogical in the sense that the residential school experience is not an individual phenomenon. It is a family and community experience that crosses generations. The intergenerational issues most commonly raised related to family alienation which in turn resulted in a lack of parenting skills; however, participants also said that the CEP process led to increased openness between themselves and their children about the legacy of residential schools.

Chapter 1

Introduction to the CEP Study

In May of 2006, a landmark historical event took place in Canada as legal representatives for Survivors of the Indian residential school system, the Assembly of First Nations, Inuit representatives, and church entities signed an agreement with the Government of Canada in the hopes of achieving a comprehensive resolution to the legacy of Indian residential schools. The *Indian Residential Schools Settlement Agreement*, finalized in March of 2007, represents the largest out-of-court settlement in Canadian history.¹ The agreement consists of several components, one of which is the common experience payment (CEP) that provides a lump sum payment to former students of Indian residential schools where the government was jointly or solely responsible for the operation of the residences. Other components of the *Settlement Agreement* include an independent assessment process (IAP) to settle claims of sexual, physical, and other abuses that occurred while attending these schools, the establishment of the Truth and Reconciliation Commission (TRC), a healing fund of \$125 million to the Aboriginal Healing Foundation to continue its funding to healing projects addressing the effects caused by harms suffered while attending Indian residential schools (the Legacy), and a separate fund for commemoration activities dealing with this legacy.

This study reports on how Survivors and their engagement in healing have been impacted by the common experience payment. A previous exploratory study, the AHF's *Lump Sum Compensation Payment Research Project*, anticipated a wide range of individual Survivor and community impacts stemming from such payments (Dion Stout and Harp, 2007). That study also predicted that whether or not Survivors were already engaged in healing would be the critical variable in how compensation impacted their lives. The purpose of the present research is to provide a comprehensive and in-depth investigation into these questions and to determine the overall impacts of the common experience payment process among First Nations, Inuit, and Métis Survivors across Canada.

Background

Between 1831 and 1998 at least 130 industrial, boarding, and residential schools and hostels operated across Canada. The actual number is difficult to determine as many institutions that Survivors had attended and have requested to be added to the official list are deemed unqualified or are still pending a decision. Institutions have been disqualified due to non-involvement of the federal government, meaning that a school was provincially operated or run by religious or private organizations without federal assistance, or due to the fact that home placements, boarding homes, hostels within hospitals, or sanatoriums have been deemed non-residential by the parties to the *Settlement Agreement*.

For over 150 years, Aboriginal children were removed from their families and forced to attend residential schools. Aboriginal families were torn apart, cultural transmission was seriously disrupted, and languages were threatened. In some schools, children were physically and/or sexually abused, poorly fed, medically deprived, emotionally neglected, and taught to be ashamed of their families and culture (Miller, 1996;

¹ For a more detailed history of events surrounding and leading up to the *Settlement Agreement*, please see Jung (2009).

Chrisjohn and Young, 1997; Milloy, 1999). This legacy of physical and sexual abuse in residential schools has affected Survivors, their families, and communities. Negative intergenerational effects include family violence, drug, alcohol, and substance abuse, physical and sexual abuse, loss of parenting skills, and self-destructive behaviour. Not surprisingly, some individuals who attended these schools suffer from ongoing physical, emotional, and/or mental problems (First Nations Centre, 2005; Kishk Anaquot Health Research, 2006).

The Aboriginal Healing Foundation (AHF) was established in 1998 as a result of *Gathering Strength—Canada's Aboriginal Action Plan*, a federal strategy to renew the relationship between Aboriginal people and the Government of Canada. The AHF was given a total of \$390 million between 1998 and 2007 to fund initiatives that address the legacy of physical and sexual abuse in the residential school system. As a result of the *Settlement Agreement*, an additional \$125 million was allocated to extend the 11-year mandate to March 2012. Accordingly, the AHF Board of Directors put in place a five-year plan which comprised commitment and disbursement of funds, monitoring of projects, auditing and reporting of Foundation activities to stakeholders, program evaluation, and winding-up of the Corporation (disposition/transfer of assets, dissolution). The AHF mandate and management plan adhere to the terms of the Funding Agreement, having a five-year timeframe as follows: 2007: commitment of the Amount; 2007–2010: disbursement of the Amount (the AHF will fund 134 existing projects to 31 March 2010 and 11 healing centres to 31 March 2012); and 2010–2012: wind-up activities and final audit.

Since inception, AHF has funded a total of 1,346 projects that served an estimated total of 111,170 individuals. Extrapolated figures of the total number of Survivors indicate that approximately 287,350 Aboriginal people have experienced intergenerational impacts, which means there may be close to 373,350 individuals whose lives have been intimately touched by the residential school system (Brant Castellano, 2006).² AHF currently funds, to March 31, 2010, 145 active healing projects in 11 regions across Canada, serving First Nations, Inuit, and Métis living in urban, rural, and isolated communities. Eleven of these projects are healing centres that, among many health services offered, provide a program component specific to residential school issues. An evaluation in 2006 to assess the process and impact of AHF-funded project activities on Aboriginal individuals and communities concluded that more time was needed for projects to raise awareness and to break down barriers of denial regarding how the Legacy of residential schools has impacted on the health and social stratum of Aboriginal individuals and communities.³

Among Aboriginal people, the term *healing* has diverse meanings. For most, it is seen as restoring physical, mental, emotional/social, and spiritual balance to individuals, families, communities, and nations; for others, this term implies weakness and could act as a barrier to participation in activities. The progression along a healing journey is complex, involving interplay between individuals and their social environment. The well-being of an individual is interconnected with the surrounding community and institutions that can either facilitate or thwart the healing process. In 2002, Lane and colleagues mapped out and described the healing journey based on discussions with and review of six Aboriginal healing centres. They found healing to be a developmental process that focuses on balancing relationships in order to provide a sense of well-being within oneself and others and between the natural and spiritual worlds.

² At the time this report was published, it was estimated that there were 86,000 Survivors.

³ See Kishk Anaquot Health Research (2006).

Healing then focuses on the well-being of all, not on illness. Healing is learning and re-learning skills that help individuals move toward a healthy way of life. Readiness to heal in an individual usually begins at the point where they feel a sense of profound loss or when they feel they have hit rock bottom (Lane et al., 2002).

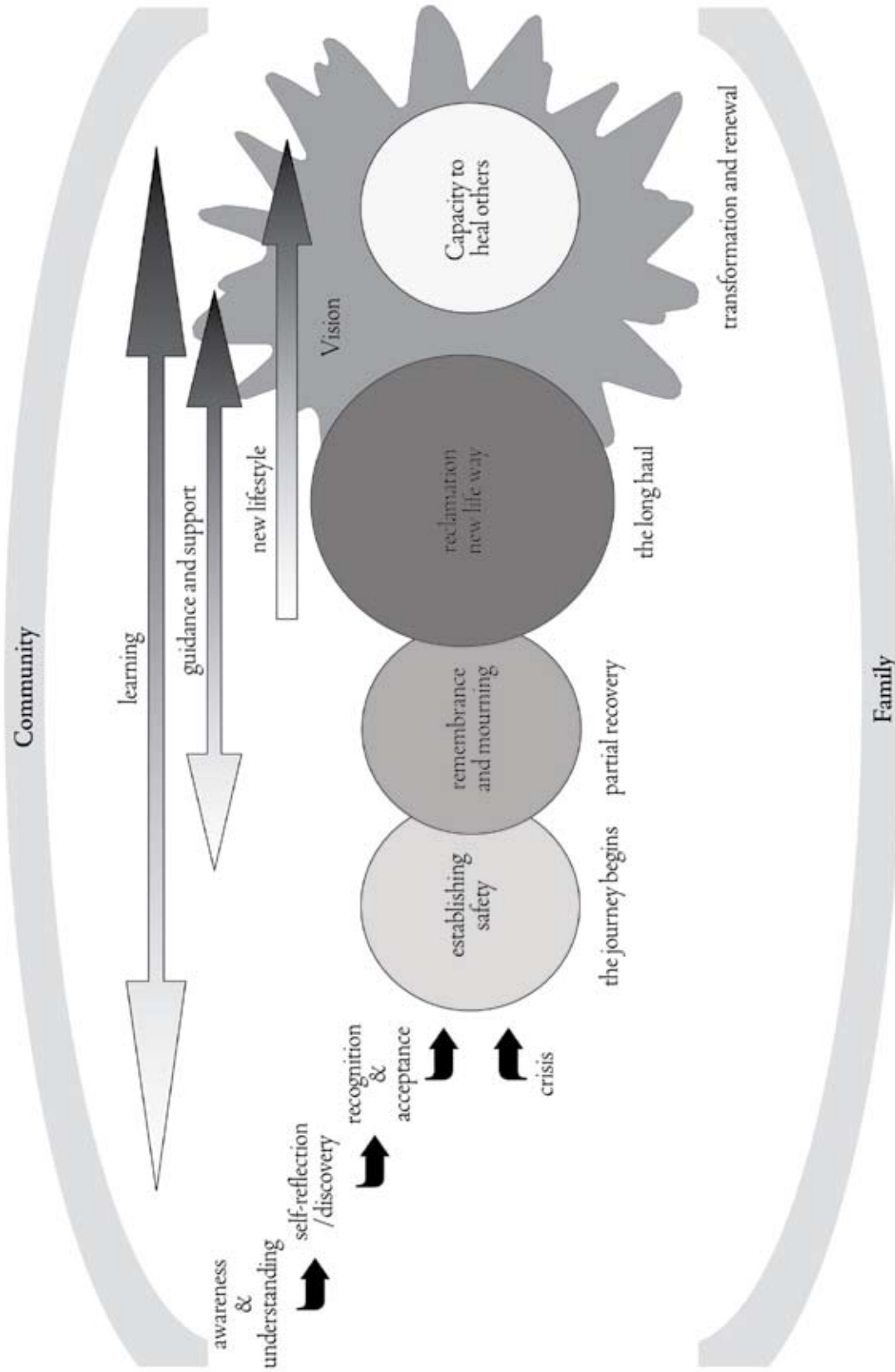
The AHF, in its 2006 *Final Report*, defines a Survivor's healing journey as follows:

Survivors appear to live through a natural sequence on their healing journey that can begin with awareness, followed by an understanding of the Legacy's impact on self and family, which precipitates reflection, discovery and acknowledgement that can lead to healing. Of course, crisis alone can also catapult individuals into seeking help. Once in a therapeutic environment or relationship, Survivors need to *feel safe*, and this is where the hard work begins for both the Survivor and the healing team. In the next phase, past trauma is faced and resolved and the individual develops relationships with others on the journey. Finally, there is reclamation of healthy productive lives and the rightful expectation of the same outcomes as non-Aboriginal people in Canada. The reclamation phase takes *considerably more time* and requires immense discipline as well as continued support and guidance to establish stability. Reconciliation fits at end stages because healing is not complete without forgiveness. In the end, some rest comfortably in their own healing while others are called to heal family, friends or community. In any case, the latter phases are where a personal vision comes to fruition (Kishk Anaquot Health Research, 2006:71).

The AHF has projected that the course of resolving the Legacy in an individual may take up to 30 years.

The following is a visual representation of a Survivor's journey from the beginning to partial recovery, through the long haul, and, finally, to transformation and renewal.

Figure 1) A Survivor's Journey*



*This figure appears as Figure 18 in Final Report of the Aboriginal Healing Foundation Volume II, Measuring Progress: Program Evaluation.

Indian Residential Schools Compensation Processes

Four different lump sum payment (LSP) options have been available to Survivors to compensate them for the suffering they experienced as a result of the residential school system. The first option secured compensation through civil and criminal lawsuits initiated by Survivors against the Canadian government and the churches. This process, which began in the 1990s, was criticized by some Survivors as exclusionary, time-intensive, financially and emotionally draining, and often unrewarding. Several participants in the CEP study had been involved for years in class-action lawsuits, an experience that generally led to negative attitudes towards lawyers, critical assessments of the *Settlement Agreement*, and judgements that the CEP was “too little, too late.”

The second option, the alternative dispute resolution (ADR) process, was intended as a less formal, less complicated, and faster alternative to the courts. An estimate of 53 years with a cost of \$2 billion in administration would have taxed both the government and Survivors if the class-action lawsuits continued. “With survivors having an average age of 57 and dying at a rate of five per day, the civil process cannot provide timely justice to the majority of claimants” (Hagen, 2005:2nd para.). However, the ADR process was only intended to deal with physical and sexual abuse claims and did not consider the loss of language and culture. Similar to court cases, Survivors opting for ADR were required to prove their claims and again the process was viewed as an arduous and emotionally difficult process. Five participants in the CEP study reported that they had received payments through the ADR process.⁴

The third option—provided for in the *Indian Residential Schools Settlement Agreement* (2007)—is the common experience payment (CEP) process that offers a financial package to all former students of 137 recognized schools (Indian and Northern Affairs Canada [INAC], 2009a).⁵ In the *Settlement Agreement*, “common experience” refers solely to attendance at a residential school. The CEP is compensation for the general loss of culture and language that resulted from a system that separated children from their families and communities and that operated under policies of civilization and assimilation (cf. Milloy, 1999:42). Using a ‘10 plus 3’ formula, each former student alive as of 30 May 2005 is eligible to receive \$10,000 for the first year (or part thereof) of attendance at a residential school and an additional \$3,000 for each subsequent year (or part thereof). Most key informants in this study were recipients of common experience payments.

The official list of schools (see Appendix A) excludes many institutions that the AHF defines as a residential school including industrial schools, boarding schools, homes for students, hostels, billets, residential schools, residential schools with a majority of day students, or a combination of any of the above (Aboriginal Healing Foundation [AHF], 2001:5). Differences in how residential schools are defined for inclusion of the official list depend on whether or not there was federal government involvement and/or whether or not records exist to verify institutions as residential schools.

An advance payment program, established to expedite the distribution of funds to Survivors over the age of 65 as of 30 May 2005 was implemented between May and December of 2006. A total of 13,547 advance applications were processed and 10,337 advance payments of \$8,000 each were issued by April 2007 (INAC, 2008). Eighteen participants in this study reported that they had received this advance payment.

⁴ SPSS Table 18.

⁵ Initially, 134 schools were recognized. Three schools have since been added to the list.

In September 2007, the government began accepting common experience payment (CEP) applications. As of November 2009, 99,204 CEP applications were received and 74,701 payments were issued to Survivors (average of \$20,529 each). For Survivors who were denied CEP or who received only partial compensation for the number of years they claimed they attended, the *Settlement Agreement* allows for a reconsideration process (see Appendix B). As of November 2009, 23,973 requests for reconsideration were received by IRSRC of which 18,694 were complete. As well, 2,316 requests for appeals were received of which 177 were granted in whole or in part (INAC, 2009b). Survivors who have not yet applied for CEP are able to do so until the established deadline of September 19, 2011. It should be noted that the reconsideration process was still in development when this study commenced in June 2008 and questions to key informants about this process evolved in accordance with our understanding of reconsideration applications.⁶ Seventy-three participants (26%) in this study had applied or were in the process of applying for reconsideration.

The independent assessment process (IAP) was established to compensate Survivors who choose to come forward as victims of physical and sexual abuses at residential schools. While the CEP is designed to compensate all Survivors for common losses, the IAP is designed to resolve and compensate claims of sexual abuse, serious physical abuse, or other wrongful acts which caused serious psychological consequences (see Appendix C). The independent assessment process is meant to replace the ADR process and promises to process any residential school abuse-related claim within a nine-month period. The Indian Residential Schools Adjudication Secretariat deals with most claims through a hearing conducted by an adjudicator. Survivors have access to emotional and wellness support through the Indian Residential Schools Resolution Health Support Program provided by Health Canada. The IAP submission deadline is 19 September 2012 (INAC, 2009c).

Anticipation by AHF of the Impacts of Lump Sum Compensation Payments

In anticipation of imminent compensation payments, in the autumn of 2006 the AHF initiated the *Lump Sum Compensation Payments Research Project* (Dion Stout and Harp, 2007). The goals of this study were to assess the impact that past lump sum payments have had on Survivors, their families, and their communities; to help identify the benefits and costs of such payments; and to prepare recommendations on what might be helpful with respect to the imminent distribution of Lump Sum Compensation Payments (LSPs) such as the CEP and IAP payments. At the time, the AHF estimated that approximately 86,000 former residential school students were eligible to receive, on average, \$28,000 each in compensation, with an average recipient age of 60 years old. This wave of payments represented a massive and sudden influx of money into Aboriginal communities across Canada.

The *Lump Sum Compensation Payment Research Project* identified a wide range of community impacts stemming from lump sum payments (Dion Stout and Harp, 2007:13–39). These impacts began with the application process, which was looked upon negatively by the majority of survey participants who complained of its excessive cost and duration. While a minority found the LSP process beneficial and

⁶ Ninety-one participants (32%) in the current study reported that they received only partial payment and seventy-three (26%) stated that they had applied or were in the process of applying for reconsideration (SPSS Tables 20, 21, and 22). This rate is consistent with recent CEP statistics released by IRSSC showing that approximately one-quarter of all initial CEP applications have been followed by reconsideration requests.

positive, most saw it as financially inequitable and emotionally draining; however, once the monies arrived, many recipients turned their LSP into a positive financial opportunity to help out family, purchase needed items, clear up debts, and make investments. On the negative side, recipients noted that LSPs often led to troublesome increases in problems such as drug and alcohol abuse, pressure from family for money, and encroachment by financial predators. Receiving LSPs also triggered negative residential school memories for Survivors. Non-recipients tended to view LSPs in a critical light, citing the increased vulnerability of Survivors in general, but particularly if they were elderly, female, ill, and/or homeless. Some non-recipients linked general Survivor healthiness and LSP readiness (health and wealth) as related factors in Survivors' more positive responses to LSPs.

For the present CEP study, the results of the 2007 *Lump Sum Compensation Payments Research Project* provided a platform from which to launch a more comprehensive and in-depth investigation into the impacts of the common experience payments among recipients representing all Aboriginal peoples and all regions of Canada. Indeed, most if not all of the individual and community impacts identified in the LSP report are confirmed and elaborated upon in this present report.

Chapter 2

CEP Study Objectives and Methodology

The purpose of the *Common Experience Payment* study is to gather experiential data and to elicit CEP recipients' explanations about the impact of the CEP on Survivors and their engagement in healing, and to gather insights regarding the roles of support services in assisting them through the compensation process. As mentioned earlier, the impetus for this study were the indicators of individual and community impacts, and the consequent need for supports to be in place prior to compensation, reported in the 2007 *Lump Sum Compensation Payments Research Project*. Further impetus came from ongoing news media and anecdotal evidence that the influx of CEP money was creating problems in some communities.⁷ Hence, this qualitative study aimed to gather and analyse information about the CEP process, including the application and actual receipt of the payment, in relation to two fundamental questions:

- 1) Has the common experience payment, as part of the larger *Settlement Agreement*, impacted Survivors and their engagement in healing, and what is the nature of those impacts?
- 2) What services and/or supports have been valuable to individual CEP applicants and recipients?

Answers to these questions have been collected mainly from interviews with Survivors who applied for or received common experience payments. It is the experiences and perspectives of these individuals that provide the interpretive framework for this study. The information provided by Survivors is contextualized by an environmental scan based on interviews with service providers in the communities where key informants were interviewed and on a review of government services designed to support Survivors throughout the *Settlement Agreement* process.

Data Collection: Key Informant Interviews and Environmental Scan

Between June 2008 and April 2009 a total of 281 semi-structured interviews were conducted with First Nations, Inuit, and Métis Survivors in 17 communities across Canada. Interviews were also conducted with 18 service providers at seven of these sites as part of the environmental scan. Under the direction of the principal investigator, the interviews were conducted by the research team comprised of First Nations, Inuit, and Métis coordinators. Interviews with both Survivors and service providers were also conducted by the coordinator of the environmental scan. Each of these team members had either personal ties to Survivors (parents, grandparents) and/or professional and academic commitments to Aboriginal and residential school research. Together, these qualities and qualifications created a team with the knowledge and sensitivity to work together with organizations for the recruitment of key informants, to elicit meaningful responses during interviews, and to contribute valuable interpretations at all stages of analysis.

⁷ See for example: "Native Residential School Activist, Nora Bernard, Found Dead" (CTV News, 29 December 2007, URL: http://mostlywater.org/native_residential_school_activist_nora_bernard_found_dead, accessed 01/12/08); "Memories, Money Spell Trouble for Survivors" (Whitehorse Star, 25 April 2008, URL: <http://whitehorsestar.com/archive/story/memories-money-spell-trouble-for-survivors/>, accessed 28/04/2008).

Key informants were defined as those who both applied for and received some or all of their common experience payment as well as those who applied and were rejected or who were going through reconsideration. Considering the under-representation of Métis and Inuit in residential school research, including the 2007 LSP study, the present study made an effort to over-represent Survivors from these groups. The rationale for recruitment efforts among Métis and Inuit Survivors included the fact that these groups tend to fall between the cracks of the *Settlement Agreement*, including the CEP process. A number of day, mission, convent schools, and hostels attended by Métis, Inuit, and some First Nations students are not included in the Schedules E and F of the *Settlement Agreement* and therefore their common experience is not eligible for compensation.⁸ In addition, several Métis students who attended recognized schools as day students are not eligible for compensation because they did not reside at the schools full-time.

Questions for key informants focussed on their experiences and opinions of the CEP application process, the use and availability of support during the application process and after receipt of the payment, the personal impacts of receiving monetary compensation, and the connection, if any, between compensation and healing (or well-being) in their lives (Appendix D). All key informant interviews were conducted in-person. Survivors were not questioned about how they spent their compensation money, although many participants shared this information. Nor were Survivors asked to recount their school experiences, but many memories about residential and day schools were volunteered. Commonly, Survivors' time at school, the years following their discharge from the schools, later involvement in class-action lawsuits or alternative dispute resolution (ADR) processes, and current participation in components of the *Settlement Agreement* were spoken of as parts of a total experience. Hence, Survivors' experiences particular to the CEP process were inextricably linked to their experiences at residential school.

As the interviews with Survivors were in progress, services providers at participating sites were contacted about participating in interviews regarding the nature and extent of services and supports being accessed by Survivors involved in the CEP process. Questions focussed on service providers' perceptions of government services put in place to support CEP applicants, and on the nature and scope of services and supports available to Survivors at the community level. Seven sites agreed to participate and 18 interviews (in-person and telephone) with staff at AHF-funded projects were conducted. The semi-structured interview guide for community health providers (Appendix E) was based on the guide for Survivors with some additional questions to elicit responses on the following: healing supports used by Survivors; demand for services; professional capacity to deliver services; and perceptions of the impact of the *Settlement Agreement* on individual and community healing.

Recruitment: The AHF Network and Community Contacts

AHF-funded community-based healing projects (hereafter, "projects") were the first point of contact for recruitment of interview participants for three main reasons: 1) as community-based organizations, projects were in an optimal position to identify CEP recipients in their communities and to make contact with Survivors who might be interested in participating in an interview; 2) as healing organizations, projects were able to provide the necessary support for participants who required after-care following the interview; 3) as partner organizations, projects had an established relationship with the AHF which in

⁸ Section 5.02 & 12.01 of the *Settlement Agreement* (Indian Residential Schools Resolution Canada, 2006).

turn helped to facilitate the research team's safe and appropriate entry into and exit from communities. In consultation with AHF project officers and managers in Ottawa, approximately 20 projects across Canada were selected as representative of the Survivor and CEP-recipient populations and as having the capacity to assist the research team during the study period. Care was taken not to over-burden already busy project staff and participation as a recruitment partner was entirely voluntary. A total of 17 projects were available and willing to participate. AHF healing projects generally welcomed the opportunity to join the research study and in many instances project staff provided the logistical support necessary to ensure private and quiet interview space and to schedule interview participants prior to the arrival of the research team.

As explained above, this study made an effort to over-represent Métis and Inuit Survivors. Recruitment of Inuit key informants was relatively successful, but recruitment of Métis participants was less than ideal. It became evident from the onset of recruitment that Métis respondents would be difficult to reach. Métis communities contacted for participation in the study immediately identified the inconsistencies in the *Settlement Agreement* that excluded many Métis who attended schools that have not been recognized or who attended residential schools as day students. In other words, because many Métis Survivors were not eligible for CEP they were precluded from participating in the CEP study, resulting in a low recruitment response. The problem goes deeper than the study's inability to recruit Métis participants. Research on Métis involvement in the residential school system shows that government and church policies were inconsistent, practices varied, and records were often inaccurate, all of which contribute to the under-representation of Métis in official residential school documents:

Due to the manipulation of attendance numbers and the strict administration of per capita funds payable on behalf of First Nations children only, many of the records that exist on attendance and discharge from schools are unreliable. Inaccurate record keeping and restriction of public access has influenced the perception of Métis attendance at residential schools overall (Logan, 2008:77).

It was also a challenge to recruit interview participants who were willing or ready to engage in a study on the CEP in communities that were dealing with serious repercussions since the arrival of payments. Despite these challenges, the research team was able to elicit responses that were both personal and specific, and many participants commented that they hoped their interviews would promote change for those still going through CEP or who were about to start IAP processes.

Benefits of the research design include the broad scope of information, advice, and logistical and counselling support provided by local counsellors, administrators, Elders, and volunteers in each community. These local experts were acutely aware of how CEP and the *Settlement Agreement* had impacted individuals and communities and they often shared stories, resources, and support. Due to the sensitive and personal nature of some of the interviews, support from staff and volunteers in the community were relied upon heavily and their contribution was essential in carrying out and completing the study. As well, interviews were occasionally scheduled to coincide with a pre-existing community event or a community would create an event to coincide with the interview dates. For example, communities held workshops and gatherings, dinners, entertainment, group counselling sessions, or information sessions as part of, or in coordination with, interviews for the CEP study. The chance to gather with other Survivors or to

participate in a Service Canada workshop⁹ was helpful to those who came to participate in the CEP interviews. These events often allowed for additional support to be available from counsellors and Elders which in turn nurtured a safe environment for interview participants.

Some of the staff interviewed for the environmental scan expressed gratitude about being invited to speak about their experiences in providing healing and wellness services amidst the implementation of the *Settlement Agreement*. The honesty and frankness in their responses provided valuable context to what Survivors said about the impacts of CEP, and elicited important information about the nature of the healing services being provided to Survivors as they move through the CEP, IAP and, TRC processes.

Ethical Considerations

During the research design stage, serious consideration was given to the sensitivity of questions about compensation for residential school experiences, and a high priority for the research team was to design and implement data collection strategies that were ethical, sensitive, and respectful to Survivors. The team developed an ethics protocol to govern the actions of interviewers (and assistants such as interpreters and counsellors), to guide the process of recruitment, and to protect the confidentiality and anonymity of study participants (Appendix F). To this end, the key informant interviews were conducted in an environment where every attempt was made by the interviewer to ensure confidentiality and privacy. An informed consent form was presented to all participants prior to interviews that outlined how anonymity and confidentiality would be ensured and explained that participants could decline to answer any question and that they could withdraw from the interview at any time (Appendix G). The issue of language was also considered in the design of the CEP study, and both French and Aboriginal language interpreters were available and utilized at various interview sites.

At the start of each session, interviewers verbally ensured that participants understood the purpose of the study, their role in the study, and provisions for anonymity and confidentiality (i.e., that participants were fully informed prior to consent). Interviewers watched for signs of discomfort on the part of participants, offered to change the subject if they wished, and allowed participants to freely speak about issues that were important to them. Prior to their arrival in each community, research team members arranged for the availability of support services (e.g., project staff, counsellors, and/or Elders) in the event that the interview triggered an emotional response and the participant wished to seek after-care. As well, participants could request that a companion, interpreter, or counsellor be present during the interview, provided that a confidentiality agreement was reached with that companion (Appendix H). Following the interview, participants were given a list of resources (government resources related to CEP applications, support services, etc.), were invited to ask questions about the various *Settlement Agreement* components and processes or about the study, and were given toll-free contacts should participants want further information.

A matter of serious discussion among the research team was whether or not to offer honoraria to interview participants. The irony that Survivors would be offered money to speak their minds about the receipt of monetary compensation was not lost on research team members. Ultimately it was agreed that

⁹ In a number of locations, the projects scheduled interview times during the same period when Service Canada would conduct workshops in their area.

in consideration for the time that informants volunteered for the study, the distances they travelled to attend the interview, and/or the arrangements they made for child-care, it was disrespectful *not* to offer an honorarium. Acceptance or refusal of a gift of thanks (in cash or kind) was the personal decision of each individual, as remarked upon by one participant:

Unless a person says they are healing and they want to try it on their own, that's the best thanks you can get. Groups, counsellors, bands, they're making terrible mistakes with people. They're spoiling people and making it worse: "I'll pay you \$50 for coming here; I'll pay you \$100 for going to that meeting." They have to pay me to go to anything?

As mentioned earlier, the research team intentionally did not ask Survivors to share private information such as how they spent the compensation money, although many participants volunteered this information. Nor were Survivors questioned about their school experiences, but again, many stories were shared about their childhood years at residential and day schools.

The study design implicitly included a termination provision in the event that participation in the interviews was deemed to be doing harm to Survivors, an eventuality that, fortunately, was not faced by the research team at any point during the study. Although this study focussed solely on individual Survivors' experiences and perspectives, the participating AHF-funded projects advised the team on appropriate community protocols. In the case of Nunavut, a research license was obtained from the Nunavut Research Institute prior to commencing data collection activities.

Analysis

Fundamentally, the analysis of both the key informant and environmental scan data is qualitative in nature. Analysis of all key informant interviews was conducted by importing the transcripts into *Atlas.ti*[®] (qualitative data analysis software) for coding and theme analysis. Broad descriptive definitions were used to create a list of approximately 25 codes which allowed a first-round of coding to group responses into basic topics such as "CEP application process," "CEP impacts - positive," "CEP impacts - negative," and so forth. A second round of analysis involved a content analysis of the output for each code in order to further refine each topic into distinct sub-themes or common types of responses (e.g., various ways in which CEP had positive or negative impacts). These substantive themes—grounded in participants' responses—formed the basis for detailed operational definitions for each code. Another round of coding checked the assignment of codes to transcript text and corrections were made as necessary. Finally, the frequency of common types of responses was investigated for each code in order to distinguish between major and minor themes within a single topic or issue.¹⁰ Similarly, the interviews with service providers were transcribed and responses were grouped according to general areas of inquiry and then analyzed thematically in relation to healing supports for Survivors.

Secondary to the qualitative analysis was the use of *Statistical Package for the Social Sciences (SPSS)*[®] to generate quantitative results. All of the key informant background data such as gender, age, residence, years of school attendance, date of CEP receipt, etc. was entered into SPSS. As well, it was possible to transpose some of the theme analysis results of the *Atlas.ti* coding into the SPSS database, allowing

¹⁰ See Appendix I (Atlas Tables) for the results of theme analysis.

for cross-tabulations of qualitative results (for example, to determine if there is a correlation between recipients who say they are on a healing journey and responses about positive and/or negative impacts of CEP).¹¹

As previously mentioned, the experiences and perspectives of individual Survivors provide the interpretive framework for this study. That is, the unit of analysis is the individual Survivor and it is essential to note that any analysis of collective or community impacts are based on subjective accounts of these impacts as described by individual Survivors and local service providers.

Literature Review

A comprehensive literature review conducted for the 2007 *Lump Sum Compensation Payments Research Project* revealed there was very little research related to the personal impacts of LSPs or about the benefits and detriments of such large sums of money to individuals and communities (Dion Stout and Harp, 2007: Appendix B). In the course of the CEP study, an additional search for relevant literature was conducted but with little success. Although a number of publications exist on issues related to compensation and reparation, few have any bearing on redress for the systemic type of trauma as experienced by residential school Survivors in Canada. Published research is also sparse on the impacts of lump sum compensation on individuals and communities. As identified by Dion Stout and Harp, the most comparable research to the CEP study are investigations into the impacts of monetary compensation received by American Japanese internees in the late 1980s. In particular, research by Nagata and Takeshita (2002) investigates similar questions, examines comparable issues, and reports similar types of results as those found in the CEP study. As will be cited at various points of discussion below, Nagata and Takeshita's interpretations of the impacts of redress and the diversity of reactions to compensation among American Japanese internees are consistent with impacts reported by residential school Survivors. One main difference is that the Japanese internee study noted distinct variations of impacts and reactions by gender and age, a finding that is not borne out in the CEP study.

For the purpose of bringing additional context to the present CEP study, a literature review was also conducted for information on the history and legacy of residential schools in Canada. Publications by Miller (1996), Chrisjohn and Young (1997), and Milloy (1999) are of particular value and are cited throughout this report. As well, publications by the Aboriginal Healing Foundation provided contemporary research and thinking about the residential school legacy and the myriad of healing issues related to that legacy. Of particular relevance to the CEP research are AHF publications authored by Dion Stout and Kipling (2003), Wesley-Esquimaux and Smolewski (2004), Brant Castellano (2006), Chartrand, Logan, and Daniels (2006), Dion Stout and Harp (2007), Logan (2008), and Reimer and Fryer (2009).

¹¹ See Appendix J (SPSS Tables) for statistical results.

Limitations of the Study

Several limitations of the key informant interview process and environmental scan deserve consideration, as follows:

- The interviews and scan were conducted over a ten-month period during which CEP and IAP processes evolved and progressed. The design of the study and consequently the analysis of results do not fully nor accurately reflect the changes that occurred in the implementation of *Settlement Agreement* components during this time, although some attempt is made to estimate the lapse of time from the implementation date of the *Settlement Agreement* and the date participants said they received the CEP. Similarly, estimates have been calculated to measure the length of time between the date CEP was received and the date of the interview.
- The study was not designed to address the omission of students who attended residential schools as day students or attended schools not listed within the *Settlement Agreement* whose CEP applications were rejected, and hence the representation of Métis voices is under-represented.
- Participants were recruited by AHF-funded project staff and interviews were conducted mainly at project sites. Hence, the study sample may be skewed in favour of Survivors who have been and who are seeking support and counselling. Likewise, interviews with service providers were limited to AHF-funded project staff members.
- Some of the interview sessions were coordinated with local partners to take advantage of other pre-planned events such as Survivor Gatherings, CEP workshops sessions, or IAP hearings. This led to some confusion about the affiliation of interviewers and in several instances team members were mistaken for government employees (e.g., IRSSC), which may have compromised participants' understanding of the study objectives and/or openness of responses.
- In some communities, the number of Survivors volunteering for interviews exceeded the time and resources that interviewers were able to provide. Alternate arrangements were made including interviews held in less than ideal locations or participants asked to reschedule interview appointments. In one community, the recruitment response yielded long lines of frustrated Survivors. Elders were given priority in line-ups for interviews and, in some cases, Survivors had to be turned away. Project staff, volunteers, and research team members made efforts to accommodate as many interviews as possible while still allowing adequate time for thorough responses to interview questions.
- This study was not designed to specifically elicit the experiences of hard-to-reach populations such as those Survivors who were incarcerated. The research team anticipated, as well, that homelessness would be a difficult theme to address, which was reiterated by local partners. Although a few participants indicated that they were homeless, these individuals represent a very low per centage of the study group and cannot be said to represent the experiences of homeless Survivors.

Chapter 3 Participant Profiles

Survivor Profiles

The key informant group represents First Nations, Inuit, and Métis Survivors living in urban, rural, and isolated communities in ten provinces and territories of Canada (see Figures 2 and 3).¹²

Figure 2) Participants by Aboriginal Identity

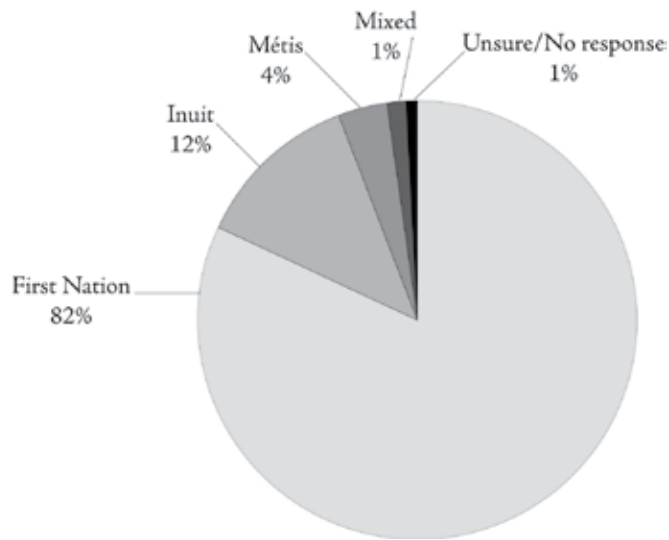
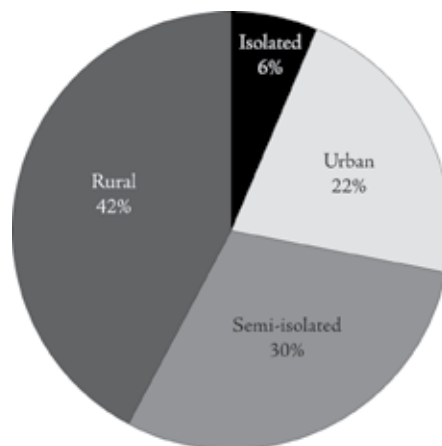


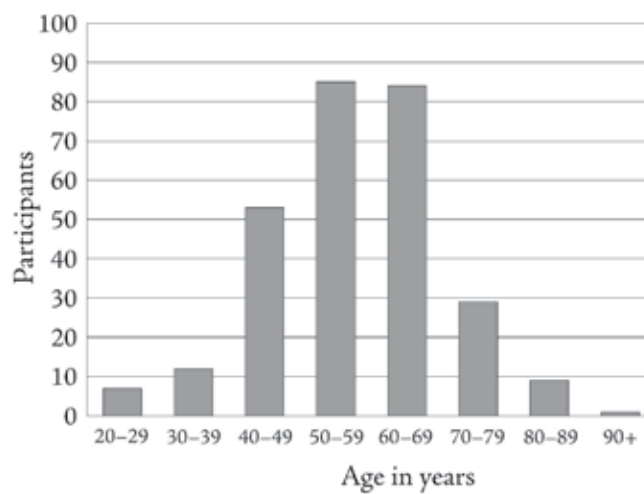
Figure 3) Distribution of Participants by Remoteness



¹² SPSS Tables 1, 2, 3, 4 & 5.

Inuit participants living in both urban centres and hamlets make up 12% of the study group, a relative success considering that an estimated 5% of residential school Survivors in Canada are Inuit.¹³ Focussed efforts to recruit Métis Survivors, however, resulted in only ten participants (4%) who self-identified as Métis and four who identified as being of mixed Aboriginal ancestry (1%). This is despite the fact that Métis comprise an estimated 9% of the Survivor population.¹⁴ The representation of First Nations participants in the study group (82%) is almost perfectly consistent with the estimated 80% of First Nations Survivors who are of First Nations ancestry. This segment of the study group resides in all types of communities, including Reserves (44%), towns (37%), and cities (17%).¹⁵ Survivors in the study group represent fairly equal numbers of women and men, ranging in age from 22 to 90 years. The majority of Survivors in the study group were between 50 to 69 years (Figure 4).¹⁶

Figure 4) Participant Age Distribution



Common Experiences

No, the price that they put on us, it couldn't buy my happiness. My childhood, my life, what was supposed to happen to me, my village - they took that away.

I keep telling my kids, 'We were hurt in residential school and they deprived us of who we are. They tried to kill the Indian in me, but they did not succeed.' I cannot forgive and forget because I have been hurt too many times.

¹³ AHF 2006:26.

¹⁴ AHF 2006:26.

¹⁵ SPSS Tables 1, 8 & 9.

¹⁶ SPSS Table 6 (152 women (54%) and 129 men (46%); SPSS Table 7 (60% [n=169] of the study group were aged 50-69).

As explained earlier, the CEP is compensation for the common experience of having attended a residential school and any consequent loss of culture and language. Most, if not all, of the Survivors in this study began to attend residential or day schools by at least age seven, in accordance with the 1920 amendment to the *Indian Act* making school attendance compulsory for all “Indian” children between the ages of seven to fifteen years (Miller, 1996:169–170; Milloy, 1999:70).¹⁷ Presuming a school start date by at least age seven, two of the oldest Survivors in the study group began attending school at the time of this amendment, and 64 others following shortly thereafter in the 1930s and 1940s, when most schools were operated by churches and missions. However, the majority (59%) of the study group attended residential and/or day schools during the 1950s to early 1970s. This period was marked by a recommendation to abolish Indian residential schools in favour of efforts to establish more day schools and to integrate Aboriginal and non-Aboriginal education under provincial control. Beginning in the 1970s, residential schools were gradually closed and education was transferred to Aboriginal control. Nevertheless, 49 Survivors in the study group attended government and or church operated residential and day schools from the 1970s to the 1990s.¹⁸

Almost everyone (96%) who participated had attended at least one residential school at some point in their childhood. Sixty Survivors had attended two or more residential schools and two Survivors named up to four schools where they were students. Nine former residential school students also attended day schools. Ten participants attended schools exclusively as day-students (Tables 1 and 2).¹⁹

Table 1) Number of Residential Schools Attended

		Frequency	Per cent	Valid Per cent
Valid	One residential school	211	75.1	77.9
	Two residential schools	43	15.3	15.9
	Three residential schools	15	5.3	5.5
	Four residential schools	2	.7	.7
Total		271	96.4	100.0
Missing	Did not attend residential school	10	3.6	
Total		281	100.0	

¹⁷ Miller (1996:169–170) explains how this policy was enforced: “Truant officers were authorized to enter ‘any place where he has reason to believe there are Indian children between the ages of seven to fifteen years’ and to prescribe penalties for Indian parents who refused to comply with notice to make their children available for school.”

¹⁸ SPSS Table 10; Miller, 1996:318; Milloy, 1999:194–198, 217–219, 236–238.

¹⁹ SPSS Tables 11, 12, & 13.

