





The approach we take in addressing racism depends very much on what we seek to change. For instance, some sociologists suggest that we must eliminate the label of ‘race’ altogether, while others argue that it is the social consequences of racialization (i.e. racism) that must be addressed. The second argument is supported by research which reveals that having a strong ‘racial’ identity - a worldview firmly grounded in one’s racial/cultural group - in addition to an awareness of racism - can actually shield racially marginalized individuals

from the health-harming effects of racism (Harrell, 2000).

A number of authors have suggested models for developing anti-racist policies, programs and practices. The ‘contact hypothesis’ model, first articulated by Gordon Allport in 1954, advances four ‘contact conditions’ that Allport claimed would reduce racism:

- advancing equal status (e.g. in educational attainment, employment opportunities) to reduce power imbalances between racialized groups;

- developing superordinate<sup>2</sup> goals so people will have to work together;
- eliminating competition by supporting collaborative initiatives; and
- institutional/authority endorsement and support of greater contact between dominant and marginalized racialized groups.

A meta-analysis of 203 studies revealed strong support for this model, indicating that under the contact conditions described above, racial and other prejudices and discrimination are greatly

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<sup>2</sup> Something that represents a higher order or category within a system of classification (e.g. the category of human over the category of race) (Oxford Dictionary, 2013a).



reduced in a number of settings (Pettigrew & Tropp, 2000). For example, in their 2003 Australian study, Dunn and Geeraert discovered fewer incidents of racism in areas with high levels of cultural diversity.

In 2003, Guerin claimed that reducing racial tensions requires a process he referred to as ‘racial socialization’, which involves: understanding the process of racialization, becoming aware of the pervasiveness of racism in societies, and recognizing the various forms it takes. Guerin described the steps in racial socialization as:

- appropriately identifying racism and acknowledging its extent;
- understanding the experience of racism, which often includes feelings of exclusion, rejection and humiliation; and
- demonstrating suitable

responses to racist incidents such as respectful corrections and accurate information.

Duckitt (2001) described four important foci of anti-racist interventions as: cognitive, individual, interpersonal, and societal. He suggested that a cognitive process of racial ‘deategorization’ could occur when individuals from different racialized groups form close connections through the pursuit of common goals, which can initiate a process of ‘recategorization’ under a shared identity (e.g., colleagues, partners, allies). Duckitt also claimed that through this process, racist individuals could acquire new values and attitudes that displace race-based stereotypes. Interventions that provide accurate inter-cultural education can also encourage individuals to reflect on their own racist worldviews, attitudes, and beliefs.

This kind of interpersonal transformation can be achieved through mass media and educational interventions that support norms of tolerance and enhance the visibility of minority groups. Liberal democracy, which protects the rights of all citizens and attempts to reduce social conflict and enhance integration, can diminish racism at a societal level (Duckitt, 2001).

## Anti-racism interventions in Canada

During the past several decades, various interventions have been designed to address racism in Canada. Specifically, media, education and health care represent settings in which awareness and social messaging have taken place.



*In general, Canadians are unaware of the history and affects of colonialism on Indigenous peoples in Canada.*



## Media

The media has a great deal of influence over societal attitudes and norms and is, therefore, an important avenue through which racism can be addressed. There is considerable evidence that the most effective (particularly among adolescents) anti-racism media campaigns employ subtle messages (e.g. commercials that include interracial couples, families and peer groups) conveyed by prominent individuals (Donovan & Leivers, 1993; Duckitt, 2001). In fact, within the context of anti-Indigenous<sup>3</sup> racism, Duckitt (2001) and others have found that confrontational messages can prompt harsh backlash among highly racist people as well as alienate those who prefer a more

subtle approach (Passi, 2013; Perkel, 2013).

Diversity has been identified as a key principle underlying the *Canadian Broadcasting Act*. As Canada's broadcasting and telecommunications regulating and licensing body, the Canadian Radio-Television and Telecommunications Commission (CRTC) attempts to ensure that all broadcasts reflect Canada's cultural diversity. In fact, the CRTC recently initiated a policy that requires all commercial television networks to submit cultural diversity plans as part of their annual reporting and renewal process. Canada's broadcasting system also offers Indigenous-specific content through the Aboriginal Peoples' Television

Network (APTN), Indigenous radio networks for specific cities, and over 200 Indigenous community-based radio stations in the north (CRTC, n.d.). The CRTC regulations also mandate that no programming may "contain comment or pictorial representation that, when taken in context, tends to or is likely to expose an individual or a group or class of individuals to hatred or contempt on the basis of race, national or ethnic origin, colour, religion, sex, sexual orientation, age or mental or physical disability" (CRTC, n.d., Section 5 (1) (b)).

One of the most promising Canadian anti-racism media offerings emerged during the early part of 2012, when the CBC presented a series entitled

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<sup>3</sup> 'Indigenous' peoples are defined as having historical connection to their territories that pre-dates European colonization; the governments of Canada and the United States refer to the First Peoples of North America as "Indians."

*8th Fire: Aboriginal Peoples, Canada and the Way Forward*, which explored the past and potential future relationship between the Indigenous and non-Indigenous peoples of Canada. The series represented a collaboration between the CBC and Indigenous broadcasters and artists. The title comes from an Anishinaabe prophecy about a time when Indigenous and non-Indigenous people will together build the “8th Fire” of justice and harmony. The series host, Wab Kinew, encouraged audiences to put aside stereotypes, prejudices and misunderstandings, and recognize the leadership and contributions Indigenous peoples have made and continue to make in areas of governance, art, and scholarship.

## Anti-oppressive education and cultural competency

Several authors have suggested that when parents encourage their children to develop perspective-taking,<sup>4</sup> empathy, and nonviolent conflict resolution, those children are much less likely to have intolerant or racist attitudes and conflicts (Duckitt, 2001; Sanson et al., 1998). Similarly, children who watch educational television programs that highlight diversity (e.g., *Sesame Street*) and have parents that talk about racialization and have racially diverse friends also tend to have less racial prejudice (Katz, 2003). Researchers have also discovered an inverse (opposite) relationship between education and racism, meaning that people with higher

levels of education generally have less racial prejudices (Pedersen, Contos, Griffiths, Bishop, & Walker, 2000; Pedersen & Walker, 1997). In particular, people who receive a ‘liberal’ education that incorporates diverse perspectives tend to develop less authoritative and racist beliefs and norms than those who are indoctrinated into the traditional teachings of ‘conservatism’ (Duckitt, 2001).

In general, Canadians are unaware of the history and effects of colonialism<sup>5</sup> on Indigenous peoples in Canada. Unfortunately, the basis for this ignorance can often be found in our system of education. Beyond a few exceptions, the education of children and youth in Canada does not include

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<sup>4</sup> Perspective-taking considers what others think and feel from their unique social location.

<sup>5</sup> Colonialism – “the policy or practice of acquiring full or partial political control over another country, occupying it with settlers, and exploiting it economically” (Oxford Dictionaries, 2013b).



a critical examination of our colonial history or its damaging consequences to the health and well-being of Indigenous peoples. In reality, the historical ‘facts’ presented about Indigenous peoples are at times inaccurate and/or degrading, while the issue of systemic racism is diminished or entirely ignored (The Standing Senate Committee on Aboriginal Peoples, n.d.).

One clear approach to fostering anti-racist values and social norms is the implementation of multicultural educational programs that include an unvarnished version of our colonial history, and emphasize the value of diversity within society. Several authors (Hollinsworth, 1998; Pedersen et al., 2000; Sanson et al., 1998) have suggested that these programs are most effective when delivered by appropriately trained teachers, integrated into the overall curriculum, and introduced as early as possible. Anti-oppressive education discourages students from making generalizations about racialized groups or about the circumstances in which some racialized people live, and does not shy away from frank discussions of racism and how to address it (Duckitt, 2001; Guerin, 2003).

Working in collaboration with Indigenous peoples and others, schools across Canada have developed anti-racism policies that provide guidelines for recognizing, reporting, documenting and responding to incidents of racism against students and staff. Implementation of these policies has been enhanced by in-service education developed in partnership with, and facilitated by, Indigenous community representatives. Schools are also encouraged to develop relationships with Indigenous cultural leaders, elders and knowledge holders, who can speak to students as well as contribute to the development of Indigenous-focused curricula (Lindsay, 2008).

A number of anti-racist resources have been developed to assist Canadian teachers. One such resource, *The Anti-Racism Curriculum*, provides teachers with in-service education sessions, a Resource Kit, and an online guide for anti-racism classroom learning activities. The goals of the curriculum are to increase students’ awareness and knowledge of racism, as well as the skills to discuss and address it in the classroom and the community (Alberta Civil Liberties Research Centre

and the Committee on Race Relations and Cross Cultural Understanding, 2007, 2009).

The Assembly of First Nations (AFN) as well as the National Aboriginal Health Organization (NAHO)<sup>6</sup> have advised that in order to be effective and appropriate, the teaching of Indigenous history and contemporary life requires that:

- educators are culturally competent; and
- Indigenous students feel culturally safe (Assembly of First Nations, n.d.; NAHO, 2008).