Table 2) Number of Day Schools Attended

		Frequency	Per cent	Valid Per cent
Valid	One day school	16	5.7	84.2
	Two day schools	3	1.1	15.8
Total		19	6.8	100.0
Missing	Did not attend day school	262	93.2	
Total		281	100.0	

Although Métis students had many experiences similar to First Nations and Inuit students at the schools, there were some experiences that were unique to Métis. Falling between the gaps in federal, provincial, and church jurisdictions, Métis often attended the larger convent schools, mission schools, and residential schools as day students. Many of the residential and day schools that Métis attended are not covered by the *Settlement Agreement* and therefore many are not entitled to the CEP. This is despite evidence that school attendance impacted Métis/Michif languages and cultures (Chartrand, Logan, and Daniels, 2006:77–81). Sentiments about being left out of the *Settlement Agreement* processes are mirrored in Métis participants' responses about being treated as "outsiders" in the schools:

We're not getting recognized and we'd like to. We suffered, if not more then the same as the people who lived in the Missions. In them days there was no bus, no nothing, we had to walk through the bush three or four miles to go to school and when we did get there... you won't get in, in the morning, if you're too early. We had to have our lunch outside... we sat outside and our lunch was frozen. We were outsiders; they called us 'externs,' whatever that meant.

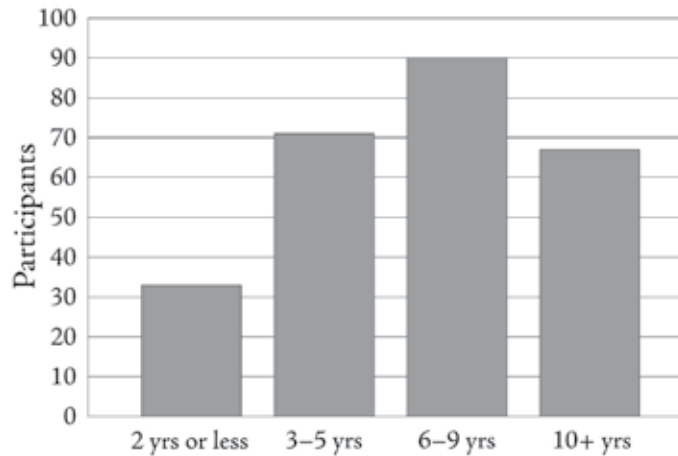
Inuit who attended hostels as well as day schools or residential schools were subject to many of the same abuses as those who went to the larger schools in the South. Unfortunately, some of the day schools and hostels are not eligible for CEP payments according to the *Settlement Agreement*, and access to and availability of services in the North for Inuit Survivors is limited:

I still thought it wasn't enough for a lot of us that had to go through all of this kind of pain and abuses. It's something that you can't explain. Some of it hurts a lot. It's really... big mixed feelings. It's good that you could pay off bills but another thing is, I feel kind of guilty to get it. But still, in some ways, it wasn't enough. To me, the federal government never thinks of the North. It's not enough. We were all treated like guinea pigs or mice in a science lab. That's how I see it. That's how I feel. It's mixed.

Non-eligible institutions represent gaps in the *Settlement Agreement* system that effectively deny compensation and acknowledgement to Inuit, Métis, and some First Nations who suffered the same abuse as those who attended recognized institutions.

The time Survivors spent in school ranges from under one year to as long as 14 years. More than half of the study participants spent a significant part of their childhood in Indian residential and/or day schools: a third of Survivors attended between 6-9 years and another quarter attended for ten years or longer (Figure 5).²⁰

Figure 5) Years at Residential School



For many CEP recipients, no amount of money can repay the loss of culture and language they experienced as a result of being alienated from their community or the profound and lingering loneliness caused by long separations from their family.²¹ Survivors lamented that what they should have naturally learned as children was lost, including social skills, family values, cultural practices, and linguistic fluency. For one participant, the hardest part was that “you were isolated from everybody except the kids you went to school with. You lost your prairie Cree, the only one language you can communicate with.” Emotional deprivation and loneliness in particular have been documented as one of the worst aspects of residential institutions (Miller, 1996:338–339, 422). For a First Nations woman in Saskatchewan, strong feelings of loneliness caught her unawares at the start of the CEP process:

I didn't think it was going to affect me, but I remember walking down to Service Canada ... I got my application and on the way back I just got this really lonely feeling, kind of grieving feeling, almost. I couldn't really understand why I was feeling like that because I was OK with it up until that point... All these old memories came back about loneliness and I felt like I really missed a lot and lost a lot because of my culture and not spending time with my family and my parents and my grandmothers. It was a really lonely feeling. I wasn't angry or anything, just lonely.

²⁰ SPSS Table 15: 90 participants (32% study group) attended 6-9 years; 67 participants (24% study group) attended 10 years or longer.

²¹ Atlas Table 9: 21 participants (7.5%) commented that the “10-plus-3” formula was not enough to compensate for loss of culture and language.

Several participants added that while the residential school system deprived generations of First Nations, Inuit, and Métis of their cultures and languages, it did not replace these losses with Euro-Canadian education and opportunities as promised.²² Many Survivors recalled that they spent most of their day working on the school farm, that class time was used mainly for religious instruction, or that their capacity to learn was diminished by abuse. A Métis Survivor who attended day school for five years said he didn't "even remember having pencils or a scribbler or anything - you just prayed" adding that "no matter what we did, when we die, we'd go to hell." A First Nations Survivor who attended residential school for eleven years suggested that the CEP money should "have been spent to re-educate myself - because of the abuse I was going through at the time I could not concentrate on the education and I'm borderline illiterate." In the long-term, the lack of a basic education erected a systemic barrier by compromising the economic futures of many Survivors. In the immediate *Settlement Agreement* context, a lack of literacy skills challenged Survivors' capacity to comprehend and complete the CEP application process:

I didn't even get an education. I didn't go to a class or anything... They made you work down there all the time. I didn't do any learning. I was on the farm, that's all I was doing... There used to be rocks all over the fields, big boulders and they used horses and picked them all up. That's how they got that meadow there to make hay. We'd go out in the morning and first we'd clean the barn, pigs, chicken, we'd do that in the morning and then in the afternoon we'd go to the field. No time for the classroom. I can't even read or write, some of these heavy words [in the CEP application] I couldn't even understand.

Although many Survivors voluntarily and spontaneously shared stories of negative school experiences, there were also a few participants who made a point of saying that their school experiences were positive, that they liked their teachers and that they received a reasonable education for the time. Because the question guide did not include probes into participants' residential school experiences, it is not possible to measure rates of positive or negative school experiences; however, fewer positive stories were volunteered than negative stories, and even those who had good school experiences often added that being separated from their families and communities was emotionally difficult, resulting in feelings of alienation from parents and siblings as well as loss of language and cultural aptitudes.

Service Provider Profiles

Eighteen service providers employed at AHF-funded projects at seven of the key informants sites were interviewed for the environmental scan. As shown in Table 3 below, these men and women represent a range of professional experience as healing centre directors, counsellors, social workers, and therapists. Two service providers interviewed were Resolution Health Support Workers (RHSWs), a government initiative established under the *Settlement Agreement*, and funded by Health Canada.

The type of Aboriginal communities represented also varies, including urban, rural and isolated communities in British Columbia, Saskatchewan, Manitoba, Northwest Territories, Nunavut and Nova Scotia. Two communities were First Nations Reserves.

²² Atlas Table 9: 12 participants (4% of the study group) said CEP was unfair compensation for lack of education.

All but one service provider identified as Aboriginal. Of significance to this study is that the majority of service providers had personal connections with the residential school experience: ten service providers were themselves Survivors and another five were intergenerationally impacted by the legacy of residential schools.

Table 3) Service Provider Demographics (AHF-funded Projects)

Service Provision	Identity	Remoteness	Gender	Residential School
Director	First Nations	Rural	Female	Survivor
Project coordinator	First Nations	Rural	Female	Survivor
Project manager and counselor	First Nations	Isolated	Male	Survivor
Counseling coordinator	First Nations	Urban	Female	Intergenerational
Counselor	First Nations	Rural	Female	Survivor
Counselor	First Nations	Urban	Female	Survivor
Addictions counselor	First Nations	Urban	Male	Survivor
Resolution Health Support Worker	First Nations	Rural	Female	No
Resolution Health Support Worker	First Nations	Rural	Female	Intergenerational
Behavioural health specialist	First Nations	Urban	Female	Survivor
Community support worker	First Nations	Rural	Female	Intergenerational
Community support worker	First Nations	Rural	Female	Survivor
Mental health therapist	First Nations	Urban	Male	Survivor
Office assistant	First Nations	Rural	Female	Intergenerational
Volunteer	First Nations	Rural	Female	Intergenerational
Director	Métis	Urban	Female	Survivor
Behavioural health specialist	Métis	Urban	Male	No response
Executive director	Non-Aboriginal	Isolated	Male	No

Chapter 4

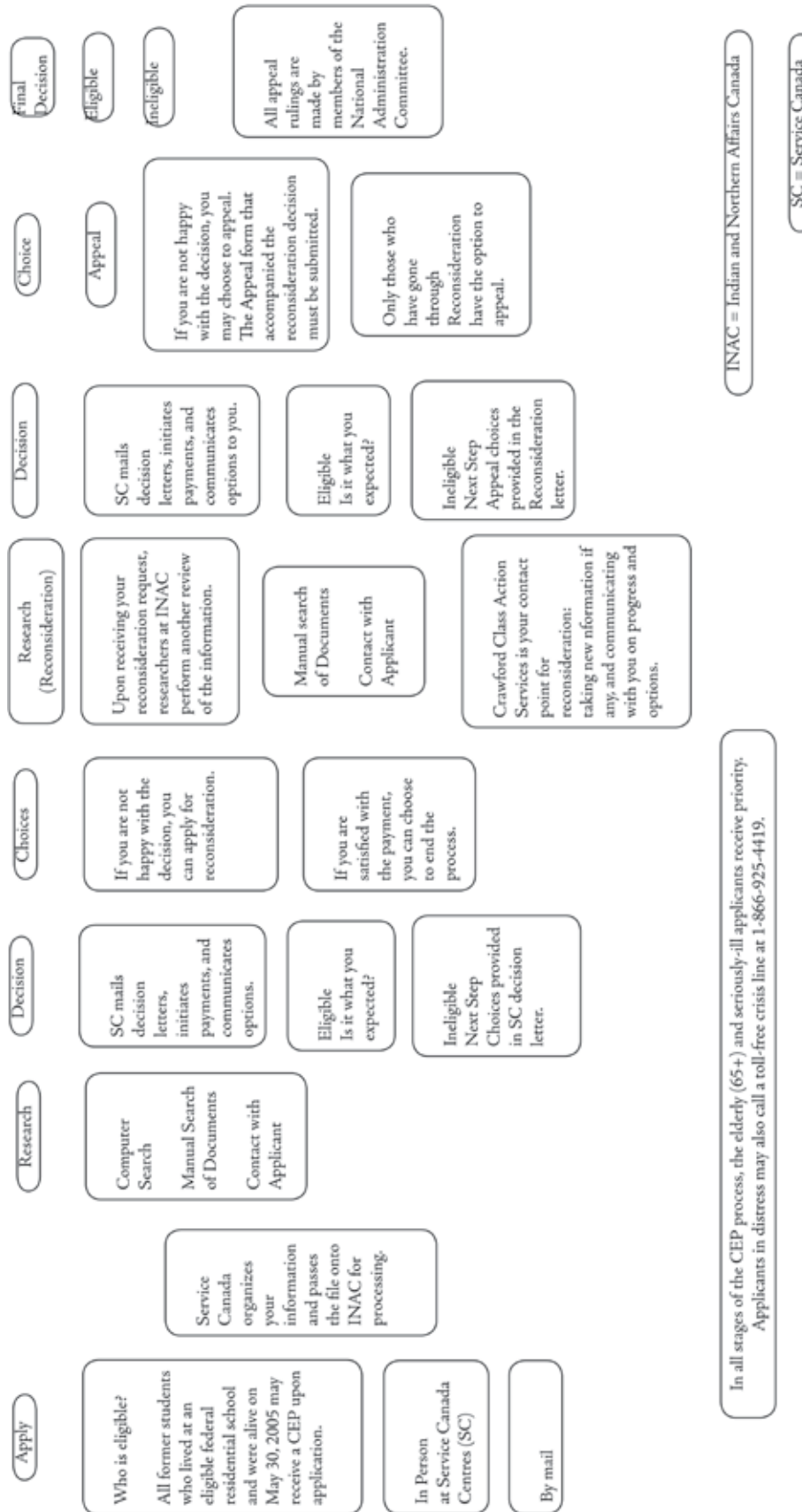
The Common Experience Payment Process

All key informants were asked about their experiences from the time they applied for CEP (see Figure 6 below) until they received payment which involved up to three main activities:²⁴

- 1) *CEP Application*: Initial applications were administered by Service Canada where toll-free telephone assistance was available to help Survivors complete applications. Completed CEP applications were sent to Indian and Northern Affairs Resolution Sector (also known as Indian Residential Schools Resolution Canada [IRSRC]) where files were verified. A second toll-free line to the CEP Response Centre was available to Survivors for updates on applications. After the application was processed by IRSRC, Service Canada mailed decision letters and initiated payments to successful applicants.
- 2) *Reconsideration Request*: CEP applicants who were not satisfied with the decision regarding their payment could apply for reconsideration to IRSRC where additional research (document search and/or contact with the applicant) was conducted. Applicants could call the CEP Response Centre toll-free line for updates on reconsideration requests. Again, Service Canada mailed decision letters and initiated payments.
- 3) *Appeal Letter*: Reconsideration applicants who were not satisfied with the decision could submit a letter of appeal to the National Administration Committee. A third toll-free number was available for appeal applicants to get information about the status of their appeal. Rulings on appeal are final. In all stages of the CEP process, the elderly (65+) and seriously-ill applicants receive priority. As well, a fourth toll-free number served as a “crisis line” for applicants in distress (INAC, 2009d).

²⁴ This summary is taken from “The Common Experience Payment Process Review” Retrieved 22 September 2009 from: <http://www.ainc-inac.gc.ca/ai/rqpi/cep/ov/ov-eng.pdf>

Figure 6) Common Experience Payment Process



Once the *Settlement Agreement* was finalized, most Survivors in the study group applied almost immediately for CEP compensation: over sixty per cent said they received payment within six months after the *Agreement* took effect in September 2007.²⁵ A few Survivors, however, received payment a full year or more after implementation, having postponed the decision to apply because the notion of monetary compensation for past losses was distasteful, because they did not trust the government's motivation behind the *Agreement*, or because they disagreed with the actual terms of the *Agreement*:

I heard about [CEP] and it took me a long time. A lot of people applied for it right away but I didn't for a long time because I was angry, and I still am at the government because of what they have done to our Aboriginal people. I said, 'they aren't going to buy me for what they have done to me.' You know, it never replaces what we have lost... It took me quite awhile and I thought about it for a long time. I wasn't going to apply for it in the beginning. No, I wasn't going to because I just felt that, 'is that trying to replace what we lost?'

Figure 7 below shows the status of CEP receipt at the time of interviews. While almost all key informants had received CEP payments at the time of interviews, only twenty per cent confirmed that they received their full payment, in contrast to over thirty per cent who said they received only partial payment.²⁶ Many in this latter group had applied for reconsideration.²⁷ Eighteen elderly Survivors had received an advance payment of \$8,000. Eight Survivors were still waiting for their CEP to arrive and another fourteen had been rejected, of whom five had applied for reconsideration and were waiting for a response.²⁸ In terms of CEP as a recent memory at the time of the interview, receipt ranged from one month to over two years; sixty per cent of recipients recalled getting their CEP within one year prior to the interview.²⁹

²⁵ SPSS Table 16: 173 participants (62% study group) received CEP within the first 6 months of the *Settlement Agreement*; 52 participants (18.5% study group) received CEP 7–18 months later. The date of receipt reported by 25 participants (9% study group) was prior to implementation of the *Settlement Agreement* and it is uncertain if these indicate faulty recall or if participants were referring to a different payment (e.g., ADR).

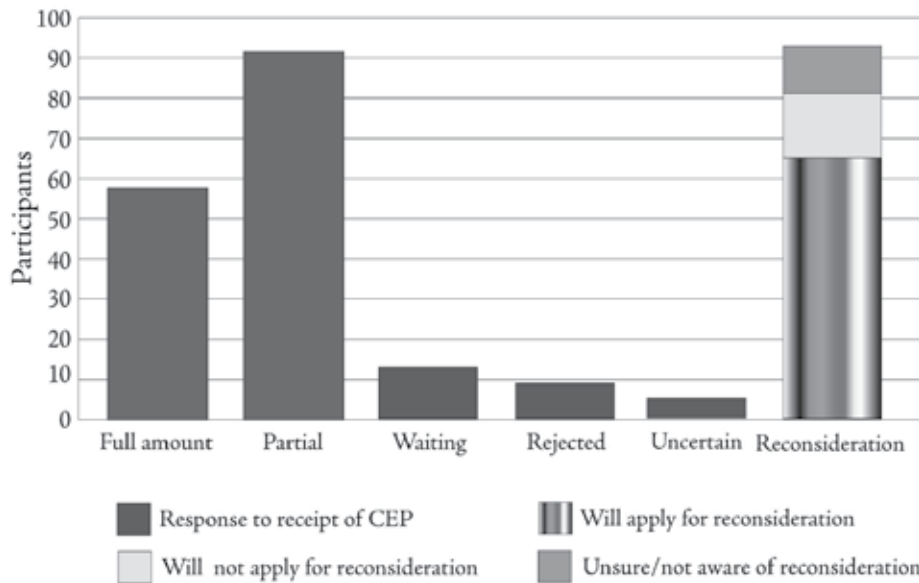
²⁶ SPSS Tables 17 & 20. Not all participants were explicit about receiving full or partial payment. While it is possible that another 25-30% of participants received full CEP, this cannot be confirmed absolutely.

²⁷ SPSS Table 21. 24% of participants had applied or intended to apply for reconsideration.

²⁸ SPSS Tables 17 & 18.

²⁹ SPSS Table 19.

Figure 7) Confirmed Status of CEP Payments



Applying for CEP

Most Survivors in the study were open and explicit about their experiences during the CEP process, including their efforts to obtain information and updates on the status of their applications.³⁰ For some, the process was still ongoing because they had applied for reconsideration and were awaiting a reply, or they were undecided about whether or not to apply for reconsideration.³¹ As shown in the table below, the CEP process went relatively smoothly for about a third of CEP applicants, but was difficult both logistically and emotionally for over a quarter of participants. Twenty per cent of participants expressed anxiety over the long wait for payment.³²

Table 4) Experiences Applying for CEP

CEP Application Process	Respondents	% of total respondents (n=201)	% of study group (n=281)
Application was easy, straight forward	94	47%	34%
Application was difficult, frustrating, costly	72	36%	26%
Long wait time for confirmation / payment	56	28%	20%

³⁰ Atlas Table 1: 201 respondents, or 72% response rate.

³¹ SPSS Table 21.

³² Atlas Table 1.

A few applicants had very mixed experiences: although the application form itself was simple, they found the entire process overwhelming because there was so much to reflect back upon and the waiting period for payment was very long:

I waited a year and a half. It was a time consuming thing. They said to call back, asking the same questions over and over, and it was hard recalling names of people who died in school, who hung themselves, who died, who I grew up protecting. To bring it up again is kind of a hard thing to do.

The majority of those who reported that the CEP application was straight-forward were Survivors under the age of 60 and those who said they were fluent and literate in English or French. Generally, Survivors who found the CEP process easy also explained that a Service Canada office was nearby to provide assistance, or that Service Canada or AHF-funded projects held form-filling workshops in their communities. Access to assistance and support during the application process was a significant benefit. Indeed, most CEP applicants who said they accessed Service Canada supports found that these services “clarified a lot of things on the application form.”³³ Those aged 70 years and over had a younger person (usually a family member) complete the application form for them. Although this assistance eased the form-filling component of the application process, they said it was nevertheless difficult for them to remember details about their residential school years.

School records for about one-quarter of participants were lost or destroyed, making the application difficult and costly because they had to search for and gather information that was hard to locate. Missing records were not a small issue for Survivors who were denied one or more years’ payment because they cannot prove attendance. One Survivor likened it to “digging for a needle in a haystack” until she discovered that the local land claim office could assist her. Difficulty finding school records was particularly a problem for former students who attended schools no longer in existence or who had no personal records or photographs of their school years. As explained by a Survivor in Nunavut:

It was a waiting game, and you know, they don’t believe you sometimes. They don’t believe you went to the school... Like us from before in the early 70’s, we never keep all our records and our parents just threw them away. And that’s what they want and that was hard. And then our school burnt down and all our records were in there and so for us around here it was kind of hard. I know there’s still some people that are still waiting and trying.

Letters and phone calls from IRSRC to CEP applicants stating that their records of attendance at their school were lost or incomplete, that their name was not included on any school record (many Survivors’ names were changed while attending residential school), or that the information on their applications could not be verified, made Survivors feel like liars. Likewise, receiving only partial payment was described as degrading and being denied outright was very discouraging. Elderly Survivors in particular were offended that “that they don’t believe me,” and younger applicants were very critical of a process that put

³³ Atlas Table 4: 71 participants (25% study group) commented on Service Canada/IRSRC supports. These government services were viewed as helpful by a 3:1 ratio: 53 said Service Canada/IRSRC supports were helpful compared to 18 who did not find Service Canada/IRSRC helpful.

the onus on Survivors to prove attendance in a government-run school system that failed to secure proper records. A Survivor in rural Alberta contrasted the all-expense paid trips received by Service Canada representatives to conduct form-filling workshops to the complete lack of remuneration he received for the travel expenses he incurred to collect the documentation necessary to complete his CEP application. As expressed by another Survivor, the CEP process was flawed:

The [CEP] process was so flawed. It was just a very terrible, unorganized process because there was no rhyme or reason for anything that happened... [One] lady just received her payment two or three weeks ago and she was getting frustrated because all her siblings received payments except her... People that were in that position were very frustrated and it was almost like being rejected again. I guess the fact that you have to prove it, that the victim has to prove they attended, the process was [flawed].

Service providers also spoke to the issue of missing records. Finding residential school records was a difficult task and project staff assisted Survivors in helping them to recall those gaps in their memories and in helping Survivors find their “official” documents. This suggests that support to complete CEP application processes may have erected barriers to the provision of healing services since project staff shifted their energies toward logistical support for the CEP process. Many projects encouraged Survivors to write down information and map out their experiences in order to jog their memories about time spent at school, or to create memory books to replace missing official records. Projects also took time to initiate searches at church, provincial, and national archives. Difficulties associated with finding records were compounded by other factors such as hospitalization and language barriers, as experienced by project staff who worked to expedite the application process for one vulnerable Survivor:

Some clients are in the hospital and if they want CEP we have to go up there and ask them questions, which is hard for us because when we try to find their records and we talk to the CEP people on the phone, they won't talk to us unless that person says it is ok. And you can't have a phone in the hospital room because of all the machines they have and these are elders and they have a hard time speaking English some of the time and understanding. We understand the Aboriginal language here and we may get an interpreter to ask the right questions and when we phoned the CEP people to try and find out records about our elders, they have a hard time talking to us... One of our elders we couldn't find anything - only his discharge. I sent it to the IRSRC and sent 15 pages of everything I could find, even his sister's records. And he got [CEP] two weeks before he died so he was ready to give up. IRSRC told me that I needed to get a doctor's note for anyone that is really ill so they can get the CEP really fast. He got his money within 10 days of... a few days later he passed away.

Twenty per cent of Survivors in the study expressed anxiety over the long wait for processing of applications and receipt of payments.³⁴ Constant follow-up for updates and phone calls that were not answered or placed on hold for long periods added to their frustration. Several Survivors stated that when they called the CEP Response Centre toll-free number, the predicted payment date kept changing. Others were confused about why Survivors who applied on the same date received their payments weeks

³⁴ Atlas Table 1: 56 participants (28% respondents; 20% study group).

or months apart. These respondents generally agreed that the payment process seemed inconsistent, leaving them at the mercy of an outside agency in control of yet another aspect of their lives. This sense of powerlessness is familiar to many Survivors and for some the CEP process added to the psychological and emotional baggage rooted in colonial subjugation (Wesley-Esquimaux and Smolewski, 2004:3–5). A Survivor in the Yukon explained:

Yes, it's a long waiting period. They keep you on pins and needles. They offer you money, and they upset you worse. It's all controlling again. They control us from the time we go into the school until they leave us. To this day I feel our parents should be compensated for their parenting skills being taken away from us. A lot of them passed on without getting a chance of bonding. It will never be the same, the only ones we bond with are other students. All our communication, our culture is all gone. For a lot of us, we can't get it back. The government is trying to give it back. It's devastating for those who lost our language and our culture.

In summary, the main factors that influenced Survivors' positive perceptions of the CEP application process were applicants' fluency in English or French and access to form-filling assistance at the community level. Factors that influenced negative experiences and opinions about the application process included a lack of support at the local level for form-filling and for record searching, the onus on applicants to prove attendance at schools for which records were lost, unsatisfactory replies from operators answering the toll-free lines, and long wait times for confirmation or receipt of CEP payments after the application was submitted. Together, these negative factors created or exacerbated anxiety among Survivors, many of whom were also dealing with traumatic memories and emotions triggered by the application process. Among Survivors whose first application was partially or fully denied, this anxiety was compounded by a demanding reconsideration process.

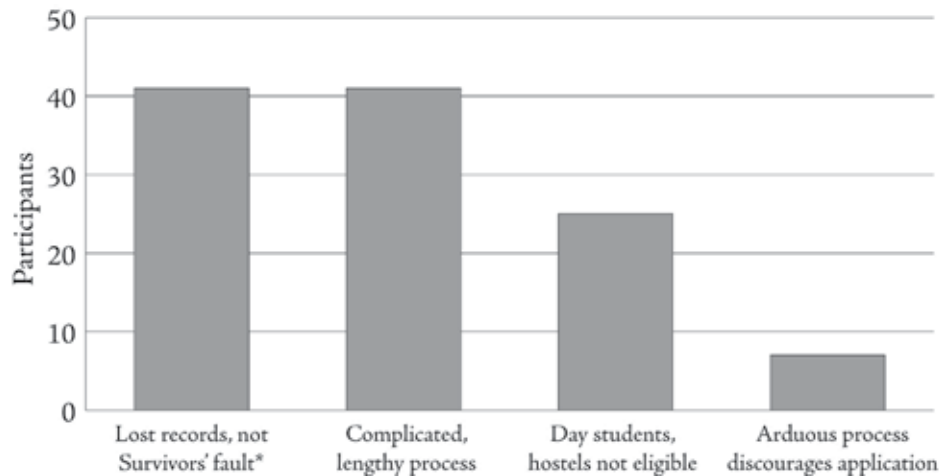
Reconsideration Applications

Although participants were not consistently asked if they received the full amount claimed in their CEP applications,³⁵ ninety-one Survivors explicitly stated that to-date, they had received only a partial amount and nine applicants said they had received no compensation (rejected). Another seven participants had initially received partial compensation but were successful in the reconsideration process and by the date of the interview they had received their full claim. Figure 8 summarizes the reasons given by participants for their dissatisfaction with the reconsideration process.³⁶

³⁵ As noted above, the reconsideration process was still being developed when this study commenced and questions to key informants evolved in accordance with our understanding of reconsideration requests. Questions about the amount of compensation received by Survivors were considered ethically inappropriate and whether or not applicants received the full amount they claimed for was generally asked only if the participant raised the issue. Sixty-three per cent of the study group volunteered information about the status of their CEP payments (SPSS Tables 20 and 21).

³⁶ Atlas Table 2.

Figure 8) Attitudes toward the CEP Reconsideration Request



Well over a third of the study group felt they were not believed in their first application and were faced with the choice of whether or not to retell their story and try to prove their years of attendance through the reconsideration process, all in the hope that the government would validate their experiences. For example, one Survivor faced roadblocks in his attempts to refute IRSRC's claim that he attended as a day student, although he said that at the time there was no day school in his community. A complete loss of his attendance records left him "angry because all this stuff they promised never came through. For all the years they did this and now I have to try and prove their lack of record keeping that I was in school that long." Indeed, fifteen Survivors decided not to apply for reconsideration mainly because they had lost hope that any success would come of the application after having already experienced a long and frustrating CEP process. In the end, however, most of the Survivors who received partial payment decided to fight the process and to submit reconsideration applications.³⁷ As explained by a Survivor in Nova Scotia, the money was "owed" to her:

What money? I already received some, but they owe me. I'm waiting... [Reconsideration is] frustrating. I'm not going to give up. I gave up a lot of things before I did it. That's why I want to see the other Survivors go for it. Don't let them push you around, fight for it, don't let it go by you. Don't sit back and wait and heal, and feel sorry for yourself, no self pity, we don't need that. We need to fight for it. That's what we need to do. They talk about the hurts... I know I'm hurting too, I know I need healing. It might take along time. It all depends on us.

Survivors were mainly critical of the CEP reconsideration process for two interrelated reasons: first, the fact that school records were lost was not their fault; and, second, finding proof of attendance is both complicated and time-consuming (see Figure 8 above). A number of Survivors who stated it was not their fault that school records were missing, added that in this respect the CEP process is unfair and that having to fight for compensation re-victimizes Survivors. Being told school records are lost and that Survivors must find other means of proving attendance was difficult both logistically and emotionally, particularly for individuals who could not access support from AHF-funded projects, Friendship Centres,

³⁷ 79% of those who received partial payment had applied or were planning to apply for reconsideration (SPSS Table 22).

hamlet and band offices, or other resources. A Métis Survivor whose CEP claim was rejected and who was in the reconsideration process for over a year noted that the process was especially frustrating for off-Reserve residents: "If you're on Reserve there's people who take care of you."

For Survivors in communities where AHF-funded projects are located, staff generally offered assistance in the reconsideration process. For example, a First Nations woman from Saskatchewan and another from British Columbia both spoke about the support they received in searching for fellow students to sign petitions attesting to their attendance. For one woman, applying for reconsideration was also a sad experience: "The nuns had taken a group picture of all of us and I spotted myself in there... I was going through the picture, and half of the people were dead. It was so heartbreaking."

More so than CEP, Survivors going through requests for reconsideration said they were made to feel like a liar or they felt they were being pushed around. Lost records tended to create confusion among those Survivors who could not understand why the government was unable to find the correct information. For example, a Survivor who attended no less than four residential schools found it incomprehensible that records for only three of the schools could be found, adding that "they still owe me money." For this same reason, another participant found the reconsideration process very upsetting:

Just when you get that letter, it is really upsetting. They say you didn't go. It is like they are saying you are being denied. You feel like you are being called a liar when they say we can't find any record of you. And then it says, denied... Like I know that I went but I don't know where the information is and I don't know where to look. See, our mom kept all our records but from one of our moves, we had all our stuff stolen and there was a special trunk she kept everything in and it was stolen so we never saw that stuff again - pictures, report cards. So I didn't know where to look... and [IRSRC] told me to write down who you knew, things you remember about the school, the workers, any big incidences you remember. And I did all of that and I still got denied from my early years.

One elderly Survivor was refused compensation for several years of attendance because he began living at the mission school at age three or four and children were not supposed to be admitted at such a young age. His presence was therefore not officially recorded in the school register until he reached age six or seven. These types of experiences speak to the instability of life in some residential schools, where federal policies were not necessarily followed to the letter and are now affecting Survivors' access to compensation (Chartrand, Logan, and Daniels, 2006).

Survivors who received only a partial payment or were rejected completely felt deprived of what was rightfully theirs and were discouraged by the entire compensation process. One Survivor concluded that the government is not serious about compensating Survivors:

I heard they owe a lot of people. What are they doing, putting it in their pockets? The people deserve to have the money for what they went through. Why are they holding back all the hurts they went through, they should deserve to get that money. Maybe they (government) are pocketing it. They should have more consideration about this. It hurts the people. I'm sorry, I don't think they're really serious about this. Money talks.

Several participants who had negative experiences with their initial CEP application were discouraged from applying for reconsideration because they felt that it would be even more arduous, or because it would only perpetuate negative thinking about the past: “I’ve never thought of doing [reconsideration] because it takes forever... I don’t want to think about anything.” This was the case for a Survivor who had recently recovered memories of her year in school when her father died, but was undecided about reapplying for reconsideration for that year because she was “tired of getting whipped.”

The reconsideration request is perceived as a long process involving more waiting than for the initial CEP application. The process is complicated because very detailed information is required, and it is time consuming to contact former class mates or school employees as witnesses or to identify bus drivers, pilots, etc., who may help prove they attended in certain periods. In the words of one Survivor, “We didn’t know as children we would have to remember these things.” An Inuk Survivor in Nunavut said she was asked by IRSRC to first give the current names of her fellow students, and then later to provide their parents’ names: “Even to write the letter twice, I was starting to get anxious.” Ultimately this applicant’s reconsideration was successful and at the time of the interview she had received her full claim.

Despite the challenges, several Survivors remained determined to pursue reconsideration because they felt entitled to that money: “I have lots of evidence. That’s \$15,000! I’m not working, I have grandchildren to take care of.” Fifteen per cent of the study group visited lawyers to gain some assistance either with the CEP and reconsideration processes, or in the course of prior lawsuit and ADR processes. In general, legal involvement was considered expensive and time-consuming. CEP applicants who sought legal assistance said it was not helpful because it cost too much, there was no after-care following a visit to the lawyer, they received conflicting information from that released by Service Canada, IRSRC, or AHF-funded projects, or applicants did not know how or where to retain a lawyer.³⁸ Indeed, the refusal to apply for reconsideration is in part due to the perception that the process may lead to legal action that Survivors are hesitant to pursue.

Finally, nine per cent of CEP-applicants in the study spoke negatively about the number of former students who were denied compensation because they attended schools, hostels, and group homes that are not on the list of recognized institutions.³⁹ Omission of certain schools from this list caused bitter responses to questions about the initial CEP application and reconsideration processes. Those who were refused compensation for attending schools that are not recognized accused the government of holding back. In these cases, it became clear that not all believe the compensation process reflects the common experience of attending residential school. Again, Survivors who were classified by the school system as day students, as were many Métis children, were critical of a compensation process that does not recognize their experience as part of one that is common to all those who attended residential school and will not hear their stories. One Métis Survivor who claimed to have stayed overnight in the mission on school days and could name priests and nuns at the mission school, was dismayed that his CEP application was rejected not so much because of the money, but because he wanted to be heard: “I just want the truth... Why do they do this? Why can’t anybody hear me?” Another Survivor finally gave up trying to apply for reconsideration because the day-school he attended was not recognized: “I didn’t get

³⁸ Atlas Table 4: 43 participants (15% study group) commented on legal services; of these, 25 said it was not helpful; 18 said legal assistance was helpful, especially with CEP form-filling.

³⁹ Atlas Table 2: 25 participants (27% respondents; 9% study group).

my last two years because it was a day school. I didn't agree with that. I even sent them a letter and picture of me when I was there."

Although Survivors could apply for schools to be reconsidered as eligible for the list of recognized schools, waiting for a response was stressful if not hopeless. In fact, since the implementation of the *Settlement Agreement* in September 2007, only three institutions have been added to the original list.⁴⁰ New class action lawsuits by those who are excluded from applying for compensation through the *Settlement Agreement* may widen the types of schools that are eligible, but the outcomes of these cases remain unknown at this time.

Decisions around the eligibility of certain schools were not well understood in communities. Participants questioned why applications submitted by Métis were denied because they attended as day-students, albeit at a recognized residential school, or why hostels in which many Inuit children were boarded are not on the list. Hostels, for example, have been described as "the worst experience for children" not only because they were separated from their families but also because of strategies to integrate them into the public school system (Milloy, 1999:224–225). Aboriginal children were "caught between the past and the future" and "immersed daily in the demoralizing atmosphere of a non-Aboriginal school" where they were unable to compete academically and where they were fearful of the new "White Man's world" into which they had been thrown (*ibid.*). An Inuk Survivor intended to apply for reconsideration for two years she spent billeted in a home, saying "that was the toughest, staying in someone's homes... We were moved without our parents being informed of where we were going." Claiming to have endured the same treatment as residential children, hostel and day-school Survivors felt that their experiences were viewed as unimportant and that they had no chance of compensation within the CEP component of the *Settlement Agreement*. Métis participants, for example, were familiar with the CEP and reconsideration process but few had actually received payment and so were unable to comment on the impact of compensation on their lives or healing journeys. One Métis respondent expressed frustration for being left out of the process:

The only difference is that we got to go home at night... That's what I said on the crisis line, I was so 'p-oed'... She said to me they think they are reconsidering the day students because maybe I wasn't the only one who phoned in. And then I had also phoned some of those other 800 numbers and said, 'How come the day students are getting left out? Why?' Because a lot of them are Métis and a lot of Métis are getting left out, never mind being a day student.

A few participants concluded that the bureaucracy in charge of implementing the *Settlement Agreement* simply does not comprehend the impacts of the CEP, reconsideration, and other compensation processes on individual Survivors and their communities.⁴¹

⁴⁰ Anahim Lake Dormitory, Cote Improved Federal Day School, and St. Paul's Hostel have been added as of 4 June 2009 to the official residential schools list since it was made public (INAC, 2009a).

⁴¹ Atlas Table 4: 3 participants.

The CEP Process as a Trigger

I feel like I never got a chance to forget because you hear so many rumours and you don't know what to believe after awhile. And there are some things that happened that I would like to file for and I don't know where to go or what to do. The process is hard to understand, and of course I feel that I'm educated well enough and I should be able to understand. But it is just too ... it is like running around a track - going around and around. It is just like, they say they want to compensate you and want to help you but they make it so frustrating that a person feels like giving up, you know? And I know there are a lot of others that feel the same. Some of the others that I went to school with and grew up with, they feel the same too because it brings up emotions from the past that you feel like you dealt with them and put them away, but they are still there. And you start talking about things and it brings all those things up.

Over a third of the study group shared that the CEP and reconsideration application process triggered negative reactions (Table 5).⁴² Survivors mostly spoke about the painful emotions or traumatic flashbacks that were triggered while completing the CEP and reconsideration applications. While for some these triggers led Survivors to seek counselling and were later seen as a step along their healing journey, for others the pain was unbearable and led to a relapse of addictive behaviours or thoughts of suicide.

Table 5) CEP Triggered Negative Reactions

CEP was a trigger	Respondents	% of study group (n=281)	
Yes, CEP was a trigger	102	36%	
Did not say if CEP was a trigger or not	179	64%	
<i>Multiple responses about CEP as a trigger:</i>			% of total "yes" respondents (n=102)
<i>CEP triggered negative memories and emotions</i>	91	32%	89%
<i>But, triggers were a step toward healing</i>	10	3.5%	10%
<i>Reconsideration process perpetuated abuse</i>	9	3%	9%
<i>CEP reawakened addictive / suicidal tendencies</i>	7	2.5%	7%

First Nations, Métis, and Inuit Survivors equally shared stories of how the CEP application process was a trigger, regardless of when or length of time they went to residential school.⁴³ An Inuk recipient spoke about how some Survivors in his community were unable to cope with the negative feelings triggered by CEP:

⁴² SPSS Table 23; Atlas Table 3.

⁴³ There is no correlation between CEP as a trigger and Aboriginal identity, number of years at school or era of school attendance (SPSS Tables 25, 26 & 27).

A lot of negative feelings you know... because I knew I went to school with people that were abused and it really messed up their lives. Some of them couldn't deal with the abuse so they drank themselves to death or drugged themselves to death. Some of them committed suicide. Just, some really weird stuff. It sure brought back some feelings. And also, the feeling is not really a good package, but what can you do?

Service providers also identified the trigger effects of the application process as one of the challenges for Survivors. Revisiting harmful memories can result in a need for counselling support and one counsellor spoke to the need of preventing this trauma before Survivors began the CEP application process:

We have people that are coming forward now and want to go through that process so we make sure they have counselling because we know how hard it is if they don't do that kind of work [beforehand]. So we try to make it bearable for them because I know for a lot of them, it is just so unbearable... I'll get calls from people at work and ask if they can see me at 5pm because they can't come and see me any other time and I'll ask them if they want a clinical counselor involved.

The most common explanation for why the CEP process was a trigger was that working through the application brought back negative memories and opened old wounds.⁴⁴ One participant explained that "you have to think about it now. I never used to think about it. It's stuck in my head... I never had to deal with it until the money came." Reactions to these resurfaced memories ranged from discomfort and loneliness to panic, pain, and depression. As noted earlier, several Survivors avoided or postponed completing the application because they were afraid to relive painful memories. For example, a woman who had boarded in a hostel in the 1970s said that "when I was first filling out the application, it was like 'bang!' ... It brought me back, I felt I was back in the hostel... and then I thought that I had better stop for a while." Another Survivor compared the CEP application process to being back in residential school: "It brought up the memories... I had a panic attack. I ended up in the hospital... Just to realize that, yes it was true, it did really happen." For this woman, the fact that the CEP process triggered such strong emotions deterred her from continuing on her healing journey: "I've been talking about it for a while but, it's just that, I can't go any further than where I am right now."

Many of the participants who said that CEP triggered negative emotions became emotional during the interview when recalling their experiences. For some, coping with these emotions was life-altering, as was the case for a Survivor in the Northwest Territories who decided to take a leave of absence from work to pursue treatment:

All the memories came back...It was kind of hard for awhile when I was filling out the forms... It was really, really hard on me because of what the nuns and the priests did to me in [the residential school]... So I have to get time off from work because it really, really bothers me so I have to go to treatment. It's really painful [and] sometimes I go through nightmares.

⁴⁴ Atlas Table 3: 91 participants (89% respondents; 32% study group).

Several Survivors shared that the CEP process triggered an extreme emotional reaction leading to self-destructive addictive behaviour (drugs, alcohol) or to thoughts of and attempts at suicide.⁴⁵ One participant said she never really thought about the people with whom she attended school until the CEP process led her to the discovery that “the majority of them were dead, a lot of them from drugs and alcohol, and the girls from prostitution, living down on the skids.” This woman said she later went into depression as a result of the CEP process. A CEP applicant in the Yukon spoke about the devastating impact of revisiting the past:

Trying to bring back memories, I re-opened up the past. It was too hard. Our ancestors were First Nations and we should be compensated more. Lawyers are taking too much. We were the ones who lived through the trauma and stories and the physical and sexual abuse. There’s no after-care. After seeing the lawyer, there are suicides, prescription drugs, alcohol, self-destruction. You feel like you don’t want to live anymore. You walk around in a daze, emotions just change. Why did I have to re-live this? Especially when the flash-backs come. There should be someone in the community 24/7 when the flashbacks come and all the self-destruction. I don’t blame people dealing with this for their self-destruction. Government doesn’t realize the affect of being taken from your family.