Cultural competence and safety within educational settings are described, respectively, as the degree to which teachers’ attitudes, knowledge and skills ensure that Indigenous cultures are respectfully represented in curricula and to which Indigenous students feel safe (visible, respected and empowered) within school environments. According to Battiste (2004) and Hatcher and Bartlett (2010), all students, regardless of their racialized identity, benefit from respectful observance of Indigenous cultures in school, as it prepares them to participate in an inclusive and anti-racist way in their future

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<sup>6</sup> The National Aboriginal Health Organization (NAHO) was an Indigenous designed and controlled non-profit organization that undertook knowledge-based activities with the aim of influencing and advancing Indigenous health and well-being in Canada. The organization was incorporated in 2000, but lost its funding and ceased operations in 2012.



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workplace or post-secondary institution.

In Manitoba, Indigenous content has been incorporated into curricula for all students and includes Indigenous histories, knowledge systems and cultures. Indigenous students benefit from this type of education through enhanced knowledge of their cultures as well as skills they can use to work in their own communities. Similarly, non-Indigenous students benefit from being exposed to environments and curricula that acknowledge and accurately represent the history, strengths and challenges of Indigenous peoples, thus positively shaping future educators, professionals, leaders and citizens of Canada. The ultimate goal of these educational initiatives is to eradicate racialized stereotypes, enrich the educational experience, and

heighten the academic success of Indigenous students, which will in turn increase the representation of Indigenous students in post-secondary institutions and diverse workplaces (Manitoba Education and Literacy, 2003). A well-educated, well-respected Indigenous workforce will reduce poverty within Indigenous communities and develop the capacity of Indigenous leadership and participation locally, regionally, nationally and internationally.

### Health care

Several researchers have discovered a long history of Canadian health services and providers that often fail to create ‘culturally safe’ environments in which Indigenous people can access care (Browne & Fiske, 2001; Davidhizar, & Newman Giger, 2000; Fontaine & Health

Council of Canada, 2012; O’Sullivan, 2013; Shah & Reeves, 2012). Reports suggest that health professionals are sometimes influenced by racial biases and stereotypes when providing services to Indigenous peoples (Fontaine & Health Council of Canada, 2012; Shah & Reeves, 2012). Ultimately, a lack of culturally sensitive care as well as a shortage of Indigenous health care providers often limits the comfort Indigenous people feel about accessing health services (Fontaine & Health Council of Canada, 2012; Shah & Reeves, 2012).

Over the past three decades, researchers and practitioners from across the globe have attempted to address these issues by developing various concepts of cultural sensitivity and competence to inform health practice. In the 1970s, the



concept of cultural competence was defined as the attainment of skills that would enable the delivery of ‘appropriate’ care to diverse racialized peoples (Ruben, 1976). However, models of competence that simply focus on knowledge of various cultural ‘facts’ can unintentionally create or reinforce harmful stereotypes. Recent models have emphasized the development of awareness among health care providers of their own privileged position, encouraging them to work respectfully with diversely racialized people (Goode, 2004).

In the 1980s, Māori nursing professionals developed the concept of cultural safety as an approach to diminishing cultural harms based on unequal power relations between health care providers and Indigenous patients. Bourke et

al. (2004) define cultural safety as environments, relationships and behaviours in which there is no “assault, challenge or denial of [Indigenous and other racialized peoples’] identity, of who they are and what they need.” They conclude that “a lack of culturally safe health services places people at risk by dramatically reducing [the likelihood that they will] access...services” (p. 183), thereby negatively impacting screening rates as well as the timeliness of diagnosis, treatment, care and support. Thus, improvements in cultural safety create a potential trajectory of positive changes related to health care utilization and consequently, the social and economic well-being of Indigenous individuals and communities.

Health care systems and institutions across Canada have

begun to embrace the concept of cultural safety by implementing a plethora of initiatives aimed at enhancing the involvement of Indigenous peoples in the design and management of their own health programs and services. An example can be found within the Saskatoon Regional Health Authority where collaborations between an Indigenous Health Council, Indigenous communities, and the health care system aim to:

- increase inclusion of traditional healing,
- enhance Indigenous diversity,
- address the spiritual and cultural healing needs of Indigenous clients,
- develop a Cultural Competency Framework for health professionals,
- increase employment opportunities for Indigenous people within all levels of the Health Region, and
- develop an Anti-Racism Strategy (Strengthening the Circle Partnership, n.d.).

Although no longer funded by the federal government, the Inuit Tuttarvingat, a division of the National Aboriginal Health Organization (NAHO), provides another excellent example. This group gathered and distributed valuable resources for non-Inuit health care providers working in Inuit communities as well as those serving the health care needs of Inuit patients in southern Canada. The resources



*It will take several generations and many voices from diverse racialized peoples to undo the damage wrought by our colonial past and to change belief systems that privilege some but make us all poor in spirit.*



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included materials related to the health profile of Inuit people, as well as Inuit culture, history, values, and perspectives on health (Zizman & Amagoalik, 2010), which could be incorporated into health care environments and relationships to ensure cultural safety for Inuit peoples.

Clinique Minowé in Val-d'Or Quebec provides an example of innovation in the provision of integrated health and social services for Indigenous peoples living in urban centers. Developed through a partnership between the Val-d'Or Native Friendship Centre, the Regional Office of Provincial Health and Social services, and the Regional Youth Protection Services Centre, Clinique Minowé offers culturally relevant services to Indigenous peoples and communities. The cultural safety of its services is

enhanced by its location in the Friendship Centre, as well as the holistic approach taken by the clinic's health professionals and their willingness to travel to remote camps during the summer months to attend to their Indigenous clients' needs (Health Council of Canada, n.d.).

Since 2006, the Aboriginal Health Program of the Provincial Health Services Authority in British Columbia has delivered a groundbreaking and large-scale anti-racism initiative. This on-line program offers a *Core Indigenous Cultural Competency (ICC) Health Training* course that focuses on building capacity among non-Indigenous health care professionals to provide culturally safe care to Indigenous people in British Columbia (Provincial Health Services Authority, n.d.). Participants

learn about colonial history and residential schools, and develop a contextual understanding of Indigenous social disparities and health inequities. Interactive activities help participants explore the meaning of culture, the consequences and legacy of colonization, as well as the harms associated with stereotyping. Developed in response to the *Transformative Change Accord*, which includes a commitment to develop and pursue mandatory training for staff of the Ministry of Health and regional health authorities in BC, this program has the potential to enhance culturally safe (anti-racist) practice among 100,000 health care workers in BC (Health Council of Canada, 2012).

Developed in 2009, *Cultural Competence and Cultural Safety in Nursing Education: A Framework*

for First Nations, Inuit and Métis Nursing has become the basis upon which Canadian Schools of Nursing are developing and implementing new curricula and courses that enhance nurses' capacity to meet the health care needs of Indigenous clients (Hart-Wasekeesikaw & David, 2009). Similarly, in partnership with Indigenous scholars, the Indigenous Physicians Association of Canada has developed a framework entitled, *First Nations, Inuit and Metis Health Core Competencies: A Curriculum Framework for Continuing Medical Education*, which represents a template from which to develop the core competencies of health science students in the area of Indigenous cultural safety. Module topics include: "Indigenous worldviews, impacts of colonization, health determinants and health outcomes, gaps in mainstream health and social services for Indigenous service users, and concepts of health and healing in an Indigenous context" (Toronto Star, 2012, n.p.).

The representation of Indigenous peoples within health care settings is an important component of culturally safe care (Bourke et al., 2004). To that end, the Aboriginal Nurses Association of Canada has recently initiated

a program aimed at increasing the recruitment and retention of Indigenous students to Canadian Schools of Nursing and supporting the retention of First Nation, Inuit, and Métis nurses and other health professionals currently in the workplace (Aboriginal Nurses Association of Canada, n.d.). Similarly, several universities across Canada have initiated programs to recruit and retain Indigenous students in their medical programs (Indigenous Physicians Association of Canada, 2007).

## Systemic policies

*Indigenous peoples... are vulnerable to racism, racial discrimination... and related intolerance. Canada will continue to understand better the causes and manifestations of racism and racial discrimination and how the two affect vulnerable groups. Our approach will target compounded disadvantages suffered by individuals or vulnerable communities to strengthen social cohesion.*  
(Department of Canadian Heritage, 2005, p.14)

The Canadian government has enacted several pieces of anti-discriminatory legislation in an attempt to address disparities based on historic and contemporary racism (Minister of Public Works and Government Services Canada, 2005). This type

of legislation is critical as it serves both symbolic and educational purposes; promoting social values of equity and justice, as well as deterring and punishing racial discrimination (Hollinsworth, 1998). For example, the Criminal Code of Canada provides protection against racialized violence by not just prohibiting genocide,<sup>7</sup> but also punishing those who promote or support genocide as well as those who promote or incite racialized hatred through public statements (Government of Canada, 1985). Likewise, the *Canadian Human Rights Act* prohibits racialized or other forms of discrimination by providing opportunities for those subjected to discriminatory treatment to file a complaint with the Canadian Human Rights Commission that will investigate the claim and take appropriate action to address and/or compensate for discriminatory policies or practices (Human Rights Commission, n.d.).

Unfortunately, there continues to be a need to address racism within public services - even among those charged with protecting the public from harm. For instance, a report by Hylton (n.d.) proposes that the most successful approaches to reducing anti-Indigenous racism within policing services involve the recruitment and support

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<sup>7</sup> Genocide refers to "any act committed with intent to destroy in whole or in part any identifiable group" (Government of Canada, 1985).