A few Survivors⁴⁶ who received only partial payment or whose application was denied said that the CEP and reconsideration process was itself a type of abuse because it re-awakened feelings of rejection:

CEP money was good out here, but inside, its still there. In fact, it reawakened something - they rejected me for \$9,000. They’re doing it again - that rejection I experienced in school. I made a reconsideration letter with the names of the guys I went to school with, my teacher, my principal and no response. My people that went to school with me will sign an affidavit for me. The money doesn’t help me much internally, whether I receive it or not, I’m so used to rejection. I’m so used to it. It’s the same thing again. That was the way it was, you have to more or less be a monkey and jump through hoops to get what you felt you needed.

Not only was digging into the past to prove attendance a painful experience because it triggered negative memories, but it also required Survivors to prove that those memories were true. One Survivor described it as “psychologically abusing the people who lived in residential school.”

In contrast, a minority of Survivors felt that issues or memories triggered by the CEP process were beneficial because the open wounds led to open dialogue and healing.⁴⁷ For these individuals, triggered emotions have been a step along their healing journey either because they were prompted to learn more about the residential school legacy and its impacts on their families, or because talking about flashbacks with other Survivors led to the realization that they were not alone and did not have to feel ashamed about their residential school experiences. As explained by one Survivor, CEP was worthwhile if it led to a new “chapter” in a person’s life:

⁴⁵ Atlas Table 3: 7 participants (7% respondents; 2.5% study group).

⁴⁶ Atlas Table 3: 9 participants (9% respondents; 3% study group). Note: Crosstabulation analysis does not indicate that receiving either full or partial CEP (or applying for reconsideration) correlates with a trigger effect (SPSS Table 28).

⁴⁷ Atlas Table 3: 10 participants (10% respondents; 3.5% study group).

It is almost like opening a book that you finished, opening up that chapter. And then staying on that chapter for a while, and then after you do get your payment, the book is closed, and that is it. The story is finished. But what really got me was the amount of isolation. You become alone in the whole process. There are people there who want to help you, but something of this magnitude does not go away over night. I do not like to use the word, but it was basically genocide. And going back to the point, how did I feel about it? I felt guilty about it. I felt ashamed, 'What am I doing? Why did I sign this piece of paper?' I think for me, signing it was to acknowledge and to realize that they were finally accepting their fault. But is this little piece of paper going to wash away everything? It does not work like that... I don't believe in [the CEP] but if it is something that will change a chapter I am all for it. But only as long as they are going to do something about the mistakes they have made, to help someone like myself get back on track.

An Inuk Survivor in Nunavut said he tried to turn the negative lessons he learned at residential school into positive advice for his children and other young people about what to expect if they planned to leave the community to pursue an education. In Nova Scotia, a Survivor who was invited to speak about her experiences in a Mi'kmaq studies course at a university stated that "for the first time I was willing to open up about the residential school." Another woman in British Columbia became emotional when she shared that going through the CEP process helped her understand why her own parenting skills were sometimes abusive and violent, and to begin to alter those patterns.

CEP Experiences as Factors in Survivors' Willingness to Participate in IAP or TRC

Participants were asked if they were aware of the Independent Assessment Process (IAP) and the Truth and Reconciliation Commission (TRC), what they thought about each, and if, at the moment, they felt willing to participate in these processes. At the time of the CEP interviews, the IAP had only just begun implementation and the TRC, chaired by Murray Sinclair, had yet to begin its mandate. Hence, many participants were unaware of or under-informed about IAP and TRC and in a number of instances the information provided during the interview was Survivors' first introduction to either or both. Keeping this in mind, it is important to note that the results reported here are not definitive. Many participants had not had time to learn the details about these processes nor to formulate a firm opinion about their willingness to participate. In all probability some Survivors will have changed their opinions about applying for IAP or participating in the TRC as more information became available or as they heard from other Survivors who had attended TRC-related events or received payments. For example, at some research sites the CEP interviews were coordinated in conjunction with IAP workshops and Survivors' had only just decided to go forward with the IAP process:

I'm planning to [apply for IAP] but I haven't yet. I was not going to but I think I can handle it. Once I got my CEP I started remembering other stuff. I want to put closure to that. It would be nice to get something... I lost my hearing at Residential School. I'm going through it, I'm just deciding when. I decided now that I'm going ahead with it.

A quarter of study participants responded said that, yes, they would be or were applying for IAP.⁴⁸ Generally, IAP was seen as a necessary component of the *Settlement Agreement* because of the widespread physical and sexual abuse that occurred at many residential schools and Survivors felt that the government owed them for the abuse they suffered. Similar to attitudes toward the CEP process, many of these affirmative responses were qualified with accompanying criticisms of IAP, including strong objections to the scoring formula (“abuse is abuse”), stories about how the process triggered anger or nightmares, and discomfort about the hearings in which they would have to talk about the abuse amongst strangers. Survivors who had already applied for IAP were critical about the amount of paperwork involved but added that for the most part, the IAP workshops and writers had been helpful.

For ten per cent of the study group, however, CEP experiences were influencing Survivors’ decisions *not* to apply for IAP and another eight per cent were hesitant to apply for IAP.⁴⁹ A main reason is that Survivors did not want to go through another onerous process nor did they want to re-live residential school experiences yet again. Lack of confidence in the counselling support that would be available during the process also deterred some Survivors’ willingness to be subjected to an IAP hearing. A few added that more compensation money would not fix anything. Several participants said they heard that the IAP process was longer and more frustrating than CEP and that they would have to deal with lawyers, a particularly objectionable prospect for some. Participants who were undecided about applying for IAP also voiced their mistrust of the involvement by lawyers – an attitude often associated with previous experiences in lawsuits or the alternative dispute resolution (ADR) process.

Negative experiences in the CEP process also affected some Survivors’ views about the Truth and Reconciliation Commission (TRC). Almost ten per cent of the study group said they would refuse to participate or were unsure if they would participate in TRC hearings.⁵⁰ This was despite the fact that some of these respondents supported the notion of the Commission. That is, the main reasons against participation were personal: Survivors believed it would be emotionally too hard, too negative, or too public. Others said they were tired of talking about their residential school experience and that dealing with residential school issues through the CEP process was enough. Some Survivors stated it was now time to move beyond residential school issues. Others said they were not interested in the TRC because, like the CEP, the Commission was “too little, too late” and it was now time to replace talk with action, as expressed by an Inuk Survivor in Nunavut:

It was a long time ago now, I don’t know. If they want to share, let them share, but for myself I would say, it’s not really worth it. It’s not worth it for me to go. It’s too late. Everything is too late. I’m not going to pick up from there. I’m just going to go my own way – with Elders instead. It will not be beneficial for me and it will most probably make me angry, because they’re way too late in trying to discuss this. They made such a big mess, so why bother even talking about it. I would like to see them hire Inuk ladies, teach us how to make *kamiks* and more things like that. But why talk about it? I think it’s worthless.

⁴⁸ Atlas Table 16: 71 participants (45% respondents; 25% study group) said they would apply for IAP.

⁴⁹ Atlas Table 16: 27 participants (17% respondents; 10% study group) said, no, they would not apply for IAP; 22 participants (14% respondents; 8% study group) were hesitant to apply for IAP.

⁵⁰ Atlas Table 17.

Participants who said they intended to participate or had participated in TRC-related events generally expressed their support for the Commission in terms of healing. The TRC was considered a good idea because learning to be open about residential school experiences and listening to other Survivors' stories was a critical step along the healing journey. Some Survivors said that the TRC is necessary if for no other reason than to "strive for reconciliation," particularly in terms of Aboriginal relations with the rest of Canada. As with IAP, most respondents who expressed support for the TRC in principle did so with some degree of reservation or criticism.⁵¹ Support was qualified by the hope that the Commission would benefit Aboriginal youth and future generations by getting the true story of residential school system into the public domain. Support was further qualified by statements that the TRC will only be good if it leads to positive outcomes for Aboriginal communities in terms of health, education, housing, and other quality of life matters.

⁵¹ Atlas Table 17: 52 participants (48% respondents; 18.5% study group) said, yes, they were willing to participate in TRC hearings; another 18 participants (16.5% respondents; 6% study group) gave qualified support to the TRC.

Chapter 5

Impacts of Common Experience Payments

Receiving money in itself is a good thing. But those things that I had forgotten have come back. Things that I had tried to forget. When the memories came back, it was not easy.

Once CEP cheques began arriving in mailboxes and monies were direct-deposited into bank accounts, Survivors said they noticed immediate changes at both an individual and a community level. For some the CEP cheque was a relief from financial stress but for others the receipt of such a large lump sum was intimidating because they did not know how to manage it.⁵² Although many study participants welcomed the CEP money as a source of individual or family wealth, others saw it as a time of general ill-health in their community.

Almost all study participants shared personal stories about the direct impacts of the CEP compensation. Table 6 below shows the frequency of responses to the interview question: “For you, personally, was receiving CEP a positive or negative experience?” The aim of this question was not to elicit what Survivors did with their CEP money, but rather to discover if and how the payment affected their lives in the immediate aftermath of receipt of CEP. It is important to clarify that these results refer to attitudes, reactions, and impacts of the CEP *money* on Survivors’ personal lives, and do not reflect opinions about the overall CEP application *process* (as discussed in Chapter 4). Nor do these results reflect the relationship between compensation and Survivors’ healing journeys (to be discussed in Chapter 7). The purpose of this analysis is to investigate Survivors’ views toward and experiences with *cash* compensation and to examine the various impacts that this lump sum payment had on their lives.⁵³

Table 6) Personal Experiences Receiving CEP

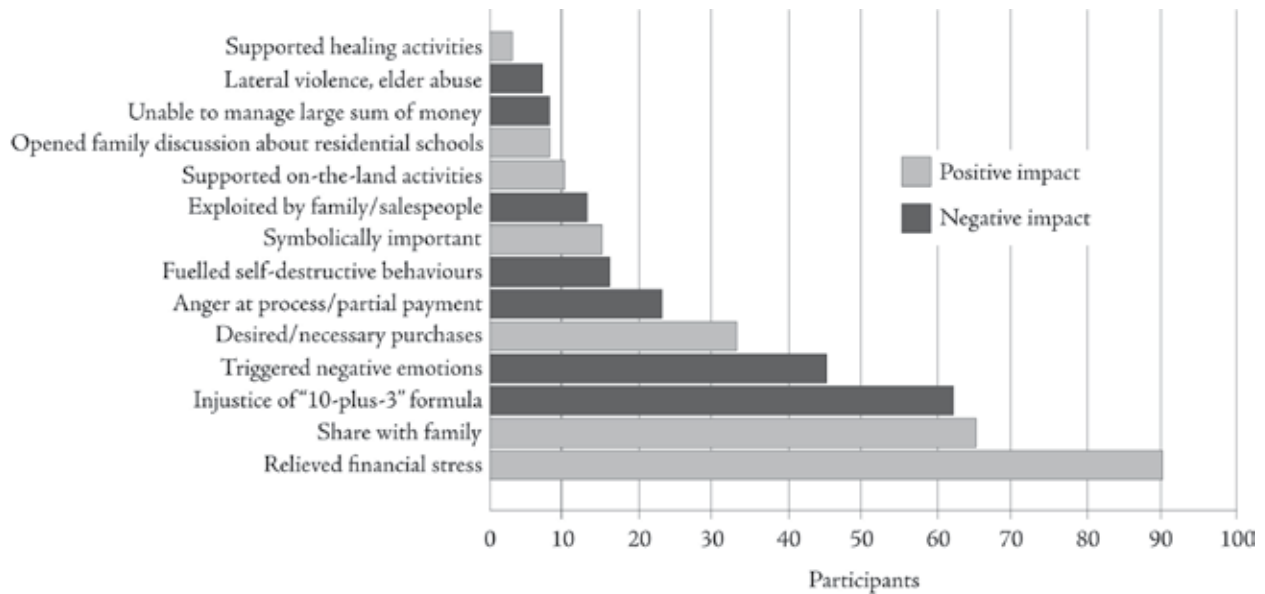
Experiences re: CEP compensation	Total	% of study
Overall positive experience	77	27%
Overall negative experience	38	14%
Both positive and negative experience	130	46%
Neither positive nor negative experience	12	4%
Subtotal	257	91%
<i>Missing (NR / NA)</i>	24	9%
Total	281	100%

⁵² Atlas Table 11: 8 participants (6% respondents; 3% study group) expressed these fears. See also Atlas Table 4: only five (5) participants commented on financial services; two (2) said services such as RCMP workshops were helpful; three (3) said these were not helpful or they did not need/want financial supports.

⁵³ SPSS Table 29: Frequency results were generated by transposing qualitative statements in each interview (as coded in Atlas.ti) into discrete values (positive, negative, both, neither) and entering these values into SPSS.

Impacts of CEP compensation are defined as positive if study participants referred to them as such, or if they described the receipt of CEP money as good, helpful, a financial relief, an opportunity to pursue healing activities, or an acknowledgement by the government for past wrong-doing. Impacts of CEP compensation are defined as negative if study participants referred to them as such, or if they described the receipt of CEP money as bad, an insult, socially destructive, emotionally difficult, or associated with shame or guilt. The nature of positive and negative impacts of CEP compensation identified by study participants is illustrated in Figure 9.⁵⁴

Figure 9) Descriptions of Positive and Negative Impacts of Payment



Although statistics indicate that more participants identified positive impacts from compensation than negative, analysis of this result requires caution since it over-simplifies the complexity of responses to this question.⁵⁵ This *frequency* should not be confused with *magnitude* of impacts: the negative impacts described by participants were profoundly destructive for many Survivors and their families, and in some communities greatly outweighed any positive, material benefits of the common experience payments. Indeed, several communities visited during the course of this study were dealing with serious repercussions since the arrival of the common experience payments. Survivors in these communities directly related the receipt of CEP to an alarming rise in accidental deaths, suicides, and homicides and a project counsellor characterized CEP as a time of "general demoralization" in her community. A recent survey of AHF-funded projects revealed that more than a third of participating communities experienced a period of crisis after receipt of the payments (Reimer and Fryer, 2009:13). These critical issues were largely related to two factors following receipt of compensation: increased substance abuse and pressure and abuse from the Survivor's intimate circle. Some Survivors were reminded by the CEP of past trauma that led to dysfunctional behaviours:

⁵⁴ Atlas Tables 10 & 11.

⁵⁵ Atlas Tables 10 & 11. 168 participants (60% response rate) identified positive impacts; 131 participants (47% response rate) identified negative impacts.

What [CEP] really did was it brought back the old traumas from the past and a lot of people just drank their money away. One of my younger friends got into a crack house and just cracked all his money away. It is surprising that he is still alive.

Grieving communities were intensely aware of the negative impacts of the CEP and many recipients, regardless of the personal impact of CEP on their lives, mentioned the impact the residential schools and *Settlement Agreement* was having on their community. Participants who volunteered these stories spoke mainly about increased addictive behaviours and a contagion of suicides and alcohol-induced deaths.⁵⁶ For example, a Survivor in the Yukon was grieving because he lost three people due to the CEP. In the Northwest Territories another Survivor lamented the deaths after CEP arrived, concluding that much more should have been done to prepare individuals and communities for the influx of the CEP money. One CEP recipient suggested that “compensation is a shock to us. By the time the money comes, the self-destruction sets in.” This was the situation described by a Survivor in British Columbia:

I want to mention about the negative experiences. I have lost about half a dozen cousins since we have gotten [CEP]. In my home community we are having funerals all the time. I have one cousin now who has wet brain and is in the hospital and he doesn't remember us. He drank and drank and drank and drank when the money came in. His younger brother died shortly after that money came in. He was young - he was 34 or 35 and he just drank and drank and drank. You know there is a lot more than just the half a dozen in my family and a lot of the people dying are younger than me. I'm 52 and many of them are my cohorts and were my cohorts in residential school and some of them are younger. There are Elders as well who passed away as a result. It is a common refrain in our territory. In our area there are three bands that speak the same language but culturally we are different. In the three bands, we were just having funerals and funerals and funerals. It is like the support people at the funerals just can't keep up. It has really done a lot of damage and destruction to our villages... Everyone keeps dying.

Service providers interviewed for this study corroborated such stories about communities that experienced crises immediately following the receipt of CEP, including an increase in accidental and suicidal deaths. One project staff member discussed the challenges faced when dealing with these critical issues while at the same time providing support to people in mourning due to deaths in the community:

A lot of it has been from the money they have got and for some of them, they are all mad now because the money is gone so I can't tell you for sure what it is but there have been so many deaths. And some of the deaths have been so horrific our people have just been feeling like, “where did that come from?” You know, there was a murder here and that just sent our community for a loop because you think a little place like [town name], it has just been ongoing so not only do we do a lot of the work that we do, we help people go through their grieving and it has just been really, really tough. If anybody told me my job would be like this, I probably would have said I'll give this a second thought but for me, my people are more important than that and that is why I am here doing what I'm doing.

⁵⁶ Atlas Table 12: 23 participants (8% of study group) responded that CEP money fuelled addictions; 10 participants (4%) said CEP contributed to deaths in their community.

Other projects described a community-wide sense of fatigue with grief, remarking, for example, that “on the Reserve, it just seemed like the deaths would never stop... and it still hasn’t stopped... [We] faced a lot of deaths from people getting this huge wad of cash.”

Mixed Responses: CEP was both Positive and Negative

As has been documented in other studies of compensation—Japanese internees, for example—there are limits to which monetary redress can have a positive impact: “redress cannot be expected to erase the negative feelings and memories” associated with traumatic experiences (Nagata and Takeshita, 2002:52–53). This helps to explain the high rate of residential school Survivors who described CEP as both positive and negative.

Almost half of the participants stated that receiving the lump sum payment was both positive and negative, demonstrating mixed or conflicted reactions. These mixed feelings illustrate the extent to which CEP compensation was part of a total experience whereby receiving the money influenced one or all elements of a Survivor’s physical, emotional, mental, or spiritual life. Many respondents clearly explained that while they felt money helped them in some way, they also knew it came with a cost. Viewed as a total experience, CEP allowed some to feel positively about the compensation on an individual level, but they could not ignore the collective impact that the money had in their communities:

Well, at first it was negative because of what I felt and I was angry and hurt. But then after that, when I got over that a little bit, I started thinking that my first priority is what should I do with it. The first thing was to get a house and then get a van and the rest - to save some for my kids. I really had to think. I wanted to spend, spend, spend but you know, I told myself, no, do the important things first and then use the money for others. Because I saw some people who blew it and it was terrible. They got so much money and they are still on the streets. Babies taken. It was bad for some, really. But I guess I did not too bad.

Participants expressed this dualism in various ways, from “like anything else, there were both negative and positive effects” to feeling “contented, but for what we went through you cannot really be happy.” An Inuk woman said she felt torn in two by conflicting emotions of being grateful for the money but infuriated by her memories of residential school. Although some participants said it was more positive than negative, others said the horror stories outweighed the positive stories. A thread that runs throughout these types of responses is that the money’s financial, material, and symbolic benefits were largely overshadowed by the emotional toll of the process and the fact that it would never bring back what was lost. The corollary is that the wounds opened up by the CEP process signalled attention to matters of healing among residential school Survivors and their communities and for some it was a step along their healing journeys.

Fundamentally, the mixed responses stemmed from two opposing but not mutually exclusive characterizations of the CEP: it was *good* because it relieved financial stress by paying off debts, afforded Survivors’ with opportunities to share with family or to make necessary and desired purchases, but it was also *bad* because these benefits did not outweigh the emotional turmoil and the sense of injustice regarding the ‘10 plus 3’ compensation formula for past losses. Some recipients described being internally

conflicted about accepting CEP in exchange for the profound loss of language and culture due to the residential school system.

The benefits of CEP also did not alleviate the pain of triggered emotions and memories of trauma from their residential school years. Indeed, for a substantial number of Survivors, the actual receipt of their payment was an emotionally difficult experience. Survivors explained that CEP “relieved some stress but at the same time, it stirred some memories from school,” or that “the positive was that I gave my money to my siblings and my mother, took out my friends, treated myself. The negative part was that it just kind of triggered something.” An Inuk Survivor expressed her mixed feelings about the money:

Receiving money in itself is a good thing. But those things that I had forgotten have come back. Things that I had tried to forget. When the memories came back, it was not easy. If I had grown up with my mother I wouldn't have struggled as much. They took away their kids. They loved their kids. When you were taken away from them, when you returned, it was different. All those memories came back when I received the money.

The satisfaction derived from the CEP money tended to be short-lived, as illustrated in the relatively high rate of positive impacts among participants who received their compensation within six months of the interview. A much lower positive response rate among those who received CEP from seven months to two years prior to the interview suggests that favourable perceptions of CEP fade as time passes and money is spent.⁵⁷ This is partly because many recipients quickly distributed the money among immediate and extended family members so, as in the words of an Inuk recipient, “the money was gone quickly because there are a lot of us.” Added to this was the attitude among quite a few participants that they must get rid of the money as soon as possible because it reminded them of their residential school experiences. One Survivor from Quebec said the CEP cheque “was like a hot potato - I was not at ease keeping the money.”

Several Survivors were somewhat ambivalent about their payments saying it was merely “OK,” or “mediocre,” or responses that CEP was both good and bad, “I guess.” To some degree this ambivalence may reflect the fact that this was the first time many Survivors had been directly asked what they thought about CEP. Receiving lump sum compensation was a new experience for most participants and a few Survivors found the actual receipt of the cash somewhat frightening: when asked how she felt when the CEP cheque arrived, an Inuk woman living in an isolated hamlet in Nunavut replied: “Scared. I never had something that big in my life.” One project staff member discussed how one's experience with CEP depends on personal circumstances: “It depends on where the Survivor is at. If a Survivor has already tried to commit suicide, most likely it was a negative [reaction] to CEP because they are drinking it off and basically d[ying] of alcoholism.”

⁵⁷ SPSS Table 30: 50% of participants who received CEP 0-6 months prior to the interview reported positive impacts, compared to 21-27% of those who received CEP 7-24 months prior to the interview. These results are statistically significant (95% level of confidence).

Positive Impacts

Many respondents considered the receipt of CEP and the acknowledgement of their experiences through the *Settlement Agreement* quite positively. The influx of money gave some people the opportunity to do things they could not have done without financial help and they recounted remarkable experiences associated with the CEP payment. Payment often came at a time or at a stage of a recipient's life or in his or her healing process that allowed them to derive benefit from the lump sum. For others it provided some closure, a way to access healing services, a way to take care of their family or simply to improve their current situation by paying down debts or making new purchases.

Just over a quarter of the study group said that, personally, receiving the CEP money was a positive experience overall.⁵⁸ That is, these Survivors did not share any negative personal impacts as a result of getting CEP. This was particularly the case for Survivors living in isolated communities often characterized by mixed subsistence and wage economies and relatively high unemployment rates, possibly a factor in their exclusively beneficial view of CEP.⁵⁹

Sixty per cent of the study group identified various types of positive impacts that CEP had on their personal lives.⁶⁰ The most commonly identified benefit was pragmatic: the money relieved financial stress and worry. Survivors said it felt good to pay off debts which in turn was good for self-esteem, or the money helped improve everyday life. For a homeless Survivor the CEP came at a particularly opportune time for him maintain a residence during a tough period in his life. Another recipient said the CEP got him through a period of unemployment until he could enter a re-training program. CEP also allowed Survivors to consider expenses they previously could not afford: vehicles, furniture, house renovations, and travel to visit friends and family, for example. Some participants felt that because they were entitled to this compensation, they allowed themselves to simply enjoy it:

I just went totally crackers! But I enjoyed it. I thought, well thank you, thank you for the thought of us. At least they are trying, the government is trying, and that is what I am looking at. I try not to look at the negative part because I know I've been really hurt by the government and the church, so part of me needs to heal that. So I thought, this is on the government and this is on the church, so I'm just going to enjoy myself. No sense sitting on misery, right? So I just enjoyed life and lived it to the fullest.

As one Survivor noted, though, these benefits were for the most part temporary: "Money does not last forever, but it helped for the time being - it is just like anything, life still goes on." Together, the material

⁵⁸ SPSS Table 29: 77 participants (27% study group) reported only positive impacts (i.e., they did not report any negative impacts).

⁵⁹ SPSS Table 31: Zero participants living in isolated communities reported *only* negative impacts of CEP. Atlas Tables 10 & 11: Almost all (n=16, or 89% isolated) participants from isolated communities identified positive impacts, compared with less than half (n=8, or 44% isolated) who identified negative impacts.

⁶⁰ Atlas Table 10: 168 participants (60% response rate) described one or more positive impacts. Note that many also described one or more negative impacts (i.e., both positive and negative; see SPSS Table 29).

benefits of CEP account for the majority of positive comments about receipt of compensation.⁶¹ A couple living on a rural Reserve concluded that the CEP “brought us ahead instead of backwards,” and another said it helped him “get back on my tracks.”

The second most frequent benefit of CEP was the opportunity it allowed for Survivors to share with family and friends.⁶² Some recipients said they spent every dollar on their family. While this was also viewed in pragmatic terms, Survivors often expressed this opportunity as symbolically important: many stories centred on the importance of sharing, especially with their children and grandchildren. The money helped some families to reconnect by covering travel expenses for a gathering, sometimes the first one in many years. In British Columbia, a First Nations woman said her main goal was to gather all of her children together: “I hadn’t seen them, and it was just so great to have them all together... I was just happy I spent it in a good way.” In rural Saskatchewan a participant said it was positive for her to help people that needed it and she gave away her CEP unconditionally. One recipient emphasized that using CEP money in this way accorded with cultural ideals of sharing: “I helped my daughter out because she has a family... I told them not to worry about it, it is just money... I’ll say it again - that is the Indian way.” A few participants suggested that sharing the money with their children was one way of making up for poor parenting skills and intergenerational harm, both legacies of the residential school system (cf. Miller, 1996:338-340; Milloy, 1999:298). In particular, Survivors who were mothers had very mixed feelings about the money and some responses about the redeeming qualities of CEP were demonstrably borne out of pain and guilt. Although they were glad to use CEP as forgiveness gifts to their children, this positive impact was expressed within a negative context. For example, a mother in Saskatchewan said she “spent it all on my children because they were the ones who suffered from me going to residential school.” Another mother in Alberta also distributed a significant portion of her CEP to her children as compensation for her lack of parenting skills:

When I received the payment I wanted to get rid of it as soon as I could. I just spent it. I bought furniture for myself and gave my kids money. My thinking was, I’m going to give my kids each \$4,000 because of the way I raised them. I was trying to pay them for the abuse I did to them because I didn’t know how to be a parent. That was my way of paying them.

Survivors also shared stories about how receiving the CEP money led to conversations and discussions among family members about residential school experiences.⁶³ Participants confided that the CEP process was a catalyst to open up about the past, to connect with children and grandchildren, to remove emotional barriers and “allow myself to feel.” For one Survivor, “there was a willingness to move on from the past along with that Common Experience money.” A Survivor in Saskatchewan said the CEP presented an opportunity to explain what he went through and how residential school continued to affect his life:

⁶¹ Atlas Table 10: 90 participants (59% respondents; 32% study group) said CEP relieved financial stress; 33 participants (20% respondents; 12% study group) said CEP allowed necessary or desired purchases.

⁶² Atlas Table 10: 65 participants (39% respondents; 23% study group) identified sharing with family and friends as a positive impact of the CEP.

⁶³ Atlas Table 10: 8 participants (3% study group) said receipt of CEP led to increased family openness.

My kids understand a little of what we went through... The impact of being in that place [residential school], they didn't realize it. They put you in a strange place, they didn't see that... My kids were helped in a lot of ways. In a lot of ways they understood where the money was coming from. Everyone thinks it's just money, all the pain you went through, that the CEP is just about money. It's not.

Some Survivors commented that the CEP money was symbolically important as a tangible recognition by Canada of the Aboriginal experience. They viewed CEP as an admission by the government of the fundamental wrong-doing in forcibly removing Inuit, Métis, and First Nations children from their families and enforcing an assimilation policy through schooling. For this reason, one Survivor asserted that compensation was better than healing or other programs because it was a concrete step toward reconciliation. Indeed, another participant said that CEP validated her experiences. In this respect, CEP was seen as a symbol of hope in the fight for acknowledgment and respect for the history and present condition of Aboriginal populations in Canada. For a few Survivors, CEP helped to pay back a tiny portion of what was lost. Similarly, the apology by the federal government on 11 June 2008 was viewed by about a quarter of the study group as an important step toward healing at a much broader social level, as expressed by a Survivor in Manitoba:⁶⁴

It was positive, in a way. In another way, negative. Want me to explain that? It was positive: we went to the apology, it sounded good, it was a start. We might start up a working relationship with the white people. It was bad because the common experience payments - they could start a treatment centre. That might be enough for a centre. We need money after that. It was negative in that area, because it wasn't enough.

A few participants volunteered information about using the money to access health and wellness services and to attend activities such as Survivor gatherings, traditional ceremonies, drumming groups, or other counselling and therapy. For example, a Survivor from Nova Scotia said she travelled to gatherings and sweat lodge ceremonies more often than before: "I have to try to maintain my spirituality, to heal it all, not just the parts that hurt the most." One recipient suggested that "it should have been stipulated that in order to be eligible for the Common Experience Payment that they had to go to some type of counselling - that they make it mandatory."

Finally, several Survivors living in isolated and semi-isolated communities said CEP was positive because the money allowed greater access to being out on the land, a cultural and economic activity they described as spiritually healing as well.⁶⁵ Inuit participants in particular characterized this as a wise use of their money. One Inuit couple invested their CEP to build a new cabin where they could live most of the year and where children, grandchildren, and friends could reside during the spring and summer. Another highlighted the unusually high sale of snowmobiles at the local Co-op to demonstrate how

⁶⁴ SPSS Table 32: 73 participants (26% study group) believed the federal apology was sincere and a necessary step to healing the Aboriginal-Euro-Canadian relationship in Canada. However, 35% (98 participants) disagreed, stating they felt the apology was insincere and "too little, too late." Overall, there is no significant correlation between opinions of the apology and personal impacts of CEP, although a higher percentage of those who experienced negative impacts also had negative opinions about the apology (SPSS Table 33).

⁶⁵ Atlas Table 10: 10 participants said CEP supported "on the land" activities and 3 said CEP money helped them to access healing services and supports.

Inuit recipients used their money wisely. For some the positive impact went beyond the purchase of equipment and was seen also as an opportunity to transmit traditional values associated with hunting and fishing, a sentiment expressed by a Survivor in the Northwest Territories:

I never had a boat before, and so I always relied on my dad because I always used his skier to go hunting. And they liked that because I went out successfully a couple of times and I brought back whatever I harvested to them. But this time I did not have to rely on them. And in a sense, purchasing a boat helped me strengthen my culture and helped me connect with that. And right now, my son is really interested in coming out with me which is a positive thing.

Negative Impacts

Close to fifteen per cent of study participants said that receiving the CEP money was an altogether negative experience and that for them, personally, there were no positive impacts.⁶⁶ Among these Survivors, the bitterness that has resulted from centuries of colonization of Aboriginal people,⁶⁷ including the legacy of residential schools, coloured their view of the *Settlement Agreement* and anything associated with it:

For everybody, it was very stressful. We are thinking, 'this is bull---'. The government *and* AFN is involved in this as well. They thought they could just give us a couple of bucks, pat us on the back and say and move on... I spent 10 years in that prison, where there was rape of little kids. "I'm sorry" - those were the *words* from Harper. Raping a little boy, that is very painful. Raping a little girl, that is very painful. That stays with a person forever. Money is not going to work. That is why they should have consulted with the Survivors... They should have consulted everyone, not just the people that are working in offices. So this pissed off a lot of people. Take for instance [Maher Arar]... 'Canada sent me to my home land and I've been tortured there for 10 months and I want 10.5 million bucks.' Right away Canada signed and gave it to him... and paid his lawyer. And what do I get? What do we get? The 10-3 formula! And we have to pay our lawyers! ...The government said before the CEP began that they were going to be fair and honest and just. What does that mean? ...Fontaine and his group, they were bragging saying they worked their ass off for us. They said that the 10-3 formula was really good for us. Well bull--- to them. What should be in the compensation package is the government to sign the declaration of human rights for Indigenous people. Next, let's have better housing on reserves... It's sad, it's sickening. We need better drinking water... and better education and health care for our people... After taking my land, my language, my culture, our way of being parents. They took all that away - our dignity. They gave us shame and hurt. Speaking of this, it hurts me... It affects my children and my grandchildren. That is why I say this 10-3 is bull---...Canada will have to say, 'I'm sorry, this is what we will do. We will work with you.' They should not just give us some money, a pat on the back, and tell us to move on.

⁶⁶ SPSS Table 29.

⁶⁷ Wesley-Esquimaux and Smolewski (2004:5, 65) refer to this as "historic trauma," generationally transmitted stress and grief that has resulted from repeated relocations from traditional lands and long-term policies of assimilation including the forced removal of children to residential schools.

As illustrated in the quote above, many Survivors viewed the '10 plus 3' formula as unjust compensation for what they lost as a result of the residential school system.⁶⁸ Participants expressed how CEP stirred resentments: "They're paying us off... I want my life back, all my childhood... I want to be me now. I want to be like the woman I've never been." Another said, "The Creator gave us one life. Half of our lives were stolen and we were not to live our own life. And I have deep resentments because of that. I think '10-3' was just a drop in the bucket - it was an insult." Survivors also criticized the compensation formula as peanuts, a slap in the face, or unfair compared to other compensation packages they knew about such as that offered to Japanese internees, to former residents of Mount Cashel orphanage, or to Maher Arar.⁶⁹ The CEP eligibility scheme also angered Survivors whose parents and other family members died before the cut-off date of May 30, 2005. Generally these Survivors concluded that no amount of money can compensate for the residential school experience and some added that the money could have been better used for healing or other programs in communities. In some communities, the money came at a point when levels of frustration with the government only created resentment toward the CEP:

So many years of suffering, 10-3 doesn't sound like a lot. I don't know what the government is doing. They make promises and they break them. A lot of people signed with the 10-3, but I wanted to opt out. But people need the money. \$20,000 is not very much for everything. But it's a lot of money for a lot of people right across Canada. A lot of people at the poverty level. If you starve a dog for a long time, if he finally gets a meal, of course he'll take it. You can't say no. It brought a lot of negativity. A lot of strife between family members that had never been there before.

Some Survivors depicted the CEP money as shut-up money or as a pay-off to buy their silence, a reaction that has been documented in other studies of monetary redress for past wrong-doing (Nagata and Takeshita, 2002:52).⁷⁰ A Survivor from Saskatchewan was left with the feeling, "you've got your money now be quiet." Others used terms like blood money in reference to the deaths that occurred in residential schools. When a Survivor in the Yukon heard Elders speak about the deaths involved and the subsequent

⁶⁸ Atlas Table 11: 62 participants (47% respondents; 22% study group) said they were dissatisfied when they received the CEP because it was "not enough."

⁶⁹ Between 1898 and 1990, the Christian Brothers of Ireland in Canada operated the Mount Cashel Orphanage, a facility for boys in St. John's, Newfoundland. In the late 1980s, allegations of sexual abuse began to surface. An investigation by a royal commission found that there was evidence of abuse, and eventually nine Christian brothers were convicted and sentenced. The institution was subsequently closed in 1990, and the Government of Newfoundland has since paid compensation to the victims. For more information, see: Royal Commission of Inquiry into the Response of the Newfoundland Criminal Justice System to Complaints (1991). *Volume One: Report*. St. John's, NL: Office of the Queen's Printer; Harris, Michael (1990). *Unholy Orders: Tragedy at Mount Cashel*. Markham, ON: Penguin Books; and Berry, Jason and Andrew M. Greely (2000). *Lead Us Not Into Temptation: Catholic Priests and the Sexual Abuse of Children*. Champaign, IL: University of Illinois Press. For information on the Maher Arar case, see: Prime Minister releases letter of apology to Maher Arar and his family and announces completion of mediation process (2007). Retrieved 25 February 2010 from: <http://www.pm.gc.ca/eng/media.asp?id=1509>; Commission of Inquiry into the Actions of Canadian Officials in Relation to Maher Arar. Retrieved 25 February 2010 from: http://epe.lac-bac.gc.ca/100/206/301/pco-bcp/commissions/maher_arar/07-09-13/www.ararcommission.ca/default.htm; Maher Arar v. The Syrian Arab Republic and The Hashemite Kingdom Of Jordan, Statement of Claim [2005] ON S.C. Docket: 03-CV-259270CM2. Retrieved 25 February 2010 from: http://www.maherarar.ca/cms/images/uploads/ararclaim_syria_final_Nov21.pdf

⁷⁰ Japanese internees in the USA described their compensation as "hush money." See also Atlas Table 9: 30 participants (11% study group) used terms like "pay-off" or "shut-up money" to describe their feelings about CEP.

cover up, she felt conflicted about having accepted CEP: "Maybe if I knew more of the history, I wouldn't have taken it." The implication of such a delayed reaction is that what some Survivors initially viewed as a happy circumstance of increased wealth, later reflection on the legacy of residential school system altered those perceptions.

A second commonly identified negative impact was that receipt of the CEP money triggered negative memories and emotions, causing stress or feelings of guilt and shame.⁷¹ For one woman, "the CEP payment brought a lot of pain, and also opened up the wounds for my children and I had to re-apologize. I told my husband to put it away... I do not want to look at it." A number of recipients said that their way of coping with the trigger effect was to avoid the cheque. An elderly Survivor in British Columbia did not open his CEP envelope for three months because he hated his time at school. Another man from the same community did not want to touch his cheque because it reminded him what happened at the school. A woman from Quebec said she "felt like a prostitute, like I sold my body" and another from the Yukon, who thought she would feel happy when the cheque arrived, felt ashamed instead and "all I did was cry when I got it." In an Alberta community, the simultaneous arrival of numerous common experience payments exacerbated an overall negative environment:

The only thing that really changed is that everybody talks about Residential Schools now. And how are you going to forget about it? You already forgot about that years ago, and now everybody talks about it. Every place you go, people talk about it. And it brings memories.

Other negative impacts included feelings of anger and dashed hopes among Survivors who received only partial payment. Receipt of only a portion of their CEP money renewed frustration with what was perceived as a flawed system of compensation and generally added to feelings of victimization already being dealt with by many Survivors.⁷²

For several Survivors, receiving the money resulted in depression, thoughts of suicide, or self-destructive behaviours such as using CEP money to escape through alcohol or drugs.⁷³ Several participants acknowledged that their compensation served only to fuel their addictions, saying that the money was "straight-up negative! I just stayed drunk and it was all gone," or that the only impact of CEP was more "alcoholism - nothing positive, nothing. I am who I am because of the residential school." A Survivor in British Columbia said the CEP left her emotionally, mentally, physically, and spiritually weary and confided that she eventually attempted suicide because "it just brought up too much."

Several participants said attempts were made by other community members and by outside salespeople to exploit them after their payments arrived. A single-parent claimed that she was denied work when her local employer learned the amount of her compensation. In communities where poverty is a shared experience, divisiveness at the arrival of large sums of money for some individuals was not surprising.

⁷¹ Atlas Table 11: 45 participants (34% respondents; 16% study group) said they were triggered when CEP arrived.

⁷² Atlas Table 11: 23 participants (18% respondents; 8% study group) said receipt of CEP renewed their anger at the process and/or at the fact they received only partial payment.

⁷³ Atlas Table 11: 16 participants (12% respondents; 6% study group) said some or all of their CEP money was used to "escape" through addictive / "self-destructive" behaviours.

One Survivor wished he had not received CEP because he was constantly harassed whenever he went into town. For this reason, some said they stayed home or that they were afraid to see anyone after they received their CEP. Of particular concern to Survivors were instances of backlash from family members who insisted on a share of the payment, often resulting in rifts. The daughter of an elderly recipient was frustrated that an aunt repeatedly took advantage of her father, asking for gifts of money. Another Survivor said that receipt of the CEP resulted in divisions within her family because everyone wanted a share of the money:

When I got my compensation it really had a negative effect on my family too. Even though I was able to buy things for myself. I got myself out of poverty. I felt like it just really created more disunity and jealousy and bad feelings in my family and the people in the community. But the way I see it is, it's my money and I suffered for it.

Elder abuse, lateral violence, or demonstrations of greed among Survivors and community members were also mentioned as destructive impacts of CEP.⁷⁴ A Survivor in rural British Columbia said that the aftermath of CEP was like a before and after picture because all people talked about was residential school and money: "The money is there, you feel it, you smell it, it impacts your outlook on life, it changes your attitude - after that money came it was a different story and people are lying if they saying it didn't affect them." In an isolated Nunavut hamlet, a recipient said that after her CEP arrived, other Survivors stopped talking to her: "A large number of them did not receive it and it was like they were mad or jealous of me for getting that cheque." In Saskatchewan, a Survivor pointed to what she considered the most negative impact of the CEP: "Elders are being abused and some people were taking advantage of the Elders and taking their money." This problem was also observed by Survivors in other communities:

Well looking at my friends, when they got theirs, they just drank theirs up. Some of them committed suicide, and some got beat up. It is so sad... They got their money and then you hear about people taking advantage of them. They take their bank card, and then they are missing money out of their account. It is so sad, because it was their own family taking advantage of them... My uncle, he got his money, and now he is out on the street again. It is so sad... Especially for the Elders, their own kids robbed them. It was because of the drugs.

Pressure and abuse from a Survivor's intimate circle were reported by half of the service providers interviewed. Although the degree and nature of this pressure and manipulation varied, serious incidents of familial abuse over money were related by a project staff:

One example was that a brother was beaten by another brother for money and just about beat him to death. He didn't want to fill in his CEP application because he said he will come back and beat me for my money. And I said to his sister, who takes care of him because he is a paranoid schizophrenic, you tell him that we will protect him and he doesn't have to let anyone know where his accounts are, and that his sister should take care of the money. But he is still very mentally unstable about this whole thing.

⁷⁴ Atlas Table 11: 13 participants (10% respondents; 5% study group) said they were "exploited" by family or community members, resulting in divisiveness, or that they were "violated" by salespeople (e.g., car dealers); 7 participants (5% respondents; 2.5% study group) mentioned Elder abuse and/or lateral violence as negative impacts.

For the most part, the negative impacts described by Survivors suggest that the decision to settle for individual monetary compensation was misguided and insufficient, compounded by a lack of planning on the part of those implementing the CEP to prepare for triggered emotions, self-destructive reactions, and predatory behaviours. On the other hand, accounts of positive impacts convey a tendency among Survivors to simply view the compensation as materially beneficial in its own right (“we can all use money”). In the minds of many Survivors, the frustration with the process and difficult emotions stirred by the CEP process as a whole over-shadowed healing benefits and generally wealth and health were viewed as separate issues:

Healing is something I believe in and is definitely needed. That is what I work in, trying to break the cycles of these addictions and bringing out and helping people forgive the past, is one of the things I work with. It is still on-going and it always will be. Probably the majority of people that you interview here need a lot of healing and a lot of initiatives set up for them, to remember what happened, why it happened and to forgive and heal themselves and other people for what happened. And that is something that I see is starting to make a change. The money, I think, didn't really have much of an effect in terms of the healing. I can't really recollect anyone saying they paid for counselling or anything like that. I know that the money that was given by the government as compensation for residential school Survivors, but I think every single Aboriginal person in today's society is affected or was affected by the residential school system and is a Survivor. So, in a way, every individual, every Aboriginal person should have been compensated, you know? That is my belief.

Several Survivors insisted that the CEP was antithetical to healing because what is needed in communities is a “whole package” of healing resources, not just individual compensation.⁷⁵

Perspectives on Intergenerational Effects and Compensation

If you have an opportunity to go to the school here and look at the old pictures there, you could almost see a time line. You see the Inuit out on the land with their little tent, smiling, they're living out on the land. And then you go over to the next picture and you got the kid sitting on the Father's lap and you got the Inuit standing behind him and are all of them are straight faced. There's no more smiling and you could see exactly where it started. I'm sure it goes back a little further than that but it's right there. But we can't see it - it's like looking through a window. You can kind of see life but it's all foggy and distorted. That's what I would compare it to.

Although no questions were asked of Survivors about the legacy of the residential school system or about intergenerational impacts *per se*, about a third of participants raised these issues in the course of the interview.⁷⁶ In some communities, the *Settlement Agreement* and CEP was a magnifying glass

⁷⁵ Atlas Table 14: 10 participants (4% study group) defined CEP as the opposite of healing.

⁷⁶ Atlas Table 15: 83 participants (30% response rate) spoke about intergenerational issues.

on serious trends in intergenerational impacts from the residential school system. The stories and comments about Survivors' parents, children, and community relations reveal underlying perspectives on compensation that relate to these impacts. In part, Survivors said that CEP is not enough because the *legacy* of residential school cannot be compensated. Also, CEP as *individual* compensation did not make sense to some Survivors because residential school is not an individual phenomenon, but remains a family and community experience that crosses generations. This perspective sheds light on why it was important to so many recipients to share their CEP with family and friends. Healing for one should mean healing for all and many Survivors considered the health of their community to be a component of their own healing. Hence, how the CEP impacted their family and community undoubtedly affected them personally as well.

The main intergenerational issue raised by Survivors related to the lack of parenting skills.⁷⁷ Residential school estranged parents from their children who subsequently did not learn parenting skills at home. As described earlier, some Survivors grieved over how they raised their own children, having learned from nuns, priests, and teachers to apply strict discipline and corporal punishment. Abusive parenting practices were passed down through the generations and Survivors who defined healing in this context spoke about breaking the cycle of parental abuse by developing healthy parenting skills:

[CEP] helped me in the healing journey because it made me understand how I acted, especially in my parenting skills - I have seven children. It also made me understand my mom. Even though both my parents went to residential school they had different personalities. It really made me understand my mom, she was very rigid, she wasn't affectionate. I tended to do that too, with my children, to be strict with them. Now with my grandchildren it's a different story. I'm breaking that cycle now.

Participants also frequently mentioned family members and friends who were never able to see this current era of redress, apologies, and reconciliation. Generations of Survivors passed away before there was any acknowledgement of their time at residential schools. Several respondents reflected poignantly on how receiving the CEP money and going through *Settlement Agreement* processes reminded them of parents, siblings, or friends who had passed:

I have five children. That money is not going to do anything but pay my bills. It hurt. I see family members who got more into alcohol. There's so many people that died and who didn't receive it, who died and they deserved it, nothing happened. They [government] were too slow. I think they were waiting for all of us to die off.

Several participants insisted that compensation was due to the parents who suffered the pain of not knowing what was happening to their children in school and who were denied the right to bond with their children. A few respondents mentioned that they planned to use their CEP payments to buy memorials or headstones for parents or family members who attended residential schools. To them, the CEP was, in part, homage to previous generations:

⁷⁷ Atlas Table 15: 63 participants (76% respondents; 22% study group) spoke to issues of family alienation and lack of parenting skills.

When we get [CEP] we'll buy our parents the nicest headstone, the most money can get... I'm getting emotional. It will be positive once it's settled, to do with what I plan to do with it. I want to buy them a nice head stone for their grave. I'd like to buy for myself, but it's for my parents, they suffered for this. That's what we did for [my husband's] mom... She knows from up above we got it.

Other participants told stories about how the CEP and IAP processes have led to increased openness between themselves and their children.⁷⁸ As they have learned about their parents' and grandparents' experiences, Survivors' children and grandchildren have begun to understand why they were raised the way they were, and consequently to better understand themselves as well. Several CEP recipients suggested that the children of Survivors not only need healing but should also be compensated for having suffered the legacy of residential school. As described earlier, several Survivors distributed their CEP money among their children as a forgiveness gift for what was deprived them in childhood.

Survivors also identified self-destructive behaviours such as alcohol and drug abuse and family violence, including spousal abuse and child abuse, as intergenerational scars left by the residential school legacy.⁷⁹ Addictions and violence were described by some as learned behaviours they acquired from their parents and grandparents who also attended residential school. In this context, participants defined healing as breaking the chain of abuse.

In general, the residential school experience left students feeling alienated from their community, creating generation gaps. Prolonged and repeated periods of separation between parents and children living in different worlds resulted in an inability to communicate in terms of language, but more-so in terms of not being able to connect and relate to each other. Furthermore, residential schools taught children to be ashamed of what was considered by the teachers as an inferior way of life in Aboriginal communities. In this context, Survivors defined healing as closing the gap or building a bridge between Elders, adults, and youth in the community.⁸⁰

⁷⁸ Atlas Table 15: 27 participants (33% respondents; 10% study group) said CEP or IAP created more openness between generations.

⁷⁹ Atlas Table 15: 18 participants (22% respondents; 6% study group) said self-destructive and violent behaviours are intergenerational.

⁸⁰ Atlas Table 15: 16 participants (19% respondents; 6% study group) said residential school created community disconnection and generation gaps.

Chapter 6

Survivors' Assessments of CEP-related Supports

Considering the experiences and impacts described in the previous two chapters, it is not surprising that the majority of Survivors in the study group required or wanted some kind of support during the CEP process. Participants spoke to the need for assistance with form-filling and for counselling related to negative emotions and traumatic memories triggered by the application processes and/or after receipt of payment.

The findings of this study indicate that almost three-quarters of study participants relied on various services and supports to some degree. This estimate is supported by the finding that only about a third had an easy time completing the CEP application, suggesting that the majority may have required some assistance along the way. Aside from form-filling support, findings show that another third of the study group was triggered by the CEP process and required emotional support.⁸⁰ Furthermore, once the money was received, many Survivors who described the immediate aftermath as partly or wholly a negative experience also required some type of support. The over-riding theme among comments about service provision and support networks was the importance of support being available at the community level. A Survivor living in a semi-isolated community in the Yukon spoke about the consequences of not being able to access local resources: "I wanted to get healing for the schools... but there was no one here to help us. I think that's why people are drinking so much around here... but it's not going to solve anything."

These findings are consistent with a recent evaluation of AHF-funded projects (hereafter, 'projects') conducted by Indian and Northern Affairs Canada which found that the demand for healing services has increased due to the CEP, IAP, and TRC processes, "both by triggering disclosure and the seeking of healing by more Survivors, and by demands on projects for assistance in navigating the CEP and/or IAP processes" (INAC, 2009f:30). That projects are slated to close in March 2010 is an urgent matter among service providers interviewed for this study because this reality threatens the long-term healing that is required to finally deal with the legacy of residential schools.

Service providers characterized healing as a long-term process or *healing journey* that occurs in stages. For residential school Survivors, this journey commonly begins with awareness and understanding of the impacts of the legacy of residential schools on themselves as individuals and on their families. Continuing on a healing journey requires that Survivors feel safe enough to open up about issues related to trauma. It involves the reclamation of healthy productive lives, which takes time, discipline, ongoing support, and guidance.

⁸⁰ A total of 233 participants commented on government, legal, and financial services, AHF services, and/or family and community support. Subtracting those who stated they were unaware of government services (n=20) and those who never used AHF services (n=10), it may be estimated that 203 participants (72% study group) relied on services or supports to some degree (Atlas Tables 4, 5, 6). This is consistent with the finding shown in Atlas Table 1 that 94 participants (33% study group) found the CEP application process "easy," implying that the remaining 67% may have required some assistance along the way. Aside from form-filling support, Atlas Table 3 indicates that 36% of the study group was triggered by the process and required emotional support.

Government Support Services: An Overview

As outlined earlier, Service Canada and Indian Residential Schools Resolution Canada (IRSRC) were mandated to administer the CEP compensation application processes and to operate the CEP Response Centre and various toll-free service and support lines. Another two government initiatives were established to support the well-being of Survivors and to contribute to the ongoing reconciliation process between former students and the Government of Canada: 1) the Advocacy and Public Information Program, and; 2) the Indian Residential Schools Resolution Health Support Program (RHSP) (formerly called the Mental Health Support Program) (INAC, 2009e).

The Advocacy and Public Information Program (APIP) is administered by Indian and Northern Affairs Canada (INAC). Its key goals are: to encourage information sharing about the *Settlement Agreement* and the benefits for former students of federally recognized schools and their families and their communities; to support opportunities that enhance service delivery, and; to help educate Canadians about the impacts of Indian residential schools on Aboriginal communities. This program also funds community gatherings and reunions aimed at sharing information about the *Settlement Agreement's* processes: CEP, including the application, reconsideration, and appeals; IAP; TRC; and wider commemorative initiatives.

The dissemination of *Settlement Agreement* information was achieved through funding partnerships with Aboriginal organizations that focused on gatherings and forums for Survivors, financial planning seminars, abuse prevention, public exhibitions, and the development of educational resources. These partnerships were designed to assure government that information on residential schools was being communicated effectively to Aboriginal communities, feedback was being received on the implementation of the *Settlement Agreement*, and the general population was having access to educational resources about the residential school system and its legacy of impacts.

APIP's emphasis has now evolved to reflect the deadlines for compensation applications under the *Settlement Agreement* and, therefore, its current focus has shifted from CEP application information to providing information on reconsideration and appeals of CEP, IAP applications and hearings, preparing Survivors to participate in TRC events and commemorative initiatives, and dealing with any impacts that might arise from the *Settlement Agreement* processes, including the assurance of adequate support systems in place for Survivors. A wider focus for this program ensued in order to strengthen and expand outreach to northern and remote communities and to include those who are homeless, incarcerated, or less advantaged with respect to receiving information on the *Settlement Agreement*.

Survivors have access to emotional and wellness support through the Indian Residential Schools Resolution Health Support Program administered by Health Canada. This program is coordinated by regional coordinators in the provinces and territories. It offers professional counselling, emotional support provided by Resolution Health Support Workers, cultural support provided by Elders, and assistance with transportation and/or costs to services that may not be available in every community. These services are available to Survivors and their families who are: eligible to receive and who are currently receiving the CEP; resolving a claim through the IAP, ADR, or court processes, or; who are participating in TRC events. Family members and those without a DIAND number are eligible and may request services through the regional coordinators using the name of the former student and birth date to "verify program

eligibility.”⁸¹ Requests for services may be denied, however, and may go to three levels of appeal before a final decision would be made.

The RHSP is funded and administered by Health Canada. The program has two main consulting bodies: the Health Support Steering Committee made up of senior representatives from both Health Canada and INAC to guide, direct, and oversee the development and implementation of the program; and an advisory group of twelve Aboriginal volunteers that form the Aboriginal Working Caucus who work with lawyers, churches, and both federal departments to assist in the ongoing development of the Indian residential schools resolution process. This program began in November 2003 and offers support to Survivors related to professional counselling, emotional support, cultural support, and transportation while they move through the *Settlement Agreement* processes (see Figure 10 below).

Professional counselling for Survivors, individual and family counselling, is provided by registered Health Canada service providers who are licensed psychologists and/or social workers. The service providers must provide a completed treatment plan before actual sessions can take place. The number of counselling sessions will depend on the recommendations provided in the treatment plan and must be within the individual's eligibility period. These services are coordinated by IRS Resolution Health Support Program regional coordinators within Health Canada's FNIHB regional offices in Halifax (Nova Scotia) for the Atlantic provinces, Montreal (Quebec), Nepean (Ontario), Winnipeg (Manitoba), Regina (Saskatchewan), Edmonton (Alberta), Vancouver (British Columbia), Whitehorse (Yukon), and, for the Northwest Territories and Nunavut region, Ottawa (Ontario).

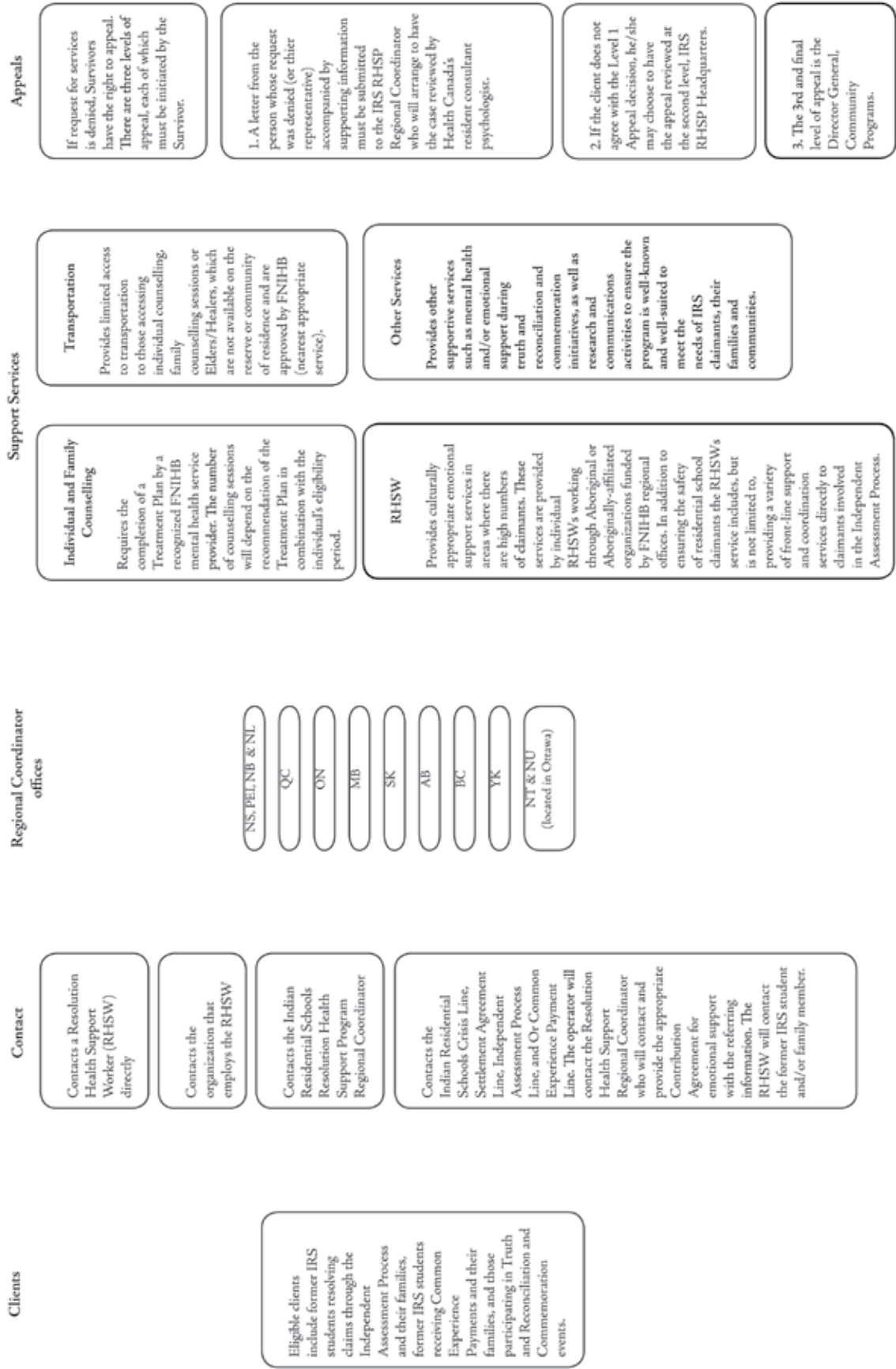
Emotional support is provided by a Resolution Health Support Worker (RHSW). The RHSWs are managed through regionally held contribution agreements between FNIHB regional offices and Aboriginal organizations or their affiliations. They are employed by the grantee organization to provide a supportive role while eligible Survivors are going through the *Settlement Agreement* processes (CEP, IAP, litigation, ADR, and TRC events). These front-line workers carry out a variety of functions, such as assisting Survivors filling out forms, providing culturally appropriate emotional support, coordination of services, assisting with transportation to and from mental health services and hearings, and so on.

Cultural support is provided by a Cultural Support Provider (CSP) through the Cultural Support Program under RHSP. These individuals are Elders who are knowledgeable in their culture and traditions and can perform or assist in ceremonies. Elders must demonstrate sufficient progress along their own healing journey in order to provide safe and effective services to other Survivors. Their role is to provide eligible Survivors and their families with cultural support in the forms of accompanying Survivors to hearings and TRC events, performing or helping with traditional ceremonies, and having knowledge in all other appropriate services that Survivors may need to access. Elders who become CSPs are chosen by the community in need through the local band council or health centre. The work of the CSP is managed by the Aboriginal organization or affiliate through a contribution agreement with FNIHB.

Provisions of limited access to transportation are provided to those eligible Survivors accessing professional counselling, Elders, or healers that are not available in their community and that are approved by FNIHB (access must be the nearest appropriate service).

⁸¹ Email from John Fee at Health Canada, 10 March 2010.

Figure 10) Indian Residential Schools Resolution Health Support Program



The Survivors who do not qualify for these services within RHSP can go through a three-level appeal process that they or their representative must initiate at each level. An initial letter can be sent to the RHSP regional coordinator who will then have Health Canada's resident consultant psychologist review the case. If the Survivor does not agree with the decision at the first level, the appeal is then reviewed at the RHSP main headquarters. If approval is not met, the appeal can then go to the third and final level where the decision is made by the Director General of Community Programs. Additional information on the appeals process is through contact with the RHSP regional coordinator.

Participants' Assessment of Government Supports

Both Survivors and service providers were asked about their awareness and opinions of government support services. This information provides context for the main research objectives and is not an evaluation of services or providers. In general, there was suspicion about government, an overarching theme that may have influenced if and how Survivors accessed government services. Approximately seven per cent—and especially those living in isolated communities—were completely unaware of government services available help during the CEP process.⁸²

There was a general distrust about the CEP Response Centre toll-free lines and with staff at the call centres who provide services over the phone. Repeated phone calls to toll-free information lines increased Survivors' frustration when operators provided different answers at each call. Indeed, very few of the participants who used the toll-free lines found them helpful for application and update information and most who said they tried the 1-866 numbers received little to no help.⁸³ Often the operators could not answer Survivors' questions leading some to believe that they were being given the run-around. One CEP-applicant became exasperated at dealing with a faceless bureaucracy and another felt "they were just trying to play games, trying to make you sound like you are lying." Some Survivors said the questions asked by toll-free operators were complicated or intimidating, and in several cases the calls triggered painful memories. Service providers who were interviewed also related stories about Survivors who "don't want to talk because they don't know that person and they don't feel comfortable talking on the phone about something that affects them like residential school." Another service provider said it was "unreasonable" for IRSRC to "expect these people that live in a different community and have a different lifestyle to phone them and talk to them."

Survivors in the reconsideration process also distrusted the CEP Response Centre, describing it as a buffer between applicants and those with the power to approve compensation. Survivors said that, first of all, it was hard to explain to strangers what happened to them in school and second, although Service Canada employees tried to be helpful, they were insensitive:

They didn't really understand... I didn't think they were adequately prepared for this. After the application period is over they are very bureaucratic... a 'go away' type of mentality.

⁸² Atlas Table 4: 20 participants (7% study group) said they did not know about any government support services for CEP. See also SPSS Table 3: A high ratio (6 of 18, or one-third) of those living in isolated communities were unaware of government services, compared to those living in other types of communities (between 5 and 7%).

⁸³ Atlas Table 4: 31 participants (11% study group) commented on the toll-free information services. These services were viewed as unhelpful by a 5:1 ratio: 26 respondents said the toll-free lines were not helpful; 5 respondents said toll-free lines were helpful.

Phone-line operators were perceived as giving rehearsed answers and as unhelpful in providing the information being requested. A Survivor in British Columbia in reconsideration for payment for five years' attendance called the toll free line several times and concluded that operators were ill-equipped to provide any real information. A Survivor and project counsellor in Saskatchewan explained that although toll-free operators have been placed at the front-line of application support, they have not been trained to deal with the frustration and anger of many callers:

And the [reconsideration] process that we are going through now, the call centres ... the workers being told that this call centre was just put there just for lip service. These poor people that are working there are being victimized too because they are getting the brunt of the anger of the [Survivors]... People that work at the call centre are getting very emotionally ... some of them don't know how to cope with it because they are not really trained. They aren't therapists or counsellors. They are just there for lip service and they are told what to say and this is what they have to say. To me, that whole system there is a negative experience.

These experiences compounded what many Survivors were already experiencing in terms of traumatic memories. For several individuals, just working through the application form was an emotional challenge, especially if they had little to no support. One woman was reluctant to talk about her CEP application experience because "it just brought a lot of stuff up," adding that she found it hard to work on the forms by herself and it was months before she finally completed the application. Likewise, a Survivor living on a Reserve in Quebec struggled to complete her CEP application:

I hesitated for some time before applying for the CEP. Is it really worth it to apply? I have to tell you that I am unemployed, I am retired - so I told myself it might help. The process was long, very long. I had to write and make phone calls to prove I went to residential school. Nobody was helping and guiding me. Nobody would give me any detail on the type of documents needed. I was discouraged, but my husband kept encouraging me to go on with the application and to keep calling. I had a hard time getting proof of my registration at school. We had to travel and pay for our expenses in order to get school pictures and visit the school board. We had to do our own research... I was very angered by the whole process, and on top of that, we had to struggle to find proof. The problem was that every time I called (the CEP information line) I could not speak to the same person. We had to tell the same story over and over again. But I have to admit, there was one man on the phone who gave me and my husband pertinent information that allowed the process to progress. But prior to speaking with him, it was a big stressful experience. I am angry about the whole process. It was them who came to get me to go to Residential school, and now it was up to me to prove it. I have to add that whenever I called, the person answering my call gave me the impression that they wanted to get rid of me.

With regard to the IRSRC crisis line, several Survivors said they accessed this service because it was accessible at all times of day or night. A Survivor living in a semi-isolated community wished there was "someone in the community 24/7 when the flashbacks come" because, as another Survivor explained, "memories come up for people at any point in the day. I can get triggered off by anything." After he received his CEP, one Survivor called the crisis line a couple of times during the night and found that

they were understanding and helpful. Another Survivor who called the crisis line late one night after an IAP hearing was impressed that even though he projected his anger at the crisis-counsellor, the crisis-counsellor remained on the line with him for two hours until a local counsellor could be contacted.

An approach that worked well was collaboration between government service providers and local support groups such as AHF-funded projects. For example, a collaborative effort initiated by a project with Service Canada in rural Saskatchewan was very successful:

We asked [Service Canada] to come out here to help fill out applications, and checking on people's applications. We asked them if they could come out for two days a week... and they came out twice a week for two months. They were really, really wonderful. They were so patient. I know a lot of the Survivors were getting upset with them... but they were very professional and helpful. But then we also had our therapists on hand so if those people were angry, they could go and talk to them.

Depending on the project, Service Canada staff filled out CEP forms for people over the course of one day, two days, or regular intervals over a few months. Having the forms notarized and completed at once and in person was helpful for applicants. A staff member at a community project in Nova Scotia was very impressed by the assistance provided by Service Canada:

We called Service Canada. They came in and there were 62 survivors in the community and we all applied at the same time in September 2007. We filled out all these applications. I had no problem, I received all my money.

In the context of these joint sessions, Survivors agreed that not only did the Service Canada representatives do a good job assisting with applications but counsellors were available if Survivors needed to talk to someone and workshops, including sessions about fraud directed at elderly recipients, were particularly helpful. On the whole, projects who contacted Service Canada to request assistance for form-filling within their communities reported on these joint sessions as positive experiences.

Survivors who were reluctant to speak with local counsellors because of confidentiality and anonymity concerns, welcomed the support offered by government sponsored services such as community CEP workshops, the Resolution Health Support Worker (RHSW) programs, and crisis line.⁸⁴ For example, several Survivors credited the RHSW support services with providing confidential help that they felt they could not get from local counselors. This was especially important for Survivors living in isolated communities where trust issues were of particular concern because everyone knew each other.⁸⁵ However, project staff indicated that there was a low level of knowledge among both Survivors and service providers about the RHSW program. Indeed, several AHF-funded projects were unaware of the program.

⁸⁴ Atlas Table 4: Service Canada/IRSRC support services were viewed as helpful by a 3:1 ratio: 53 respondents said these services were helpful; 18 respondents said these services were not helpful.

⁸⁵ SPSS Table 3; Atlas Table 7: 40% of participants living in isolated communities identified trust issues as a barrier to services and support, compared to 8-13% of participants living in other types of communities.

Two projects experienced problems working with RHSWs because the local individuals or organizations contracted to provide program services were perceived as not well regarded in the communities where they worked. Project staff was thus reluctant to refer clients to RHSW services. In one remote community, accessing RHSWs was difficult because the program was based in the regional capital, creating barriers of distance and high transportation costs. Although a Survivor could apply for reimbursement of such expenses, the high costs up front were prohibitive.

Where RHSWs were integrated as staff within an AHF-funded project, there appeared to be a good working relationship and several service providers reported that the RHSW has been a valuable program. Where RHSWs were integrated within community healing centres, these individuals were not only helpful with form-filling, but also provided necessary counselling and social work support for Survivors who experienced trauma caused by reliving or remembering past abuse while filling out applications.

Support for Survivors by AHF-funded Projects

About a third of Survivors in the study group shared their experiences and opinions about AHF-funded projects in their communities.⁸⁶ Most of these Survivors described the benefits of support and assistance they received from project staff and a few added that these programs should be sustained in the long-term.⁸⁷ Project staff was generally seen as very helpful with CEP form-filling and, as noted above, with necessary liaison services between Service Canada and applicants. Projects became key local access points for Survivors who required education about and assistance with the CEP application process. Project staff also provided guidance on related issues including how to cope with the receipt of CEP monies, financial planning, bequests to Survivors, interpreter services, and advocating on behalf of Survivors having difficulties communicating with IRSRC or Service Canada. In general, the environmental scan demonstrated a commitment among project staff to support Survivors by whatever means possible, often providing services and supports that were outside of the project's mandate.

The projects scanned for this study reported that the majority of their added work was related to filling out CEP application forms, research to find and complete Survivor's residential school records, following the CEP process through appeals and reconsideration, and submitting new research to support the different stages of the CEP process. This support allowed many Survivors to complete their applications in an accurate and timely manner, thereby affecting positive outcomes in terms of payments received. In turn, participation in the CEP process encouraged some Survivors to engage in healing activities:

There has been a big increase... The [Survivors] who have been filling out the CEP, most of them said that if they didn't receive the CEP, they wouldn't have to talk about the issues. So I said, 'it's a good thing that you received your CEP then.'

⁸⁶ Atlas Table 5: 92 participants (33% response rate).

⁸⁷ Atlas Table 5: 65 participants (71% respondents; 23% study group) had positive opinions about projects. The fact that study participants were recruited by project staff is likely a factor in the high satisfaction rate for project services. However, it is worthy to note that the study group included participants for whom the CEP interview was their first visit to the project office.

Service providers remarked on noticeable increases in the demand for a variety of services among Survivors who sought application help from projects. In this sense, the CEP application process opened an opportunity to initiate discussions about healing:

I know for myself there were days when I had eight appointments. It was exhausting but really good, too, that they were coming in and coming in. Although the paperwork stuff was busy, it got them in the door so we could start talking and let them know what we had to offer.

Several key informants made a point of comparing AHF-funded project information services with Service Canada and IRSRC's CEP Response Centre toll-free lines, stating that the assistance they received from project staff was better than that provided by the 1-866 operators. In the Northwest Territories, a Survivor preferred going to the project because "I talked to somebody on the toll free line but it wasn't the same as talking to somebody face to face, so it was hard for me to call back." An important aspect of participants' high regard for healing projects in their community was the counselling support Survivors received when they were triggered by the CEP process. In fact, a recent survey of AHF-funded community-based projects across Canada concluded that over one-third of these projects are providing support to Survivors going through the various *Settlement Agreement* processes. Almost twenty per cent of projects reported that Survivors are seeking counselling because they experience trauma or are reminded of past harm during the *Settlement Agreement's* application processes, resulting in significant increases in the demand for healing services (Reimer and Fryer, 2009).

A main benefit of the approaches taken by AHF-funded projects is their focus on residential school trauma. In northern British Columbia a women's circle sponsored by the community project "did wonders for everybody" not only because of the speakers and healers facilitating sessions, but also because Survivors came to understand that their experiences were shared by many others. In Ontario, a Survivor described the project as her second home: "They get to know who I am... I have had a lot of bad experiences. We share our stories together here." Similarly in the Northwest Territories a project counsellor helped a Survivor learn to cope with traumatic memories:

There was a lot of bad feelings, I had a lot of pain. I went through flashbacks, remembering all this stuff again... I was crying and carrying on and I didn't know where to go to so that is why I went to the [AHF-funded project] and that's where I talked to [project counsellor]. I talked with other people that were teaching me how to deal with the trauma. So it did help a lot and I learned to do that. And I also talked to someone on the toll free number but it's hard, it's much different. It's like you're talking to no one.

That the majority of project staff are Survivors themselves is identified as a main benefit toward helping other Survivors to heal. Staff who can share personal experiences at residential school help to build trust and to create a safe environment in which Survivors can speak about their own experiences. The benefits of this approach were described by one project staff member:

I am in my own healing and I would share the heavy core about what happened to me in order to get the Survivor talking. ... Many have come from far away and most have gone

[on with] their healing journey and have been referred to treatment centres and they were able to deal with it.

The value of former students assisting other former students has been confirmed in previous evaluations of projects offering this type of service (Kishk Anaquot Health Research, 2006; Archibald, 2006). Project staff also claimed that clients trusted them because they share similar cultural backgrounds. For one service provider, common cultural and school experiences assisted her in developing trust with Survivors who came in for counselling:

I have heard from the very beginning... I had clients [since] I was 27 years old and I am 55 now. Right from then I had people talking about residential school and right from then I asked them, why do you feel you can talk to me about this? They said, because you are our people and ... you understand the pain...and you won't make fun of me. And even if you don't understand, you don't ask the stupid questions.

Criticism of the AHF-funded healing projects was relatively minor, ranging from complaints that projects were unorganized, did a poor job of communicating events, had inflexible office hours that did not accommodate Survivors with full-time jobs, or were not available on a twenty-four hours basis. In urban centres, some participants said homelessness was a barrier to programs because these were not structured for outreach to Survivors with no fixed address. Homeless Survivors either did not receive information about available services, could not afford to get to those services, or an addictive lifestyle precluded their participation.⁸⁸ Some Survivors judged project staff in the community and other local counsellors as improperly trained or unqualified to provide professional counselling or traditional healing.⁸⁹ One Survivor said she did not feel that the social workers in her community could emotionally handle residential school issues; when the counsellors began to cry, Survivors stopped talking because they didn't want to hurt anyone. For this reason, she would have preferred to speak with a psychotherapist but none were available in her community or immediate area.

Family and Community Supports

I started talking about what I went through at [residential school], not only with my daughter but with other people. We used to have a meeting in another place and we could tell them about what had happened and they said, 'oh yeah, we went through the same thing.' I tell you, I thought I was the only one that went through that and they said, 'no, no, you aren't the only one. There are a lot of other people that went through it just like you and me.' So we share stories when we get together. It is just like a counselling and it is helping us to forget and to forgive and to give good examples so that this may never, ever happen again. Never. I told our generation that is coming up - never.

⁸⁸ Atlas Table 7: Hours of service and other logistical barriers such as transportation, homelessness and disabilities were identified by 19 participants (17% respondents; 7% study group).

⁸⁹ Atlas Table 7: 36 participants (31% respondents; 13% study group) identified qualification issues as a problem (i.e., perceptions that there was a lack of qualified staff at the local level).

Over forty per cent of the study group said they relied mainly on family, friends, and/or on local resources such as the Friendship Centre, Band office, land-claim office, or community health centre for support during the CEP process.⁹⁰ Most of these Survivors said they accessed local resources such as the Indian Residential School Survivor Society (IRSSS), community-based programs such as *Choices* or *Returning to the Spirit*, Friendship Centres, chapters of the John Howard Society or Alcoholics Anonymous, area addiction treatment centres, community mental health committees or community health workers. In one rural area, CEP applicants said they would not have coped without the community liaison who gathered the necessary information and worked with archives to collect records: “It was a waste of time to deal with IRSRC so we developed partnerships with other organizations like IRSSS (Indian Residential School Survivors Society).” Many Survivors relied on these community resources to get help with CEP form-filling:

It was a lot of work on our part, those of us that were at the band office. I worked for the band at that time and it wasn't my job to do this, but we were doing it. It was a lot of work trying to get that information from people. Some of the insanity that happened with the people was that some band members were there with other band members and most of our people were sent to [residential school] and even though people were there together in the same year they denied one person and allowed another. And people couldn't fathom that and they couldn't make sense of the whole thing. It was convoluted. The forms were difficult for people to complete. It was hard to get [records] because someone burnt [the residential school] down ... so a lot of records were burnt... And when you are in trauma and don't really remember a lot, it is hard to substantiate a lot, like who was there.

One elderly Survivor was uplifted by healing massages provided by “a woman who runs a little healing place out of her trailer.” For her, this type of therapy was helpful for Survivors not ready to open up but who need to find moments of peace: “I can understand why people don't want to talk about stuff. I am 69 and it is still hard on me emotionally and physically.” She added that other Survivors might need different types of services, but many in the city cannot access services because they lack transportation.

Sixteen per cent of Survivor participants said they relied fully or partly on informal support networks including immediate and extended family members and friends.⁹¹ Spouses, siblings, children, parents, in-laws, aunts, uncles, grandparents, and trusted friends were all identified as providing support to Survivors both for CEP application form-filling and for emotional support during the CEP and reconsideration process. For example, a Survivor said she relied solely on her mother and sister for support because she otherwise felt left to her own devices. In large part, these individuals felt more comfortable going through this deeply personal and sometimes painful process with someone who understood them and who could be trusted.

⁹⁰ Atlas Table 6: 118 participants (42% response rate) said they relied on family and community supports; 59 participants (50% of respondents; 21% study group) said they sought counselling support from non-residential school specific community services, and 27 participants (23% of respondents; 10% of the study group) said they received form-filling assistance from non-CEP related resources.

⁹¹ Atlas Table 6: 45 participants (38% respondents; 16% study group).

Indeed, one of the main reasons Survivors refused to take advantage of more formal services and supports in their home communities was a lack of trust in such services in terms of both confidentiality and anonymity. This particularly posed a barrier in smaller communities. Hence, a woman living in a semi-isolated community in the Northwest Territories relied solely on her daughters to help with her CEP paper work because “once you tell those counsellors something it is supposed to be confidential, but it is not.” Another woman in rural British Columbia refused to attend Survivors’ support groups because “I went to school with some of them, so I don’t want to talk about it around here.” The issue of trust, however, was not straight forward. Having a counsellor who was a friend or relative was viewed as a problem for some, but for others it was preferable to speak with counsellors with whom they had pre-existing relationships. For example, one Survivor felt more comfortable seeking help through the Resolution Health Support Worker program because her aunt was the local RHSW, but another Survivor felt she could not talk to the project counsellor because it was her daughter and she was too close.

Barriers to Services and Supports

As mentioned earlier, over forty per cent of the Survivor study group commented that a lack of access to support services was a problem or obstacle they encountered in the CEP process.⁹² Barriers included lack of trust in counselling services, perceptions that local service providers were unqualified, cultural issues such as a lack of Aboriginal service providers or services not provided in Aboriginal languages, a lack of CEP-application support, personal issues that kept individuals away from support services, or logistical barriers such as unavailable transportation. With regard to the CEP application process, eleven per cent of the study group commented on the lack of CEP-specific supports and services available to them in their home communities.⁹³ Survivors living in communities that lacked support or assistance with form-filling or record searching found the process particularly challenging, and several applicants said they felt very anxious about whether they had submitted the correct information.

Lack of trust was a commonly identified barrier to accessing services and supports.⁹⁴ Trust issues were described by Survivors as a problem of finding a counsellor in the local community that could be trusted to maintain confidentiality, or as a problem of remaining anonymous in smaller communities. In rural British Columbia a Survivor said she went to three different counsellors and in each instance confidentiality was broken: “You can’t trust them. I’d rather have somebody from out of the community.” Because everyone knows everyone, some Survivors felt vulnerable talking to a local person who might judge or pity them, and they were at greater liberty to speak openly and freely with a counsellor from outside the community. Unfortunately, several participants explained that a high turnover of counselling and health care staff in their communities discouraged long-term care relationships necessary for the development of trust. Three Inuit Survivors from the same isolated hamlet in Nunavut highlighted these problems. First they pointed out that “people from here, some of them don’t want to share with other locals because some gossip right away... so it’s better to get someone from out of town.” They then added that Survivors needed “at least two to three years, one-on-one with somebody” but that this was almost impossible up north because counsellors tend to stay for only a year or two: “Then you start all over again when someone else replaces them” and “you’re always telling the same story over and over and over.”

⁹² Atlas Table 7.

⁹³ Atlas Table 7: 31 participants (11% study group) identified access issues related to CEP-specific supports.

⁹⁴ Atlas Table 7: 37 participants identified trust issues as a barrier (31% respondents; 13% study group).

Trust is also an issue in group activities such as healing circles and Survivor gatherings that are considered too public and, while some Survivors said they would welcome these types of activities in other towns or cities, time and travel costs often prohibited attendance:

Well, it's a lot of travelling you know. It's really tiresome. Sometimes it hard to go to [community]... But they should have counselors here too. Those counselors in ...[community] should be coming to the communities to help us, to help the Survivors in the communities too, because most of us live in rural communities. And it seems like all the folks are always in ...[community] all the services are always in ...[community]. Why can't they come here too to our communities and help us Survivors? Plus I think living in this community is really isolated so it's hard to get any kind of services. Or it's hard to trust anybody here in this small town too.

Confidentiality and anonymity when seeking treatment was a barrier recognized by almost all service providers interviewed for this study. Project staff confirmed that many Survivors were concerned that family or friends would find out about their residential school experiences, about their application for CEP, and/or about their participation in healing services. Although projects attempted to provide a safe space that allowed for privacy, in small communities this was not necessarily guaranteed because even the location of office space might compromise a Survivor's ability to attend without notice. Many projects have developed flexible strategies, including home visits, to deal with these barriers:

Confidentiality is a big issue here because our offices are next door to Child and Family services and another one is because family members are working in this office so they don't want family members to know that they were in need of help and they really believe that there is gossip that goes around and some people won't come into the office and always ask for home visits. We do home visits when necessary.

A project that operates within the local hospital says their location affords Survivors a higher level of anonymity because the hospital is a multi-use space that does not identify an individual's reason for visiting:

I think some of the communities unfortunately do not have the same type of services that we provide here. A lot of them won't admit that they have problems to anybody in their community or in their band office or health centres. There are a lot of different services that are provided there but a lot of people choose not to use the services because they don't want anybody to know they are having problems such as mental health problems... Some of the bands have contracted therapists that may work there two days a week, but a lot of the people prefer not to go to them because they don't want anybody to know they are going through therapy. So they chose to come here because nobody knows, and they can come into the hospital and no one knows what they are coming in for. That is one of the barriers.

Projects located in or near urban areas find that Survivors from distant rural areas seek out their services because they fear that confidentiality and anonymity is impossible in small communities:

So in the community, a lot of them have to go underground for their healing because of the family members... [There are] communities where traditional ways are shunned, but there are family members who are sneakily doing it, or trying to learn it or practice it. So when a service provider comes, their only option is to see them - a stranger. When they do go, they have shared with us, 'what if somebody in the community finds out?' Especially a sibling - they are really terrified of letting their siblings know they have been abused. There are many different reasons, but it makes it really tight in terms of trying to get out of that whole web of denial and fear.

Finally, a project staff member shared a story about a Survivor for whom "everything is hush, hush." Together they go to great lengths to meet secretly for counselling sessions because, for the Survivor, this is the only way she can feel safe and under control of her situation.