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of Indigenous officers, as well as screening for racism among new recruits and cross-cultural training for all police officers. The Saskatchewan Police College is one of many that require all recruits to undergo cultural awareness training (Saskatchewan Police College, n.d.). It has been shown to strengthen an officer’s sense of inclusion, thus challenging the traditional stance of police as being separate from the community (Coderoni, 2002).

Initiated in the 1960s, the term ‘affirmative action’ refers to an approach to addressing historic employment discrimination against women and racialized groups, such as Indigenous peoples, whereby institutions with affirmative action programs prioritize the hiring of these previously disadvantaged groups. The *Canadian Charter of Rights and Freedoms* supports

“the amelioration of conditions of disadvantaged individuals or groups including those that are disadvantaged because of race...” through affirmative action (Section 15, 1). As such, the *Canadian Employment Equity Act* requires employers to identify and eliminate employment barriers and institute policies and practices to ensure designated groups achieve an appropriate degree of representation (Government of Canada, n.d.).

It is crucial that affirmative action policies do not compromise employment ‘merit’ wherein people are placed in positions for which they do not have the skills, abilities, or qualifications to be successful. Similarly, although affirmative action policies are necessary to achieve socio-economic equity, they can also generate feelings of self-doubt among racialized groups as the

assumption of ‘special treatment’ persists (Dovidio & Gaertner, 1996). Indeed, backlash against affirmative action policies is diminished when employment policies are both fair and are perceived as such. This process avoids quota systems and includes institutional communication about the benefits of diversity and the necessity to address historic discrimination (Dovidio & Gaertner, 1996).

Criticism of affirmative action policies is often rooted in misguided notions of ‘colour blindness.’<sup>8</sup> Several researchers have discovered that “colour blind” policies can actually be detrimental to racially marginalized groups by ignoring the lived experiences of racialized inequity, thereby maintaining more subtle forms of racism and curtailing attempts to ‘level the playing field’ (Ben-Tovim, Gabriel,

<sup>8</sup>The concept of ‘colour blindness’ was introduced in the first fact sheet in this series and refers to the notion that we should “ignore colour”, which in theory is reasonable but in practice does not occur.



Law, & Stredder, 1992; Bonnett, 2000; Duckitt, 2001).

Established in 2007, *The Truth and Reconciliation Commission* aimed to “reveal the complete story of Canada’s residential school system,<sup>9</sup> and lead the way to respect through reconciliation... for the child taken, for the parent left behind” (Truth and Reconciliation Commission of Canada, 2012, p.2). With support from Governor General Michaëlle Jean, the Commissioners travelled to every province and territory in Canada to meet with former residential school students and staff. They visited hundreds of Indigenous communities to talk about the Commission and attended several conferences and gatherings, as well as met with regional and federal leaders, the Assembly of First Nations, the Métis National Council, and the Inuit Tapiriit Kanatami. In September 2010, the Commissioners presented their initial findings to the Canadian Senate Standing Committee on Aboriginal Peoples with several recommendations for addressing systemic racism and the trauma experienced by Indigenous peoples, families, communities and nations as a result of residential schools.

In addition to raising awareness about the negative impacts of

colonization, we can combat racism by celebrating the valuable contributions made by Indigenous peoples to Canadian society through Indigenous concepts of health and healing practices, environmental stewardship, as well as diverse traditions of art, governance, culture and language (Lee, 2008). One such initiative is the Aboriginal Peoples’ Program (APP) of the Department of Canadian Heritage, which aims to “support the continuation of Indigenous cultures and languages as living elements of Canadian society” through “community projects that incorporate Indigenous values, cultures and traditional practices into community-driven activities designed to strengthen cultural identity and enable positive life choices” (Canadian Heritage, n.d., para, 2).

## Conclusion

Racism is a pervasive condition capable of poisoning the perceptions of everyday people and corrupting the structure of entire societies. It is perpetrated by strangers and colleagues, and sometimes even by friends; it happens in grocery stores and halls of justice, and even in places of worship. It has condemned entire nations and countless generations of people to untold suffering. Whether subtle or

overt, racism commits assault on the minds, spirits and even the bodies of those racialized and consequently marginalized to ‘minority’ status.

Alone, Indigenous people can do little to combat racism, particularly when it is so pervasively and deeply embedded in the ideological, political, economic and social structures of Canada. But together, as allies, Indigenous and non-Indigenous people *are* turning the tide. We are demanding respectful representation of Indigenous people in our media, an honest and diversely informed education for our children, humility and compassion from our health care providers, and equitable partnership with our government leaders. It will take several generations and many voices from diverse racialized peoples to undo the damage wrought by our colonial past and to change belief systems that privilege some but make us all poor in spirit.