A number of Survivors felt their needs could not be met because there were no qualified counsellors or therapists available locally who understood residential school trauma or who were Aboriginal. In the words of one Survivor, "a social worker is not enough." Another Survivor believed that the only way he could deal with residential school issues was to seek counsel with someone who had gone through the system and who understood his feelings of alienation from his family. A woman from British Columbia emphasized the importance of understanding historic trauma rooted in the colonial experience:

It is really difficult trying to educate non-native people about what happened... I have gone through a lot of counselling but invariably I end up teaching them about the colonial experience and residential schools and child welfare system and all the huge barriers that we face as Aboriginal people.

Although this woman wanted to see a First Nations counsellor, she had not found one in the urban community where she currently resided.

Several Survivors were disappointed that AHF-funded projects did not facilitate more Survivors support groups and student reunions, or did not work with addiction treatment programs to integrate residential school counselling to get at root issues. For Survivors dealing with addictions, standardized treatment programs and Alcoholics Anonymous programs were not enough:

Social Services and family counselling [here], they do not know how to deal with residential school Survivors. The doctors don't know - they will shove you on anti-depressants, or if you drink, they will shove you off for a while in detox. Some people that die from 'alcoholism', that is not true. Some are just so emotionally disturbed by what they went through in residential school, they are just covering it up with alcohol. The core of it is the trauma that they went through in residential school. It is not the alcohol, that is just how they deal with it.

A participant from the Northwest Territories said that existing drug and alcohol programs throughout the territory and in the communities were not educated on issues specific to residential school Survivors, adding that this type of training and preparation should have been done before the CEP was implemented. As explained by one service provider, though, one of the issues was the difficulty in retaining qualified staff to address addiction issues:

There are not enough A [alcohol] and D [drugs] counselors. Not [high] enough wages to keep them. They earn the same as the receptionist in my band. The people that suffer from chronic addictions, you can't do that treatment between 8:30 and 4:30, it just doesn't work. The in-patient care too, there always seems to be a long waitlist for them so the treatment lodge provides some service. Not only for alcohol and drug issues but also for some residential school in-patient work.

Given the increased substance abuse witnessed by project staff after the receipt of the first round of CEP payments, and with the increasing number of Survivors and those affected intergenerationally requesting healing services, projects underline the need for long-term funding in order to address the demand. One service provider remarked on the fact that cash compensation does not necessarily lead to healing:

Healing is not financial. Healing is much more than finances. It's much more than money, emotional, physical...money unfortunately does not meet those needs. It is recognized that there's a need for healing. There's still a lot more that needs to be done.

From service providers' perspectives, statements about lack of services speak to the increased demand for healing services since the *Settlement Agreement*. One project staff member described how they are dealing with the increase in demand:

I'm trying to remember some of the stats - I'm thinking in a month we're doing between 160 and 180 individual sessions and then in the middle of that, in that month, we're also doing group work, doing ceremonies and handling crisis calls through the telephone. And then it has increased our administration. We had to hire more admin people because of the documentation that has to be done because we're accredited so we have certain things that we have to fulfill. So everything has really increased.

Another project serves many communities throughout the province and people regularly travel long distances in order to access their services. In the view of these service providers, healing support is currently addressing only the "tip of the iceberg:"

We get... between 4,000 and 4,500 drop-ins a year. I don't think a day goes by without someone asking for and getting counselling. Some people are coming back regularly and make appointments. Others just say, "I need to talk to you". Sometimes it's a few minutes. Sometimes it's a couple of hours. The demand is constant and it's a demand that in general in [this province] is not being met. If everyone who needed help who has mental health or personal problems or family issues came ...for counselling we would be open twenty-four hours a day and we would need five times the staff and we still wouldn't meet the demand. So we're only nibbling at the bottom. We're dealing with the tip of the iceberg - there's nine-tenths still under the water.

Statements such as this are consistent with the recent survey of project activity since the *Settlement Agreement*, in which staff concluded that "the healing has just begun" (Reimer and Fryer, 2009). Most service providers interviewed for the present study felt overwhelmed and some discussed the stress they experience in trying to meet Survivors' needs in the absence of staff increases or funding since the

Settlement Agreement. All but one service provider reported that the need for healing services is greater than their project's human resource capacity to deliver these services.

Cultural issues were also identified as barriers to accessing services and support during the CEP process, despite the Cultural Support Program provided under RHSP (discussed above).⁹⁵ In particular, several Survivors pointed to a lack of counselling programs based on traditional wellness practices in their communities, including healing circles, one-on-one spiritual counselling, or on-the-land programs. Almost twenty per cent of the study group spoke of the profound importance of traditional activities and wellness practices to healing the legacy of residential school.⁹⁶ Such practices included spending time on the land—including for counselling sessions—not only as an antidote to the institutional strictures of residential school, but also because it represents survival and health:

I work as a residential school Survivor counsellor... One of the things that I have found is that Dene people don't like sitting in an office. They want to be out on the land, by the fire, somewhere where they are not closed in because this reminds them of residential school. So one of the things that I do is I go and get out there. I don't get paid. I want my people to be strong. Because in turn, I get benefits because I can go to these people and they will say, 'Oh, remember what you told us?' when I am down.

One Survivor described a meeting in the woods with Elders who opened up about what parents and grandparents went through each autumn: "The Elders said that after we left it was so sad, nobody was able to look at each other straight in the eyes, and the hurt was so big."

Traditional healing ceremonies (e.g., smudge, sweat lodge) helped reaffirm Aboriginal identities and spiritual connections:

I need to make a connection with my brothers and sisters. I've been away from them for forty years of my life, now it's my turn to find that bonding, that connection back to my homeland, connection back to my people. I really need to do that. I believe that the Creator has opened that door for me. So that's the part that is really important in my life is the spirituality, and the traditions that go with that.

A few Survivors added that counselling and other healing activities conducted in their Aboriginal language were significant in light of the punishment they received for speaking their own languages at school. A Survivor who is also a residential school counsellor in Northwest Territories said she spent much of her time interpreting for Elders who wanted to tell their stories and speak of their pain in their native Slavey, not in English. Also, language barriers prevented a few Survivors from accessing the crisis line and counselling. Two Inuit Survivors said they did not call the crisis line because it was "just going to be English," adding that they would have called if they could have spoken to a counsellor in Inuktitut.

⁹⁵ Atlas Table 7: 31 participants identified cultural issues as a barrier to participation in formal programs (27% respondents; 11% study group).

⁹⁶ Atlas Table 8: 54 participants (19% response rate).

Aside from wanting to speak in their own language with qualified counsellors who are First Nations, Métis, or Inuit, several Survivors also said healing programs needed to better incorporate counselling from healthy Elders whose pedagogy is grounded in success-based teachings in contrast to the shame-based lessons of residential schools:

The part that is really important in my life is the spirituality, and the traditions that go with that. I don't think that psychology will ever help me. I think about that for other Survivors, I don't think a psychologist can reach the Survivors... There are quite a few people here that would not attend a circle with a clinical counsellor involved... It's mostly because they're not Aboriginal. One of the things that most of the Survivors said that they need is the focus on cultural needs and traditional needs. [...] If it can be creative, or have the funds available for spiritual leaders or medicine people that would be really great, because they're more qualified than a psychologist. At least they can reach the heart, where a psychologist can reach the mind not the heart.

Service providers confirmed that one of the greatest demands for support was cultural intervention provided by Elders in the community:

To tell you the truth, I've maybe only had a couple of people request contemporary counselling. For the most part, people have already accessed Elder or some type of traditional, culturally appropriate counselling as well. People have certain Elders they already go to so we cannot say, go to this Elder... as they have their own Elders established and they go to their own ceremonies and sweats and stuff like that. But we also offer that here because sometimes people want to do that but they don't know where to start. So once they start here, because there are so many people that attend the ceremonies and sweats and feasts... they make those connections and links and meet other people that are involved in their culture.

Participants said that learning about traditional practices from Elders helped to restore the cultural education lost during childhood and it was important to Survivors to know that First Nations, Métis and Inuit came from a healthy past. For instance, an Inuk Survivor in Nunavut lamented "those things that I lost, the things I should have known at that age." Aware that she should have learned how to make *kamiks* by around age ten or eleven, she now regretted that as an adult she no longer had the same capacity to learn these skills.

Most service providers interviewed agreed that culturally appropriate support is important to Survivors and is one of the main reasons why Survivors access project services. In many communities there is no other centre that provides holistic, therapeutic approaches to health and wellness, as explained by one project staff member in a First Nations community:

There is more demand for traditional models rather than the Western... Here they look at the Western model as abstract because it has everything to do with confidentiality. But the traditional model looks at it as a way of life that we are taught and this is the only way they can feel comfortable and confident in their own self, and confident with us that we will keep everything confidential. I think there is a greater demand because... the

Survivors have just touched their issues, just scratched the surface. The services that are really missing here is the traditional model and we really need to have funding for people like myself or my co-workers who do a lot of traditional healing... But the only ones that are able to do that are the First Nations.

A final barrier identified by study participants is homelessness. In urban centres, some Survivors said many services were not structured for outreach to Survivors with no fixed address. Homeless Survivors either did not receive information about available services, could not afford to get to those services, or an addictive lifestyle precluded their participation.⁹⁷ Service providers also spoke to issues of homelessness and hidden homelessness (individuals with no fixed address because they move between residences belonging to family or friends) as a problem with regard to applying for the CEP or accessing support services:

Not having a fixed address is a problem for lots of people. There are so many people who just have General Delivery here or use a mailbox that belongs to somebody else, their brother or sister who might be lucky enough to have a house.

Some projects have specific initiatives to target those that are homeless and will cover the cost of postage and phone calls to IRSRC to file applications and to follow-up with claims. One project also provides a fixed address for those who need one, and works toward solving immediate basic needs such as hunger before engaging in counselling or application assistance.

In summary, the majority of Survivors in the study group required or wanted some kind of support during the CEP process and expressed a variety of needs and preferences. For example, some preferred qualified local Aboriginal counsellors or traditional healers, those that spoke their language, understood their culture, and could relate to their residential school experiences. Others felt more comfortable with outsiders with whom they could develop trusted professional rather than personal relationships. What most agreed upon was that support needed to be available at the community-level and that those involved in support required a deep and sincere understanding of residential school issues and impacts, including the impacts of seeking compensation. It was this lack of sensitivity that led many CEP applicants to be critical of the toll-free services offered by Service Canada and IRSRC. In contrast, it was the local availability of projects and the capacity of Aboriginal staff to deal specifically with residential school trauma and emotions triggered by the CEP process that led Survivors to recount the benefits of that support and assistance. Service providers reported that traditional healing approaches and cultural practices were the services that were most in demand. Promising healing approaches include Survivors assisting Survivors and integrated service delivery models that provide logistical support for those applying for CEP within a healing environment where Survivors can receive counselling if the process proves challenging. Counselling services were also in demand and those centres that offered a variety of approaches saw positive results and increases in demand. Wise practices among projects included flexible hours of operation, a mixture of fixed appointments and walk-in services, sensitivity to confidentiality and anonymity concerns, and, in urban centres particularly, targeted approaches to provide support to homeless Survivors.

⁹⁷ Atlas Table 7: Hours of service and other logistical barriers such as transportation, homelessness and disabilities were identified by 19 participants (17% respondents; 7% study group).

Chapter 7

Healing, Well-being, and the CEP

I guess the positive effect is that people realize that they have been traumatized from the residential school. They have been really affected in a lot of areas because of their residential school, like parenting. Anger, a lot of pent up emotions because of the residential school but also because they don't know how to cope. A lot of them will turn to drugs and alcohol and I think people are starting to recognize what has caused all this dysfunction. So now that they understand what caused it all, they can start their healing process... [What is] positive is we are starting to realize what happened to us, but the negative for me is just the [CEP] process - the process was so flawed.

The 2007 *Lump Sum Payment* study predicted that a Survivor's starting point—that is, whether or not they were engaged in healing efforts—would be the “critical variable in determining the impact” of compensation:

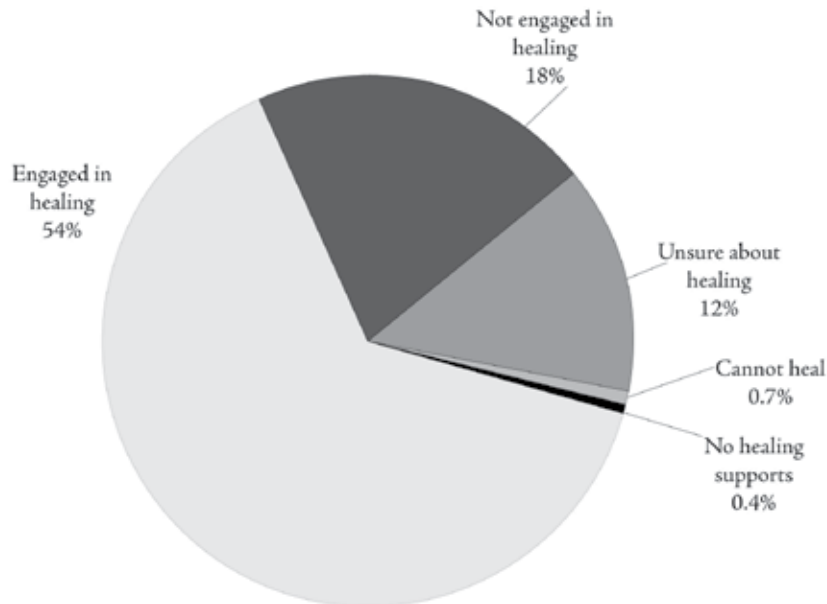
In other words, to the extent healing is already underway when a payment arrives, LSPs can play a role in enabling or deepening opportunities to build upon it. Meanwhile, [others] believed healing occurred as an indirect, almost accidental, result of LSPs [because]... it forced recipients to name their experience and deal with it (Dion Stout and Harp, 2007:30).

The 2007 study also reported that LSPs hindered healing when the receipt of payments “accelerated and exacerbated the problems of individuals” who were not on a healing journey (*ibid.*). Following up on these statements, the present study defined variables that could be used to measure the potential link between compensation and healing.

When asked to describe their concept of healing and how CEP affected their well-being, most participants discussed whether or not they were engaged in healing. Figure 11 shows that the majority were on a healing journey or were engaged in healing activities in order to deal with residential school issues, to cope with triggers, and to move forward after CEP. The remainder of participants said they were not engaged in healing either because they were not ready to begin healing or did not feel that healing was necessary, that they were uncertain about healing, that they could never heal, or that there were no healing supports available.⁹⁸

⁹⁸ SPSS Table 34.

Figure 11) Engagement in Healing



It might be expected that Survivors already on a healing journey would report a higher rate of positive personal impacts, but the present study does not bear this out. Survivors who said they were engaged in healing and those who said they were not, both reported similar rates of positive and negative impacts.⁹⁹ On the other hand, Survivors who stated they had been on a path toward healing before the *Settlement Agreement* were much more likely to say that the CEP process and money improved their well-being in some way and that at the very least it was a small step toward healing in their lives. In contrast, participants who indicated they were not on a healing journey were more inclined to say that CEP made no difference to their well-being or that the process and money hindered healing.¹⁰⁰

What is ‘Healing’?

Is healing something you think about?

All the time. Healing means you have to find yourself within, emotionally, physically, spiritually, culturally, mentally. Once you find that you are on the right road to emotionally heal, you need to work on yourself. After my [CEP] money was gone, I sat down and thought, ‘What was I thinking? What was I doing? What did this money do to me?’ It came to me at the wrong time, that was my thinking. It came into my hands at the wrong time.

When Survivors in the study group spoke about what healing meant to them, many participants said they thought about it a lot and when asked to define healing or if they were on a healing journey many

⁹⁹ SPSS Tables 34 & 35.

¹⁰⁰ SPSS Tables 36 & 37. The cross-tabulation results in SPSS Table 37 are statistically significant (95% level of confidence).

emphasized that healing is a life-long process. Because memories return and emotions resurface without warning, Survivors agreed that personal healing takes time, that it is a life-long process of living one day at a time. Survivors stressed that no one can heal overnight and certainly compensation was not a quick cure. Aside from these commonalities, individual definitions of healing varied considerably and constituted a wide range of personal perspectives on how to achieve well-being, as well as a few opinions about what does *not* constitute healing.¹⁰¹ Table 7 shows the variety of definitions interview respondents provided when asked the question: *What does healing mean to you?*

Table 7) Definitions of Healing

Healing Definitions	# of Respondents	% of total respondents (n=191)*	% of study group (n=281)
Healing is...			
...dealing with legacy of residential school	82	43%	29%
...getting addiction treatment	26	14%	9%
...participating in traditional cultural activities	25	13%	9%
...traditional approaches & holistic healing	23	12%	8%
...accessing professional services (Western therapeutic counselling)	21	11%	7.5%
...talking with someone you can trust	15	8%	5%
...personal happiness, health, balance	15	8%	5%
...Christian faith	13	7%	5%
...reconnecting to family & community	8	4%	3%
...helping others	6	3%	2%
...finding closure for deaths during/at RS	3	1.5%	1%
Healing is <u>not</u>...			
...holding back	15	8%	5%
...compensation (CEP)	10	5%	4%
...for me; it's for those who were abused	3	1.5%	1%
Do not think about or unable to define healing	12	6%	4%

* Multiple responses; n = 191 or 68% response rate (90 participants = no response).

The most common definition of healing related to learning about the residential schools system (legacy education) and understanding the impacts of Survivors' experiences as being at the root of their problems:¹⁰²

¹⁰¹ Atlas Table 14. 191 participants (68% study group) responded to the question, "what does healing mean to you?"

¹⁰² Atlas Table 14: 82 participants (43% respondents; 29% study group) defined healing as dealing with the root issues of residential school. Another three (3) participants stated that healing meant finding closure for deaths during / at residential school.

Being able to name a threat or cluster of reactions gives the individual a sense of control over their emotions ... Legacy education is particularly useful when it explains that the reactions to the residential school experience are normal and predictable consequences of institutional trauma, and not an individual character flaw or weakness (Kishk Anaquot Health Research, 2006:42).

By sharing their stories, many Survivors were able to release the pain of dealing with their memories on their own. Participants suggested that this does not mean dwelling on the past but rather involves facing the memories, dealing with the emotions, forgiving yourself and others, and then getting on with life. For example, an Inuk Survivor faced his memories by searching for the family and visiting the grave of the Catholic priest who abused him:

I did research on him and I found out that he had eleven brothers and a sister... and I talked to his sister and one of his brothers. And to me, that was part of healing. I found and went to his grave across the river... so to me, it was part of my healing, to find out who he was and why he did it. And also, I've been going to counselling for a long time about my issues... I went to all kinds of different workshops and residential school reunions and anything to do with residential school. I try to get information and participate in them because its part of healing for me.

For a woman in Saskatchewan, healing meant releasing the guilt she harboured for being an abusive parent and seeking forgiveness and understanding from her children. Another Survivor from the same community explained that when young adults graduated from residential schools, they lacked parenting skills to the point where she could not even say 'I love you' to her children. Other participants described healing as accepting that whatever happened in residential school was not their fault and learning to unload their guilt.

Indeed, the idea of moving forward and living for the future was a critical element in this definition of healing. One Survivor interpreted healing as finding answers about his past, learning from them, and then continuing on with life "in a new light, like a new day." For a few Survivors, this included a specific need to find closure for the deaths that occurred in families and among friends during and as a result of residential school experiences. For example, a woman in Nova Scotia said she had miles to go before she could heal because she still had no closure concerning the death of her mother: "I wasn't allowed to mourn or cry or talk about her in residential school." Another Survivor from Alberta was still searching for closure on the death of a friend at the mission school:

He used to get beatings every night, almost every night... and one day he went to the hospital after the beatings. He came back in a box. He was about seven years old. That has bothered me a long time... There's a lot of kids that dies that are not recorded. That's the healing process you're talking about. I don't know if I was really healed about it. This is just opening old wounds.

Many participants conceptualized healing as a spiritual journey in which they were learning to deal with the anger and sadness rooted in their school experience and to live in peace. One Survivor described healing as "digging out the old stuff and laying it out on the table... forgiving them and burying the past,

getting it over and done with, and working on your issues.” Another defined healing as unloading a big chip from his shoulder.

Conversely, holding back by refusing to talk about one’s residential school experience and resisting the urge to forgive perpetrators were labelled as *not* healing.¹⁰³ One man likened this to nurturing garbage, adding that until anger is replaced with forgiveness and until Survivors are content with who they are, healing will not happen. The healing process begins with oneself—Survivors must want to seek healing as the first step. For one Survivor, participating in the study interview was his first step toward healing because it demonstrated a willingness to be open about his residential school experience. A participant who was both a Survivor and a project counsellor noted that people are beginning to recognize that the legacy of residential schools is a root cause of social ills in Aboriginal communities:

I guess the positive effect [of CEP] is that people realize that they have been traumatized from the residential school. They have been really affected in a lot of areas because of their residential school, like parenting, anger, a lot of pent up emotions because of the residential school. But also because they don’t know how to cope. A lot of them will turn to drugs and alcohol and I think people are starting to recognize what has caused all this dysfunction. So now that they understand what caused it all they can start their healing process.

Quite a few participants defined healing in terms of traditional Aboriginal cultural practices or wellness practices and noted these as the most effective way to deal with root issues of residential school experiences.¹⁰⁴ Some First Nations Survivors defined healing in terms of their traditional wellness practices, such as smudging and sweat lodge ceremonies, and the importance of holistic philosophies, such as the medicine wheel, traditions that focus on spiritual healing by restoring balance in the body, mind, and spirit. A First Nations Elder from Nova Scotia said “our DNA” is in the sweat lodge, the tobacco, and the ceremonies. Grounded in traditional knowledge since the beginning of time, he believed these ceremonies were essential to resurrect Mi’kmaq culture. Inuit and Métis Survivors focussed more on the importance of participating in traditional cultural activities, such as being out on the land, fishing, trapping, hunting, learning traditional cultural skills from Elders, creating art, writing stories, or learning to speak fluently in their Aboriginal languages. These types of traditional activities were seen as natural pathways toward cultural healing because they revive core values of resilience and survival and return part of what was lost as a result of residential schools:

There are all these little courses on how to skin beaver and how to... all these little things. And my friend and I are thinking on how to build a two log high little winter camp, to put up a tent. So we are starting to get into that. I think that is part of building your self-esteem for native people... That would be part of my healing. I’m starting to realize that. My dad was a trapper and I wanted to be like him.

¹⁰³ Atlas Table 14: 15 participants (8% respondents; 5% study group) said holding back is *not* healing.

¹⁰⁴ Atlas Table 14: 25 participants (13% respondents; 9% study group) defined healing as participating in traditional Aboriginal cultural practices; 23 participants (12% respondents; 8% study group) defined healing in terms of Aboriginal wellness practices and philosophies. See also Atlas Table 8: 54 participants (19% of the study group) advocated traditional healing practices to deal with residential school issues.

Those who stressed the importance of cultural activities as a source of healing believe that upholding one's cultural traditions also promotes healthy lifestyles: "The residential school just about killed the Indian in us, so to speak... Bring the people out in the forest, out on the land and your job is half done."

Similarly, many projects reported that Survivors wanted to participate in cultural interventions that serve to reclaim skills or knowledge that was lost. One project staff member highlighted the positive effects of re-learning cultural practices:

The whole focus of our programs is on learning or re-learning traditional skills and developing pride in oneself and one's culture to help redevelop self-esteem. Because one of the worst impacts of the programs and services that have come here over the last fifty years has been loss of traditional skills of all types; traditional clothes making skills, traditional way-finding, traditional interpretation of weather and climate signs, and even loss of languages is closely related to those things.

AHF-funded projects scanned in the course of this study commented on the importance of reclaiming history and revitalizing cultural practices and traditions as a step along the healing journey. One project staff member indicated that Survivors are increasingly interested in learning more about their culture and history:

Some Survivors are requesting group healing... sweat lodge ceremonies, pipe ceremonies, sweetgrass ceremonies, drumming, chanting. Because the Indian was beaten out of them when they were children, they want to know what it is like to be Indian again. And these ceremonies bring that back... So a lot of them request a traditional person to come in and bring back the ceremonies and teach them... and it is basically a talking circle after that... It is not necessarily talking about their experiences at school, because a lot of them have already dealt with that. They want to know more about the ceremonies, what it is like to be an Indian, what they have lost, what they are going to get back.

Re-enculturation along traditional Aboriginal paths was seen as not only revitalising in itself, but also as a defiant demonstration of practices denied in the residential schools and about which children were taught to be ashamed. Several Survivors alluded to what they felt was the main lesson of the residential school system: that they were "not good enough as an Indian." A woman from the Yukon explained that her residential school experience trampled the love and respect she had for her parents and replaced it with shame towards her family, her home, and her First Nations identity. An Inuk Survivor who refused to see counsellors because they reminded her of the "nuns who lectured, lectured, lectured," preferred to be with Elders who taught her traditional sewing techniques: "This is how it should have been, these are the things I was deprived of... I'd probably be healing more if I was learning to become a seamstress." For a First Nations woman in British Columbia, cultural and spiritual traditions were the most reliable and effective treatment for residential school issues:

Healing is a whole journey. I use my traditions because that's the strongest thing as a First Nations person - that's the strongest way that I can bring my spirit into everything else: my way of thinking, my intellect, to support the physical things that I do... I've drawn my strength from my grandmother and my grandfather's teachings about taking care of children and taking care of myself. Making sure that I not only eat well but that I

am always relating to the Creator. I used to go to the sweat lodge and I totally approve of anyone going to the sweat lodge, whether it's their culture or not because you sure get a lot out of it. You realize your inner strengths and the spiritual connection. When I pray in the sweat lodge or down by the river, I get so connected to the Aboriginal teachings. They not only make sense but they've been there for eons. That's how we lived.

There were also Survivors who held fast to their Christian beliefs as the source of their healing and capacity to forgive, to find inner peace, and to move forward.¹⁰⁵ One Survivor coped with negative memories and triggers through prayer. Another believed that prayer helped her along her healing path because she felt less alone and more at peace, especially when "walking in the bush and thanking God for this beautiful place. It's a gift."

Several participants defined healing solely in terms of accessing Western methods of treatment such as counselling and treatment for addictions. Healing meant taking advantage of available services such as one-on-one counselling, healing circles, AHF-funded healing activities, or gatherings until a Survivor has recovered enough that school memories no longer affect his or her daily life. In short, to heal meant to acquire a set of coping mechanisms. For example, a participant said that if she did not have the AHF-funded project to turn to she would have turned to alcohol for relief.

For close to ten per cent of Survivors in the study, healing was defined as dealing with addictions and healing involved the recognition that addictive behaviour is at least partly a consequence of the residential school experience and legacy.¹⁰⁶ A story from a Survivor in the Yukon demonstrates the need to link healing for addictions with healing for residential school issues:

From when I was born I was raised up in the bush. Then the next thing you know I was taken away in an orange bus and the next thing I know, the rest is history I guess. All that stuff that happened when you were young - I used to have a lot of rage, uncontrollable rage. I can't sleep - when I'd get up in the morning I was just really mean and it all stems from what I experienced during when I was 5, 6, 7 years old in residential school in the dorm when the night watchmen would come and all that stuff... That's why there is so much alcohol and drinking in our village right now because it stems from what all happened in those residential schools, in [residential school]. You could say that I have a lot of scars, but you can't see it... If you say I'm healing, I was doing that since I sobered up.

Two Survivors in the Northwest Territories clearly acknowledged the connection between their residential school experiences and their addictions. One man said he wanted to heal by going to a detox-centre to deal with addiction issues and a woman shared that she had gone to treatment centres three times but her residential school issues kept turning her back to alcohol: "It hurts so much deep inside, so that's why I kept drinking and falling down." As mentioned earlier, a problem identified by several Survivors was

¹⁰⁵ Atlas Table 14: 13 participants (7% respondents; 5% study group) defined healing in terms of their Christian faith.

¹⁰⁶ Atlas Table 14: 26 participants (14% respondents; 9% study group) defined healing as seeking treatment for addictions.

that many addiction treatment programs do not know how to address residential school experiences as a root cause.¹⁰⁷

In a few cases, project workshops and gatherings were not considered by Survivors because they wanted to forget about residential school or they believed they could never heal.¹⁰⁸ Service providers spoke about the shame and fear of discovery that can impede a Survivor's capacity to seek healing services. Many projects reported that Survivors were having still experiencing trauma and emotional distress due to their experiences at residential schools and that some individuals were "not ready and never will be... Some are too much into bitterness and anger and rage that they will never be able to access [healing services]." Another service provider pointed to the silence that can stem from Survivors' memories of residential school and the impact this has had on everyday life in the community:

The pain; the pain is so horrific for them that they don't even want to go there. It is just too hard and the memories of everybody, you know even their own relatives, some can't even look at them or talk to them because of what happened there. It is so horrific that as much as they love each other, they can't even go to each other because of that. Even looking at each other, sneaking little peeks at each other.

Survivors often described healing as a very personal journey that did not involve any formal or professional supports.¹⁰⁹ As discussed earlier, moral support from a trusted family member, friend, or Elder was important to many Survivors: it helped to lift spirits, to lessen the load of heavy burdens and to cope with flashbacks related to residential school. For example, an Inuk Survivor living in an isolated hamlet defined healing as "sharing with someone who won't tell anyone else." A First Nations Survivor in rural Saskatchewan said her own way of healing was talking to family and friends about the abuse she suffered at school.

Healing was also derived from helping other Survivors either in material ways or by encouraging and assisting them to participate in healing activities. An elderly Survivor defined healing as helping his grandchildren financially and being "a giver, not a taker." A younger woman said that helping other women at a local shelter by sharing what she went through was part of her own healing process and a couple who provided healing massages in Survivors' homes said that was healing for them as well.

Personal healing also involved nurturing ways to reconnect with community and family. For example, some Survivors highlighted reconnecting with brothers and sisters, learning to be a good parent, regaining love and respect for their parents who sent them to residential school, or learning about ancestors through genealogical research:

¹⁰⁷ Atlas Table 7: Treatment centres that do not deal with root issues related to residential school was identified as a "qualification" issue.

¹⁰⁸ Atlas Table 7: 22 participants (19% respondents; 8% study group) identified "self" issues as the main reason they did not access available services and supports. For example, Survivors "do not want" or "do not need" to use services; they "cannot heal"; their addictions are a barrier to access (e.g., "forget" to attend).

¹⁰⁹ Atlas Table 14: 15 participants (8% respondents; 5% study group)s aid healing is talking to someone they trust; 15 participants (8% respondents; 5% study group) said healing is personal balance, happiness and health; 8 participants (4% respondents; 3% study group) said healing is reconnecting with family and community; 6 participants (3% respondents; 2% study group) said healing is helping others.

All this wounded-ness that's happened from residential school, our children and grandchildren are affected by that. They could learn so much from the Elders if they could re-connect. I found that out for myself, when I went to [residential school]. I didn't know what was missing from my life. I did a four-day fast and I felt like I reconnected to my ancestral line. I got something back in my life. I've been searching and searching. [...] I'm a researcher, for my family tree. I look through the years of things that happen in the past... they had to punish the Indian people if they did anything wrong and in those days everything was wrong... They banned the potlatch system, they took away their identity. When I did the fast, I got my identity back, my roots, my re-connection. I did some fasts in the past, I could get a dream or something. You don't realize how rich our ancestors were, surviving, being happy, doing things they used to do.

A Survivor in Quebec was tracing her clan ancestry not only to rediscover her roots but also to heal the isolating effects of her residential school experience and to mend the gap between generations. Some participants said that healing came from learning to show love to their children, but also learning to love the child inside of them who attended residential school. A woman in Manitoba said she was just beginning to realize that the reason she could not hug her family or tell them she loved them was because "I didn't love myself... and I don't have much time left to learn to love [and] how to give it freely." Another woman in Nunavut felt that the only way she could heal was if the person who abused her as a child personally apologized and showed regret for what happened. Other Survivors said healing meant breaking away from a cycle of abuse within their families. Some of these individualized descriptions of healing convey the need for Survivors to be released from guilt and shame, to build self-esteem, and to know for certain that abusers cannot hurt them anymore. For many, healing was a deeply personal journey toward balance and finding ways to be healthy on one's own, of being happy within themselves.

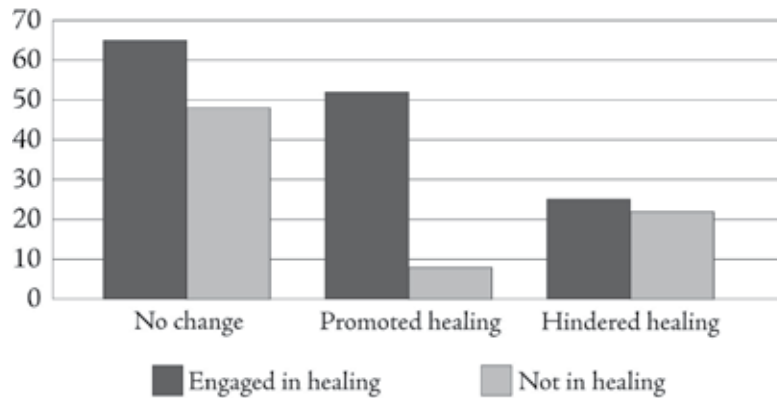
CEP - A Step along the Healing Journey?

I feel like we should be getting more money through the CEP. So I just got to keep on surviving, I guess. The other day, I was visiting my friend; she went to [residential school] too. She's older than me, sort of an Elder I guess. She said, 'How are you doing?' And I said, 'I guess I'm doing ok, I'm surviving.' 'How come you're always surviving?' she said, 'Why don't you say something like, you're thriving?' But it's hard you know. It's hard to survive. It's just hard. It's tough. It's a tough journey being on this healing journey.

Each participant was asked whether the CEP experience had a healing effect and if there had been any changes in their well-being compared to the time before the *Settlement Agreement* and CEP. Analysis of responses to this question led to three definitions: 1) CEP made no change: money is not connected to healing because it can never replace what was lost; Survivors were on a healing journey before CEP so it made no difference; or Survivors felt no need for healing; 2) CEP promoted healing because it acknowledged residential school suffering, it revealed that Survivors were not alone and it afforded healing activities, or the money helped improve family conditions and promoted self-esteem, and; 3) CEP hindered healing: the process represented a negative time for Survivors who felt worse off than before and the money was associated with pain, anger, sadness, and bitterness. Figure 12 below shows

that more than half of the study group said CEP made no difference to their well-being; over a quarter said the process was a step along their healing journey; and about twenty per cent said it was a step backward.

Figure 12) Effects of CEP on Healing and Well-being



It is important to note that these results are not mutually exclusive. A few participants spoke about all three types of connection between CEP and healing, demonstrating the complex relationship between redress and retributive justice.¹¹⁰ For example, this participant touched on all three themes, but concluded that CEP impeded healing by building his anger:

I didn't care. I just spent it... So, it didn't really help me at all... [I felt] anger. Is it really worth it to get that money? I started asking those questions. [...] But [it was healing] in a way, because you deal with some of the memories, reflecting back on that period. But as far as I'm concerned, the money didn't really help... It was a waste of the money. Because that was a lot of money. [...] The money didn't heal me. It's never going to heal me, the money is never going to heal me. It just built the anger.

As mentioned earlier, Survivors who stated they were already on a healing journey before the *Settlement Agreement* were more likely to say that the CEP process and money promoted healing in some way, while participants who indicated they were not on a healing journey were more inclined to say that it either made no difference to their well-being or that the process and money actually hindered healing.¹¹¹ The information and stories Survivors shared about their personal healing journeys suggest that over half of

¹¹⁰ Cf. Nagata and Takeshita (2002). Further context and analysis on this complex relationship is provided in their article, "Psychological Reactions to Redress: Diversity Among Japanese Americans Interned During World War II."

¹¹¹ SPSS Table 37: 51 participants who said they were on a healing journey (35% of "Yes") said that CEP promoted healing in some way, compared to 9 participants who were not on a healing journey (11% of "No"). This result is statistically significant (95% level of confidence).

the study group were engaged in healing.¹¹² Many Survivors explicitly stated that they were on a healing journey either long before, in the course of, or since the *Settlement Agreement* and CEP. Other Survivors' stories about how healing activities helped them to cope, to forgive, to move forward, and to lighten the burden of residential school trauma implied they were also on a healing journey. A third group of Survivors described their healing journey away from addictions which in the context of the *Settlement Agreement* and CEP was viewed as a key step in their healing journey to deal with school issues. Together, this group of Survivors generally possessed a strong sense of what constituted the healing journey and provided many of the clear and detailed definitions of healing referred to above.

About a third of the Survivors in the study indicated they were not on a healing journey, either because their school experiences were relatively good and there was no need to heal or because the experience was so bad that they believed they could never heal. Others said they were not ready to deal with residential school issues or they were uncertain about how to embark on a healing journey and what that might mean for their lives. Finally, a few said they were not on a healing journey because there were no services or supports in their community that they could trust or that they believed could help them. Many of these Survivors spoke freely about healing and said they thought about healing, but that was as far as it went for them. Among those who said they could not heal, questions about well-being sometimes elicited bitter, angry, and vindictive responses aimed at churches or the government. Indeed, whether or not individuals were on a healing journey often did not factor into Survivors' opinions about the federal government's intent and initiatives to deal with the legacy of residential schools:

Money is money. It does not eliminate the suffering. I saw other people react differently. I do not associate the payment with the suffering I endured in residential school. I found the apology presented by the government to the Aboriginal population very touching, but I do not have any compliments for the Conservative Government for their role in the handling issues related to residential schools. The conditions of our communities are still to be dealt with. Healing has just begun.

No Connection between CEP and Healing

Money is just compensation. Healing was separate.

Why would cash make it better? No, there has not been a healing effect from the money. There have been no changes in my well-being.

For nearly half of the participants in the study, compensation made no difference to their well-being. The main opinion among these Survivors was that there is no connection between money and healing and

¹¹² SPSS Table 34: Participants were asked if they thought about healing and to define what healing meant to them. This was generally followed by the question, "are you are a healing journey?" The full set of transcripts (n=281) were examined for responses specific to the healing journey question. As a result of this grounded analysis, it was possible to categorize responses into five themes (values) and to then transpose these into SPSS for frequency and crosstabulation analysis.

no amount of compensation can replace what was lost.¹¹³ Survivors expressed these sentiments by clearly stating that money had nothing to do with spiritual or mental well-being nor did it rid them of the life-long effects of residential school attendance. Some Survivors expressed this sentiment by stating they could not be bought, while others said that the money was owed to them as earnings, not as compensation and certainly not as healing. Others thought CEP was a waste of money because it could have been better used for healing programs and counselling. Quite a few Survivors who said compensation did not effect any changes had been on a healing journey prior to the *Settlement Agreement*, so the CEP had no impact on their well-being.¹¹⁴

Many comments demonstrated ambivalence by qualifying that the money itself was good, but nothing else: AIt is good that they gave us money, but the damage is done.” One First Nations Survivor who said she was currently on a healing journey explained that “I don’t think the CEP actually really did anything for me in that way, for self-help, because I basically did that on my own.” Another warned that Survivors who complained about CEP were not healed and had fallen into greediness because the money could never be enough to buy happiness, language, or culture. A Survivor from the Yukon echoed this sentiment:

No amount of compensation will negate what happened to me. I accept what was offered and that’s it. I leave it at that, because I don’t want people, the general public as a whole, especially the western society to view this as a money-making venture by the native people for the abuse that they suffered... At one point I thought maybe that I would go to court but I said, what’s the use? For me its pointless, its done. How others want to pursue it is really up to them. It’s a personal thing.

CEP Promoted Healing

A healing effect? I guess I have worked hard on my healing in this time. I don’t know if it came directly as a result of the CEP though. It came from me going home after 27 years in the city. I [went home] for 5 years. Having said that, though, a big part of my interaction with the community was around the CEP. We created a group up there and it is still ongoing, they are working on the IAP as a result of that. That is pretty healing, being involved in the residential school group that we created... When you hear your Elder speaking about what happened to them, it always has a healing effect. I heard some of our Elders sharing and I just can’t believe it. I thought my experience was horrendous but the generation before me, the corporal punishment and brutality are like double what I went through.

¹¹³ Whether Survivors received their full claim or only part of their claim is not a major factor in the correlation between compensation and healing, a finding consistent with the majority opinion of Survivors in this study that money and healing are separate issues. See SPSS Table 38: Almost equal per centages of recipients who received full and partial claims stated that CEP either promoted or hindered healing, or made no difference.

¹¹⁴ SPSS Table 37: 67 participants on a healing journey (46% of “Yes”) reported “no change.” Atlas Table 13: 17 participants (8% respondents; 6% study group) explained that the reason CEP made no difference was because they were on a healing journey before it arrived.

Almost one quarter of the Survivors in the study said that the CEP process or money promoted healing to some degree.¹¹⁵ These Survivors found it was a kick-start to deal with residential school issues and that they were able to speak more positively about themselves. In Saskatchewan a First Nations participant said CEP started a gradual process of openness about her school experiences:

I'm starting to slowly talk to my children about my residential school experiences, because before I never did. I blocked it out, it was part of my past I didn't want to bring up. I put it back there. That's what [CEP] did - it brought it out. I'm going through my healing journey, I have to bring it out not as much to my kids but to my friends, to my healing circles... [...] The change is I'm remembering more stuff, the more negative stuff. It's good because I'm able to deal with it and go on. In that way it's good. I remember the good stuff too, the lifelong friendships I made, since I was 8 years old. I still see them.

For most of these CEP recipients, the process was a small step forward in their healing journeys because of what it symbolized: compensation was tangible acknowledgment of suffering in the residential school system, it revealed to Survivors that they were not alone, and it provided a sense of closure as payment for what was lost. A few Survivors were pleasantly surprised because they had not believed that the government would actually follow through on compensation. The history and experience of colonialism in the North led one Inuk Survivor in Nunavut to state that "when you've been mistreated by the [white people] it makes it hard to trust that when you're given something like that, that it's real." Survivors viewed this monetary acknowledgement as fundamental to Aboriginal peoples' well-being: "When they finally said they would get compensation I felt better for myself and other people."