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<sup>9</sup>The experience of Indigenous children within residential schools was discussed in the second fact sheet in this series.

## References

- Aboriginal Nurses Association of Canada. (n.d.). *Cultural competence and cultural safety in nursing education introduction*. Ottawa, ON: Aboriginal Nurses Association of Canada. Retrieved June 17, 2013 from <http://www.anac.on.ca/competency.php>.
- Alberta Civil Liberties Research Centre and the Committee on Race Relations and Cross Cultural Understanding. (2007, 2009). *Anti-racism resource kit - Second edition*. Calgary, AB: University of Calgary. Retrieved June 15, 2013 from [http://webcache.googleusercontent.com/search?q=cache:zzR8gU7MMugJ:www.aclrc.com/pdf/Anti\\_Racism\\_Resource\\_Kit.pdf+&cd=12&hl=en&ct=clnk&gl=ca](http://webcache.googleusercontent.com/search?q=cache:zzR8gU7MMugJ:www.aclrc.com/pdf/Anti_Racism_Resource_Kit.pdf+&cd=12&hl=en&ct=clnk&gl=ca)
- Allport, G.W. (1954). *The nature of prejudice*. Cambridge, MA: Perseus Books.
- Assembly of First Nations. (n.d.). *First Nations cultural safety in post-secondary education*. Ottawa, ON: Assembly of First Nations. Retrieved March 11, 2013, from <http://64.26.129.156/article.asp?id=3962>
- Battiste, M. (2004). Bringing Aboriginal education into the contemporary education: Narratives of cognitive imperialism reconciling with decolonization! In *Leadership, gender and culture. Male and female perspectives*, J. Collard & C. Reynolds (eds.), pp. 142-148. Maidenhead, UK: Open University Press.
- Ben-Tovim, G., Gabriel, J., Law, I., & Stredder, K. (eds). (1986). *The local politics of race*. London: Macmillan.
- Bonnett, A. (2000). *Anti-racism*. London: Routledge.
- Bourke, L., Sheridan, C., Russell, U., Jones, G., DeWitt, D., & Liaw, S. (2004). Developing a conceptual understanding of rural health practice. *Australian Journal of Rural Health*, 12: 181-186.
- Browne, A. J., & Fiske, J. (2001). First Nations women's encounters with mainstream health services. *Western Journal of Nursing Research*, 23(2): 126-147.
- Canadian Heritage. (n.d.). *Aboriginal peoples' program*. Retrieved March 15, 2013 from <http://www.pch.gc.ca/eng/1288012444767/1305897413896>
- Canadian Radio-Television and Telecommunications Commission. (n.d.) Retrieved March 15, 2013 from <http://www.crtc.gc.ca/eng/home-accueil.htm>
- Coderoni, G. (2002). Relationship between multicultural training for police and effective law enforcement. *FBI Law Enforcement*, 71(11): 16-18.
- Davidhizar, R., & Newman Giger, J. (2000). Cultural competency matters. *Leadership in Health Services*, 13(4): 8-12.
- Department of Canadian Heritage. (2005). *A Canada for all: Canada's action plan against racism*. Gatineau, QC: Department of Canadian Heritage Multiculturalism.
- Devine, P.G., & Vasquez, K.A. (1998). The rocky road to positive intergroup relations. In *Confronting racism: The problem and the response*, J.L. Eberhardt & S.T. Fiske (eds.), pp. 234-262. Thousand Oaks, CA: Sage.
- Donovan, R.J., & Leivers, S. (1993). Using paid advertising to modify racial stereotype beliefs. *The Public Opinion Quarterly*, 57: 205-208.
- Dovidio, J.F., & Gaertner, S.L. (1996). Affirmative action, unintentional racial biases, and intergroup relations. *Journal of Social Issues*, 52(4): 51-75.
- Duckitt, J. (2001) Reducing prejudice: An historical and multi-level approach. In *Understanding prejudice, racism, and social conflict*, M. Augoustinos & K.J. Reynolds (eds.), pp. 253-271. London: Sage.
- Dunn, K.M., & Geeraert, P. (2003). The geography of 'race' and racisms? *GeoDate*, 16(3): 1-6.
- Fontaine, L., & Health Council of Canada. (2012). *Empathy, dignity, and respect: Creating cultural safety for Aboriginal people in urban health care*. Toronto, ON: Health Council of Canada.
- Goode, T. D. (2004). *Cultural competence continuum*. Washington, DC: National Centre for Cultural Competence, Georgetown University Center for Child and Human Development.
- Government of Canada. (1985). c. C-46, Hate propaganda, Acts 318 & 319. *Criminal Code of Canada*. Retrieved March 15, 2013 from <http://laws-lois.justice.gc.ca/eng/acts/c-46/>
- Government of Canada. (n.d.). *Employment equity act*. Retrieved March 15, 2013 from <http://laws-lois.justice.gc.ca/eng/acts/E-5.401/page-3.html#h-6>