The symbolic significance of the CEP was often associated with that of the federal government's apology on 11 June 2008.¹¹⁶ The fact that an official apology was finally offered made the receipt of compensation more significant to some Survivors: "To realize that they finally apologized, that made [CEP] even better." Also, for a few individuals, although the CEP process was painful and frustrating it nevertheless opened the door to healing and took away some of the pain. For others, it was merely a nice gesture but certainly not the cure. A Survivor in Quebec said, "It is like a bandage - once you remove the bandage the wound is still there." Nevertheless, several applicants who were still waiting for CEP believed it would help them heal because they deserved it and hoped that their experience would be recognized along with other Survivors.

Participants also said compensation promoted healing because the relief from financial stress improved their overall well-being:

I think what happens is, if there was any stress level, and stress can find its way into your life and if it affects you, it can slow you down. Like financially, things just start building up. In that way, if that part is alleviated, it lessens your burden to bring attention to what you're really trying to do. It gives you time.

¹¹⁵ SPSS Table 36.

¹¹⁶ Note, however, that there does not appear to be any correlation between those who said CEP promoted healing and those who thought the apology was sincere (SPSS Table 39).

It was also a good feeling to help family, friends, and other Survivors and often distribution of the money led to conversations about residential school, a growing understanding by children of what parents went through as children, and generally improved relationships between family members. A participant said that when she gathers with her family they “usually talk about residential school and our feelings” and younger members are “hearing it - they ask questions and we try to explain to them.” Relief from debt, acquisition of some needed or desired material possessions, and investments in the future were all seen as curative in terms of healthier self-esteem. For instance, a Survivor shared that being able to pay off a long-term housing loan was a load off his chest and a big change to his well-being.

CEP Hindered Healing

It exacerbated [the pain]. It did NOTHING towards my own healing... I can never be healed. You can't get rid of that anger, without constant support and counselling. I haven't had that opportunity... If anything, I've deteriorated.

For almost every CEP recipient whose well-being was improved by the compensation, another recipient said that the CEP process and money were steps backward on their healing journeys.¹¹⁷ When Survivors in this latter group embedded their CEP experiences within a context of healing, the ‘10 plus 3’ formula was seen as a deterrent because it so blatantly paled in comparison to the destructive effects of the residential school system. They viewed CEP as “too little, too late,” stated that too many Survivors died before the *Settlement Agreement* was implemented, and criticized the process as unfair especially for those Survivors who were deprived their full payment or who were denied any payment at all. One participant felt hurt that there was no compensation for the families of his relatives who had passed away before the *Settlement Agreement*, adding that the government should have considered such families. Another responded that CEP caused him to reflect on “how bad my life was... I wouldn't have been where I've been.” For these Survivors the CEP represented a negative time in their lives and left them feeling worse off than before. For example, Survivors said they went into a depression as a result of CEP and or harboured bitterness, anger, and even hatred after receiving payment.

CEP aggravated emotional wounds, triggered traumatic memories, and led to depression, thoughts of revenge, suicide, and addictive behaviours. This was particularly the case among Survivors who said they were not ready to deal with residential school issues and whose healing process was paralysed at least for a time:

Before the CEP, we used to talk about it. We had meetings in the bush under a tent, and we talked about it in order to help each other. We wanted to get to the root of the problem. When we heard about the CEP, we thought it might provide some help. It did not help me. The lump I have in my throat is still there. It is like some cement has been poured on that lump and made it even harder, it made it worse. I have some anger inside me and it is like, by giving us money they wanted to calm me and shut me up.

¹¹⁷ SPSS Table 36. 19% of the study group said that CEP hindered healing, compared to 24% who said CEP promoted healing.

One man said he ignored his plans for addiction treatment once the CEP money arrived, opting instead to just spend it. Another was very frank about his CEP experience: "Dealing with it took me more into depression. I tried to kill myself... [CEP] opened the doors back up and I can't get over it so I just stay drunk." For these and several other Survivors, the CEP process made residential school abuses a reality that they did not want to accept. A few Survivors concluded that they could never heal.

In summary, CEP hindered healing by stirring up feelings of bitterness and resentment toward an inadequate '10 plus 3' formula, anger toward eligibility criteria that deprived compensation to many living Survivors, and grief over the many Survivors who died before the *Settlement Agreement* was implemented. Yet there are also encouraging stories about how the CEP process has promoted healing, most notably because of what it symbolized: compensation was a tangible acknowledgment of suffering in the residential school system, it revealed to Survivors that they were not alone and prompted them to open up about their experiences, and it provided a sense of closure for what was lost. Many Survivors, however, shared the opinion that there is no connection between money and healing and no amount of compensation can replace what was lost at the hand of the residential school system.

Chapter 8

Conclusions

The Common Experience Payment and Healing

This research study sought to determine if the common experience payment had an impact on individuals and their engagement in healing and, if so, how? The answer is complex and varied, mainly because most participants saw no connection between money and healing. No amount of compensation could repay the language and cultural losses incurred from a residential school system that lasted for 150 years and involved generations of Aboriginal children. Hence, for about half of the Survivors in the study, compensation made no difference to their well-being.

Nevertheless, about a quarter of Survivors in the study said that, yes, the CEP process was a step forward in their healing journeys because of what it symbolized: compensation was a tangible acknowledgment of suffering in the residential school system, it revealed to Survivors that they were not alone and prompted them to open up about their experiences, and it provided a sense of closure. For some of these Survivors, the symbolic significance of the CEP was elevated by the federal government's apology on 11 June 2008. Many of these Survivors also acknowledged the material benefits to their well-being, including relief from financial stresses or the joy of sharing with family.

For almost every CEP recipient whose well-being was improved by the compensation, however, another recipient said that the CEP process and compensation were steps backward on their healing journeys. These Survivors expressed bitterness and resentment toward the '10 plus 3' formula that they considered an injustice compared to the destructive effects of the residential school system. Too many Survivors died before the *Settlement Agreement* was implemented and too many living Survivors were deprived compensation. For many of these participants, the CEP process was wrought with painful memories and traumatic flashbacks and generally represented a negative period in their lives that left them feeling worse off than before.

This study indicates that Survivors who were already on a healing journey before the *Settlement Agreement* were more likely to say that the CEP process promoted healing in some way and that, at the very least, it was a small step toward healing in their lives. In contrast, Survivors who indicated they were not on a healing journey were more inclined to say that CEP made no difference to their well-being or that the process and money hindered healing.

Impacts of CEP Compensation

When Survivors received their CEP compensation, they noticed immediate changes at both an individual and a community level. Although more participants described positive types of impacts than did those who described negative impacts, this *frequency* should not be confused with *magnitude*: the negative impacts described by participants were profoundly destructive for many Survivors and their families and in some communities greatly outweighed any positive, material benefits of the payments. The general message of Survivors' accounts of negative impacts was that the decision to settle for individual monetary compensation was misguided and insufficient, compounded by a lack of planning on the part of those

implementing the CEP to prepare for the triggers, self-destructive reactions, and predatory behaviours. In turn, Survivors' accounts of positive impacts convey a tendency to separate issues of healing from issues of money and hence to simply view the compensation as materially beneficial in its own right. Indeed, a relatively high rate of positive impacts reported by participants who received their compensation within six months of the interview suggests that the satisfaction derived from the CEP money was for the most part temporary.

Almost half of the participants said they experienced both positive and negative impacts. Fundamentally, this dualism was characterized as CEP being positive in material and financial terms but also negative because these benefits did not outweigh the sense of injustice in the '10 plus 3' formula nor did they alleviate the pain of triggered emotions and memories of trauma from their residential school years.

Positive impacts of CEP were mainly pragmatic: the money relieved financial stress and allowed Survivors to make purchases they previously could not afford. Another benefit of CEP was the opportunity for Survivors to share with family and friends. Some Survivors were glad to share the money with their children as a forgiveness gift for poor parenting skills and intergenerational harm, both legacies of the residential school system. In these instances, the redeeming qualities of CEP were borne out of pain and guilt. Several Survivors commented that the CEP money was symbolically important as a tangible recognition by Canada of the Aboriginal experience in the residential school system.

Negative impacts of CEP included strong feelings of injustice, resentment or bitterness among Survivors who believed the *Settlement Agreement* and the '10 plus 3' formula were woefully inadequate. These Survivors depicted CEP compensation as blood money or hush money. For several Survivors, receiving the money resulted in depression, thoughts of suicide, or self-destructive and addictive behaviours. Also of concern to Survivors were family rifts and divisiveness over the distribution of the money, as well as instances of Elder abuse, lateral violence, or predatory behaviours by fellow community members or outsiders.

AHF's *Lump Sum Compensation Research Project* predicted in 2007 that whether or not a Survivor was on a healing journey would be a critical variable in determining the impact of compensation. Although it might be expected that Survivors already on a healing journey would report a higher rate of positive personal impacts, the present study did not bear this out. Survivors who said they were on a healing journey and those who said they were not, both reported similar rates of positive and negative impacts.

Support for Survivors during the CEP Process

A second objective of the CEP study was to determine what services and supports were valuable to individual CEP applicants and recipients. That a support system would need to be in place by the time Survivors applied for and received large sums of compensation money was anticipated and recommended in the 2007 *Lump Sum Compensation Research Project*. Indeed, a significant finding of this study is that a large majority of Survivors did in fact require or desire some kind of support during the CEP process. Yet, up to forty per cent of the study group identified barriers to accessing needed services and supports. The CEP applications and especially the reconsideration requests were far from perfectly implemented, and many Survivors found these processes emotionally very difficult. Perhaps the nature of the residential school legacy is such that even a deeply sensitive process with the necessary supports in place could

not have protected every Survivor. As many Survivors noted, healing starts within oneself and involves acknowledging and then releasing the pain, hopefully in a supportive environment and among people who understand the full implications of the residential school legacy.

A most profound effect of CEP and reconsideration is the extent and depth of negative emotions and traumatic flashbacks triggered by the application process. More than a third of Survivors in the study group reported that they were triggered by the process to some degree. The most common explanation was that going through the CEP process brought back negative memories and opened old wounds. Survivors described reactions to these memories ranging from discomfort and a sense of loneliness to feelings of panic and pain leading to depression and self-destructive harm including addictive behaviours and suicidal tendencies.

Many study participants found the CEP form-filling difficult or complicated and stated that the long wait for processing of their applications and payments created anxiety, confusion, and frustration. Many applicants had to search for and gather school information that was difficult to locate because schools and records were no longer in existence. They were very critical of a process that put the onus on Survivors to prove attendance in a government-run school system that failed to ensure proper record keeping. Survivors, especially Métis, who were classified by the school system as day-students were critical of a compensation process that does not recognize their experience and will not hear their stories. Participants who found the CEP forms easy and straight forward were mainly under the age of 60, were fluent and literate in English or French, or lived in communities where Service Canada assistance was made available or where AHF-funded projects and other local organizations held form-filling workshops.

More than a third of the study group received what they felt was only partial payment or were rejected outright for CEP. For those who made reconsideration requests, the frustration of the CEP application process was magnified. These applicants were faced with the choice of retelling their story and of trying to prove their years of attendance in the hope that the government would validate their experiences. Participants were vehement that it was not their fault school records were lost, and many Survivors said they were made to feel like liars. Reconsideration applicants were particularly critical of the omission of some schools, hostels, and group homes from the list of recognized institutions.

Because of these logistical and emotional challenges, most of the Survivors in the study group required or wanted some kind of support during the CEP process. This support consisted of assistance with form-filling, counselling related to triggered emotions, or both. The over-riding theme in comments about services and support networks was the importance of support being available at the community-level. Many Survivors relied mainly on informal support networks including family, relatives, and friends because they did not trust the level of confidentiality and anonymity of more formal services. This was particularly the case in smaller communities. CEP applicants also sought assistance from local resources such as Friendship Centres, Band offices, land-claim offices, or community health centres. Almost a quarter of participants described the benefits of support and assistance they received from AHF-funded community-based healing projects. Participants said that the main benefit of projects' approaches is their focus on residential school trauma and that staff are Aboriginal and/or Survivors themselves.

A fair number of participants also said they used CEP-specific services and supports provided by government agencies. Where available, Service Canada application supports were generally viewed as

very helpful. CEP applicants were very critical, though, of the service offered through the CEP Response Centre for application and update information, saying they received little to no help, felt either intimidated or frustrated by operators, or that the service was insensitive to the nature of the effects the process was having on Survivors. The IRSRC crisis line was helpful to Survivors who needed counselling that was available any time of day or night. As well, Survivors who were reluctant to speak with local counsellors because of confidentiality and anonymity concerns welcomed the support offered by crisis-counsellors and Resolution Health Support Workers. An approach that worked well was collaboration between government service providers and local support groups such as AHF-funded projects. In particular, projects who contacted Service Canada to request assistance for form-filling within their communities reported on these joint sessions as positive experiences.

The environmental scan conducted for this study demonstrated a commitment among AHF-funded project staff to support Survivors during the CEP process by whatever means possible, often providing services and supports that were outside of the project's mandate. From a service provision perspective, Survivors' statements about lack of services at the community level speak to the increased demand for healing services since the *Settlement Agreement*. Most service providers interviewed for this project felt overwhelmed and some discussed the stress they experience in trying to meet Survivors' needs in the absence of staff increases or funding since the *Settlement Agreement*. In their view, the current level of healing support in communities is merely addressing the tip of the iceberg. This view is consistent with the recent survey of AHF-funded project activity since the *Settlement Agreement* which concluded that the healing has just begun.

Responses from Survivors about the need for and value of community supports are relevant to their ongoing participation in the Independent Assessment Process and the Truth and Reconciliation Commission. Already some Survivors were aware of the potential emotional toll of attending an IAP hearing and indeed ten per cent said they would not participate because they believed the experience would be much worse than CEP or reconsideration. Several stated that until they were confident in the counselling support available during the hearings, they were unwilling to subject themselves to the IAP process. Similarly, almost ten per cent of the study group said they were hesitant or would refuse to attend the TRC because they believed it would be emotionally taxing.

Support for both IAP and TRC was qualified by the hope that something tangible would result in terms of relations between Aboriginal peoples and the rest of Canada. In particular, Survivors hoped that the TRC would benefit Aboriginal youth and future generations by making public the true story of the residential school system and legacy. Indeed, many study participants spoke about CEP and compensation from perspectives that take into account the intergenerational impacts of residential school experiences. Survivors said that CEP was not enough because the *legacy* of residential school cannot be compensated, and also that individual compensation is illogical in the sense that the residential school experience is not an individual phenomenon - it is a family and community experience that crosses generations.

References

- Aboriginal Healing Foundation [AHF] (2001). *Aboriginal Healing Foundation Program Handbook, Third Edition*. Ottawa, ON: Aboriginal Healing Foundation.
- Archibald, Linda (2006). *Final Report of the Aboriginal Healing Foundation, Volume III: Promising Healing Practices in Aboriginal Communities*. Ottawa, ON: Aboriginal Healing Foundation.
- Brant Castellano, M. (2006). *Final Report of the Aboriginal Healing Foundation, Volume I: A Healing Journey: Reclaiming Wellness*. Ottawa, ON: Aboriginal Healing Foundation.
- Chartrand, L.N., T.E. Logan and J.D. Daniels (2006). *Metis History and Experience and Residential Schools in Canada*. Ottawa, ON: Aboriginal Healing Foundation.
- Chrisjohn, R. and S. Young (1997). *The Circle Game: Shadows and Substance in the Indian Residential School Experience in Canada*. Penticton, BC: Theytus Books Ltd.
- Dion Stout, M. and G. Kipling (2003). *Aboriginal People, Resilience and the Residential School Legacy*. Ottawa, ON: Aboriginal Healing Foundation.
- Dion Stout, M. and R. Harp (2007). *Lump Sum Compensation Payments Research Project: The Circle Rechecks Itself*. Ottawa, ON: Aboriginal Healing Foundation.
- First Nations Centre (2005). *First Nations Regional Longitudinal Health Survey (RHS) 2002/03: Results for Adults, Youth, and Children Living in First Nations Communities*. Ottawa, ON: First Nations Centre.
- Hagen, Greg (2005). Commentary: on ADR for residential schools claims "As of March 9 only 93 cases have been resolved using the ADR process and the program administration costs are reported to be nearly four times the settlement amounts." *Lawyer's Weekly*, 1 April 2005 Retrieved 20 January 2010 from: <http://www.lawyersweekly.ca/index.php?section=article&articleid=62>
- Indian and Northern Affairs Canada [INAC] (2009a). List of Recognized Institutions. Retrieved 13 October 2009 from: <http://www.ainc-inac.gc.ca/ai/rqpi/cep/mp/index-eng.asp>
- (2009b). Common Experience Payment Statistics. Retrieved 6 October 2009 from: <http://www.ainc-inac.gc.ca/ai/rqpi/cep/st/index-eng.asp>
- (2009c). Independent Assessment Process. Retrieved 16 July 2009 from: <http://www.ainc-inac.gc.ca/ai/rqpi/inasspr/index-eng.asp>
- (2009d). Common Experience Payments Process Overview. Retrieved 30 November 2009 from: <http://www.ainc-inac.gc.ca/ai/rqpi/cep/ov/index-eng.asp>

- (2009e). *Evaluation of the Advocacy and Public Information Program (APIP): Final Report*. Ottawa, ON: Audit and Evaluation Sector, INAC. Retrieved 9 March 2010 from: <http://www.ainc-inac.gc.ca/ai/arp/aev/pubs/ev/apip/apip-eng.pdf>
- (2009f). *Final Report: Evaluation of Community-Based Healing Initiatives Supported Through the Aboriginal Healing Foundation*. Ottawa, ON: Audit and Evaluation Sector, INAC. Retrieved 9 March 2010 from: <http://www.ainc-inac.gc.ca/ai/arp/aev/pubs/ev/ahf/ahf-eng.asp>
- (2008). *Audit of the Advance Payment Program*. Retrieved 16 July 2009 from: <http://www.ainc-inac.gc.ca/ai/arp/aev/pubs/au/app/app-eng.asp>
- Indian Residential Schools Resolution Canada [IRSRC] (2006). *Indian Residential Schools Settlement Agreement*. Retrieved 3 December 2008 from: <http://www.residentialschoolsettlement.ca/settlement.html>
- Jung, Courtney (2009). *Canada and the Legacy of the Indian Residential Schools: Transitional Justice for Indigenous Peoples in a Non-Transitional Society*. Retrieved 17 March 2010 from: <http://ssrn.com/abstract=1374950>
- Kishk Anaquot Health Research (2001). *An Interim Evaluation Report of AHF Program Activity*. Ottawa, ON: Aboriginal Healing Foundation.
- (2006). *Final Report of the Aboriginal Healing Foundation, Volume II, Measuring Progress: Program Evaluation*. Ottawa, ON: Aboriginal Healing Foundation. This can also be retrieved in PDF format from: <http://www.ahf.ca/publications/research-series>
- Lane, Phil, Jr., Michael Bopp, Judie Bopp, and Julian Norris (2002). *Mapping the Healing Journey: The Final Report of a First Nation Research Project on Healing in Canadian Aboriginal Communities*. Ottawa, ON: Solicitor General Canada and Aboriginal Healing Foundation.
- Logan, Tricia (2008). "A Metis Perspective on Truth and Reconciliation." In M. Brant Castellano, L. Archibald, and M. DeGagne (eds.), *From Truth to Reconciliation: Transforming the Legacy of Residential Schools*. Ottawa, ON: Aboriginal Healing Foundation.
- Miller, J.R. (1996). *Shingwauk's Vision: A History of Native Residential Schools*. Toronto, ON: University of Toronto Press.
- Milloy, J.S. (1999). *"A National Crime:" The Canadian Government and the Residential School System, 1879 to 1986*. Winnipeg, MB: The University of Manitoba Press.
- Nagata, D.K, and Y.J. Takeshita (2002). Psychological Reactions to Redress: Diversity Among Japanese Americans Interned During World War II. *Cultural Diversity and Ethnic Minority Psychology* 8(1): 41–59.
- Reimer, G. and S. Fryer (2009). "Mapping Progress" on Community Healing since implementation of the *Settlement Agreement*: Effectiveness of Evaluation Tools used by Projects funded by the Aboriginal

Healing Foundation. Report prepared by Praxis Research Associates. Ottawa, ON: Aboriginal Healing Foundation [in press].

Truth and Reconciliation Commission [TRC] (2009). Retrieved 16 July 2009 from: <http://www.trc-cvr.ca/overview.html>

Wesley-Esquimaux, C. and M. Smolewski (2004). *Historic Trauma and Aboriginal Healing*. Ottawa, ON: Aboriginal Healing Foundation.

COMMON EXPERIENCE PAYMENT

Who we are

At Service Canada, we bring Government of Canada services and benefits together in a single delivery network. We provide Canadians with one-stop, personalized service they can access however they choose - by phone at 1 800 O-Canada, on the Internet at servicecanada.gc.ca, or in person at Service Canada Centres across the country.

Our role in delivering the Common Experience Payment

Service Canada and Indian Residential Schools Resolution Canada (IRSRC) are jointly responsible for the Common Experience Payment (CEP) component of the Indian Residential Schools Settlement Agreement. At Service Canada, we will accept your CEP applications in person at our Service Canada Centres, by mail, or through our outreach locations in local communities. Once we receive it, we will process your application as quickly as possible.

How you can help us process your claim quickly

To avoid delays in processing your application, please remember to:

- include your proper identity documents;
- list your full name, as well as all names you were known by at residential school(s);
- list all of the residential schools you lived in and when;
- include your complete mailing address, including the postal code; and
- sign your application.

Please note:

- If you have any questions about the application form, please contact us at 1-866-699-1742 for assistance. TTY users can reach us at 1-800-926-9105. Both numbers are toll free.
- If you do not complete your application in full, or if you forget to sign it, our processing of your application will be delayed.
- If you cannot provide an original or certified true copy of one of the documents required to verify a change of name, you may submit a guarantor declaration (see attached). For more information on using guarantor declarations to demonstrate a change of name, please contact us at 1-866-699-1742 (1-800-926-9105 for TTY users) or online at www.servicecanada.gc.ca or visit your local Service Canada Centre.
- If we need more documentation than what we ask for on the application form, we will contact you directly by phone or mail.

We will process your application as quickly as possible, and we will notify you within 60 days of our making a decision. For information about the status of your application, **please contact us at 1-866-699-1742**. TTY users can reach us at 1-800-926-9105. Both numbers are toll free.

How we make the payments

Former students who receive a Common Experience Payment will have the option of either receiving a cheque by mail or having the payment made by direct deposit (available in Canada only). Direct deposit is the fastest and most secure option, since we deposit the payment directly into your bank account. If you would like to take advantage of direct deposit, please provide your bank information in the appropriate area of the application form, or attach a "VOID" cheque.

Please note: Direct deposit is not available for Common Experience Payments issued to estates or personal representatives of former students.



**APPLICATION FOR COMMON EXPERIENCE PAYMENT
FOR FORMER STUDENTS WHO RESIDED AT
INDIAN RESIDENTIAL SCHOOL(S)**

PLEASE PRINT IN INK
Please fill in all boxes or write "not applicable"

If you are applying as the legal Personal Representative of a mentally incompetent or minor person, or if you are applying for a person who died on or after May 30, 2005 or for someone who attended the Mohawk Institute and who died on or after October 5, 1996, please use the Common Experience Payment Application for Personal Representative or Estate available from Service Canada at www.servicecanada.gc.ca or call Service Canada at 1-866-699-1742 (TTY 1-800-926-9105).

SECTION A			
1. IDENTIFICATION		<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms	
		Language Preference <input type="checkbox"/> English <input type="checkbox"/> French	
Current First Name	Middle Name (if applicable)	Last Name	
OTHER NAME(S) BY WHICH YOU WERE KNOWN AT RESIDENTIAL SCHOOL AND/OR TRADITIONAL NAME <i>Please provide all names including name at birth and common alternate spellings and nicknames (example: Celina, Lena).</i>			
First Name(s)	Middle Name(s) (if applicable)	Last Name(s)	
Full names of mother, father and/or guardian(s)/caregiver(s) while you attended residential school (Guardian(s)/caregiver(s) may be traditional adoptive parents, extended family or members of your community). <i>Providing this information is not required for eligibility but may help us in confirming your school experience.</i>			
Mother (maiden/birth name)	First Name _____	Last Name _____	
Father	First Name _____	Last Name _____	
Guardian(s)/Caregiver(s) (if applicable)	First Name _____	Last Name _____	
Relationship of guardian(s)/caregiver(s) to the former student (for example, aunt, grandmother, friend, etc) _____			
2. CURRENT ADDRESS			
ADDRESS (No., Street, Apt., R.R., P.O. Box)		City/Town/Community	
Province/Territory/State	Country	Postal Code/Zip Code	Telephone number
MAILING ADDRESS (No., Street, Apt., R.R., P.O. Box)		City/Town/Community	
Province/Territory/State	Country	Postal Code/Zip Code	Telephone number

For assistance completing this form, please call Service Canada at 1-866-699-1742 (TTY 1-800-926-9105)



3. DATE AND PLACE OF BIRTH				
YEAR	MONTH	DAY	PROVINCE/TERRITORY/STATE	COUNTRY
PLEASE INDICATE WHICH GROUP YOU BELONGED TO AT RESIDENTIAL SCHOOL				
<input type="checkbox"/> Status Indian <input type="checkbox"/> Non-Status Indian <input type="checkbox"/> Métis <input type="checkbox"/> Inuit(Nunavut) <input type="checkbox"/> Inuit(Québec) <input type="checkbox"/> Inuvialuit <input type="checkbox"/> Non-Aboriginal				
<i>The information you provide in this section is mandatory. This information will be provided to Indian Residential Schools Resolution Canada to assist in processing your application in accordance with the Court approved principles.</i>				
4. PROOF OF IDENTITY REQUIRED				
Proof of your identity is required. See Section B for information. Please check which documents you are submitting:				
Key Documents:		If the name on the application is different than the key documents please provide an original or certified true copy of one of the following:		
<input type="checkbox"/> Original Birth Certificate or two of the following, one of which must have a photograph:		<input type="checkbox"/> Marriage Certificate/Registration <input type="checkbox"/> Divorce Decree <input type="checkbox"/> Legal Change of Name Document <input type="checkbox"/> Adoption Papers		
<input type="checkbox"/> Certificate of Indian Status <input type="checkbox"/> Provincial/Territorial Driver's License <input type="checkbox"/> Provincial/Territorial Health Card <input type="checkbox"/> Canadian Passport				
5. INDIAN RESIDENTIAL SCHOOL(S) AT WHICH YOU RESIDED (Please see Section C for School Number)				
Please tell us, to the best of your recollection, about all of the schools at which you resided. You will need to indicate the school number(s) from the approved list in section C and tell us when you started and when you left. If you left the school for a period of time (other than for vacation and/or holidays), then later returned to the same school, please list this as a separate school.				
School #	Resided:	From	To	
		Month or Season / Year	Month or Season / Year	
School #	Resided:	From	To	
		Month or Season / Year	Month or Season / Year	
School #	Resided:	From	To	
		Month or Season / Year	Month or Season / Year	
School #	Resided:	From	To	
		Month or Season / Year	Month or Season / Year	
If listing more than four Indian Residential Schools, please provide the information on an additional page. If you could not find the name of the school on the approved list, write the name here				
Town/Community and Province/Territory in which the school was located: _____				
Resided:		From	To	
		Month or Season / Year	Month or Season / Year	

For assistance completing this form, please call Service Canada at 1-866-699-1742 (TTY 1-800-926-9105)



6. IF YOU WOULD LIKE DIRECT DEPOSIT *(In Canada Only)*

Do you want your Common Experience Payment deposited into your account at a bank or financial institution?

No Yes (Complete this section)

If you have a Chequing Account, please attach an unsigned personalized cheque. Write the word "VOID" on the front of the cheque.

or

If you have a Savings Account, complete the boxes below (you may wish to contact your bank or financial institution to obtain this information):

<i>Branch Number</i>	<i>Institution Number</i>	<i>Account Number</i>	<i>Name of Financial Institution</i>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Name(s) on the account</i>		<i>Telephone number of your financial institution</i>	
<input type="text"/>		<input type="text"/>	

For assistance completing this form, please call Service Canada at 1-866-699-1742 (TTY 1-800-926-9105)



SIGNATURE

My signature/mark indicates that the information I have provided in this application is true and accurate to the best of my knowledge. I acknowledge that knowingly making a false or fraudulent application could result in criminal prosecution. I understand that every application is subject to verification.

Applicant's Signature**Year****Month****Day**

I understand that the information requested in this application is required for the administration of the Common Experience Payment and that the information will be provided to Indian Residential Schools Resolution Canada in order to determine my eligibility. I understand that personal information is protected under the *Privacy Act and the Department of Social Development Act (DSD Act)*. I have the right to request access to my personal information and am aware that the information may be used or disclosed within the conditions set out in the *Privacy Act, DSD Act* and outlined in the Personal Information Bank (HRSDC PPU 100).

SIGNATURE WITH A MARK

If the applicant signed with a mark (for example "X"), the mark must be made in the presence of a witness. A witness may be a relative.

The witness must provide the following information:

Witness' first name, initial and last name

Relationship to the applicant

Address (No., Street, Apt., R.R., P.O. Box)

City/Town/Community

Province/Territory/State

Country

Postal Code/Zip Code

Telephone number

If the applicant signed with a mark, the witness must also sign the following declaration:

I have read the content of this application to the applicant who understands and confirms the complete contents and who made his or her mark in my presence.

Signature of Witness**Year****Month****Day**

For assistance completing this form, please call Service Canada at 1-866-699-1742 (TTY 1-800-926-9105)



NO NEED TO RETURN PAGES 5-11 WITH APPLICATION

<p>SECTION B DOCUMENT REQUIREMENTS</p> <p>I. IDENTITY REQUIREMENTS</p> <p>1. You must submit your original birth certificate with the application form. It will be returned to you once your identity has been confirmed.</p> <p>or</p> <p>2. If you do not have an original birth certificate, you may visit a Service Canada Centre to present two (2) of the following documents, one of which must have a photograph:</p> <ul style="list-style-type: none"> - Certificate of Indian Status (issued by Indian and Northern Affairs Canada); - Provincial / Territorial Driver's Licence; - Provincial / Territorial Health Card; - Canadian Passport. <p>3. If you choose to mail your application and your original birth certificate is not available, you must submit certified true copies of at least two (2) of the documents listed in number 2. The original documents must be presented to an individual who will certify that the copies pertain to your identity. This individual must be a Canadian citizen residing in Canada, must be available to Service Canada for verification, and must have known you personally for a minimum of two years.</p> <p>Please note that you cannot certify a copy of your own documents.</p> <p>On the copy of the identity document that does not feature a photo, the person certifying the document must include the statement "I certify this to be a true copy of the original". On the copy of the identity document that features a photo, the person certifying the document must include the statement "I certify that this is a true copy of the original and that the image is a true likeness of the applicant. I am a Canadian citizen and have known the applicant personally for at least two years." On all copies of identity documents, they will also include their printed name, position, signature, contact information and the date they certified the document.</p> <p>The following can certify the documents:</p> <ul style="list-style-type: none"> - Chief or Councilor of First Nations Band Council - Council of the Métis Settlements General Council and Members of the Saskatchewan Provincial Métis Council - Dentist - Executive Officer of Nunavut Tungavik Inc - Executive Officer of Inuvialuit Regional Corporation and of the six (6) Inuvialuit Community Corporations (Northwest Territories) - Executive Officer of Makivik (Northern Québec) - Judge - Lawyer (member of a provincial bar association) - Notary (in Québec) - Magistrate - Mayor - Medical doctor - Minister of religion authorized under provincial law to perform marriages - Notary public - Optometrist - Pharmacist - Police officer (municipal, provincial or RCMP) - Postmaster
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For assistance completing this form, please call Service Canada at 1-866-699-1742 (TTY 1-800-926-9105)



- Principal of a primary or secondary school
- Professional accountant (APA, CA, CGA, CMA, PA, RPA)
- Professional engineer (P.Eng., Eng. in Québec)
- Senior administrator in a community college (includes CEGEPs)
- Senior administrator or teacher in a university
- Social worker with MSW (Masters in Social Work)
- Veterinarian

PLEASE NOTE:

Should the name on the identity documents differ from current name, proof must be submitted to support the discrepancy. Original or certified true copies of the following may be submitted:

- Marriage Certificate or Marriage Registration
- Divorce Decree
- Legal Change of Name Document
- Adoption Papers

II. SUBMITTING YOUR APPLICATION: You may submit your application by mail or in person at Service Canada Centre locations.

If you are applying by mail, please submit your application to:

CEP Processing Centre
706 Yates Street
PO Box 8729 STN Central
Victoria BC V8W 3S3

Please do not provide any additional documents other than what is requested on the application form. We will contact you directly by phone or by mail if we need further information. Please ensure that you have completed all the information and have signed your application.

Service Canada operates within the Department of Human Resources and Skills Development. To "Find a Service Canada Centre Near You" go to www.servicecanada.gc.ca or call **1-800-O-Canada (1-800-622- 6232)**.

For assistance completing this form, please call Service Canada at 1-866-699-1742 (TTY 1-800-926-9105)



SECTION C**INDIAN RESIDENTIAL SCHOOL IDENTIFICATION**

Complete Section A, Block 5 by entering the number(s) corresponding to the school(s) at which you resided. Please note that additional Indian residential schools may be added to this list from time to time. Please check the official list of Indian residential schools found on the Settlement Agreement web site: <http://www.residentialschoolsettlement.ca/schools.html>

Residential Schools**YUKON RESIDENTIAL SCHOOLS**

01	Carcross (Chooutla)	Carcross
02	Coudert Hall (Whitehorse Hostel/Student Residence - Predecessor to Yukon Hall)	Whitehorse
03	Shingle Point (Predecessor to All Saints, Aklavik)	Shingle Point
04	Whitehorse Baptist	Whitehorse
05	Yukon Hall (Whitehorse/Protestant Hostel)	Whitehorse
131	St. Paul's Hostel September 1920 to June 1943	Dawson City

NORTHWEST TERRITORIES RESIDENTIAL SCHOOLS

06	Immaculate Conception (Aklavik Roman Catholic)	Aklavik
07	All Saints (Aklavik Anglican)	Aklavik
08	Fleming Hall (Fort McPherson)	Fort McPherson
09	Sacred Heart (Fort Providence)	Fort Providence
10	St. Joseph's (Fort Resolution)	Fort Resolution
11	Bompas Hall (Fort Simpson Anglican)	Fort Simpson
12	Lapointe Hall (Fort Simpson Roman Catholic)	Fort Simpson
13	Breynat Hall (Fort Smith)	Fort Smith
14	Grandin College	Fort Smith
15	Hay River (St. Peter's)	Hay River
16	Grolier Hall (Inuvik Roman Catholic)	Inuvik
17	Stringer Hall (Inuvik Anglican Hostel)	Inuvik
18	Akaitcho Hall (Yellowknife)	Yellowknife
130	Federal Hostel at Fort Franklin	Déline

NUNAVUT RESIDENTIAL SCHOOLS

19	Chesterfield Inlet (Turquetil Hall)	Chesterfield Inlet
20	Federal Tent Hostel at Coppermine	Coppermine
21	Federal Hostel at Baker Lake	Qamani'tuaq, Qamanittuaq
22	Federal Hostel at Belcher Islands	Sanikiluaq
23	Federal Hostel at Broughton Island	Qikiqtarjuaq
24	Federal Hostel at Cambridge Bay	Cambridge Bay
25	Federal Hostel at Cape Dorset	Kinngait
26	Federal Hostel at Eskimo Point	Arviat

For assistance completing this form, please call Service Canada at 1-866-699-1742 (TTY 1-800-926-9105)

INDIAN RESIDENTIAL SCHOOL IDENTIFICATION

Complete Section A, Block 5 by entering the number(s) corresponding to the school(s) at which you resided.

Residential Schools		
NUNAVUT RESIDENTIAL SCHOOLS		
27	Federal Hostel at Frobisher Bay (Ukkivik)	Iqaluit
28	Federal Hostel at Igloolik	Igloolik/Iglulik
29	Federal Hostel at Lake Harbour	Kimmirut
30	Federal Hostel at Pangnirtung (Pangnirtang)	Pangnirtung / Panniqtuuq
31	Federal Hostel at Pond Inlet	Mittimatalik
BRITISH COLUMBIA RESIDENTIAL SCHOOLS		
32	Ahousaht	Ahousaht
33	Alberni	Port Alberni
34	Cariboo (St. Joseph's, Williams Lake)	Williams Lake
35	Christie (Clayoquot, Kakawis)	Tofino
36	Coqualeetza	Chilliwack / Sardis
37	Cranbrook (St. Eugene's, Kootenay)	Cranbrook
38	Kamloops	Kamloops
39	Kitimaat	Kitimaat
40	Kuper Island	Kuper Island
41	Lejac (Fraser Lake)	Fraser Lake
42	Lower Post	Lower Post
43	Port Simpson (Crosby Home for Girls)	Port Simpson
44	St. George's (Lytton)	Lytton
45	St. Mary's (Mission)	Mission
46	St. Michael's (Alert Bay Girls' Home, Alert Bay Boys' Home)	Alert Bay
47	Sechelt	Sechelt
48	St. Paul's (Squamish, North Vancouver)	North Vancouver
132	Anahim Lake Dormitory Sept 1968 to June 1977	Anahim Lake
ALBERTA RESIDENTIAL SCHOOLS		
49	Assumption (Hay Lakes)	Assumption
50	Blue Quills (Saddle Lake, Sacred Heart, formerly Lac la Biche)	St. Paul
51	Crowfoot (St. Joseph's, Ste. Trinité)	Cluny
52	Desmarais (St. Martin's, Wabasca Roman Catholic)	Desmarais-Wabasca
53	Edmonton (formerly Red Deer Industrial)	St. Albert
54	Ermineskin	Hobbema
55	Fort Vermilion (St. Henry's)	Fort Vermilion
56	Grouard (St. Bernard's, Lesser Slave Lake Roman Catholic)	Grouard

For assistance completing this form, please call Service Canada at 1-866-699-1742 (TTY 1-800-926-9105)



INDIAN RESIDENTIAL SCHOOL IDENTIFICATION

Complete Section A, Block 5 by entering the number(s) corresponding to the school(s) at which you resided.

Residential Schools		
ALBERTA RESIDENTIAL SCHOOLS		
57	Holy Angels (Fort Chipewyan, École des Saints-Anges)	Fort Chipewyan
58	Joussard (St. Bruno's)	Joussard
59	Lac la Biche (Notre Dame des Victoire, predecessor to Blue Quills)	Lac la Biche
60	Lesser Slave Lake (St. Peter's)	Lesser Slave Lake
61	Morley (Stony)	Morley
62	Old Sun	Gleichen
63	Sacred Heart	Brocket
64	St. Albert (Youville)	Youville
65	St. Augustine (Smoky River)	Smoky River
66	St. Cyprian's (Queen Victoria's Jubilee Home)	Brocket, Peigan Reserve
67	St. Joseph's (Dunbow)	High River
68	St. Mary's (Blood, Immaculate Conception)	Cardston
69	St. Paul's (Blood, Anglican/Church of England)	Cardston
70	Sarcee (St. Barnabas)	T'suu Tina
71	Sturgeon Lake (St. Francis Xavier)	Calais
72	St. John's (Wabasca Anglican/Church of England)	Wabasca
73	Whitefish Lake (St. Andrew's)	Whitefish Lake
SASKATCHEWAN RESIDENTIAL SCHOOLS		
74	Beauval (Lac la Plonge)	Beauval
75	Crowstand	Kamsack
76	File Hills	Balcarres
97	Fort Pelly	Fort Pelly
77	Gordon's	Gordon's Reserve, Punnichy
78	Lebret (Qu'Appelle, Whitecalf, St. Paul's High School)	Lebret
79	Marieval (Cowesess, Crooked Lake)	Grayson
80	Muscowequan (Lestock, Touchwood)	Lestock
81	Prince Albert (Onion Lake Church of England, St. Alban's, All Saints, St. Barnabas, Lac La Ronge)	Prince Albert
82	Regina	Regina
83	Round Lake	Stockholm
84	St. Anthony's (Onion Lake Roman Catholic)	Onion Lake
85	St. Michael's (Duck Lake)	Duck Lake
86	St. Philip's	Kamsack

For assistance completing this form, please call Service Canada at 1-866-699-1742 (TTY 1-800-926-9105)

INDIAN RESIDENTIAL SCHOOL IDENTIFICATION

Complete Section A, Block 5 by entering the number(s) corresponding to the school(s) at which you resided.

Residential Schools		
SASKATCHEWAN RESIDENTIAL SCHOOLS		
<input type="checkbox"/> 87	Sturgeon Landing (Predecessor to Guy Hill, MB)	Sturgeon Landing
<input type="checkbox"/> 88	Thunderchild (Delmas, St. Henri)	Delmas
MANITOBA RESIDENTIAL SCHOOLS		
<input type="checkbox"/> 89	Assiniboia (Winnipeg)	Winnipeg
<input type="checkbox"/> 90	Birtle	Birtle
<input type="checkbox"/> 91	Brandon	Brandon
<input type="checkbox"/> 92	Churchill Vocational Centre	Churchill
<input type="checkbox"/> 93	Cross Lake (St. Joseph's, Jack River Annex - predecessor to Notre Dame Hostel)	Cross Lake
<input type="checkbox"/> 94	Dauphin (McKay)	The Pas / Dauphin
<input type="checkbox"/> 95	Elkhorn (Washakada)	Elkhorn
<input type="checkbox"/> 96	Fort Alexander (Pine Falls)	Fort Alexander
<input type="checkbox"/> 98	Guy Hill (Clearwater, The Pas, formerly Sturgeon Landing, SK)	The Pas
<input type="checkbox"/> 99	Norway House United Church	Norway House
<input type="checkbox"/> 129	Notre Dame Hostel (Norway House Roman Catholic, Jack River Hostel, replaced Jack River Annex at Cross Lake)	Norway House
<input type="checkbox"/> 100	Pine Creek (Camperville)	Camperville
<input type="checkbox"/> 101	Portage la Prairie	Portage la Prairie
<input type="checkbox"/> 102	Sandy Bay	Marius
ONTARIO RESIDENTIAL SCHOOLS		
<input type="checkbox"/> 103	Bishop Horden Hall (Moose Fort, Moose Factory)	Moose Island
<input type="checkbox"/> 104	Cecilia Jeffrey (Kenora, Shoal Lake)	Kenora
<input type="checkbox"/> 105	Chapleau (St. John's)	Chapleau
<input type="checkbox"/> 106	Fort Frances (St. Margaret's)	Fort Frances
<input type="checkbox"/> 107	Fort William (St. Joseph's)	Fort William
<input type="checkbox"/> 108	McIntosh	McIntosh
<input type="checkbox"/> 109	Mohawk Institute	Brantford
<input type="checkbox"/> 110	Mount Elgin (Muncey, St. Thomas)	Munceytown
<input type="checkbox"/> 111	Pelican Lake (Pelican Falls)	Sioux Lookout
<input type="checkbox"/> 112	Poplar Hill	Poplar Hill
<input type="checkbox"/> 113	St. Anne's (Fort Albany)	Fort Albany
<input type="checkbox"/> 114	St. Mary's (Kenora, St. Anthony's)	Kenora
<input type="checkbox"/> 115	Shingwauk	Sault Ste. Marie

For assistance completing this form, please call Service Canada at 1-866-699-1742 (TTY 1-800-926-9105)

INDIAN RESIDENTIAL SCHOOL IDENTIFICATION
Complete Section A, Block 5 by entering the number(s) corresponding to the school(s) at which you resided.

Residential Schools		
ONTARIO RESIDENTIAL SCHOOLS		
116	Spanish Boys School (Charles Garnier, St. Joseph's, formerly Wikwemikong Industrial)	Spanish
117	Spanish Girls School (St. Joseph's, St. Peter's, St. Anne's formerly Wikwemikong Industrial)	Spanish
QUEBEC RESIDENTIAL SCHOOLS		
118	Amos (Saint-Marc-de-Figuery)	Amos
119	Pointe Bleue	Pointe Bleue
120	La Tuque	La Tuque
121	Fort George (St. Philip's)	Fort George
122	Fort George (St. Joseph's Mission, Résidence Couture, Sainte-Thérèse-de-l'Enfant-Jésus)	Fort George
123	Sept-Îles (Notre Dame, Maliotenam)	Sept-Îles
124	Federal Hostel at George River	Kangirsualujuaq
125	Federal Hostel at Great Whale River (Poste-de-la-Baleine)	Kuujjuaraapik / Whapmagoostui
126	Federal Hostel at Payne Bay (Bellin)	Kangirsuk
127	Federal Hostel at Port Harrison (Inoucdjouac, Innoucdouac)	Inukjuak
NOVA SCOTIA RESIDENTIAL SCHOOLS		
128	Shubenacadie	Shubenacadie

For assistance completing this form, please call Service Canada at 1-866-699-1742 (TTY 1-800-926-9105)



**COMMON EXPERIENCE PAYMENT FOR FORMER STUDENTS
 WHO RESIDED AT INDIAN RESIDENTIAL SCHOOL(S)**

PLEASE PRINT

GUARANTOR DECLARATION			
Used to support Identity validation of Applicant (Former Student or Personal Representative) Must be accompanied by CEP application			
<p>This Guarantor Declaration will be accepted to establish that the current name used by the applicant in the CEP application is the same name by which the applicant is known to the guarantor. Service Canada may contact the guarantor to verify their declaration.</p> <p>Please place a check mark against the statement below that applies to your situation.</p> <p>This Guarantor Declaration is submitted when the Common Experience Payment (CEP) applicant cannot:</p> <p><input type="checkbox"/> Submit an identity document with a photograph as required in support of the CEP application.</p> <p><input type="checkbox"/> Obtain the identity document(s) required in support of the CEP application.</p> <p><input type="checkbox"/> Obtain the identity documents outlined in the CEP application that support a change of name.</p> <p>Please ensure that a completed and signed application for the Common Experience Payment along with the supporting documentation (e.g. identity documents) where relevant, is also submitted. Service Canada may contact the persons identified in this form to verify their declaration.</p>			
1. APPLICANT'S INFORMATION			
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms			
First Name(s)	Middle Name(s) (if applicable)	Last Name(s)	Year/Month/Day
Current Address:			
(P.O. Box, Street No., Street, Apt., R.R.)		City/Town/Community	
Province/Territory/State	Postal/Zip Code	Country	
Date of Birth (YYYY/MM/DD)	Telephone Number	CEP Application Reference Number (if known)	

For assistance completing this form, please call Service Canada at 1-866-699-1742 (TTY 1-800-926-9105)



2. SIGNATURE

My signature/mark indicates that the information I have provided in this form is true and accurate. I acknowledge that knowingly making a false or fraudulent statement could result in criminal prosecution. I understand that every form is subject to verification.

Signature _____ **Year/Month/Day**

I understand that the information requested in this form is required for the administration of the Common Experience Payment. I understand that personal information is protected under the Privacy Act and the Department of Social Development Act (DSD Act). I have the right to request access to my personal information pursuant to the Privacy Act, and I am aware that the information may be used or disclosed within the conditions set out in the Privacy Act, DSD Act and outlined in the Personal Information Bank (HRSDC PPU 100).

3. SIGNATURE WITH A MARK

If signed with a mark (for example symbol/"X"), the mark must be made in the presence of a witness. A witness may be a relative.

The witness must provide the following information:

WITNESS'S INFORMATION

First Name(s) _____ **Middle Name(s) (if applicable)** _____ **Last Name(s)** _____

Relationship to the Applicant: _____

Address of Witness:

(P.O. Box, Street No., Street, Apt., R.R.) _____ **City/Town/Community**

Province/Territory/State _____ **Postal/Zip Code** _____ **Country** _____ **Telephone Number**

If signed with a mark, the witness must also sign the following declaration:

I have read the content of this form to the applicant who understands and confirms the complete content and who made his or her mark in my presence.

Signature of Witness _____ **Year/Month/Day**

For assistance completing this form, please call Service Canada at 1-866-699-1742 (TTY 1-800-926-9105)



4. GUARANTOR INFORMATION		LANGUAGE PREFERENCE	
<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Ms.		<input type="checkbox"/> English <input type="checkbox"/> French	
First Name(s)	Middle Name(s) (if applicable)	Last Name(s)	
5. MAILING ADDRESS OF GUARANTOR			
Name of organization (if applicable)			
(P.O. Box, Street No., Street, Apt., R.R.)		City/Town/Community	
Province/Territory/State	Postal/Zip Code	Country	
6. TELEPHONE NUMBERS OF GUARANTOR			
Home	Business	Cell/Other	
7. OCCUPATION OF GUARANTOR			
Please indicate your occupation:			
<input type="checkbox"/> Chief or Councilor of First Nations Band Council Council of the Métis Settlements General <input type="checkbox"/> Council and Members of the Saskatchewan Provincial Métis Council <input type="checkbox"/> Members of the Saskatchewan Provincial Métis Council <input type="checkbox"/> Dentist <input type="checkbox"/> Executive Officer of Nunavut Tungavik Inc Executive Officer of Inuvialuit Regional Corporation and of the six (6) Inuvialuit Community Corporations (Northwest Territories) <input type="checkbox"/> Executive Officer of Makivik (Northern Quebec) <input type="checkbox"/> Judge <input type="checkbox"/> Lawyer (member of a provincial bar association) <input type="checkbox"/> Notary in Quebec <input type="checkbox"/> Magistrate <input type="checkbox"/> Mayor <input type="checkbox"/> Medical doctor		<input type="checkbox"/> Minister of religion authorized under provincial law to perform marriages <input type="checkbox"/> Notary public <input type="checkbox"/> Optometrist <input type="checkbox"/> Pharmacist <input type="checkbox"/> Police officer (municipal, provincial or RCMP) <input type="checkbox"/> Postmaster <input type="checkbox"/> Principal of a primary or secondary school <input type="checkbox"/> Professional accountant (APA, CA, CGA, CMA, PS, RPA) <input type="checkbox"/> Professional engineer (P. Eng., Eng. In Quebec) <input type="checkbox"/> Senior administrator in a community college (includes CEGEPs) <input type="checkbox"/> Senior administrator or teacher in a university <input type="checkbox"/> Social Worker with MSW (Masters in Social Work) <input type="checkbox"/> Veterinarian	

For assistance completing this form, please call Service Canada at 1-866-699-1742 (TTY 1-800-926-9105)



8. GUARANTOR DECLARATION:

I hereby declare that I have known the applicant as _____
(PLEASE INSERT APPLICANT'S FULL NAME) personally for at least TWO years. My signature indicates that the information I have provided in this form is true and accurate. I acknowledge that knowingly making a false or fraudulent statement could result in criminal prosecution. I understand that every form is subject to verification.

Name (print)	Guarantor's Signature	Year/Month/Day
<p>I understand that the information requested in this form is required for the administration of the Common Experience Payment. I understand that personal information is protected under the Privacy Act and Department of Social Development Act (DSD Act). I have the right to request access to my personal information and am aware that the information may be used or disclosed within the conditions set out in the Privacy Act, DSD Act and outlined in the Personal Information Bank (HRSDC PPU 100) .</p>		
<p>To be mailed to:</p> <p style="text-align: center;">CEP Processing Centre 706 Yates Street PO Box 8729 STN Central Victoria, BC V8W 3S3</p>		

For assistance completing this form, please call Service Canada at 1-866-699-1742 (TTY 1-800-926-9105)





Indian Residential Schools
Resolution Canada

Résolution des questions des
pensionats indiens Canada

CEP – Request for Reconsideration

CEP Transaction ID		WIID	
Last Name		Given Names	
Nicknames or other traditional names not indicated on your application		Date of Birth	
Indian Residential School(s) at which you lived		Years lived there	
Years confirmed		Years denied	

If you wish to apply for a reconsideration of your CEP application, please provide any additional information that might help us confirm that you lived at the Indian Residential School(s) indicated on your application form.

Please mail completed forms to:
Common Experience Payment Response Centre
P.O. Box 5260
Nepean LCD Merivale
Ottawa, ON K2C 3H5
(or) Fax: 1-866-352-4080
(or) E-mail: reconsideration@irsr-rqpi.gc.ca

Protected B document when completed

Indian Residential Schools

Adjudication Secretariat

Secrétariat d'adjudication

des pensionnats indiens

APPLICATION FORM

Independent Assessment Process

Application Deadline:

We must receive this form by September 19, 2012.

If you are considering applying in 2012 or later, call the Help Desk at 1-866-879-4913.

24 hour IRS Crisis Line is available at **1-866-925-4419**

www.iap-pei.ca

GETTING HELP AND SUPPORT

The Guide for this Application

We have prepared a Guide to help you with this Application. The Guide explains the Independent Assessment Process (IAP) and gives you step-by-step instructions for filling out this Application form. If you do not have a copy of the Guide, please call the Help Desk at 1-866-879-4913.

Getting counselling support

Throughout the Independent Assessment Process, we will ask you for information about the abuse you suffered at Indian residential school. This Application asks you to write, in detail, about the abuse and how it has affected you. The content of this Application, including descriptions of abuse, may disturb you.

You may feel anxious or unwell when you think about your Indian residential school experience or while filling out this Application. If so, you may want the support of someone you trust, such as a family member, counsellor, traditional healer, Elder or someone else from your community. Ask for help if you need it. Take as long as you need to read and fill out this Application.

Health Canada will arrange for free, **confidential** counselling to help you through the Independent Assessment Process. **Aboriginal crisis counsellors are available at any time. Call 1-866-925-4419 if you need this help.**

Getting legal help

We recommend that you hire a lawyer because of the difficult legal issues involved in this Independent Assessment Process.

If you hire a lawyer and you receive compensation through this process, the government will pay part of your legal fees. Please see page 5 of the Guide for more information.

If you need help finding a lawyer, please see Appendix C of the Guide.

CONTENTS

Section 1	Personal information
Section 2	Indian residential school identification
Section 3	The abuse
Section 4	The harms you suffered and treatment you received
Section 5	Your education and work history
Section 6	The resolution tracks
Section 7	Your plans for future care
Section 8	Hearing preferences and Church involvement
Section 9	Feedback
Section 10	Declaration

When completing this Application form, please

- **use black ink**
- **use as much extra paper as you need.**

If you have additional comments to go with this Application, please attach them.

Section 1 — Personal information

See page 10 of the Guide.

1. Mr. Mrs. Ms. Miss

Current Last name

First name

Middle name

2. **Other names** you are known by

3. **Other names** you may have been known by in residential school (for example, maiden name, nicknames)

4. **Current mailing address**

Street and apartment number

P.O. Box or R.R. #

City/Town

Province Postal Code

Home phone () _____

Other phone () _____

5. **E-mail address** (if you wish to use one)

6. If you are not represented by a lawyer, **where and how should we contact you** (for example, at work, home or by email, phone or fax, or through someone you know)

If you want to be contacted by phone, can we leave you a message?

- Yes No

7. **Your birth date** (day/month/year)

Your Province/Territory of Birth:

8. Male Female

9. **Indian Registration (Status) Number or Inuit Disc Number** (if you have one):

Current: _____

While at Residential School:

What are the full names of your mother, father and/or guardian/caregiver while you attended residential school?

(Guardian/caregiver may be traditional adoptive parents, extended family or member of your community).

Providing this information is not required for eligibility but may help us in confirming your school experience.

Mother (maiden/birth name)	First Name _____	Last Name _____
Father	First Name _____	Last Name _____
Guardian/Caregiver (if applicable)	First Name _____	Last Name _____

Relationship to guardian/caregiver (for example, aunt, grandmother, friend, etc.):

10. If you are a member of an established group (see Appendix D of the Guide) in this process, please identify:

Group coordinator _____

Phone () _____

Address _____

E-mail _____

Name of group _____

Name of group lawyer (if known)

If you later change your mind about wanting to proceed with this group, you will have to let us know in writing.

11. **If someone else is helping you to fill out this Application, please provide that person's:**

Name

Relationship to you

Address

Phone Number () _____

Organization (if applicable)

12. We give priority to applicants who are in failing health or are 60 or older. Is your health so poor that a delay in the process would prevent you from participating in a hearing?

Yes No

If you answered Yes, we need a letter from a doctor that confirms this. Submit this letter with your Application, or send it to:

**Indian Residential Schools Independent Assessment Process
Suite 3-505, 133 Weber Street North
Waterloo, Ontario, N2J 3G9**

13. Have you started a court claim or an Alternative Dispute Resolution process claim for your residential school experience?

Yes No

14. If you answered Yes to question 13, have you received a settlement or a decision for that claim?

Yes No

Section 2 — Indian residential school identification

See page 11 of the Guide.

1. Check at least one box:

- I lived at a residential school.
 I did not live at the school, but I was a student at a residential school.
 I was not a student or resident at a residential school.

If you were not a student or resident, why were you at the residential school?

2. Please tell us which residential school(s) you attended. See page 39 of the Guide for the list of eligible residential schools.

	School name and Province or Territory	Approximate dates attended	
		from	to
1		_____ (month/year)	_____ (month/year)
2		_____ (month/year)	_____ (month/year)
3		_____ (month/year)	_____ (month/year)

PLEASE READ BEFORE TURNING THE PAGE

The following pages ask for detailed information about the abuse you experienced at an Indian residential school. These questions may trigger certain memories and bring painful feelings. Because of this, we suggest that you take as much time as you need and that you be in a safe place when you look at and answer these questions.

We recommend you read and complete the following pages with a support person nearby. That person could be a family member, counsellor, traditional healer, Elder, or someone else you trust.

If you feel anxious or unwell and need to talk to someone, Aboriginal crisis counsellors are available 24 hours a day on a confidential basis. Just call 1-866-925-4419.

You have access to confidential counselling support at every stage of the Independent Assessment Process. See page 6 of the Guide for details.

Section 3 — The abuse

See page 11 of the Guide

Some types of abuse are not covered by the Independent Assessment Process. See Appendix E of the Guide for details.

1. This Table asks for brief information about the abuse that happened to you. The next page asks you to write about the abuse in detail.

If you are not able to fill out the chart, please go directly to the next page.

Information about the abuse				
If you suffered more than 5 incidents of abuse, please attach a separate piece of paper to your Application.				
	Incident of abuse (Briefly describe the occurrence of sexual abuse, physical abuse, or other wrongful act that happened to you)	Level of abuse (from page 13 of the Guide)	Approximate date(s) when abuse occurred (month/year)	Who abused you Tell us: <ul style="list-style-type: none"> the person's name was this person a staff and, if so, what job or position did they hold? Was this person a student and, if so, were they older or younger than you?
1				
2				
3				
4				
5				

4. Abuse by a student: Information about reports

If another student abused you, please write about the following:

a) Did you report the abuse to any staff at the residential school? Please give details.

b) Do you believe that the staff at the residential school knew or should have known that students were abusing other students? If so, why do you think this?

c) What was the level of supervision at the school? Where was the staff when the abuse happened?

d) Was the abuse accompanied by threats, coercion or violence?

If you need more pages, please attach them to your Application.

2. If you described a **physical injury** on pages 9-12, please fill out the following chart:

Type of injury	Yes <input type="checkbox"/> No <input type="checkbox"/>	Who caused it?	What happened?
Did you receive a physical injury that led to or should have led to hospitalization or serious medical treatment by a physician?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Did you or do you suffer from a permanent or demonstrated long-term physical injury, impairment or disfigurement?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Did you experience loss of consciousness?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Did you receive broken bones?	Yes <input type="checkbox"/> No <input type="checkbox"/>		
Did you suffer serious but temporary incapacitation such that bed rest or infirmary care of several days duration was required?	Yes <input type="checkbox"/> No <input type="checkbox"/>		

3. If you received treatment for the physical injuries described in Question 2, please fill out the following chart:

Physical Injury	Type of Treatment	Who provided the treatment?	When did you receive this treatment?	Where did you receive this treatment?
-----------------	-------------------	-----------------------------	--------------------------------------	---------------------------------------

- 1.
- 2.
- 3.
- 4.

If you need more space, please attach extra pages to your Application.

4. Have you ever received treatment, counselling or traditional healing for **emotional or psychological effects** of the abuse you listed on pages 9-12?

- Yes No

If yes, please fill out the following chart:

Type of Treatment, counselling or traditional healing	Who provided the treatment?	When did you receive this treatment?	Where did you receive this treatment?
---	-----------------------------	--------------------------------------	---------------------------------------

- 1.
- 2.
- 3.
- 4.

5. What level of harm are you claiming? See page 16 of the Guide. (Check only one box):

Level 1 **Level 2** **Level 3** **Level 4** **Level 5**

If you are claiming compensation for harms at levels 3, 4 or 5, you will have to obtain and submit certain documents (such as treatment records) later in this process. If you are claiming compensation for harms at levels 4 or 5, the adjudicator will require you to meet with a psychiatrist or psychologist. He or she will assess your condition, unless all parties agree that this is unnecessary.

Section 5 — Your education and work history

See page 17 of the Guide.

1. Please give details of your formal education or other training.

School, college, university or training facility attended	Approximate Dates		Level reached or degree, diploma or certificate obtained
	from	to	

If you need more space, please attach more pages to your Application.

Effects on Education and Work

3. Considering the education, training and work history you have described in this section, please see page 18 of the Guide and read the boxed definitions below and answer the following question:

Are you asking for compensation for **Loss of Opportunity** or **Actual Income Loss** because of the abuse you experienced? You may only seek compensation for one or the other, but not both.

Loss of Opportunity

Actual Income Loss

Neither

Loss of Opportunity means you have had fewer chances (less opportunity) to become as educated or as fully employed as you might have been *because* of the effects of the abuse you experienced at Indian residential school. In other words, the effects from the abuse you suffered have kept you from reaching a higher level of education or getting a better job. For more information, see page 18 of Guide.

If you are claiming compensation for Loss of Opportunity at levels 2, 3, 4 or 5 (see next page for description of levels), you will have to obtain and submit certain documents later in this process. Examples include treatment records, workers' compensation records, or income tax records. For levels 4 or 5, the adjudicator will require an expert assessment unless all parties agree that it is not necessary.

Actual Income Loss means that you had a paying job but you had to miss work or leave your job *because* of the effects of the abuse you experienced at Indian residential school. As a result, you lost money that you could have earned. You must show a direct connection between the effects of the abuse you suffered and your inability to keep working. For more information, see page 18 of Guide.

If you are claiming Actual Income Loss, your claim will involve a higher level of proof. In addition to having to submit certain documents later in the process such as treatment records, workers' compensation records, or income tax records, the adjudicator will generally order an expert assessment. Because of the legal complexities, we strongly recommend you hire a lawyer if you want to pursue this type of claim.

Section 6 — The Resolution Tracks

See page 19 of the Guide.

In the IAP, claims of Other Wrongful Act(s) or Actual Income Loss are considered complicated claims. As a result, a separate resolution track was created for only these types of claims, called the Complex Track. In this track, claimants or their counsel have to prove the claim on the same standard a court would apply in like matters. This means that claims must be proven to have been caused by one or more events of abuse for which the IAP compensates. Furthermore, expert assessments are required in the Complex Track, unless the parties agree to dispense with them.

Claimants are urged to retain counsel to proceed through the Complex Track.

All other claims, such as sexual or physical abuse claims, are handled in the Standard Track. In this track, claimants or their counsel must prove the abuse on the balance of probabilities. Then, if the claimant experienced harms, those harms must be plausibly linked to the proven abuse.

Please indicate below if you intend to enter the Complex Track:

- YES**, I want to enter the **Complex Track** because I am claiming **Other Wrongful Act(s)** and/or **Actual Income Loss**.

- NO**, I do not want to enter the **Complex Track** because I am not claiming Other Wrongful Acts or Actual Income Loss. Instead I wish to enter the **Standard Track**.

To find out more about Actual Income Loss, please see page 18 of the IAP Guide. To find out more about Other Wrongful Acts, please see page 24 of the IAP Guide.

Section 8 — Hearing preferences and Church involvement

See page 20 of the Guide.

If your claim is accepted into the Independent Assessment Process and schedule a hearing for you, you can tell us your preferences about how the hearing will be run. We will make every effort to use your preferences.

1. Do you prefer to have an adjudicator who is:

- No Preference Male Female

2. Do you have a preference for the location of your hearing?

- Yes No

If Yes, give your preferred locations: _____ 1st Choice

_____ 2nd Choice

Health Support Worker

3. You can have an Aboriginal health support worker attend your hearing. They can be in the hearing room if you wish or be available for you nearby. Do you wish to have an Aboriginal health support worker in the hearing room with you?

- Yes No

If Yes, may we send them your name and contact information?

- Yes No

Church involvement

The church involved in your claim is a party to the process and has a right to participate in your hearing. Sometimes the church chooses not to participate in the hearing, but they may still wish to come to hear your evidence or to offer you support.

4. Please check one of the following:

I would like a church representative to be at my hearing

I do not want a church representative at my hearing.

No preference

5. If you settle your claim before a hearing, would you like to meet with a church representative to discuss your claim or for pastoral support?

- Yes No

Section 9 — Feedback

See page 21 of the Guide

Please indicate with the boxes available how you learned about the IAP. You may check off any of the following:

- IAP Community Outreach
- IAP Website
- Television
- Radio
- Newspapers
- Family/ Friends
- Other:

Section 10 — Declaration

See page 21 of the Guide.

I give my permission to the Library and Archives of Canada, Indian and Northern Affairs Canada, and any other federal, provincial or territorial government department having records relevant to my claim to share them with Health Canada. This permission will allow the government to research my claim.

I understand that my personal information, including the details of any claim of abuse, may be shared with others, including the government, the adjudicator, participating church organizations, those I identify as having abused me, and witnesses. Information given to those I identify as having abused me and to witnesses will not include my contact details or other information not relevant to their role in the claim.

I agree to respect the private nature of any hearing I may have in this process. I will not disclose any witness statement I receive or anything said at the hearing by any participant, except what I say myself.

I confirm that the statements in this Application are true, whether made by me or on my behalf. Where someone helped me with the *Application*, that person has read to me everything they wrote and I confirm that it is true. I know that signing this Application has the same effect as if I had made it under oath in court.

 Witness Signature
 (Witness must watch you sign. Witness
 Does not need to read your application.)

 Claimant Signature

 Print Name of Witness

 Date

If the applicant signed with a mark, the witness must also sign the following declaration:

I have read the content of this Application to the applicant who understands and confirms the complete contents and who made his or her mark in my presence.

Witness

Print Name of Witness

Date

If you are represented by a lawyer, he or she must complete the following:

I certify that I have reviewed this completed Application with my client to ensure its accuracy.

Signature of Lawyer

Name of lawyer

Phone: () _____

Law Firm

Fax: () _____

E-mail address: _____

Address

Key Informant Interview Guide

Aboriginal Healing Foundation - Research Study Common Experience Payment and Healing

Interview Code: _____
Date: _____
Interviewer: _____

INTERVIEW GUIDE

A. Background Information

1. Sex: Female / Male

2. Age: _____

3. *Aboriginal Identity*

Status Indian (First Nations) _____ Non-Status Indian (First Nations) _____
Métis _____ Inuit _____

4. *Date when CEP received:* _____

If CEP not received, indicate stage of CEP process (awaiting reply; appeal; reconsideration): _____

5. *Residential School attended*

Name: _____ RS Code: _____
Province: _____

Time spent at Residential School: _____ years AND/OR _____ months

6. *Current Residence*

Province: _____

City/Town: _____

Community type:

Urban (City) _____ Rural Town / Hamlet _____
First Nation Reserve _____ Métis Settlement _____

Remoteness: (according to AHF categories)

Urban _____ Rural _____ Semi-Isolated _____ Isolated _____

7. *Residence while growing up* (i.e., where they spent the most time while growing up while not in Residential School)

Same as above: _____

Province: _____

City/Town: _____

Community type: (check all that apply)

Urban (City) _____

Rural Town / Hamlet _____

First Nation Reserve _____

Métis Settlement _____

Remoteness: (check all that apply)

Urban _____ Rural _____ Semi-Isolated _____ Isolated _____

B. Interview Questions

1. Tell me step-by-step, what it was or is like getting the CEP?
 - a) application process
 - b) waiting period
 - c) actual receipt of payment

 2. Do you know about the support services for Residential School Survivors that are offered by the government as part of the settlement agreement?

For example:

 - a) IRSSS crisis line offered by INAC Resolution Sector (formerly IRSC)
 - b) Information lines for CEP, Reconsideration, and IAP applications offered by INAC Resolution Sector (formerly IRSC)
 - c) Assistance with CEP applications offered by Service Canada
 - d) Professional counseling, emotional support, cultural support, and assistance with the cost of transportation offered by Indian Residential Schools Resolution Health Support Program (Health Canada).
 - 2.1. If No, you did not use any of these services, why not?
 - 2.2. If Yes, where did you hear about these services? What was or is your experience with these services? If any of these services have been helpful, how or why?

 3. Do you know about support services offered to Residential School Survivors in your community/region? Did or do you use these services? For example:
 - a) AHF project activities
 - b) Counselling
 - c) Financial
 - d) Traditional wellness
 - e) Physical health
 - f) Spiritual support
 - g) Form filling (logistical help)
 - h) Other?
-

- 3.1. If No, do you think that you would want these services offered to you? Why or why not?
- 3.2. If Yes, where did you hear about these services? What was or is your experience with these services? If any of these services have been helpful, how or why?
4. For you personally, have there been or will there be positive effects of the CEP? What is good? Are there any negative effects? What is not good?
5. Is “Healing” something that you think about? (i.e., Healing can include how you have recovered, coped, or dealt with your Residential School experience). What does healing mean to you?
6. One of the things we want to learn about is whether the CEP has a healing effect? Compared to the time before the Settlement Agreement and CEP, have there been any changes in your well-being?
7. Did you listen to the Apology issued by the Prime Minister? Did the apology play a role in how the CEP payment impacted you? Does it make a difference in how you think about the CEP?
8. Do you know about the Independent Assessment Process, the Truth and Reconciliation Commission, (and the ‘Reconsideration Process’ if they are not happy with their application status)? Do you plan to apply or take part in these processes? Why or Why not?

Methodological Notes/Comments:

The Semi-Structured Interview Guide For Community Health Providers

*Aboriginal Healing Foundation – Research Study
Common Experience Payment and Healing*

Community Representatives and Service Providers Interview Guide

Interview Code: _____

Date: _____

Interviewer: _____

A: BACKGROUND INFORMATION

1. **Sex:** Female / Male

2. **Age:** _____

3. **Aboriginal Identity**

Status Indian (First Nations)

Métis

Non-Status Indian (First Nations)

Inuit

4. Occupation

4. **Attended Residential School:** YES _____ NO _____

5. **Current Residence**

Province: _____

Community type:

Urban (City) _____

Rural Town / Hamlet _____

First Nation Reserve _____

Métis Settlement _____

Remoteness: (according to AHF categories)

Urban _____ Rural _____ Semi-Isolated _____ Isolated _____

6. **Type of services provided in project? (Check all that apply)**

Counseling by healer/helper/Elder Psychotherapy

Traditional Medicine (herbal)

Anger Management

Medicine Wheel Teachings

Cognitive Behavioural Therapy

Parenting Skills Education

Psychodrama

Traditional Healer

Art therapy

Circles

Life Skills Education

Land-based activity

Individual Counseling (Western)

Cleansing, smudging, prayer

Individual Counseling (Traditional)

Ceremony	Crisis Intervention
Education about Aboriginal History	Family Counseling (Western)
Legacy Education	Family Counseling (Traditional)
Cultural activities	Organized sports
Storytelling/ cultural teachings	Elders and youth gatherings

B: INTERVIEW QUESTIONS

6. We hope to learn about some of the healing supports and services that have been most effective for Residential School Survivors. Can you describe what healing means to you?
7. Can you discuss your role at work as it contributes to healing for Residential School Survivors in your community or service provision region?

PROMPT: How do you work with intergenerational impacts of Residential School?

PROMPT: Are you involved in assisting Residential School Survivors with their healing needs outside of work?

8. We want to learn about the healing services that have been most valuable to Survivors since they received CEP. Can you discuss some of these?

PROMPT: What about the informal network of supports that may be used by Survivors for their day-to-day healing needs? For instance, close community ties may allow for easier access to logistics and transport assistance, someone who practices traditional medicine may use their relationships with healers or Elders for healing.

9. In your opinion, has the need for healing services and supports been met?
 - 1.1 If no, please specify how or why not?
 - 1.2 What, if any, healing and support services are lacking in your community or region?
 10. As you may be aware, there are support services that have been offered by the government as part of the Settlement Agreement. Are you aware of these services?

Examples:

 - a) IRSSS crisis line offered by INAC Resolution Sector (formerly IRSC)
 - b) Information lines for CEP, Reconsideration, and IAP applications offered by INAC Resolution Sector (formerly IRSC)
 - c) Assistance with CEP applications offered by Service Canada.
 - d) Professional counseling, emotional support, cultural support, and assistance with the cost of transportation offered by Indian Residential Schools Resolution Health Support Program (Health Canada).
 - 1.1 In your opinion, have these services been helpful to Survivors? How or why or why not?
-

11. Can you identify any barriers that may prevent Residential School Survivors from accessing healing supports and services?

PROMPT: Staff turnover due to high demand or burn out?

- 11.1 Do you know of groups of survivors (e.g., homeless) who do not access healing and support services or other groups that may fall through the cracks? Do you have suggestions about how to fill these gaps?

PROMPT: Referrals to different agencies – what other supports in the community are available to Survivors?

PROMPT: Anyone else in your community you would recommend I speak to?

12. Is there anything we haven't discussed that you would like to add?

AHF – CEP Study Ethics Protocol

Aboriginal Healing Foundation - Research Study: Common Experience Payment and Healing

ETHICAL GUIDELINES

Introduction

This document serves as a supplement to the Aboriginal Healing Foundation (AHF) Ethical Guidelines for Research and AHF Code of Ethics. These guidelines are designed to address the specific research concerns related to healing, trauma and the unique nature of the Common Experience Payments (CEP) experience. The primary concern of AHF is to ethically and respectfully gather CEP recipients' insights and that the research processes contribute to CEP recipients' healing journey.

The Common Experience Payment (CEP) study is primarily concerned with the experiences that Survivors have had with the Common Experience Payment process or other associated elements of the settlement agreement.¹ Study participants will not be required to share any information specific to their time in Residential Schools, nor will they be asked any direct questions about how payments were spent. All questions of the study will focus solely on experiences related to the Common Experience Payment or associated elements of the Settlement agreement.

Study Goals, Purpose and Objectives

The goal of *The Common Experience Payment and Healing* research project is to provide post-Common Experience Payment (CEP)-receipt information with respect to the impact(s) of the payment on individuals and communities.

The purpose of this study is to gather recipient and stakeholder insights regarding the role of CEP payments within Survivors' healing journeys. Considering the sensitivity of this topic of study, high regard must be given to implementation strategies that are both ethical and respectful. The main research questions relate to two fundamental themes:

1. Has the CEP experience, as part of the larger Settlement Agreement (SA), impacted individuals' healing journeys? What is the nature of those impacts, if any?
2. What services and/or supports have been valuable to individuals since receipt of CEP?

¹ Canada, National Consortium and Merchant Law Group, Independent Counsel, Assembly of First Nations, Inuit Representatives, General Synod of the Anglican Church of Canada, The Presbyterian Church of Canada, The United Church of Canada and Roman Catholic Entities. *Indian Residential Schools Settlement Agreement*, Ottawa: May, 2006, <http://www.residentialschoolsettlement.ca/Settlement.pdf>

Unit of Analysis

The unit of analysis for this study is individual CEP recipients. Data collection and analysis will focus on individuals' experiences and opinions about the healing impacts of CEP. The study does not aim to investigate healing at a community level, but we do recognize that individual recipients are connected to and supported by families and communities. Hence, the research team will seek and respect the expert advice of local AHF funded project staff with regard to recruitment and interviewing protocols.

Data Collection, Analysis and Results

The main data collection instrument will be in-person, semi-structured interviews, employing a short guide of open-ended questions and topics for discussion. Participants will also be asked to provide basic background information (age, gender, years attended Residential School, etc.). Interviewers are Aboriginal, including Inuit, Métis, and First Nations coordinators.

Data collected in the course of this study will be used solely by the Aboriginal Healing Foundation to compile a report on the healing experiences of CEP recipients.

Analysis and reporting will be conducted by the Principal Investigator and will involve input from other team members. Results will be released in a public report published by the Aboriginal Healing Foundation.

Pre-Testing

The first few interviews (~5) conducted among each main culture group (Inuit, Métis, and First Nations) will be considered as "Pre-Test" interviews. Participants will be asked to provide feedback and advice on the interview questions and procedures. The consent form and question guide will be modified to specifically address the pre-test requirements, as necessary. The information shared by participants in response to the main research questions will be used in the study analysis. The information provided in response to the methodological pre-test questions will be used to refine the study's ethics protocol (consent form, confidentiality agreements) and data collection instruments (interview question guide).

Confidentiality

All identifying information will be kept confidential and no names will be attributed to the interviewees. Names and communities will be assigned codes by the research team and will not appear in the final report.

In-person interviews will be conducted and responses will be audio-recorded or hand-written. Key informants have the option to decline the audio recordings if they prefer. Recordings will be transcribed and coded by research team members. Team members will be stewards of their own data during the study and at the end of the study, files will be handed over to the AHF. Files kept at the AHF office will be held for as long as the Foundation remains in operation. Files will be destroyed by the Foundation if and when operations of the AHF are terminated.

Consent

Each study participant will be required to give signed or oral consent at the beginning of interviews. See attached informed consent form.

Languages

Efforts will be made, within reason to translate documents into the language of the community or the recipients. Researchers will also provide plans for collecting oral consent. Some segment of written documents and consent forms could also be made available in languages used in the communities. Interviews designed for a community or individual whose first language is not English will be handled on a case-by-case basis with the research team and participants.

Cultural Protocols

Researchers will work closely with local AHF funded projects to respect and accommodate cultural protocols and practices associated with the communities where interviews are conducted. Researchers will be prepared to adjust their data collection techniques accordingly.

Community Approval

Appropriate community contacts will be alerted of the study activities on a case-by-case basis with advisement from AHF funded project staff and according to the research approval process in each region. Counseling, debriefing or other community support networks may be used outside of the AHF funded project and these supports will be coordinated with the assistance of AHF funded project staff.

Sampling and Recruitment

Efforts have been made by the research team to ensure a study sample of key informants that represents the general composition of CEP recipients in Canada. This sample size is estimated at 100-125, and will include members of First Nations, Métis and Inuit communities. Particular efforts are being made to involve substantial numbers of Métis and Inuit CEP recipients. Interview sites have been selected in accordance with recommendations made by AHF project officers, who aided in assuring that the samples are fairly represented by region (province, territory) and type of community (i.e. urban, rural).

Voluntary participation

Individual participation in the Common Experience Payment study is voluntary and withdrawal from the project is left to the discretion of the participant. Participation in this project is not related to the funding agreement or project management of the Aboriginal Healing Foundation.

Individual Benefits and Risks

This study provides CEP recipients' the opportunity to tell their personal stories about the CEP experience and to voice their opinions and concerns. Participants will be informed that this study is

designed to investigate and support their healing journey. Individuals will be assured that the research aims to benefit and not deter from their healing efforts. To this end, CEP recipients who participate will be provided with information on how to contact counselors, Elders, list of support locations, including AHF, non-AHF, financial resources or other external community supports. Counselors will be available at each site during the interview period.

If any portion of the interview process, incidental or otherwise, adversely affects the participant, termination of the interview session will be considered and the decision of the CEP recipient respected. The research team member conducting the interview will be in contact with counseling staff at all times and participants will have ample opportunities to withdraw from the project or debrief with counselors at any stage during or after the interviews.

Honoraria

Honoraria of \$50 - \$100 will be offered to study participants at the end of each interview in respect for sharing their time and wisdom. The amount may vary as appropriate to interview sites (e.g., the honoraria amount acceptable to Nunavut research participants is generally a larger amount than elsewhere in Canada). It is CEP recipients' choice to accept or refuse the honoraria. In the event that a participant terminates the interview session before all questions are asked, the honorarium will still be offered. In addition to cash honoraria, gifts (e.g., tobacco) may also be offered, as appropriate to the cultural custom of each community.

AHF – CEP Study Informed Consent Form (Survivor Participants)

ABORIGINAL HEALING FOUNDATION - RESEARCH STUDY

The Common Experience Payment and Healing

INFORMED CONSENT

- Interview Participants: CEP Recipients -

The purpose of an informed consent is to ensure that you understand the purpose of the study and the nature of your involvement. The informed consent provides sufficient information for you to decide whether or not to participate in the study.

What is this research study about?

The purpose of this study is to learn if and how Common Experience Payments (CEPs) have made a difference to Residential School Survivors' healing journeys. We also want to determine what types of supports have been helpful to you, and what support services you felt were lacking. You will *not* be asked how your CEP was or is being spent, or about your experiences at Residential School.

What is your role in the research study?

Your participation in this study is entirely voluntary. If you choose to participate, we will ask you to answer questions in a face-to-face interview that will last approximately one hour.

You may decide if the interview is voice-recorded or if you prefer that we take notes. You may request to turn off the recorder at any point during the interview. If you prefer to conduct your interview in a language other than English, you can request to have an interpreter present during the interview.

Who else is participating in this research study?

We will be interviewing CEP recipients from across Canada.

Who is doing this research study?

The research is sponsored by the Aboriginal Healing Foundation (AHF). The research team is composed of the following people:

Jonathan Dewar (AHF Research Director)

Gwen Reimer (Principal Investigator)

Amy Bombay (First Nations Coordinator)

Jackie Brennan (AHF Project Administrator)

Tricia Logan (Métis Coordinator)

Lena Ellsworth (Inuit Coordinator)

What will be done with the information?

The information from the interviews will be put together into a report published by the Aboriginal Healing Foundation. This report will be available to the public from the AHF website (www.ahf.ca), and participants can have copies sent to them by e-mail (research@ahf.ca) or by mail (call Toll-Free number: 1-888-725-8886) upon request.

The information you give is confidential and anonymous.

The interview is entirely confidential. We will use a code number to track each interview. Your name

will only appear on the informed consent, which will be separated from the interview data and kept in a separate and secured file by the research investigators until all files are handed over to the AHF. We will not share your identity with anyone and the final report will in no way identify you as a participant in the study. All study documents will be held securely until AHF operations are terminated, at which point documents will be destroyed or secured in another location.

What are the benefits of this study?

This study provides CEP recipients the opportunity to tell their personal stories about their CEP experience and to voice their opinions and concerns. It is hoped that the findings of this project will assist in identifying what supports are helpful, and what services need to be improved as Survivors move from the CEP component of the Settlement Agreement through to the Independent Assessment Process and Commemoration components.

Are you at risk if you take part in this study?

You are asked to volunteer information during the interview and you may stop the interview at any time. We will only be asking about your experience related to the CEP, but some questions may remind you of negative experiences at Residential School. You have the right to refuse to answer questions or to end the interview.

If you do feel at risk, the research team member conducting the interview will be in contact with counseling staff at all times. You may choose to meet with counselors at any stage during or after the interviews. You may also request that a counselor accompany you during the interview.

Honoraria:

For sharing your time and experiences, you will be offered a gift at the end of the interview.

Future Contact:

We will be asking you if we can contact you again if new questions come up later in this research study, or if we decide to conduct another study in the future. Even if you agree to let us contact you, if you decide later that you are no longer interested, you are *not* committed to any further participation.

Ethics:

This study abides by the AHF Ethical Guidelines for Research. If you have any ethical concerns about your participation in this research study or if you would like to view the Ethics protocol, please call 1-888-725-8886 (Toll-Free) to contact *Jonathan Dewar (ext. 499)* or *Jackie Brennan (ext. 306)*.

Before you can participate in this research study, you must sign the last page of this form or you may give oral consent to verify that you understand and agree to the terms of this research study. You may keep pages 1-2 of this form. Page 3 must be given to the interviewer before the interview begins.