- Guerin, B. (2003). Combating prejudice and racism: New interventions from a functional analysis of racist language. *Journal of Community and Applied Social Psychology*, 13: 29–45.
- Harrell, S. (2000). A multidimensional conceptualization of racism-related stress: Implications for the well-being of people of color. *American Journal of Orthopsychiatry*, 70(1): 42–57.
- Hart-Wasekeesikaw, F., & David, G. (2009). *Cultural competence and cultural safety in First Nations, Inuit and Métis nursing education: An integrated review of the literature*. Lethbridge, AB: University of Lethbridge.
- Hatcher A., & Bartlett, C. (2010). Two-eyed seeing building cultural bridges for Aboriginal students. *Canadian Teachers Magazine*, May 10. Retrieved March 15, 2013 from [http://www.canadianteachermagazine.com/ctm\\_first\\_nations\\_education/may10\\_two\\_eyed.shtm](http://www.canadianteachermagazine.com/ctm_first_nations_education/may10_two_eyed.shtm)
- Health Council of Canada. (2012). *Empathy, dignity, and respect: Creating cultural safety for Aboriginal people in urban health care*. Ottawa, ON: Health Council of Canada. Retrieved March 10, 2014 from [http://www.healthcouncilcanada.ca/rpt\\_det.php?id=437](http://www.healthcouncilcanada.ca/rpt_det.php?id=437)
- Health Council of Canada. (n.d.). *Provincial Health Services Authority: Aboriginal Health Program*. Ottawa, ON: Author. Retrieved March 15, 2013 from [healthcouncilcanada.ca](http://healthcouncilcanada.ca).
- Hollingsworth, D. (1998). *Race and racism in Australia* (2nd ed.). Katoomba, AU: Social Science Press.
- Human Rights Commission. (n.d.). *Canadian Human Rights Act (R.S.C., 1985, c. H-6)*. Ottawa, ON: Author. Retrieved March 14, 2013 from <http://www.chrc-ccdp.gc.ca>.
- Hylton, J. (n.d.). *Canadian innovations in the provision of policing services to Aboriginal Peoples*. *Human Sector Resources*. Retrieved March 10, 2014 from [http://www.attorneygeneral.jus.gov.on.ca/inquiries/ipperwash/policy\\_part/research/pdf/John\\_Hylton\\_Canadian\\_Innovations.pdf](http://www.attorneygeneral.jus.gov.on.ca/inquiries/ipperwash/policy_part/research/pdf/John_Hylton_Canadian_Innovations.pdf)
- Indigenous Physicians Association of Canada. (2007). *Best practices to recruit mature Aboriginal students to medicine*. Winnipeg, MB: Author.
- Katz, P.A. (2003). Racists or tolerant multiculturalists? How do they begin? *American Psychologist*, 58(11): 897–909.
- Lee, D. (2008). Historical contributions of Aboriginal Peoples to Canadian culture and identity. *Directions*, 5(1): 16–21.
- Lindsay, M. (2008). Aboriginal education a working agreement in Comox Valley. *Teachers Magazine*, 20(6). Retrieved June 17, 2013 from <http://bctf.ca/publications/NewsMagArticle.aspx?id=15622>
- Manitoba Education and Literacy. (2003). *Integrating Aboriginal perspectives into curricula. A resource for curriculum developers, teachers, and administrators*. Winnipeg, MB: Government of Manitoba. Retrieved March 15, 2013 from <http://www.edu.gov.mb.ca/k12/docs/policy/abpersp/index.html>
- Minister of Public Works and Government Services Canada. (2005). *A Canada for all: Canada's action plan against racism*. Gatineau, QC: Department of Canadian Heritage.
- National Aboriginal Health Organization [NAHO]. (2008). *Cultural competency and safety: a guide for health care administrators, providers and educators*. Ottawa, ON: Author. Retrieved June 17, 2013 from <http://www.naho.ca/publications/topics/cultural-competency/>
- O'Sullivan, B. (2013). Considering culture in Aboriginal care. *Canadian Medical Association Journal*, 185(1): E27-E28.
- Oxford Dictionaries. (2013a). *Superordinate*. Retrieved from <http://oxforddictionaries.com/definition/english/superordinate>.
- Oxford Dictionaries. (2013b). *Colonialism*. Retrieved from <http://oxforddictionaries.com/definition/english/colonialism>.
- Paradies, Y. (2005). Anti-racism and Indigenous Australians. *Analyses of Social Issues and Public Policy*, 5(1): 1-28.