*If you have any questions about the research study or interview,
please ask the interviewer before you sign the form.*

CODE: _____

AHF – CEP Study Confidentiality Agreement (Interpreters & Counsellors)

ABORIGINAL HEALING FOUNDATION - RESEARCH STUDY *The Common Experience Payment and Healing*

Agreement by Personnel who provide INTERPRETER and COUNSELLING Services to the Aboriginal Healing Foundation (AHF)

ABOUT THE STUDY

The purpose of this study is to learn if and how Common Experience Payments (CEPs) have impacted Residential School Survivors' healing journeys. The main research questions relate to two fundamental themes:

- 1) Has the CEP experience, as part of the larger Settlement Agreement, impacted individuals' healing journeys? What is the nature of those impacts, if any?
- 2) What services and/or supports have been valuable to individuals since receipt of their CEP.

Face-to-face interviews lasting approximately one hour will be conducted with CEP recipients who volunteer to be study participants. If the interviewer does not speak the preferred language of the participant, the participant can request to have an interpreter present during the interviews. Considering the sensitivity of this topic of study, some participants may be reminded of negative experiences related to Residential School or of negative consequences of the CEP. For this reason, participants may request that a counsellor accompany them to the interview.

ROLES OF THE INTERPRETER AND COUNSELLOR

The purpose of the INTERPRETER is strictly to translate questions and responses between languages (for example, between English and French), at the request of the study participant.

The purpose of the COUNSELLOR is to provide support to the study participant at his or her request.

AGREEMENT

I agree that all information provided during any and all interview sessions, and any discussion concerning interview participants or interview subject matter will be treated as strictly confidential. **I agree to adhere to the AHF Confidentiality policies (attached):**

Name of Interpreter or Counsellor (Print): _____

Signature: _____

Date: _____

(d) Any information contained in a personnel file, including salary, benefits, family status, employee discipline, employee assistance or any other private aspect of the employee-employer relationship.

All Parties shall ensure that all information and materials in their possession relating to project proposals and the Foundation shall be maintained in a secure and confidential manner, shall not be copied and shall be returned to the Foundation.

Enforcement

Upon receiving information that there has been a breach of confidentiality by any Party, the Executive Director or Chair of the Foundation shall convene a meeting of a committee of the Board, the membership of which shall vary from time to time, for the purposes of determining whether or not a breach of confidentiality has occurred and if so, what, if any, measures should be taken in relation thereto.

Consequences of Breach of Confidentiality Policy

Upon a finding that a Party has failed to comply with the Confidentiality Policy of the Foundation, the committee may impose appropriate disciplinary action up to and including discharge.

Any Party who breaches the Confidentiality Policy of the Foundation shall not be entitled to any indemnification or compensation from the Foundation in the event of any action of any kind being successfully brought against such Party and the Foundation by a third party; and such Party shall further indemnify the Foundation for any and all damages, costs, expenses and other losses which may be incurred by the Foundation as a result of a successful action having been brought for the breach of this Confidentiality Policy by the Party.

All inquiries regarding this confidentiality agreement should be referred to:

Jonathan Dewar, Director of Research
ABORIGINAL HEALING FOUNDATION
75 Albert Street, Suite 801, Ottawa ON K1P 5E7
Telephone: 613-237-4441 [Toll-Free: 1-888-725-8886]
E-mail: jdewar@ahf.ca

Atlas Theme Analysis Tables

(Atlas.ti code content and theme analysis results)

Atlas Table 1: CEP Application Process, by age group

(multiple responses; n = 201 or 72% response rate)

Code: CEP Application	Respondents								% of total respondents (n=201)	% of study group (n=281)
	Age 20-29	Age 30-39	Age 40-49	Age 50-59	Age 60-69	Age 70-79	Age 80+	Totals		
Easy, straight forward	2	5	26	31	22	4	4	94	47%	34%
Difficult, costly, frustrating	1	3	16	26	23	1	2	72	36%	26%
Long wait times	1	4	7	21	17	6	0	56	28%	20%

Note: 16 respondents said the application process was both difficult and that they waited a long time for confirmation / payment; 5 respondents said the application process was easy but the wait time for confirmation / payment was long.

Atlas Table 2: CEP Reconsideration Process, by Aboriginal identity

(multiple responses; n = 93 or 33% response rate)

Code: Reconsideration / Rejection	Respondents					% of total respondents (n=93)	% of study group (n=281)
	First Nations	Inuit	Métis	Mixed/ NR	Totals		
Lost records not Survivors' fault*	38	2	0	1	41	44%	15%
Process takes too long*	33	5	2	1	41	44%	15%
Day students, hostels not eligible	19	1	4	1	25	27%	9%
Arduous process discourages application	7	0	0	0	7	7.5%	2.5%

* 13 respondents were critical of the reconsideration process because it was both difficult to locate missing records and it was frustrating due to the length of time it takes to complete the process and to receive payment.

Atlas Table 3: CEP Trigger, by age / era of RS

(multiple responses; n = 102 or 36% response rate)

Code: CEP Trigger	Respondents								% of total respondents (n=102)	% of study group (n=281)
	Age 20-29	Age 30-39	Age 40-49	Age 50-59	Age 60-69	Age 70-79	Age 80+	Totals		
Negative memories, emotions	1	6	14	31	31	7	1	91	89%	32%
Trigger is step toward healing	0	0	0	2	6	2	0	10	10%	3.5%
Application process perpetuates abuse	0	1	0	2	6	0	0	9	9%	3%
Addictive & suicidal tendencies	0	1	4	1	1	0	0	7	7%	2.5%

Atlas Table 4: Government, Legal & Financial Services, by community remoteness
(multiple responses; n = 132 or 47% response rate)

Code: Government, Legal & Financial Services	Respondents					% of total respondents (n=132)	% of study group (n=281)
	Isolated	Semi-Iso.	Rural	Urban	Totals		
Service Canada supports - helpful*	1	11	29	12	53	40%	19%
Service Canada supports - not helpful*	0	5	5	8	18	14%	6%
Toll-free information line - helpful*	2	0	2	1	5	4%	2%
Toll-free information line - not helpful*	2	4	15	5	26	20%	9%
Unaware of government services	6	4	6	4	20	15%	7%
Government does not understand CEP impacts	0	3	0	0	3	2%	1%
Legal services - helpful	2	6	7	3	18	14%	6%
Legal services - not helpful	2	7	13	3	25	19%	9%
Financial services - helpful	0	0	1	1	2	1.5%	0.7%
Financial services - not helpful	0	0	3	0	3	2%	1%

* 16 respondents commented on both the Service Canada support and the toll-free information lines.

Atlas Table 5: AHF Project Services, by community remoteness
(multiple responses; n = 92 or 33% response rate)

Code: Services - AHF	Respondents					% of total respondents (n=92)	% of study group (n=281)
	Isolated	Semi-Iso.	Rural	Urban	Totals		
Helpful	4	28	12	21	65	71%	23%
Not helpful or did not use*	3	7	8	7	25	27%	9%
Should be expanded / long-term	0	1	2	0	3	3%	1%

* 10 participants said they had never used AHF services or that the interview was their first visit to the project site.

Atlas Table 6: Family and Community Support, by community remoteness
(multiple responses; n = 118 or 42% response rate)

Code: Support-Family/Community	Respondents					% of total respondents (n=118)	% of study group (n=281)
	Isolated	Semi-Iso.	Rural	Urban	Totals		
Rely on support from community services	5	13	19	22	59	50%	21%
Rely on support from family & friends	2	14	18	11	45	38%	16%
Rely on local (informal) support for CEP	2	5	15	5	27	23%	10%

Atlas Table 7: Services and Supports - Access Issues, by community remoteness
(multiple responses; n = 115 or 41% response rate)

Code: Services & Support - Access Issues	Respondents					% of total respondents (n=115)	% of study group (n=281)
	Isolated	Semi-Iso.	Rural	Urban	Totals		
Trust issues	7	11	14	5	37	31%	13%
Qualification issues	7	13	10	6	36	31%	13%
Cultural issues	3	14	6	8	31	27%	11%
Lack of CEP-specific supports	0	9	14	8	31	27%	11%
Personal issues	3	3	8	8	22	19%	8%
Logistical issues	1	3	6	9	19	16.5%	7%

Atlas Table 8: Traditional Healing Practices, by Aboriginal identity
(multiple responses; n = 54 or 19% response rate)

Code: Traditional Healing	Respondents					% of total respondents (n=54)	% of study group (n=281)
	First Nations	Inuit	Métis	Mixed/ NR	Totals		
Ceremonies provide spiritual healing	23	0	0	0	23	43%	8%
Being 'on the land' is healing	18	2	0	0	20	37%	7%
Traditional practices are culturally healing	14	4	1	0	19	35%	7%

Atlas Table 9: CEP as "Exchange" or "Pay-Off"
(multiple responses; n = 57 or 20% response rate)

Codes: CEP as "pay-off" CEP as unfair "exchange"	Respondents	% of total respondents (n=57)	% of study group (n=281)
CEP is a pay-off or hush money	30	53%	11%
CEP is unfair exchange for loss of culture and language	21	37%	7.5%
CEP is unfair exchange for lack of education	12	21%	4%

Note: 4 respondents commented on all of the above, stating that CEP was a pay-off and that it was an unfair exchange of culture, language and education.

Atlas Table 10: Positive Impacts of CEP Compensation, by community remoteness
(multiple responses; n = 168 or 60% response rate)*

Code: CEP money – positive impacts	Respondents					% of total respondents (n=168)	% of study group (n=281)
	Isolated	Semi-Iso.	Rural	Urban	Totals		
Relieved financial stress	11	20	32	31	90	54%	32%
Share with family	1	13	36	15	65	39%	23%
Desired / necessary purchases	5	6	15	7	33	20%	12%
Symbolically important	1	1	10	3	15	9%	5%
Supported on-the-land activities	3	7	0	0	10	6%	3.5%
Opened family discussions about RS	2	2	3	1	8	5%	3%
Supported healing activities	0	2	1	0	3	2%	1%

* Includes positive responses by participants who said CEP was both positive and negative. Does not include those who provided no explanation as to what the positive impacts entailed (n=14).

Atlas Table 11: Negative Impacts of CEP Compensation, by community remoteness
(multiple responses; n = 131 or 47% response rate)*

Code: CEP money – negative impacts	Respondents					% of total respondents (n=131)	% of study group (n=281)
	Isolated	Semi-Iso.	Rural	Urban	Totals		
Injustice of “10-plus-3” formula	3	23	26	10	62	47%	22%
Triggered negative emotions	3	10	19	13	45	34%	16%
Anger at process / partial payment	0	6	11	6	23	18%	8%
Fuelled self-destructive behaviours	0	6	2	8	16	12%	6%
Exploited by family / salespeople	1	4	4	4	13	10%	5%
Unable to manage large sum of money	1	3	2	2	8	6%	3%
Lateral violence, elder abuse	0	3	1	3	7	5%	2.5%

* Includes negative responses by participants who said CEP was both positive and negative. Does not include those who said CEP was negative or both, but who provided no explanation as to what the negative impacts entailed (n=11).

Atlas Table 12: CEP Compensation - Community Impacts
(multiple responses; n = 40 or 14% response rate)

Codes: CEP money - community impacts CEP money – homelessness issues	Respondents	% of total respondents (n=40)	% of study group (n=281)
Increase in addictive behaviours among others*	23	57.5%	8%
Unwise use of CEP money by others	11	27.5%	4%
Increased suicides & accidental deaths in community*	10	25%	4%
Despite CEP, recipients are still homeless	7	17.5%	3%
Family violence & divisiveness	4	10%	1%
Wise use of CEP money by others	3	7.5%	1%
Exploitation by outsiders / negative media	3	7.5%	1%

* 6 respondents said that CEP money both fuelled addictions and contributed to deaths in the community.

Atlas Table 13: Compensation, Healing and Wellbeing

(multiple responses; n = 212 or 75% response rate)

Code: Compensation, Healing & Wellbeing	Respondents	% of total respondents (n=212)	% of study group (n=281)
No change:			
- No link between money & healing	78	37%	28%
- On healing journey before CEP & money made no difference	17	8%	6%
- Do not need to heal so CEP made no difference	8	4%	3%
Promoted healing:			
- CEP process was a step toward healing	42	20%	15%
- CEP money improved material wellbeing	27	13%	10%
- CEP afforded access to healing	8	4%	3%
Deterred healing:			
- CEP was unfair, "too little too late"	25	12%	9%
- Negative CEP process was a step backward from healing	23	11%	8%
- CEP money brought pain, anger	12	6%	4%

Note: 9 participants interpreted the question as whether or not CEP caused them to behave badly, prompting responses such as, "No changes, I didn't do drugs or anything."

Atlas Table 14: Definitions of Healing, by Aboriginal identity

(multiple responses; n = 191 or 68% response rate)

(multiple responses; n = 191 or 68% response rate)

Code: Healing Definitions	Respondents					% of total respondents (n=191)	% of study group (n=281)
	First Nations	Inuit	Métis	Mixed/ NR	Totals		
Healing is...							
...dealing with legacy of residential school	62	17	2	1	82	43%	29%
...getting addiction treatment	20	5	1	0	26	14%	9%
...participating in traditional cultural activities	15	8	0	2	25	13%	9%
...traditional approaches & holistic healing	23	0	0	0	23	12%	8%
...accessing western services	15	5	0	1	21	11%	7.5%
...talking with someone you can trust	7	7	1	0	15	8%	5%
...personal happiness, health, balance	14	0	0	1	15	8%	5%
...Christian faith	10	1	1	1	13	7%	5%
...reconnecting to family & community	8	0	0	0	8	4%	3%
...helping others	5	0	1	0	6	3%	2%
...finding closure for deaths during/at RS	3	0	0	0	3	1.5%	1%
Healing is not...							
...holding back	12	3	0	0	15	8%	5%
...compensation (CEP)	7	2	1	0	10	5%	4%
...for me; it's for those who were abused	1	1	1	0	3	1.5%	1%
Do not think about or unable to define healing	11	1	0	0	12	6%	4%

Note: 90 participants = no response (NR).

Atlas Table 15: Intergenerational Issues

(multiple responses; n = 83 or 30% response rate)

Code:	Respondents	% of total respondents	% of study group
Intergenerational Issues		(n=83)	(n=281)
Family alienation, lack of parenting skills is intergenerational	63	76%	22%
CEP has led to increased openness and understanding re: RS legacy	27	33%	10%
Self-destructive and violent behaviours are intergenerational	18	22%	6%
RS resulted in community disconnection, generation gap	16	19%	6%

Atlas Table 16: Independent Assessment Process (IAP)

(multiple responses; n = 157 or 56% response rate)

Code:	Respondents	% of total respondents	% of study group
Independent Assessment Process (IAP)		(n=157)	(n=281)
Yes, have applied / will apply for IAP	71	45%	25%
No, will not apply for IAP	27	17%	10%
Unsure / hesitant about IAP	22	14%	8%
Unaware of IAP; need information	34	22%	12%
Pursuing other legal action re: RS abuses	12	8%	4%

Atlas Table 17: Truth & Reconciliation Commission (TRC)

(n = 109 or 39% response rate)

Code:	Respondents	% of total respondents	% of study group
Truth & Reconciliation Commission (TRC)		(n=109)	(n=281)
Yes, willing to participate in TRC hearings	52	48%	18.5%
No, not willing to participate in TRC hearings	25	23%	9%
Qualified support for TRC	18	16.5%	6%
Unaware of or uninterested in TRC	14	13%	5%

SPSS Frequency and Crosstabulation Tables

SPSS Table 1: Aboriginal Identity (frequency)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	First Nation (Status)	230	81.9	81.9	81.9
	First Nation (non-Status)	1	.4	.4	82.2
	Inuit	34	12.1	12.1	94.3
	Métis	10	3.6	3.6	97.9
	Mixed - FN/Inuit/Métis	4	1.4	1.4	99.3
	Unsure/Do not know	1	.4	.4	99.6
	NR	1	.4	.4	100.0
	Total	281	100.0	100.0	

SPSS Table 2: Province/Territory (frequency)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	NU	22	7.8	7.8	7.8
	NWT	33	11.7	11.7	19.6
	YT	29	10.3	10.3	29.9
	BC	81	28.8	28.8	58.7
	AB	21	7.5	7.5	66.2
	SK	58	20.6	20.6	86.8
	MB	4	1.4	1.4	88.3
	ON	16	5.7	5.7	94.0
	QC	8	2.8	2.8	96.8
	NS	9	3.2	3.2	100.0
	Total	281	100.0	100.0	

SPSS Table 3: Remoteness by AHF Category (frequency)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Urban	61	21.7	21.7	21.7
	Rural	118	42.0	42.0	63.7
	Semi-Isolated	84	29.9	29.9	93.6
	Isolated	18	6.4	6.4	100.0
	Total	281	100.0	100.0	

SPSS Table 4: Province/Territory * Aboriginal Identity (crosstabulation)

Province/Territory	First Nation (Status)	Aboriginal Identity						Total
		First Nation (non-Status)	Inuit	Métis	Mixed - FN/Inuit/Métis	Unsure/ Do not know	NR	
	0	22	0	0	0	0	0	22
NWT	25	3	3	2	0	0	0	33
YT	29	0	0	0	0	0	0	29
BC	80	0	0	0	0	0	1	81
AB	13	0	6	1	1	0	0	21
SK	56	0	0	1	0	0	0	58
MB	3	0	1	0	0	0	0	4
ON	7	9	0	0	0	0	0	16
QC	8	0	0	0	0	0	0	8
NS	9	0	0	0	0	0	0	9
Total	230	34	10	4	1	1	1	281

SPSS Table 5: Province/Territory * Remoteness by AHF Category (crosstabulation)

Province/Territory	Remoteness (AHF Category)						Total
	Urban	Rural			Isolated	Total	
		Semi-isolated	Isolated	Total			
NU	4	0	0	0	18	0	22
NWT	17	0	16	0	0	0	33
YT	0	0	29	0	0	0	29
BC	18	32	31	0	0	0	81
AB	0	21	0	0	0	0	21
SK	3	55	0	0	0	0	58
MB	3	1	0	0	0	0	4
ON	16	0	0	0	0	0	16
QC	0	0	8	0	0	0	8
NS	0	9	0	0	0	0	9
Total	61	118	84	18	0	0	281

SPSS Table 6: Gender (frequency)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	129	45.9	45.9	45.9
	Female	152	54.1	54.1	100.0
	Total	281	100.0	100.0	

SPSS Table 7: Age Group (frequency)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	20 - 29 years	7	2.5	2.5	2.5
	30 - 39 years	12	4.3	4.3	6.8
	40 - 49 years	53	18.9	18.9	25.6
	50 - 59 years	85	30.2	30.2	55.9
	60 - 69 years	84	29.9	29.9	85.8
	70 - 79 years	29	10.3	10.3	96.1
	80 - 89 years	9	3.2	3.2	99.3
	90 years or older	1	.4	.4	99.6
	NR	1	.4	.4	100.0
	Total	281	100.0	100.0	

SPSS Table 8: Current Residence by Community Type (frequency)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	FN Reserve	101	35.9	35.9	35.9
	Métis Settlement	7	2.5	2.5	38.4
	Hamlet / Small Rural Community	20	7.1	7.1	45.6
	Town	91	32.4	32.4	77.9
	City	61	21.7	21.7	99.6
	Land / Bush / Outpost Camp	1	.4	.4	100.0
	Total	281	100.0	100.0	

SPSS Table 9: Aboriginal Identity * Current Residence by Community Type (crosstabulation)

Aboriginal Identity	Current Residence by Community Type						Total
	FN Reserve	Métis Settlement	Hamlet / Small Rural Community	Town	City	Land / Bush Outpost Camp	
First Nation (Status)	Count	3	1	85	40	1	230
% within Aboriginal Identity	43.5%	1.3%	.4%	37.0%	17.4%	.4%	100.0%
First Nation (non-Status)	Count	0	0	1	0	0	1
% within Aboriginal Identity	.0%	.0%	.0%	100.0%	.0%	.0%	100.0%
Inuit	Count	0	0	0	16	0	34
% within Aboriginal Identity	.0%	.0%	.0%	52.9%	47.1%	.0%	100.0%
Métis	Count	1	3	3	3	0	10
% within Aboriginal Identity	10.0%	30.0%	.0%	30.0%	30.0%	.0%	100.0%
Mixed - FN/Inuit/Métis	Count	0	1	0	2	0	4
% within Aboriginal Identity	.0%	25.0%	25.0%	.0%	50.0%	.0%	100.0%
Unsure/Do not know	Count	0	0	1	0	0	1
% within Aboriginal Identity	.0%	.0%	.0%	100.0%	.0%	.0%	100.0%
NR	Count	0	0	1	0	0	1
% within Aboriginal Identity	.0%	.0%	.0%	100.0%	.0%	.0%	100.0%
Total	Count	101	7	91	61	1	281
% within Aboriginal Identity	35.9%	2.5%	7.1%	32.4%	21.7%	.4%	100.0%

SPSS Table 10: Decades attended RS, presuming age 7 start-date (frequency)

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid	2	.7	.7	.7
1920s - 1930s	21	7.5	7.5	8.2
1930s - 1940s	43	15.3	15.4	23.6
1940s - 1950s	88	31.3	31.4	55.0
1950s - 1960s	77	27.4	27.5	82.5
1960s - 1970s	38	13.5	13.6	96.1
1970s - 1980s	11	3.9	3.9	100.0
1980s - 1990s	280	99.6	100.0	
Total	1	.4		
Missing	281	100.0		
Total				

SPSS Table 11: Number of Residential Schools attended (frequency)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	One residential school	211	75.1	77.9	77.9
	Two residential schools	43	15.3	15.9	93.7
	Three residential schools	15	5.3	5.5	99.3
	Four residential schools	2	.7	.7	100.0
	Total	271	96.4	100.0	
Missing	Did not attend residential school	10	3.6		
Total		281	100.0		

SPSS Table 12: Number of Day Schools attended (frequency)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	One day school	16	5.7	84.2	84.2
	Two day schools	3	1.1	15.8	100.0
	Total	19	6.8	100.0	
Missing	Did not attend day school	262	93.2		
Total		281	100.0		

SPSS Table 13: Number of Residential Schools attended * Number of Day Schools attended (crosstabulation)

					Total
		Did not attend day school	One day school	Two day schools	
Number of Residential Schools attended	Did not attend residential school	0	7	3	10
	One residential school	205	6	0	211
	Two residential schools	41	2	0	43
	Three residential schools	14	1	0	15
	Four residential schools	2	0	0	2
Total	262	16	3	281	

SPSS Table 14: Full or Partial Claim Paid * Day-student / residential-student attendance (crosstabulation)

			Day-student only	Both residential & day-student	Residential-student only	Total
Full or Partial Claim	Full	Count	0	0	58	58
		% within Day-student / residential-student attendance	.0%	.0%	22.1%	20.6%
	Partial	Count	1	8	82	91
		% within Day-student / residential-student attendance	10.0%	88.9%	31.3%	32.4%
	Uncertain	Count	0	0	5	5
		% within Day-student / residential-student attendance	.0%	.0%	1.9%	1.8%
	Waiting	Count	2	1	10	13
	% within Day-student / residential-student attendance	20.0%	11.1%	3.8%	4.6%	
Rejected	Count	7	0	2	9	
	% within Day-student / residential-student attendance	70.0%	.0%	.8%	3.2%	
NR	Count	0	0	105	105	
	% within Day-student / residential-student attendance	.0%	.0%	40.1%	37.4%	
Total	Count	10	9	262	281	
	% within Day-student / residential-student attendance	100.0%	100.0%	100.0%	100.0%	

SPSS Table 15: Years at Residential & Day School (frequency)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	2 years or less	33	11.7	12.6	12.6
	3-5 years	71	25.3	27.2	39.8
	6-9 years	90	32.0	34.5	74.3
	10 years or more	67	23.8	25.7	100.0
	Total	261	92.9	100.0	
Missing	NR	20	7.1		
Total		281	100.0		

SPSS Table 16: Difference (months) - CEP start date & receipt (frequency)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 - 6 months after IRSSA	173	61.6	69.2	69.2
	7 - 12 months after IRSSA	39	13.9	15.6	84.8
	13 - 18 months after IRSSA	13	4.6	5.2	90.0
	Pre-Sept 2007 (before IRSSA implementation)	25	8.9	10.0	100.0
	Total	250	89.0	100.0	
Missing	NA (waiting or rejected)	22	7.8		
	NR	9	3.2		
	Total	31	11.0		
Total		281	100.0		

SPSS Table 17: CEP Recipient (frequency)

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	258	91.8	91.8	91.8
Applied, Waiting	8	2.8	2.8	94.7
No, Reconsideration	5	1.8	1.8	96.4
No, Rejected	9	3.2	3.2	99.6
NR	1	.4	.4	100.0
Total	281	100.0	100.0	

SPSS Table 18: Advance payments (May 2006 - Sept 2007) * Advance CEP Eligibility (crosstabulation)

			Eligible (age 68 & over)	Not eligible (age 67 & under)	Total
Advance payments (May 2006 - Sept 2007)	Yes - CEP (age 68+)	Count	18	0	18
		% within Advance CEP Eligibility	30.5%	.0%	29.5%
	Yes - ADR (pre-SA)	Count	3	2	5
		% within Advance CEP Eligibility	5.1%	100.0%	8.2%
	No	Count	15	0	15
		% within Advance CEP Eligibility	25.4%	.0%	24.6%
	NR	Count	23	0	23
		% within Advance CEP Eligibility	39.0%	.0%	37.7%
Total		Count	59	2	61
		% within Advance CEP Eligibility	100.0%	100.0%	100.0%

SPSS Table 19: Months since CEP received prior to interview (frequency)

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid 0 - 6 months prior to interview	40	14.2	14.2	14.2
7- 12 months prior to interview	130	46.3	46.3	60.5
13 - 18 months prior to interview	64	22.8	22.8	83.3
19 - 24 months prior to interview	14	5.0	5.0	88.3
Over 24 months prior to interview	2	.7	.7	89.0
NA (waiting or rejected)	22	7.8	7.8	96.8
NR	9	3.2	3.2	100.0
Total	281	100.0	100.0	

SPSS Table 20: Full or Partial Claim Paid (frequency)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Full	58	20.6	20.6	20.6
	Partial	91	32.4	32.4	53.0
	Uncertain	5	1.8	1.8	54.8
	Waiting	13	4.6	4.6	59.4
	Rejected	9	3.2	3.2	62.6
	NR	105	37.4	37.4	100.0
	Total	281	100.0	100.0	

SPSS Table 21: Reconsideration Process (frequency)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes (in process or will apply)	66	23.5	23.5	23.5
	Yes (successful)	7	2.5	2.5	26.0
	No (has not/will not apply)	15	5.3	5.3	31.3
	Unsure/Not aware	12	4.3	4.3	35.6
	NA (full CEP on 1st application)	51	18.1	18.1	53.7
	NR	130	46.3	46.3	100.0
	Total	281	100.0	100.0	

SPSS Table 22: Reconsideration Process * Full or Partial Claim (crosstabulation); Chi-Square = .000

			Full or partial claim (not implied)					Total	
			Full	Partial	Uncertain	Waiting	Rejected		NR
Reconsideration Process	Yes (in process or will apply)	Count	0	59	0	3	3	1	66
		% within Full or Partial Claim	.0%	64.8%	.0%	23.1%	33.3%	1.0%	23.5%
	Yes (successful)	Count	7	0	0	0	0	0	7
		% within Full or Partial Claim	12.1%	.0%	.0%	.0%	.0%	.0%	2.5%
	No (has not/will not apply)	Count	0	13	1	0	0	1	15
		% within Full or Partial Claim	.0%	14.3%	20.0%	.0%	.0%	1.0%	5.3%
	Unsure/Not aware	Count	0	9	2	0	1	0	12
		% within Full or Partial Claim	.0%	9.9%	40.0%	.0%	11.1%	.0%	4.3%
	NA	Count	51	0	0	0	0	0	51
		% within Full or Partial Claim	87.9%	.0%	.0%	.0%	.0%	.0%	18.1%
	NR	Count	0	10	2	10	5	103	130
		% within Full or Partial Claim	.0%	11.0%	40.0%	76.9%	55.6%	98.1%	46.3%
	Total	Count	58	91	5	13	9	105	281
		% within Full or Partial Claim	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

SPSS Table 23: CEP triggered negative emotions (frequency)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	102	36.3	36.3	36.3
	Did not say	179	63.7	63.7	100.0
	Total	281	100.0	100.0	

SPSS Table 24: CEP triggered negative emotions * Day-student / residential-student attendance (crosstabulation)

			Day-student only	Both residential & day-student	Residential-student only	Total
CEP triggered negative emotions	Yes	Count % within Day-student / residential-student attendance	3 30.0%	2 22.2%	97 37.0%	102 36.3%
	Did not say	Count % within Day-student / residential-student attendance	7 70.0%	7 77.8%	165 63.0%	179 63.7%
Total		Count % within Day-student / residential-student attendance	10 100.0%	9 100.0%	262 100.0%	281 100.0%

SPSS Table 25: CEP triggered negative emotions * Aboriginal Identity (crosstabulation)

			Aboriginal identity						Total	
			First Nation (Status)	First Nation (non-Status)	Inuit	Métis	Mixed - FN/Inuit/Métis	Unsure/ Do not know	NR	
CEP triggered negative emotions	Yes	Count % within Aboriginal Identity	86 37.4%	1 100.0%	11 32.4%	2 20.0%	2 50.0%	0 .0%	0 .0%	102 36.3%
	Did not say	Count % within Aboriginal Identity	144 62.6%	0 .0%	23 67.6%	8 80.0%	2 50.0%	1 100.0%	1 100.0%	179 63.7%
Total		Count % within Aboriginal Identity	230 100.0%	1 100.0%	34 100.0%	10 100.0%	4 100.0%	1 100.0%	1 100.0%	281 100.0%

SPSS Table 26: CEP triggered negative emotions * Years at RS & DS (crosstabulation)

			Years at RS & DS (Range)				Total
			2 years or less	3-5 years	6-9 years	10 years or more	
CEP triggered negative emotions	Yes	Count % within Years at RS & DS (Range)	13 39.4%	28 39.4%	31 34.4%	24 35.8%	96 36.8%
	Did not say	Count % within Years at RS & DS (Range)	20 60.6%	43 60.6%	59 65.6%	43 64.2%	165 63.2%
Total		Count % within Years at RS & DS (Range)	33 100.0%	71 100.0%	90 100.0%	67 100.0%	261 100.0%

SPSS Table 27: Decades attended RS & DS (presumes age 7 start-date) * CEP triggered negative emotions (crosstabulation)

			CEP triggered negative emotions		Total
			Yes	Did not say	
Decades attended RS & DS (presumes age 7 start-date)	1920s - 1930s	Count % within Decades attended RS & DS (presumes age 7 start-date)	0 .0%	2 100.0%	2 100.0%
	1930s - 1940s	Count % within Decades attended RS & DS (presumes age 7 start-date)	4 19.0%	17 81.0%	21 100.0%
	1940s - 1950s	Count % within Decades attended RS & DS (presumes age 7 start-date)	19 44.2%	24 55.8%	43 100.0%
	1950s - 1960s	Count % within Decades attended RS & DS (presumes age 7 start-date)	33 37.5%	55 62.5%	88 100.0%
	1960s - 1970s	Count % within Decades attended RS & DS (presumes age 7 start-date)	32 41.6%	45 58.4%	77 100.0%
	1970s - 1980s	Count % within Decades attended RS & DS (presumes age 7 start-date)	12 31.6%	26 68.4%	38 100.0%
	1980s - 1990s	Count % within Decades attended RS & DS (presumes age 7 start-date)	2 18.2%	9 81.8%	11 100.0%
	Total	Count % within Decades attended RS & DS (presumes age 7 start-date)	102 36.4%	178 63.6%	280 100.0%

SPSS Table 28: Full or Partial Claim * CEP triggered negative emotions (crosstabulation)

			CEP triggered negative emotions		Total
			Yes	Did not say	
Full or Partial Claim	Full	Count % within Full or Partial Claim	21 36.2%	37 63.8%	58 100.0%
	Partial	Count % within Full or Partial Claim	35 38.5%	56 61.5%	91 100.0%
	Uncertain	Count % within Full or Partial Claim	0 .0%	5 100.0%	5 100.0%
	Waiting	Count % within Full or Partial Claim	2 15.4%	11 84.6%	13 100.0%
	Rejected	Count % within Full or Partial Claim	3 33.3%	6 66.7%	9 100.0%
	NR	Count % within Full or Partial Claim	41 39.0%	64 61.0%	105 100.0%
	Total	Count % within Full or Partial Claim	102 36.3%	179 63.7%	281 100.0%

SPSS Table 29: Personal impacts of compensation money (frequency)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Mostly positive	77	27.4	30.0	30.0
	Mostly negative	38	13.5	14.8	44.7
	Both positive & negative	130	46.3	50.6	95.3
	Neither (no difference)	12	4.3	4.7	100.0
	Total	257	91.5	100.0	
Missing	NR or NA	24	8.5		
Total		281	100.0		

SPSS Table 30: Personal impacts of compensation money * Months Since CEP Received (crosstabulation; Chi-square = .000)

			Months since CEP received (at time of interview)						NR	Total
			0-6 months prior to interview	7-12 months prior to interview	13-18 months prior to interview	19-24 months prior to interview	Over 24 months prior to interview			
Personal impacts of compensation money	Mostly positive impacts	Count	20	32	17	3	0	1	4	77
		% within Months Since CEP Received (at time of interview)	50.0%	25.0%	27.4%	21.4%	.0%	50.0%	44.4%	30.0%
	Mostly negative impacts	Count	6	20	8	2	0	0	2	38
		% within Months Since CEP Received (at time of interview)	15.0%	15.6%	12.9%	14.3%	.0%	.0%	22.2%	14.8%
	Both positive & negative impacts	Count	14	70	37	6	1	0	2	130
		% within Months Since CEP Received (at time of interview)	35.0%	54.7%	59.7%	42.9%	50.0%	.0%	22.2%	50.6%
	Neither (CEP made no difference)	Count	0	6	0	3	1	1	1	12
		% within Months Since CEP Received (at time of interview)	.0%	4.7%	.0%	21.4%	50.0%	50.0%	11.1%	4.7%
Total		Count	40	128	62	14	2	2	9	257
		% within Months Since CEP Received (at time of interview)	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

SPSS Table 31: Personal impacts of compensation money * Remoteness, AHF Category (crosstabulation; Chi-Square = .008)

			Remoteness (AHF Category)				Total
			Urban	Rural	Semi-isolated	Isolated	
Personal impacts of compensation money	Mostly positive impacts	Count	12	36	20	9	77
		% within Remoteness (AHF Category)	21.1%	32.7%	27.4%	52.9%	30.0%
	Mostly negative impacts	Count	8	10	20	0	38
		% within Remoteness (AHF Category)	14.0%	9.1%	27.4%	.0%	14.8%
	Both positive & negative impacts	Count	33	60	29	8	130
		% within Remoteness (AHF Category)	57.9%	54.5%	39.7%	47.1%	50.6%
	Neither (CEP made no difference)	Count	4	4	4	0	12
		% within Remoteness (AHF Category)	7.0%	3.6%	5.5%	.0%	4.7%
Total		Count	57	110	73	17	257
		% within Remoteness (AHF Category)	100.0%	100.0%	100.0%	100.0%	100.0%

SPSS Table 32: Opinion of Federal Apology (June 11, 2008) (frequency)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Sincere; necessary; a beginning	73	26.0	26.0	26.0
	Insincere, meaningless, not enough; too late	98	34.9	34.9	60.9
	Church must apologize (not Gov)	14	5.0	5.0	65.8
	No comment / Did not hear/listen to it / NR	96	34.2	34.2	100.0
	Total	281	100.0	100.0	

SPSS Table 33: Opinion of Federal Apology (June 11, 2008) * Personal impacts of compensation money (crosstabulation)

		Personal impacts of compensation money				
		Mostly positive impacts	Mostly negative impacts	Both positive & negative impacts	Neither (CEP made no difference)	Total
Opinion of Federal Apology	Sincere; necessary; a beginning	Count % within Personal impacts of compensation money 20 26.0%	Count % within Personal impacts of compensation money 9 23.7%	Count % within Personal impacts of compensation money 36 27.7%	Count % within Personal impacts of compensation money 4 33.3%	69 26.8%
	Insincere, meaningless not enough; too late	Count % within Personal impacts of compensation money 21 27.3%	Count % within Personal impacts of compensation money 18 47.4%	Count % within Personal impacts of compensation money 47 36.2%	Count % within Personal impacts of compensation money 4 33.3%	90 35.0%
	Church must apologize (not Gov)	Count % within Personal impacts of compensation money 5 6.5%	Count % within Personal impacts of compensation money 0 0.0%	Count % within Personal impacts of compensation money 8 6.2%	Count % within Personal impacts of compensation money 0 0.0%	13 5.1%
	No comment / Did not hear/listen to it / NR	Count % within Personal impacts of compensation money 31 40.3%	Count % within Personal impacts of compensation money 11 28.9%	Count % within Personal impacts of compensation money 39 30.0%	Count % within Personal impacts of compensation money 4 33.3%	85 33.1%
Total	Count % within Personal impacts of compensation money 77 100.0%	Count % within Personal impacts of compensation money 38 100.0%	Count % within Personal impacts of compensation money 130 100.0%	Count % within Personal impacts of compensation money 12 100.0%	257 100.0%	

SPSS Table 34: Engagement in Healing

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Engaged in healing	153	54.4	64.0	64.0
	Not engaged in healing	50	17.8	20.9	84.9
	Unsure about healing	33	11.7	13.8	98.7
	Cannot heal	2	.7	.8	99.6
	No healing supports	1	.4	.4	100.0
	Total	239	85.1	100.0	
Missing	Unclear or no response	42	14.9		
Total		281	100.0		

SPSS Table 35: Personal impacts of compensation money * Engagement in Healing (Recode) (crosstabulation); Chi-Square = 0.49

			Engagement in Healing (Recode)		Total
			Engaged in healing	Not engaged in healing	
Personal impacts of compensation money	Mostly positive impacts	Count	39	28	67
		% within Engagement in Healing (Recode)	27.7%	33.3%	29.8%
	Mostly negative impacts	Count	24	11	35
		% within Engagement in Healing (Recode)	17.0%	13.1%	15.6%
	Both positive & negative impacts	Count	75	37	112
		% within Engagement in Healing (Recode)	53.2%	44.0%	49.8%
	Neither (CEP made no difference)	Count	3	8	11
		% within Engagement in Healing (Recode)	2.1%	9.5%	4.9%
Total		Count	141	84	225
		% within Engagement in Healing (Recode)	100.0%	100.0%	100.0%

SPSS Table 36: Compensation, healing & wellbeing (frequency)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No change	133	47.3	52.4	52.4
	Promoted healing	68	24.2	26.8	79.1
	Deferred healing	53	18.9	20.9	100.0
	Total	254	90.4	100.0	
Missing	NR	27	9.6		
Total		281	100.0		

SPSS Table 37: Compensation, healing & wellbeing * Engagement in Healing (Recode) (crosstabulation); Chi-Square = .000

			Engagement in Healing (Recode)		Total
			Engaged in healing	Not engaged in healing	
Compensation, healing & wellbeing	No change	Count	65	48	113
		% within Engagement in Healing (Recode)	45.8%	61.5%	51.4%
	Promoted healing	Count	52	8	60
		% within Engagement in Healing (Recode)	36.6%	10.3%	27.3%
	Deferred healing	Count	25	22	47
		% within Engagement in Healing (Recode)	17.6%	28.2%	21.4%
Total		Count	142	78	220
		% within Engagement in Healing (Recode)	100.0%	100.0%	100.0%

SPSS Table 38: Compensation, healing & wellbeing * Full or Partial Claim (crosstabulation)

			Full or Partial Claim			Total
			Full	Partial	Uncertain, Waiting, Rejected, NR	
Compensation, healing & wellbeing	No change	Count % within Full or Partial Claim	30 56.6%	42 50.6%	61 51.7%	133 52.4%
	Promoted healing	Count % within Full or Partial Claim	11 20.8%	22 26.5%	35 29.7%	68 26.8%
	Deterred healing	Count % within Full or Partial Claim	12 22.6%	19 22.9%	22 18.6%	53 20.9%
Total	Count % within Full or Partial Claim	53 100.0%	83 100.0%	118 100.0%	254 100.0%	

SPSS Table 39: Opinion of Federal Apology (June 11, 2008) * Compensation, healing & wellbeing (crosstabulation)

			Compensation, healing & wellbeing			Total
			No change	Promoted healing	Deterred healing	
Opinion of Federal Apology	Sincere; necessary, a beginning	Count % within Compensation, healing & wellbeing	30 22.6%	25 36.8%	11 20.8%	66 26.0%
	Insincere, meaningless, not enough; too late	Count % within Compensation, healing & wellbeing	49 36.8%	25 36.8%	20 37.7%	94 37.0%
	Church must apologize (not Gov)	Count % within Compensation, healing & wellbeing	10 7.5%	1 1.5%	2 3.8%	13 5.1%
	No comment / Did not hear/listen to it / NR	Count % within Compensation, healing & wellbeing	44 33.1%	17 25.0%	20 37.7%	81 31.9%
Total	Count % within Compensation, healing & wellbeing	133 100.0%	68 100.0%	53 100.0%	254 100.0%	

SPSS Table 40: Compensation, healing & wellbeing * Aboriginal Identity (crosstabulation)

			Aboriginal Identity					Total	
			First Nation (Status)	First Nation (non-Status)	Inuit	Métis	Mixed - FN/Inuit/Métis		Unsure/ Do not know
Compensation, healing & wellbeing	No change	Count % within Aboriginal Identity	110 52.4%	0 .0%	17 51.5%	4 66.7%	2 66.7%	0 .0%	133 52.4%
	Promoted healing	Count % within Aboriginal Identity	51 24.3%	0 .0%	13 39.4%	2 33.3%	1 33.3%	1 100.0%	68 26.8%
	Deterred healing	Count % within Aboriginal Identity	49 23.3%	1 100.0%	3 9.1%	0 .0%	0 .0%	0 .0%	53 20.9%
Total	Count % within Aboriginal Identity	210 100.0%	1 100.0%	33 100.0%	6 100.0%	3 100.0%	1 100.0%	254 100.0%	

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Helping Aboriginal people heal themselves