- Passi, P. (2013). Backlash slams 'un-fair' anti-racism campaign in Twin Ports. *Duluth News Tribune*, January 31. Retrieved June 17, 2013 from <http://www.duluthnewstribune.com/event/article/id/221451/>
- Pedersen, A., Contos, N., Griffiths, B., Bishop, B., & Walker, I. (2000). Attitudes toward Aboriginal-Australians in city and country settings. *The Australian Psychologist*, 35(2): 109-117.
- Pedersen, A., & Walker, I. (1997). Prejudice against Australian Aborigines: Old-fashioned and modern forms. *The European Journal of Social Psychology*, 27: 561-587.
- Perkel, C. (2013). Aboriginal leader fears Idle No More backlash against native students. *National Post*, January 11. Retrieved June 17, 2013 from <http://news.nationalpost.com/2013/01/11/aboriginal-leader-fears-idle-no-more-backlash-against-native-students/>
- Pettigrew, T., & Tropp, L. (2000). Does intergroup contact reduce prejudice? Recent meta-analytic findings. In *Reducing prejudice and discrimination*, S. Oskamp (ed.), pp. 93-114. Hillsdale, NJ: Erlbaum.
- Provincial Health Services Authority. (n.d.). *Indigenous cultural competency (ICC) training program*. Victoria, BC: Author. Retrieved March 19, 2013, from <http://www.culturalcompetency.ca/training>
- Ruben, B. D. (1976). Assessing communication competency for intercultural adaptation. *Group and Organization Studies*, 1: 334-354.
- Sakamoto, I., & R. Pitner (2005). Use of critical consciousness in anti-oppressive social work practice: Disentangling power dynamics at personal and structural levels. *British Journal of Social Work*, 35(4): 435-452.
- Sanson, A., Augoustinos, M., Gridely, H., Kyrios, M., Reser, J., & Turner, C. (1998). Racism and prejudice: An Australian psychological society position paper. *Australian Psychologist*, 33(3): 161-82.
- Saskatchewan Police College. (n.d.). *Course calendar*. Regina, SK: Author. Retrieved January 02, 2014, from <http://www.uregina.ca/police/training.html>
- Shah, C.P., & Reeves, A. (2012). Increasing Aboriginal cultural safety among health care practitioners. *Canadian Journal of Public Health*, 103(5): 397.
- The Standing Senate Committee on Aboriginal Peoples. (n.d.). *Urban Aboriginal youth: An action plan for change*. Ottawa, ON: Author. Retrieved March 15, 2013 from <http://www.parl.gc.ca/Content/SEN/Committee/372/abor/rep/repfinoct03part2-e.htm>
- Strengthening the Circle Partnership. (n.d.). *Strengthening the circle, "Partnering for improved health for Aboriginal people" - Aboriginal Health Survey 2010-2015*. Saskatoon, SK: Saskatoon Health Region. Retrieved March 14, 2013 from [http://www.saskatoonhealthregion.ca/search/search\\_results.htm?cx=017854728811235657999%3Acz6kmin\\_6tq&cof=FORID%3A11&q=stregthening+the+circle&sa=Search&siteurl=www.saskatoonhealthregion.ca%2F&ref=&ss=5767j4273273j23](http://www.saskatoonhealthregion.ca/search/search_results.htm?cx=017854728811235657999%3Acz6kmin_6tq&cof=FORID%3A11&q=stregthening+the+circle&sa=Search&siteurl=www.saskatoonhealthregion.ca%2F&ref=&ss=5767j4273273j23)
- Toronto Star. (2012). *Interview with Dr. Shah – Aboriginal cultural safety initiative*. Anishnawbe Health Toronto. Retrieved June 17, 2013 from <http://www.aht.ca/aboriginal-culture-safety>
- Truth and Reconciliation Commission of Canada. (2012). *Truth and Reconciliation Commission of Canada: Interim report*. Retrieved March 14, 2013 from [http://www.attendancemarketing.com/~attmk/TRC\\_jd/Interim%20report%20English%20electronic%20copy.pdf](http://www.attendancemarketing.com/~attmk/TRC_jd/Interim%20report%20English%20electronic%20copy.pdf)
- Zizman, P., & Amagoalik, L. (2010). *Working with Inuit: Selected resources to help you learn about Inuit culture and way of life*. Ottawa, ON: National Aboriginal Health Organization, Inuit Tuttarvingat. Retrieved March 13, 2013 from <http://www.naho.ca/inuit/inuit-knowledge/cultural-safety/>



